



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

**Date Issued:**  
05/01/2018

**Permit #:**  
TR18-000106

## Mechanical Trade Permit

**Project Address:** 135 DUCK LANDING LN

**Property Owner:** HIMES, CHERI J

**PIN #:** 986913041818

**Mailing Address:** 516 LANDIS STORE RD  
BOYERTOWN, PA 19512

### Permit Types:

Plumbing  Electrical  Mechanical  Gas

### Contractor:

**Company Name:** Atlantic Heating & Cooling, LTD

**Phone:** (252) 441-7642

**Contact Name:** Henry Liverman

P.O. Box 132

**Address:**

Kill Devil Hills, NC 27948

**NC State License #:** 9665, H2, H3, Class 1

**Description of Work:** Remove & replace the indoor & outdoor sections of the upstairs HVAC system using a 14 SEER, R410A 2.5 ton Goodman heat pump & a matching Goodman air handler.

**Project Cost Estimate:** 5,250.00

**Permit Amount:** 160.00

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

  
Applicant Signature Date 5/3/18



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

**Date Issued:**  
05/01/2018

**Permit #:**  
TR18-000107

## Electrical Trade Permit

**Project Address:** 141 CARROL DR  
**Property Owner:** QUIMBY, JASON T

**PIN #:** 995007577646  
**Mailing Address:** 8632 Plymouth Rd  
ALEXANDRIA, VA 22308

### Permit Types:

Plumbing  Electrical  Mechanical  Gas

### Contractor:

**Company Name:** Pop's Repairs  
**Phone:** (252) 441-3456

**Contact Name:** Jim Connors  
PO Box 1130

**NC State License #:** 16445L

**Address:**  
Kill Devil Hills, NC 27948

**Description of Work:** replace electrical meter base and wiring

**Project Cost Estimate:** 1,500.00

**Permit Amount:** 100.00

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

  
Applicant Signature

Date

5-2-18



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PO Box 8369  
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(252) 255-1234

**Date Issued:**  
05/01/2018  
**Permit #:**  
TR18-000108

## Mechanical Trade Permit

**Project Address:** 118 SKIMMER WAY

**Property Owner:** KEARFOTT, MARY JO V

**PIN #:** 995118404168

**Mailing Address:** 4436 CUSTIS RD  
RICHMOND, VA 23225

### Permit Types:

Plumbing  Electrical  Mechanical  Gas

### Contractor:

**Company Name:** North Beach Services Heating and Cooling

**Phone:** (252) 491-2878

**Contact Name:** Gabby Willis

PO Box 181

**Address:**

Kitty Hawk , NC 27949

**NC State License #:**

**Description of Work:** Replacement of upper HVAC system with Trane 14 seer 2.5 ton heat pump and matching air handler

**Project Cost Estimate:** 5,289.00

**Permit Amount:** 160.00

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

Applicant Signature

Date



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**Date Issued:**  
05/01/2018

**Permit #:**  
TR18-000109

## Mechanical Trade Permit

**Project Address:** 1278 DUCK RD

**PIN #:** 985907782679

**Property Owner:** SHIPS WATCH ASSOCIATION

**Mailing Address:** 1251 DUCK RD  
KITTY HAWK, NC 27949

### Permit Types:

Plumbing    Electrical    Mechanical    Gas

### Contractor:

**Company Name:** North Beach Services Heating and Cooling

**Contact Name:** Gabby Willis

**Phone:** (252) 491-2878

PO Box 181

**Address:**

**NC State License #:**

Kitty Hawk , NC 27949

**Description of Work:** Replacement of HVAC system with Trane 14 seer 2.5 ton heat pump and matching air handler

**Project Cost Estimate:** 5,446.00

**Permit Amount:** 160.00

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

Applicant/Signature

Date



Department of Community Development  
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(252) 255-1234

**Date Issued:**  
05/03/2018

**Permit #:**  
TR18-000110

## Mechanical Trade Permit

**Project Address:** 112 SHIPS WHEEL CT

**Property Owner:** NOVOTNY, ERIC

**PIN #:** 985920929480

**Mailing Address:** 15075 BANKFIELD DR  
WATERFORD, va 20197

### Permit Types:

Plumbing  Electrical  Mechanical  Gas

### Contractor:

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

**Phone:** (252) 261-2008

**NC State License #:** 13056

**Contact Name:** Douglas Wakeley

P.O. Box 179

**Address:**

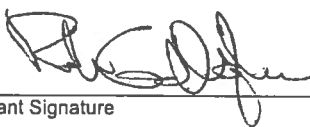
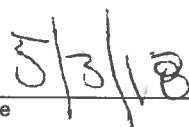
Kitty Hawk, NC 27949

**Description of Work:** C/O 3 TON 18 SEER TRANE SYSTEM MID/GROUND LEVEL WITH XL624 TSTAT

**Project Cost Estimate:** 6,117.00

**Permit Amount:** 160.00

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

   
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(252) 255-1234

**Date Issued:**  
05/03/2018

**Permit #:**  
TR18-000111

## Mechanical Trade Permit

**Project Address:** 139 BETSY CT

**PIN #:** 985916938873

**Property Owner:** GREENE, BRIAN R

**Mailing Address:** 3612 SEMINARY AVE  
RICHMOND, VA 23227

### Permit Types:

Plumbing  Electrical  Mechanical  Gas

### Contractor:

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

**Contact Name:** Douglas Wakeley

**Phone:** (252) 261-2008

P.O. Box 179

**Address:**

**NC State License #:** 13056

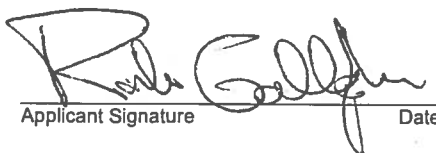
Kitty Hawk, NC 27949

**Description of Work:** C/O 2 TON 16 SEER TRANE SYSTEM MID LEVEL WITH XL624 TSTAT

**Project Cost Estimate:** 6,117.00

**Permit Amount:** 160.00

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

  
Applicant Signature

Date

5/3/18



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

Date Issued:
MAY 03 2018
Permit #:
B18-000122

Building Permit

Project Address: 114 OLD SQUAW DR
Property Owner: O'SULLIVAN, MICHAEL

PIN #: 995011568083
Mailing Address: 8506 DARL CIRCLE
COLUMBIA, MD 21704

Contractor/Company Name: Kitty Hawk Pools and Spas
Phone: (252) 305-7334
Email: jlsbuilderobx@gmail.com
Contact Name:
Address: PO Box 1508
Kitty Hawk, NC 27949
Classification: Unlicensed Contractor
NC State License #:
Expiration Date:

Description of Work: Repair and replace concrete deck around the pool; landscape and fence in back yard; move hot tub

Use: Single Family
Structure/Work Type: Primary Structure:
Pool/Hot Tub: Repair
Deck: Repair
Demo:
Accessory Building:
Bukhead (L.F.):
Pier (L.F.):
House Moving:

Table with 7 columns: Proposed Area Schedule (Sq.Ft.), Heated, Unheated, Accessory Heated, Accessory Unheated, Proposed Finished Grade (ft.), Vegetation Management (Sq.Ft.), Project Cost Estimate. Includes checkboxes for N/A and cost breakdown.

Permit Conditions:

- Any change or changes in the plans for development, construction or land use activities will require a re-evaluation and modification of this permit.
- The erection (including excavation), demolition, alteration or repair of any building in a residential or business district other than between the hours of 7 am and 6 pm, Monday through Saturday is prohibited.
- Stabilize all disturbed areas prior to CO.
- Pool fence height limited to six (6) feet above adjacent grade.
- Provide Final As-Built Survey with Updated Coverage Breakdown.
- Equipotential Bonding certification required prior to final inspection.
- Call for final inspection.

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

Applicant Signature: [Handwritten Signature]
Date: 5/2/2018



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

Date Issued:

MAY 04 2018  
 Permit #:  
 B18-000131

**Building/Floodplain Development Permit**

**Project Address:** 107 OCEAN CREST WAY  
**Property Owner:** SARKIS, KATHLEEN E

**PIN #:** 986806298998  
**Mailing Address:** 358 POSADA DR  
 MYRTLE BEACH, SC 29572

**Contractor:**

**Company Name:** Hunter Homes, Inc.  
**Phone:** (252) 441-7605  
**Email:** phhunter@me.com

**Contact Name:** Pete Hunter  
**Address:** 121 Craigy Court  
 Kill Devil Hills, NC 27948

**Classification:** General Contractor  
**NC State License #:** 16132 - Unlimited  
**Expiration Date:** 12/31/2010

**Description of Work:** Install 14 x 33 fiberglass pool with concrete deck and fencing

**Use:**  
 Single Family

**Structure/Work Type:**  
 Primary Structure:  
 Pool/Hot Tub: Pool Only  
 Deck:  
 Demo:

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

**Permit Amount:**  
 300.00

|   |  |                           |                    |                            |            |              |              |
|---|--|---------------------------|--------------------|----------------------------|------------|--------------|--------------|
| <b>Proposed Area Schedule (Sq.Ft.):</b> | Heated:                                  | Unheated:                 | Accessory Heated:  | Accessory Unheated:        |            |              |              |
| <b>Proposed Finished Grade (ft.):</b>   | N/A: <input checked="" type="checkbox"/> | House:                    | Pool:              | Driveway:                  | Parking:   | Other:       |              |
| <b>Floodplain Development:</b>          | Flood Zone: VE-12                        | Structure Value:          | Storage Below BFE: |                            |            |              |              |
| <b>Vegetation Management (Sq.Ft.):</b>  | N/A: <input checked="" type="checkbox"/> | Required Coverage: 2545.2 | Area Preserved: 0  | Required Plantings: 2545.2 |            |              |              |
| <b>Project Cost Estimate:</b>           | <b>Building</b>                          | <b>Electrical</b>         | <b>Mechanical</b>  | <b>Plumbing</b>            | <b>Gas</b> | <b>Other</b> | <b>Total</b> |
|   | \$34,000.00                              | \$1,000.00                | \$0.00             | \$0.00                     | \$0.00     | \$0.00       | \$35,000.00  |

**Permit Conditions:**

- Any change or changes in the plans for development, construction or land use activities will require a re-evaluation and modification of this permit.
- Install properly toed-in erosion control fencing around perimeter of development prior to commencing work; maintain at all times.
- Provide Final As-Built Survey with Updated Coverage Breakdown.
- No areas of fill, including graded and leveled areas, may exceed 3 in depth.
- Slope of any fill areas from toes of the slope to the final ground elevations can be no greater than 3:1.
- All principal and accessory structures must meet MBL setbacks.
- No retaining walls to be allowed to retain fill.
- Pool fence height limited to six (6) feet above adjacent grade.
- Provide Final As-Built Survey with Updated Coverage Breakdown.
- No grading activity may take place within 5 of any lot line, except as specifically authorized and shown on approved site plan to directly match adjacent grades.
- Conditions associated with CAMA Minor Permit D-2018-400 apply.

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

Applicant Signature

5/4/18  
 Date





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

**Date Issued:**  
05/04/2018

**Permit #:**  
TR18-000113

### Mechanical Trade Permit

**Project Address:** 184 OCEAN WAY CT

**Property Owner:** LANKS, KARL W

**PIN #:** 986913134514

**Mailing Address:** 868 CARROLL ST  
BROOKLYN, NY 11215

### Permit Types:

Plumbing  Electrical  Mechanical  Gas

### Contractor:

**Company Name:** Atlantic Heating & Cooling, LTD

**Phone:** (252) 441-7642

**Contact Name:** Henry Liverman

P.O. Box 132

**Address:**

Kill Devil Hills, NC 27948

**NC State License #:** 9665, H2, H3, Class 1

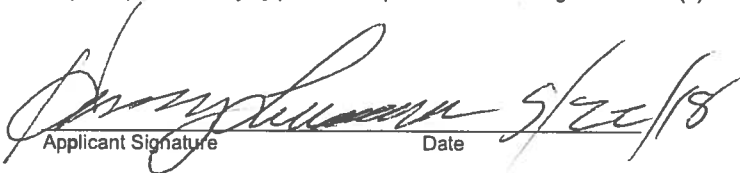
**Description of Work:**

Remove & replace the indoor & outdoor sections of the upstairs HVAC system using a 14 SEER R410A 4 ton Goodman heat pump and a matching Goodman air handler.

**Project Cost Estimate:** 6,800.00

**Permit Amount:** 160.00

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

  
Applicant Signature                      Date



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1200 Duck Road  
Town of Duck, North Carolina 27949  
(252) 255-1234

**Date Issued:**  
05/08/2018

**Permit #:**  
TR18-000115

## Mechanical Trade Permit

**Project Address:** 133 South SNOW GEESE DR

**Property Owner:** WALL, JOHN

**PIN #:** 995016737471

**Mailing Address:** 119 PARTRICK AVE  
NORWALK, CT 06851

### Permit Types:

Plumbing  Electrical  Mechanical  Gas

### Contractor:

**Company Name:** Outer Banks Heating & Cooling

**Phone:** (252) 441-1740

**NC State License #:** 12643

**Contact Name:** Brian McDonald

P.O. Box 1415

**Address:**


Nags Head, NC 27959

**Description of Work:** Replace Heat pump [outdoor only] with 14 seer 2 ton Carrier Heat pump.

**Project Cost Estimate:** 4,210.83

**Permit Amount:** 130.00

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

 5-9-18

Applicant Signature

Date



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

**Date Issued:**

**Permit #:**  
TR18-000116

## Mechanical Trade Permit

**Project Address:** 106 FLIGHT DR

**PIN #:** 995006483906

**Property Owner:** CHOULAS, JAMES D

**Mailing Address:** 1713 WHITE POND LN  
WAXHAW, NC 28173

### Permit Types:

Plumbing  Electrical  Mechanical  Gas

### Contractor:

**Company Name:** Outer Banks Heating & Cooling

**Contact Name:** Brian McDonald

**Phone:** (252) 441-1740

P.O. Box 1415

**Address:**

**NC State License #:** 12643


Nags Head, NC 27959

**Description of Work:** Replace Hvac with 14 seer 3 ton Carrier air handler and heat pump

**Project Cost Estimate:** 5,600.00

**Permit Amount:** 160.00

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

 5-9-18  
Applicant Signature Date



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

**Date Issued:**  
05/08/2018

**Permit #:**  
TR18-000117

## Mechanical Trade Permit

**Project Address:** 134 2A PLOVER DR  
**Property Owner:** JW MISSION BLUE, LLC

**PIN #:** 9869171264212A  
**Mailing Address:** 8015 WINDROSE CR  
WATERFORD, WI 53185

### Permit Types:

Plumbing  Electrical  Mechanical  Gas

### Contractor:

**Company Name:** Outer Banks Heating & Cooling  
**Phone:** (252) 441-1740

**Contact Name:** Brian McDonald  
P.O. Box 1415

**NC State License #:** 12643


**Address:**  
Nags Head, NC 27959

**Description of Work:** Replace Hvac with 14 seer 2.5 ton Carrier air handler and heat pump

**Project Cost Estimate:** 6,437.65

**Permit Amount:** 160.00

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

  
Applicant Signature

5-9-18  
Date



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

**Date Issued:**  
05/08/2018

**Permit #:**  
TR18-000118

## Mechanical Trade Permit

**Project Address:** 118 MAINSAIL CT  
**Property Owner:** SHIPS WATCH ASSOCIATION

**PIN #:** 985908882885

**Mailing Address:** 1251 DUCK RD  
KITTY HAWK, NC 27949

### Permit Types:

Plumbing  Electrical  Mechanical  Gas

### Contractor:

**Company Name:** North Beach Services Heating and Cooling  
**Phone:** (252) 491-2878

**Contact Name:** Gabby Willis  
PO Box 181

**NC State License #:**

**Address:**  
Kitty Hawk , NC 27949

**Description of Work:** Replacement of HVAC system with 14 Seer 2.5 ton heat pump and matching air handler

**Project Cost Estimate:** 5,128.00

**Permit Amount:** 160.00

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

  
Applicant Signature

5/10/18  
Date



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Town of Duck, North Carolina 27949  
(252) 255-1234

**Date Issued:**  
05/08/2018

**Permit #:**  
TR18-000119

## Mechanical Trade Permit

**Project Address:** 121 SPINDRIFT LN  
**Property Owner:** HOOK FAMILY LIMITED

**PIN #:** 995016738176  
**Mailing Address:** 2060 CENTRO EAST ST  
TIBURON, CA 94920

### Permit Types:

Plumbing  Electrical  Mechanical  Gas

### Contractor:

**Company Name:** North Beach Services Heating and Cooling  
**Phone:** (252) 491-2878

**Contact Name:** Gabby Willis  
PO Box 181

**NC State License #:**


**Address:**  
Kitty Hawk , NC 27949

**Description of Work:** Replacement of HVAC system with 14 Seer 3 ton heat pump and matching air handler

**Project Cost Estimate:** 5,366.00

**Permit Amount:** 160.00

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

  
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Date



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**Date Issued:**  
05/08/2018

**Permit #:**  
TR18-000120

## Mechanical Trade Permit

**Project Address:** 148 DUCK LANDING LN

**PIN #:** 986909056129

**Property Owner:** FOX, LAURA J TTEE

**Mailing Address:** 6 WILSON MEADOW RD  
BOW, NH 03304

### Permit Types:

Plumbing    Electrical    Mechanical    Gas

### Contractor:

**Company Name:** American Refrigeration & Heat Pump Repair

**Contact Name:** Mark Coleman

**Phone:** (252) 202-9302

1101 Clamshell Drive

**Address:**

**NC State License #:** 29031

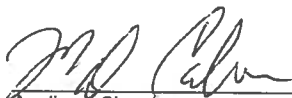
Kill Devil Hills, NC 27948

**Description of Work:** Replace ground floor heat pump and air handler with new American Standard 4 ton SEER system heat pump and air handler

**Project Cost Estimate:** 7,400.00

**Permit Amount:** 160.00

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

 5/8/18  
Applicant Signature                      Date



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Town of Duck, North Carolina 27949  
(252) 255-1234

**Date Issued:**  
05/08/2018

**Permit #:**  
TR18-000121

## Mechanical Trade Permit

**Project Address:** 105 YOLANDA TER

**Property Owner:** BSZ, LLC

**PIN #:** 986805197891

**Mailing Address:** 3036 RIVER BEACH  
WILLIAMSBURG, VA 23185

### Permit Types:

Plumbing  Electrical  Mechanical  Gas

### Contractor:

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

**Phone:** (252) 261-2008

**NC State License #:** 13056

**Contact Name:** Douglas Wakeley

P.O. Box 179

**Address:**

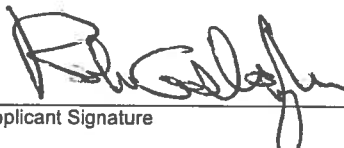
Kitty Hawk, NC 27949

**Description of Work:** C/O 3 TON 14 SEER TRANE SYSTEM TOP LEVEL RE-USE ORIGINAL TSTAT

**Project Cost Estimate:** 5,885.00

**Permit Amount:** 160.00

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

  
Applicant Signature

5/9/18  
Date





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

**Date Issued:**  
05/08/2018

**Permit #:**  
TR18-000122

## Mechanical Trade Permit

**Project Address:** 122 WAXWING LN  
**Property Owner:** CHINN, MICHAEL A

**PIN #:** 995114327514  
**Mailing Address:** 1257 MAWYER FARM LN  
CHARLOTTESVILLE, VA 22901

### Permit Types:

Plumbing  Electrical  Mechanical  Gas

### Contractor:

**Company Name:** R.A. Hoy Heating & A/C  
**Phone:** (252) 261-2008

**Contact Name:** Douglas Wakeley  
P.O. Box 179

**NC State License #:** 13056

**Address:**  
Kitty Hawk, NC 27949

**Description of Work:** C/O 3 TON 16 SEER TRANE SYSTEM TOP LEVEL WITH XL624 TSTAT

**Project Cost Estimate:** 6,499.00

**Permit Amount:** 160.00

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

  
Applicant Signature

5/9/18  
Date



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

**Date Issued:**  
05/08/2018

**Permit #:**  
TR18-000123

## Electrical Trade Permit

**Project Address:** 116 OLD SQUAW DR  
**Property Owner:** LARKIN, KURT GEORGE EUX

**PIN #:** 995011569055

**Mailing Address:** 9407 AVALON DR  
RICHMOND, VA 23229

### Permit Types:

Plumbing  Electrical  Mechanical  Gas

### Contractor:

**Company Name:** M. Clary Electrical Contractor, LLC  
**Phone:** (252) 441-6157

**Contact Name:** Mike Clary  
P.O. Box 1156

**NC State License #:** 22993

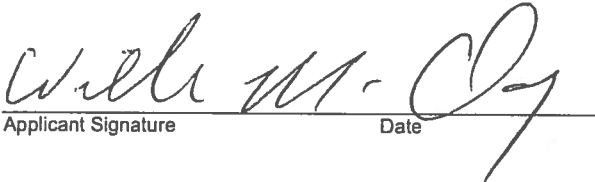
**Address:**  
Kill Devil Hills, NC 27948

**Description of Work:** Hot tub change out in same location ground level

**Project Cost Estimate:** 5,100.00

**Permit Amount:** 130.00

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

  
Applicant Signature \_\_\_\_\_ Date \_\_\_\_\_



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

**Date Issued:**  
05/09/2018

**Permit #:**  
TR18-000124

## Mechanical Trade Permit

**Project Address:** 124 North SNOW GEESE DR

**Property Owner:** MAGEL, ROBERT W JR

**PIN #:** 995015731861

**Mailing Address:** KIMBALL, JANICE B  
2652 PINWOOD RD  
LANCASTER, PA 17601

### Permit Types:

Plumbing  Electrical  Mechanical  Gas

### Contractor:

**Company Name:** Air Handlers OBX

**Phone:** (252) 491-8637

**Contact Name:** Jesse Owens

P.o. Box 309

**Address:**

Harbinger, NC 27941

**NC State License #:**

**Description of Work:** HVAC replacement 2 ton 14 SEER Trane System

**Project Cost Estimate:** 5,278.00

**Permit Amount:** 160.00

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

  
Applicant Signature Date 5-9-18



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

**Date Issued:**  
05/09/2018

**Permit #:**  
TR18-000125

## Mechanical Trade Permit

**Project Address:** 1340 DUCK RD

**Property Owner:** LUXURY OUTER BANKS HOMES, LLC

**PIN #:** 995015544117

**Mailing Address:** P O BOX 329  
KILL DEVIL HILLS, NC 27948

### Permit Types:

Plumbing    Electrical    Mechanical    Gas

### Contractor:

**Company Name:** Master Heating & Cooling, Inc.

**Phone:** (252) 255-0095

**NC State License #:** 18066

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

P.O. Box 707

**Address:**

Kitty Hawk, NC 27949


**Description of Work:**

Heat pump change out:  
Mid-level north, Maytag 2.5 ton, 14 seer, R410, M1200 Premier Series heat pump system

**Project Cost Estimate:** 6,750.00

**Permit Amount:** 160.00

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

  
\_\_\_\_\_  
Applicant Signature                      Date



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

**Date Issued:**  
05/09/2018

**Permit #:**  
TR18-000126

## Mechanical Trade Permit

**Project Address:** 166 PLOVER DR

**Property Owner:** JULIAN, LLOYD V JR

**PIN #:** 986917220164

**Mailing Address:** 133 WILLIAM RICHMOND  
WILLIAMSBURG, VA 23185

### Permit Types:

Plumbing  Electrical  Mechanical  Gas

### Contractor:

**Company Name:** North Beach Services Heating and Cooling

**Phone:** (252) 491-2878

**Contact Name:** Gabby Willis

PO Box 181

**Address:**

Kitty Hawk , NC 27949

**NC State License #:**

**Description of Work:** Replacement of lower level HVAC system with Trane 14 Seer 2 ton heat pump and matching air handler.

**Project Cost Estimate:** 5,074.00

**Permit Amount:** 160.00

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

Applicant Signature

5/10/18

Date



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

Date Issued:  
 05/09/2018  
 Permit #:  
 B18-000095

**Building/Floodplain Development Permit**

Project Address: 1536 DUCK RD  
 Property Owner: LANMAN, BART

PIN #: 995114236901  
 Mailing Address: 1233 CAVENDISH DR  
 SILVER SPRING, MD 20905

Contractor:  
 Company Name: Beachcraft, LLC  
 Phone: (252) 441-0718  
 Email: beachcraftllc@yahoo.com  
 Contact Name: Brian McIver  
 Address: 604 W. Landing Drive  
 Kill Devil Hills, NC 27948  
 Classification: General Contractor  
 NC State License #: 58810  
 Expiration Date: 12/31/2012

Description of Work: Construct new 6 bedroom SFD  
 Use: Single Family  
 Structure/Work Type: Primary Structure: 1.New Construction  
 Pool/Hot Tub:  
 Deck: New  
 Demo:  
 Permit Amount: 3,182.05  
 Accessory Building:   
 Bukhead (L.F.):  
 Pier (L.F.):  
 House Moving:

Proposed Area Schedule (Sq.Ft.): Heated: 3,495 Unheated: 1,858 Accessory Heated: Accessory Unheated:

Proposed Finished Grade (ft.): N/A:  House: 4.9 Pool: Driveway: 4.7 Parking: 4.7 Other:

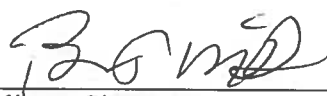
Floodplain Development: Flood Zone: AE-8 Structure Value: Storage Below BFE:

Vegetation Management (Sq.Ft.): N/A:  Required Coverage: 3334.35 Area Preserved: 4000 Required Plantings: -665.6500000000001

| Project Cost Estimate: | Building     | Electrical | Mechanical | Plumbing | Gas    | Other  | Total        |
|------------------------|--------------|------------|------------|----------|--------|--------|--------------|
|                        | \$622,000.00 | \$0.00     | \$0.00     | \$0.00   | \$0.00 | \$0.00 | \$622,000.00 |

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

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

  
 Applicant Signature  
 Date: 5/10/2018



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

**Date Issued:**  
 05/09/2018  
  
**Permit #:**  
 B18-000133

**Building Permit**

**Project Address:** 1272 DUCK RD  
**Property Owner:** SHIPS WATCH ASSOCIATION

**PIN #:** 985907781476  
**Mailing Address:** P O NOX 788  
 ELIZABETH CITY NC 27909

**Contractor/Company Name:** SHIPS WATCH ASSOCIATION  
**Phone:** 252-261-2231  
**Contact Name:** SHIPS WATCH ASSOCIATION  
**Address:** P O NOX 788  
 ELIZABETH CITY NC 27909  
**Classification:** NC State License #:  
**Email:** ,  
**Expiration Date:**

**Description of Work:** West side siding, replace east door and two upper level windows; replace west side steps and handrail; new west side upper level door

**Use:** Single Family  
**Structure/Work Type:** Primary Structure: 4.Repair/Maintenance  
 Pool/Hot Tub:  
 Deck: Repair  
 Demo:  
**Permit Amount:** \$100.00  
**Accessory Building:**   
**Bukhead (L.F.):**  
**Pier (L.F.):**  
**House Moving:**

**Proposed Area Schedule (Sq.Ft.):** Heated: Unheated: Remodel Heated: Remodel Unheated: 225

**Proposed Finished Grade (ft.):** N/A:  House: Pool: Driveway: Parking: Other:

**Vegetation Management (Sq.Ft.):** N/A:  Area Preserved: Required Coverage: 0.0 Required Plantings: 0.0

| Project Cost Estimate: | Building    | Electrical | Mechanical | Plumbing | Gas    | Other  | Total       |
|------------------------|-------------|------------|------------|----------|--------|--------|-------------|
|                        | \$16,416.00 | \$0.00     | \$0.00     | \$0.00   | \$0.00 | \$0.00 | \$16,416.00 |

**Permit Conditions:**

- Any change or changes in the plans for development, construction or land use activities will require a re-evaluation and modification of this permit.
- The erection (including excavation), demolition, alteration or repair of any building in a residential or business district other than between the hours of 7 am and 6 pm, Monday through Saturday is prohibited.
- Repair & maintenance only
- No change to coverage or footprint.
- Call for inspection if rot is found; if no rot is found provide letter stating same for CO.
- All new glass will need to meet wind-borne debris provisions of NC Residential Building Code.
- Call for final inspection.

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

David Cudde      5/9/18  
 Applicant Signature      Date



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

Date Issued:  
**MAY 10 REC'D**  
 Permit #:  
 B18-000132

**Building/Floodplain Development Permit**

Project Address: 114 South BAUM TRL  
 Property Owner: WILLIAMS, DARCY

PIN #: 995109179143  
 Mailing Address: 114 BAUM TRL  
 DUCK, NC 27949

|   |   |   |
|---|---|---|
| <b>Contractor:</b><br><b>Company Name:</b> Mike Lensch<br><b>Phone:</b> (252) 202-4686<br><b>Email:</b> ml5120@icloud.com | <b>Contact Name:</b> Mike Lensch<br><b>Address:</b> 5120 Birch Lane<br>Kitty Hawk, NC 27949 | <b>Classification:</b> Unlicensed Contractor<br><b>NC State License #:</b><br><b>Expiration Date:</b> |
|---|---|---|

**Description of Work:** Replace dune stairs buried by sand- build new steps above old set

|  |  |  |
|--|--|--|
| <b>Use:</b><br>Beach Stair/Access<br><br><b>Permit Amount:</b><br>100.00 | <b>Structure/Work Type:</b><br>Primary Structure:<br>Pool/Hot Tub:<br>Deck:<br>Demo: | <b>Accessory Building:</b><br>Bukhead (L.F.):<br>Pier (L.F.):<br>House Moving: |
|--|--|--|

|   |         |           |                   |                     |
|---|---------|-----------|-------------------|---------------------|
| <b>Proposed Area Schedule (Sq.Ft.):</b> | Heated: | Unheated: | Accessory Heated: | Accessory Unheated: |
|---|---------|-----------|-------------------|---------------------|

|                                       |  |        |       |           |          |        |
|---------------------------------------|--|--------|-------|-----------|----------|--------|
| <b>Proposed Finished Grade (ft.):</b> | N/A: <input checked="" type="checkbox"/> | House: | Pool: | Driveway: | Parking: | Other: |
|---------------------------------------|--|--------|-------|-----------|----------|--------|

|                                |                   |                  |                    |
|--------------------------------|-------------------|------------------|--------------------|
| <b>Floodplain Development:</b> | Flood Zone: VE-12 | Structure Value: | Storage Below BFE: |
|--------------------------------|-------------------|------------------|--------------------|

|  |  |                        |                 |                         |
|--|--|------------------------|-----------------|-------------------------|
| <b>Vegetation Management (Sq.Ft.):</b> | N/A: <input checked="" type="checkbox"/> | Required Coverage: 0.0 | Area Preserved: | Required Plantings: 0.0 |
|--|--|------------------------|-----------------|-------------------------|

|                               |                 |                   |                   |                 |            |              |              |
|-------------------------------|-----------------|-------------------|-------------------|-----------------|------------|--------------|--------------|
| <b>Project Cost Estimate:</b> | <b>Building</b> | <b>Electrical</b> | <b>Mechanical</b> | <b>Plumbing</b> | <b>Gas</b> | <b>Other</b> | <b>Total</b> |
|                               | \$1,800.00      | \$0.00            | \$0.00            | \$0.00          | \$0.00     | \$0.00       | \$1,800.00   |

**Permit Conditions:**

- Any change or changes in the plans for development, construction or land use activities will require a re-evaluation and modification of this permit.
- The erection (including excavation), demolition, alteration or repair of any building in a residential or business district other than between the hours of 7 am and 6 pm, Monday through Saturday is prohibited.
- Stairs and/or walkway can be no wider than four feet measured at the widest outside dimension unless an engineered design is provided that meets the V-Zone provisions of the building code.
- The underside of the dune walkover structure across the frontal or primary dune shall be a minimum of 18 inches and a maximum of 30 inches above grade.
- Call for an on-site meeting prior to the start of construction and for a final inspection. *ML* initial
- Dune walkover structures shall be located such that the first step down to the beach is placed no farther seaward than the beginning of the downward slope of the dune.
- Dune walkover structures shall be constructed so that the staircase turns parallel to the dune if there is more than a 12-foot-vertical rise in the staircase required to provide access to the surface of the beach. The requirement to turn the stairs shall not apply in instances where it would preclude the placement of the stairs entirely within the subject property.

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

Mike Lensch                      5.10.18  
 Applicant Signature                      Date





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

Date Issued:
MAY 10 2018
Permit #:
B18-000134

Building Permit

Project Address: 121 MALLARD DR
Property Owner: BURKE, PAUL D

PIN #: 995011660684
Mailing Address: BURDETTE, WILLIAM R ET UX
7614 HOLLINS ROAD
RICHMOND, VA 23229

Contractor/Company Name: Carpenter Ant Construction
Phone: (252) 202-2687
Email: corndogant@hotmail.com

Contact Name: Anthony Bartolotta
Address: 100 Honey Suckle Lane
Point Harbor, NC 27964

Classification: Unlicensed Contractor
NC State License #:
Expiration Date:

Description of Work: Rebuild west side deck and stairs in same footprint

Use: Single Family
Structure/Work Type: Primary Structure:
Pool/Hot Tub:
Deck: Repair
Demo:
Accessory Building:
Bukhead (L.F.):
Pier (L.F.):
House Moving:

Proposed Area Schedule (Sq.Ft.): Heated: Unheated: Accessory Heated: Accessory Unheated:

Proposed Finished Grade (ft.): N/A: House: Pool: Driveway: Parking: Other:

Vegetation Management (Sq.Ft.): N/A: Area Preserved: Required Coverage: 0.0 Required Plantings: 0.0

Project Cost Estimate: Building \$10,000.00 Electrical \$0.00 Mechanical \$0.00 Plumbing \$0.00 Gas \$0.00 Other \$0.00 Total \$10,000.00

Permit Conditions:

- Any change or changes in the plans for development, construction or land use activities will require a re-evaluation and modification of this permit.
- The erection (including excavation), demolition, alteration or repair of any building in a residential or business district other than between the hours of 7 am and 6 pm, Monday through Saturday is prohibited.
- Repair & maintenance only
- No change to coverage or footprint.
- Call for inspection if rot is found; if no rot is found provide letter stating same for CO.
- Call for inspection once pilings are on site but before they are installed, no cuts no notches. Provide invoice for pilings prior to inspection.
- Call for final inspection.

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

Applicant Signature: [Signature] Date: 5/10/18



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

**Date Issued:**  
05/10/2018

**Permit #:**  
TR18-000114

## Electrical Trade Permit

**Project Address:** 1259 DUCK RD

**PIN #:** 995020707934B1

**Property Owner:** DUCK PUBLIC SAFETY

**Mailing Address:** 1259 DUCK ROAD  
DUCK, NC 27949

### Permit Types:

Plumbing  Electrical  Mechanical  Gas

### Contractor:

**Company Name:** Live Wire Electrical

**Phone:** (252) 441-7557

**NC State License #:** 26767-U

**Contact Name:** Brett T Salch

111 Shedders Walk

**Address:**


Kill Devil Hills, NC 27948

**Description of Work:** Running power from garage to Surf Rescue shed underground at Duck Public Safety

**Project Cost Estimate:** 500.00

**Permit Amount:** 0.00

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

  
Applicant Signature Date 5/10/18



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

**Date Issued:**  
05/10/2018

**Permit #:**  
TR18-000127

## Mechanical Trade Permit

**Project Address:** 117 B108 SEA COLONY DR

**Property Owner:** WENTWORTH, LYNN RAE

**PIN #:** 98590897572225

**Mailing Address:** 5689 CHEROKEE RUN CT  
MALONEY, JUDITH AN NN  
HAYMARKET, VA 20169

### Permit Types:

Plumbing  Electrical  Mechanical  Gas

### Contractor:

**Company Name:** All Seasons Heating & Cooling

**Phone:** (252) 491-9232

**NC State License #:** H3Class1: 19091

**Contact Name:** Joe Simpson

P.O. Box 244

**Address:**

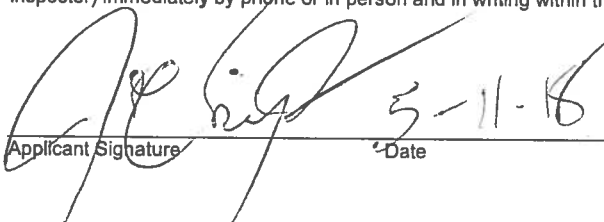
Point Harbor, NC 27964

**Description of Work:** Replace existing system with a 1.5 ton split system heat pump and air handler.

**Project Cost Estimate:** 6,210.00

**Permit Amount:** 160.00

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

  
Applicant Signature \_\_\_\_\_ Date 5-11-18



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

**Date Issued:**  
05/11/2018

**Permit #:**  
TR18-000128

## Mechanical Trade Permit

**Project Address:** 150 DUCK LANDING LN

**Property Owner:** KITRICK, JOHN

**PIN #:** 986909058213

**Mailing Address:** 672 WINDING RIVER RD  
BRICK, NJ 08724

### Permit Types:

Plumbing    Electrical    Mechanical    Gas

### Contractor:

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

**Phone:** (252) 261-2008

**NC State License #:** 13056

**Contact Name:** Douglas Wakeley

P.O. Box 179

**Address:**

Kitty Hawk, NC 27949

**Description of Work:** C/O 3.5 TON 16 SEER TRANE SYSTEM TOP LEVEL WITH XL624 TSTAT

**Project Cost Estimate:** 7,060.00

**Permit Amount:** 160.00

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

R.A. Hoy      5/14/18  
Applicant Signature      Date



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

**Date Issued:**  
05/11/2018

**Permit #:**  
TR18-000129

## Mechanical Trade Permit

**Project Address:** 109 MARLIN DR  
**Property Owner:** KEAVENEY, KEVIN

**PIN #:** 985912861046  
**Mailing Address:** 1 INDIAN SUMMER DR  
HOLLAND, PA 18966

### Permit Types:

Plumbing  Electrical  Mechanical  Gas

### Contractor:

**Company Name:** Air-O-Smith  
**Phone:** (252) 261-5238

**Contact Name:** Steven Smith  
330 N. Dogwood Trail

**NC State License #:** 30070 H3

**Address:**  
Southern Shores, NC 27949

**Description of Work:** REPLACE 14 SEER HVAC SYSTEM, LINE AND LOW VOLTAGE WIRING


**Project Cost Estimate:** 6,000.00

**Permit Amount:** 160.00

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

Applicant Signature

Date

  
5/15/18



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

**Date Issued:**  
05/11/2018

**Permit #:**  
TR18-000130

## Mechanical Trade Permit

**Project Address:** 116 MARLIN DR

**PIN #:** 985912863219

**Property Owner:** GUTHERIE, SCOTT

**Mailing Address:** 6000 CLAREMONT DR  
OWINGS, MD 20736

### Permit Types:

Plumbing  Electrical  Mechanical  Gas

### Contractor:

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

**Contact Name:** Douglas Wakeley

**Phone:** (252) 261-2008

P.O. Box 179

**Address:**

**NC State License #:** 13056

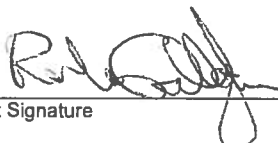
Kitty Hawk, NC 27949

**Description of Work:** C/O 2 TON 14 SEER TRANE SYSTEM DOWNSTAIRS WITH T6 WIFI TSTAT

**Project Cost Estimate:** 4,998.00

**Permit Amount:** 160.00

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

  
Applicant Signature

5/14/18  
Date



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

**Date Issued:**  
05/11/2018

**Permit #:**  
TR18-000131

## Mechanical Trade Permit

**Project Address:** 99 CANVAS BACK DR

**Property Owner:** LEVY, JAY J

**PIN #:** 995011555044

**Mailing Address:** 536 LOCKERBIE CIR S  
INDIANAPOLIS, IN 46202

### Permit Types:

Plumbing  Electrical  Mechanical  Gas

### Contractor:

**Company Name:** All Seasons Heating & Cooling

**Phone:** (252) 491-9232

**Contact Name:** Joe Simpson

P.O. Box 244

**Address:**

Point Harbor, NC 27964


**NC State License #:** H3Class1: 19091

**Description of Work:** Replace existing system with a 2 ton split system heat pump and air handler

**Project Cost Estimate:** 6,595.00

**Permit Amount:** 160.00

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

 5-18-18  
Applicant Signature Date



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

Date Issued:

**MAY 14 2018**  
 Permit #:  
 B18-000135

**Building/Floodplain Development Permit**

**Project Address:** 1212 DUCK RD  
**Property Owner:** WP & JP ENTERPRISES II, LLC

**PIN #:** 985912757100  
**Mailing Address:** 305 INDUSTRIAL BLVD  
 GREENVILLE, NC 27959

**Contractor:**  
**Company Name:** Premier Coastal Contracting  
**Phone:** (757) 761-0103  
**Email:** joe@pccbuild.com  
**Contact Name:** Joe Trentzsch  
**Address:** PO Box 2359  
 Manteo, NC 27954  
**Classification:** Unlicensed Contractor  
**NC State License #:**  
**Expiration Date:**

**Description of Work:** Siding replacement, repair, and painting siding to match existing

**Use:** Commercial  
**Structure/Work Type:** Primary Structure: 4.Repair/Maintenance  
 Pool/Hot Tub:  
 Deck:  
 Demo:  
**Permit Amount:** 100.00  
**Accessory Building:**   
**Bukhead (L.F.):**  
**Pier (L.F.):**  
**House Moving:**

**Proposed Area Schedule (Sq.Ft.):** Heated: Unheated: Accessory Heated: Accessory Unheated:

**Proposed Finished Grade (ft.):** N/A:  House: Pool: Driveway: Parking: Other:

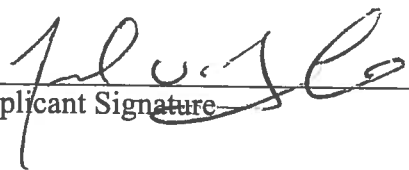
**Floodplain Development:** Flood Zone: AE-7 Structure Value: Storage Below BFE:

**Vegetation Management (Sq.Ft.):** N/A:  Required Coverage: 0.0 Area Preserved: Required Plantings: 0.0

| Project Cost Estimate: | Building   | Electrical | Mechanical | Plumbing | Gas    | Other  | Total      |
|------------------------|------------|------------|------------|----------|--------|--------|------------|
|                        | \$5,000.00 | \$0.00     | \$0.00     | \$0.00   | \$0.00 | \$0.00 | \$5,000.00 |

- Permit Conditions:**
- Any change or changes in the plans for development, construction or land use activities will require a re-evaluation and modification of this permit.
  - The erection (including excavation), demolition, alteration or repair of any building in a residential or business district other than between the hours of 7 am and 6 pm, Monday through Saturday is prohibited.
  - Repair & maintenance only
  - No change to coverage or footprint.
  - Call for inspection if rot is found; if no rot is found provide letter stating same for CO.
  - Any changes to existing paint colors will require approval from the Town of Duck Director of Community Development.
  - Call for final inspection.

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

Applicant Signature:  Date: 5/14/18





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

Date Issued:  
**MAY 14 2018**  
 Permit #:  
 B18-000136

**Building Permit**

**Project Address:** 114 SPINDRIFT LN  
**Property Owner:** SMITH, GRACE

**PIN #:** 995016735129  
**Mailing Address:** 151 GEORGE SANDYS  
 WILLIAMSBURG, VA 23185

**Contractor/Company Name:** Olin Finch & Co.  
**Phone:** 252-202-9879  
**Email:** marcemurray@gmail.com

**Contact Name:** Marc Murray  
**Address:** 116 Sandy Ridge Road  
 Duck, NC 27949

**Classification:** General Contractor  
**NC State License #:** 52567  
**Expiration Date:**

**Description of Work:** Interior remodel of existing bathrooms (4 bathrooms 96 s.f.), replacement of kitchen cabinets, deletion of chimney, installation of gas fireplace, installation of windows and skylights per plans. Construction of storage room on grade under existing house (approx 72 s.f.) All improvements inside existing footprint, no additional bedrooms or septic capacity.

**Use:**  
 Single Family

**Structure/Work Type:**  
 Primary Structure: **3.Remodel**  
 Pool/Hot Tub:  
 Deck: **Repair**  
 Demo:

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

**Permit Amount:**  
 \$125.00

|   |  |                                 |                             |                               |                      |                        |                             |
|---|--|---------------------------------|-----------------------------|-------------------------------|----------------------|------------------------|-----------------------------|
| <b>Proposed Area Schedule (Sq.Ft.):</b> | Heated:                                  | Unheated: 72                    | Accessory Heated:           | Accessory Unheated:           |                      |                        |                             |
| <b>Proposed Finished Grade (ft.):</b>   | N/A: <input checked="" type="checkbox"/> | House:                          | Pool:                       | Driveway:                     | Parking:             | Other:                 |                             |
| <b>Vegetation Management (Sq.Ft.):</b>  | N/A: <input checked="" type="checkbox"/> | Area Preserved:                 | Required Coverage: 0.0      | Required Plantings: 0.0       |                      |                        |                             |
| <b>Project Cost Estimate:</b>           | <b>Building</b><br>\$8,000.00            | <b>Electrical</b><br>\$4,000.00 | <b>Mechanical</b><br>\$0.00 | <b>Plumbing</b><br>\$4,000.00 | <b>Gas</b><br>\$0.00 | <b>Other</b><br>\$0.00 | <b>Total</b><br>\$16,000.00 |

**Permit Conditions:**

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

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

 5/14/2018  
 Applicant Signature Date



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

**Date Issued:**  
05/15/2018

**Permit #:**  
TR18-000132

## Mechanical Trade Permit

**Project Address:** 166 PLOVER DR  
**Property Owner:** JULIAN, LLOYD V JR

**PIN #:** 986917220164  
**Mailing Address:** 133 WILLIAM RICHMOND  
WILLIAMSBURG, VA 23185

### Permit Types:

Plumbing  Electrical  Mechanical  Gas

### Contractor:

**Company Name:** R.A. Hoy Heating & A/C  
**Phone:** (252) 261-2008

**Contact Name:** Douglas Wakeley  
P.O. Box 179

**NC State License #:** 13056

**Address:**  
Kitty Hawk, NC 27949

**Description of Work:** C/O 2.5 TON 14 SEER TRANE SYSTEM MID LEVEL WITH T6 THERMOSTAT

**Project Cost Estimate:** 5,400.00

**Permit Amount:** 160.00

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

  
Applicant Signature

Date

5/16/18



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

**Date Issued:**  
05/16/2018

**Permit #:**  
TR18-000133

## Mechanical Trade Permit

**Project Address:** 120 MALLARD DR  
**Property Owner:** SEAWALK LIMITED

**PIN #:** 995011661841  
**Mailing Address:** 3711 KENNYBROOK LN  
COLUMBUS, OH 43220

### Permit Types:

Plumbing  Electrical  Mechanical  Gas

### Contractor:

**Company Name:** R.A. Hoy Heating & A/C  
**Phone:** (252) 261-2008

**Contact Name:** Douglas Wakeley  
P.O. Box 179

**NC State License #:** 13056

**Address:**  
Kitty Hawk, NC 27949

**Description of Work:** C/O 1.5 TON 14 SEER TRANE OUTDOOR UNIT ONLY ON THE MID LEVEL

**Project Cost Estimate:** 3,265.00

**Permit Amount:** 130.00

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

  
Applicant Signature

5/14/18  
Date



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

**Date Issued:**  
05/16/2018

**Permit #:**  
TR18-000134

## Mechanical Trade Permit

**Project Address:** 134 MARLIN DR  
**Property Owner:** ZOLTOWSKI, DANIEL

**PIN #:** 985912960342

**Mailing Address:** 8 STONEHILL LN  
MOUNT LAUREL, NJ 08054

### Permit Types:

Plumbing  Electrical  Mechanical  Gas

### Contractor:

**Company Name:** R.A. Hoy Heating & A/C  
**Phone:** (252) 261-2008

**Contact Name:** Douglas Wakeley  
P.O. Box 179

**NC State License #:** 13056


**Address:**  
Kitty Hawk, NC 27949

**Description of Work:** C/O 2.5 TON 15 SEER TRANE SYSTEM TOP LEVEL WITH T6 TSAT

**Project Cost Estimate:** 5,500.00

**Permit Amount:** 160.00

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

  
Applicant Signature

5/16/18  
Date



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

**Date Issued:**  
05/16/2018

**Permit #:**  
TR18-000135

## Mechanical Trade Permit

**Project Address:** 121 SKIMMER WAY

**Property Owner:** MULLEN, JOHN O

**PIN #:** 995118407035

**Mailing Address:** 121 SKIMMER WAY  
KITTY HAWK, NC 27949

### Permit Types:

Plumbing  Electrical  Mechanical  Gas

### Contractor:

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

**Phone:** (252) 261-2008

**NC State License #:** 13056

**Contact Name:** Douglas Wakeley

P.O. Box 179

**Address:**


Kitty Hawk, NC 27949

**Description of Work:** C/O 1.5 TON 15 SEER TRANE SYSTEM GROUND LEVEL WITH XL624 TSTAT

**Project Cost Estimate:** 5,186.00

**Permit Amount:** 160.00

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

  
Applicant Signature

5/16/18  
Date



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

**Date Issued:**  
05/16/2018  
**Permit #:**  
TR18-000136

## Mechanical Trade Permit

**Project Address:** 141 MARLIN DR  
**Property Owner:** BORAS, GEORGE N

**PIN #:** 985912969183  
**Mailing Address:** 43635 HAY RD  
ASHBURN, VA 20147

### Permit Types:

Plumbing  Electrical  Mechanical  Gas

### Contractor:

**Company Name:** All-In-One Mechanical  
**Phone:** (252) 491-5334

**Contact Name:** Ray Etheridge  
114-A Ballast Rock Road

**NC State License #:** 27675

**Address:**  
Powells Point, NC 27966

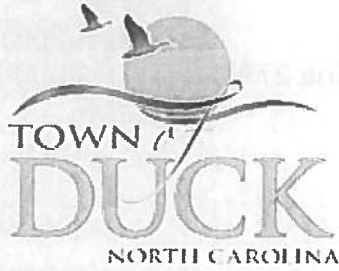
**Description of Work:** Change out 2.5 and 3.5 ton systems.

**Project Cost Estimate:** 10,500.00

**Permit Amount:** 220.00

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

W. W. Francis      5-16-18  
Applicant Signature      Date



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

**Date Issued:**  
05/17/2018

**Permit #:**  
TR18-000137

### Mechanical Trade Permit

**Project Address:** 105 PAMELA CT

**PIN #:** 985916930757

**Property Owner:** ALLEN, LINDA M

**Mailing Address:** 2855 N HANNA WAY  
ALLISON PARK, PA 15101

### Permit Types:

Plumbing     Electrical     Mechanical     Gas

### Contractor:

**Company Name:** Air Handlers OBX

**Phone:** (252) 491-8637

**Contact Name:** Jesse Owens

P.o. Box 309

**Address:**

Harbinger, NC 27941

**NC State License #:**

**Description of Work:** Remove and replace outdoor unit only with 2.5 ton trane 14 SEER heat pump and rewire

**Project Cost Estimate:** 3,200.00

**Permit Amount:** 130.00

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

  
Applicant Signature

5-24-18  
Date



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

**Date Issued:**  
05/17/2018

**Permit #:**  
TR18-000138

### Mechanical Trade Permit

**Project Address:** 153 MARLIN CT

**Property Owner:** GAERTNER, WILLIAM L JR TRUSTEE

**PIN #:** 986909062397

**Mailing Address:** 22401 CYPRESS POINT RD  
WILLIAMSBURG, VA 23185

### Permit Types:

Plumbing  Electrical  Mechanical  Gas

### Contractor:

**Company Name:** Air Handlers OBX

**Phone:** (252) 491-8637

**NC State License #:**

**Contact Name:** Jesse Owens

P.o. Box 309

**Address:**

Harbinger, NC 27941

**Description of Work:** HVAC replcaement- heat pump only- 3.5 ton Trane 14 SEER

**Project Cost Estimate:** 3,428.00

**Permit Amount:** 130.00

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

  
Applicant Signature

5-24-18  
Date





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

**Date Issued:**  
05/17/2018

**Permit #:**  
TR18-000139

**Mechanical Trade Permit**

**Project Address:** 117 D228 SEA COLONY DR

**Property Owner:** STEWART, JAMES

**PIN #:** 98590897572273

**Mailing Address:** 2502 LONDON RD  
RICHMOND, VA 23294

**Permit Types:**

Plumbing  Electrical  Mechanical  Gas

**Contractor:**

**Company Name:** Air Handlers OBX

**Phone:** (252) 491-8637

**Contact Name:** Jesse Owens

P.o. Box 309

**Address:**

Harbinger, NC 27941


**NC State License #:**

**Description of Work:** HVAC replacement- heat pump only; 1.5 ton 14 SEER Trane

**Project Cost Estimate:** 2,600.00

**Permit Amount:** 130.00

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

  
Applicant Signature

5-24-18  
Date



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

**Date Issued:**  
05/17/2018  
**Permit #:**  
TR18-000140

### Mechanical Trade Permit

**Project Address:** 126 10 QUARTERDECK DR  
**Property Owner:** HILL, ROBERT R

**PIN #:** 99501167217810  
**Mailing Address:** 11160 CAMINITO VIS  
SAN DIEGO, CA 92131

### Permit Types:

Plumbing     Electrical     Mechanical     Gas

### Contractor:

**Company Name:** Air Handlers OBX  
**Phone:** (252) 491-8637

**Contact Name:** Jesse Owens  
P.o. Box 309  
**Address:**  
Harbinger, NC 27941

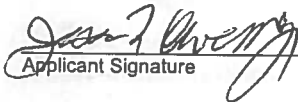
**NC State License #:**

**Description of Work:** Remove and install one 2-ton York 14 SEER heat pump only and rewire

**Project Cost Estimate:** 3,300.00

**Permit Amount:** 130.00

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

  
Applicant Signature

5-24-18  
Date



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

Date Issued:

**MAY 17 2018**  
 Permit #:  
 B18-000140

**Building/Floodplain Development Permit**

Project Address: 109 RUDDY DUCK LN  
 Property Owner: MCCONNELL, RICHARD

PIN #: 995118317314  
 Mailing Address: 8135 CLEARWATER DR  
 PARKVILLE, MO 64152

**Contractor:**  
**Company Name:** Albanese Construction Company **Contact Name:** Joe Albanese **Classification:** General Contractor  
**Phone:** (252) 441-3856 **Address:** 1811 Sea Swept Road **NC State License #:** 64199  
**Email:** jjalbanese@msn.com **Kill Devil Hills, NC 27948** **Expiration Date:**

**Description of Work:** Replace 10 Andersen windows and repair leak in MBR ceiling and rot on wall

**Use:** Single Family **Structure/Work Type:** Primary Structure: 4.Repair/Maintenance  
 Pool/Hot Tub:  
 Deck:  
 Demo:

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

**Permit Amount:**  
 100.00

**Proposed Area Schedule (Sq.Ft.):** Heated: Unheated: Accessory Heated: Accessory Unheated:

**Proposed Finished Grade (ft.):** N/A:  House: Pool: Driveway: Parking: Other:

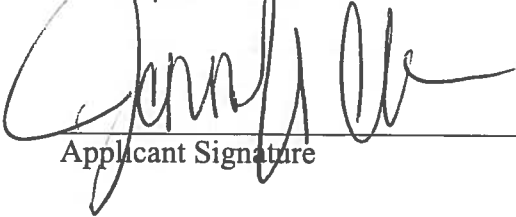
**Floodplain Development:** Flood Zone: AE-8 Structure Value: Storage Below BFE:

**Vegetation Management (Sq.Ft.):** N/A:  Required Coverage: 0.0 Area Preserved: Required Plantings: 0.0

| Project Cost Estimate: | Building    | Electrical | Mechanical | Plumbing | Gas    | Other  | Total       |
|------------------------|-------------|------------|------------|----------|--------|--------|-------------|
|                        | \$14,000.00 | \$0.00     | \$0.00     | \$0.00   | \$0.00 | \$0.00 | \$14,000.00 |

- Permit Conditions:**
- Any change or changes in the plans for development, construction or land use activities will require a re-evaluation and modification of this permit.
  - The erection (including excavation), demolition, alteration or repair of any building in a residential or business district other than between the hours of 7 am and 6 pm, Monday through Saturday is prohibited.
  - Repair & maintenance only
  - No change to coverage or footprint.
  - Call for inspection if rot is found; if no rot is found provide letter stating same for CO.
  - Call for final inspection.

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

 5/17/18  
 Applicant Signature Date



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

Date Issued:  
**MAY 18 2018**  
 Permit #:  
 B18-000142

**MAY 18 2018**

**Building/Floodplain Development Permit**

Project Address: 134 SHEARWATER WAY  
 Property Owner: KLEIN, BARBARA S

PIN #: 995118408560  
 Mailing Address: 800 SHELL POINT PL  
 WILMINGTON, NC 28405

**Contractor:**

Company Name: Ken Green & Associates  
 Phone: (252) 491-8127  
 Email: kgreen@kg-a.com

Contact Name: Ken Green  
 Address: P.O. Box 372  
 Harbinger, NC 27941

Classification: General Contractor  
 NC State License #: 68343  
 Expiration Date:

**Description of Work:** Build approximately 5' steps and a 6x4 walkway across sand dune formed on existing walkway; install 5' steps on east end of new walkway to connect to existing; install sand fencing at bottom of dune

**Use:**  
 Beach Stair/Access

**Structure/Work Type:**

Primary Structure:  
 Pool/Hot Tub:  
 Deck:  
 Demo:

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

**Permit Amount:**  
 25.00

**Proposed Area Schedule (Sq.Ft.):** Heated: Unheated: Accessory Heated: Accessory Unheated:

**Proposed Finished Grade (ft.):** N/A:  House: Pool: Driveway: Parking: Other:

**Floodplain Development:** Flood Zone: VE-12 Structure Value: Storage Below BFE:

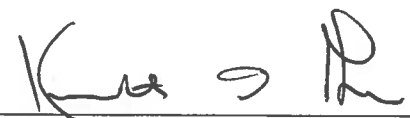
**Vegetation Management (Sq.Ft.):** N/A:  Required Coverage: 0.0 Area Preserved: Required Plantings: 0.0

| Project Cost Estimate: | Building   | Electrical | Mechanical | Plumbing | Gas    | Other  | Total      |
|------------------------|------------|------------|------------|----------|--------|--------|------------|
|                        | \$2,500.00 | \$0.00     | \$0.00     | \$0.00   | \$0.00 | \$0.00 | \$2,500.00 |

**Permit Conditions:**

- Any change or changes in the plans for development, construction or land use activities will require a re-evaluation and modification of this permit.
- The erection (including excavation), demolition, alteration or repair of any building in a residential or business district other than between the hours of 7 am and 6 pm, Monday through Saturday is prohibited.
- The new walkover can be no wider than four feet measured at the widest outside dimension unless an engineered design is provided that meets the V-Zone provisions of the building code.
- The underside of the dune walkover structure across the frontal or primary dune shall be a minimum of 18 inches and a maximum of 30 inches above grade.
- Call for final inspection.

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

  
 Applicant Signature

5-18-18  
 Date



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

Date Issued:  
**MAY 18 2018**  
 Permit #:  
 B18-000143

**Building/Floodplain Development Permit**

Project Address: 108 STATION BAY DR  
 Property Owner: SHAW, WHITNEY

PIN #: 995114248899  
 Mailing Address: 8468 PROVIDENCE RD  
 CHARLOTTE, NC 28277

**Contractor:**  
 Company Name: Ken Green & Associates  
 Phone: (252) 491-8127  
 Email: kgreen@kg-a.com

**Contact Name:** Ken Green  
**Address:** P.O. Box 372  
 Harbinger, NC 27941

**Classification:** General Contractor  
**NC State License #:** 68343  
**Expiration Date:**

**Description of Work:** Repair existing beach walkway by adding 4x4 post bolted to existing posts to level and secure walkway; add four steps to existing stairs; install new sand fence at bottom of dune

**Use:** Beach Stair/Access  
**Structure/Work Type:** Primary Structure:  
 Pool/Hot Tub:  
 Deck:  
 Demo:

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

**Permit Amount:** 25.00

**Proposed Area Schedule (Sq.Ft.):** Heated: Unheated: Accessory Heated: Accessory Unheated:

**Proposed Finished Grade (ft.):** N/A:  House: Pool: Driveway: Parking: Other:

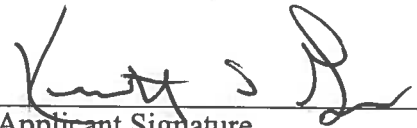
**Floodplain Development:** Flood Zone: VE-12 Structure Value: Storage Below BFE:

**Vegetation Management (Sq.Ft.):** N/A:  Required Coverage: 0.0 Area Preserved: Required Plantings: 0.0

| Project Cost Estimate: | Building   | Electrical | Mechanical | Plumbing | Gas    | Other  | Total      |
|------------------------|------------|------------|------------|----------|--------|--------|------------|
|                        | \$2,800.00 | \$0.00     | \$0.00     | \$0.00   | \$0.00 | \$0.00 | \$2,800.00 |

- Permit Conditions:**
- Any change or changes in the plans for development, construction or land use activities will require a re-evaluation and modification of this permit.
  - The erection (including excavation), demolition, alteration or repair of any building in a residential or business district other than between the hours of 7 am and 6 pm, Monday through Saturday is prohibited.
  - Repairs to stairs and/or walkway can be no wider than four feet measured at the widest outside dimension unless an engineered design is provided that meets the V-Zone provisions of the building code.
  - Dune walkover structures shall be constructed so that the staircase turns parallel to the dune if there is more than a 12-foot-vertical rise in the staircase required to provide access to the surface of the beach.
- Call for final inspection.

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

  
 Applicant Signature

5-18-18  
 Date



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

Date Issued:

**MAY 18 2018**

Permit #:  
 B18-000144

**Building/Floodplain Development Permit**

Project Address: 1475 DUCK RD  
 Property Owner: SALT HOUSES AT SANDERLING HOMEOWNERS

PIN #: 99510926228300  
 Mailing Address: c/o BARKNEY SKLANDANY  
 307 MANSION DR  
 ALEXANDRIA, VA 22303

**Contractor:**  
 Company Name: Ken Green & Associates      Contact Name: Ken Green      Classification: General Contractor  
 Phone: (252) 491-8127      Address: P.O. Box 372      NC State License #: 68343  
 Email: kgreen@kg-a.com      Harbinger, NC 27941      Expiration Date:

**Description of Work:** Level existing walkway at dune; add new stairs and landings east side of dune; add sand fence where needed

|                                   |  |  |
|-----------------------------------|--|--|
| <b>Use:</b><br>Beach Stair/Access | <b>Structure/Work Type:</b><br>Primary Structure:<br>Pool/Hot Tub:<br>Deck:<br>Demo: | Accessory Building: <input type="checkbox"/><br>Bukhead (L.F.):<br>Pier (L.F.):<br>House Moving: |
| <b>Permit Amount:</b><br>25.00    |  |  |

|   |         |           |                   |                     |
|---|---------|-----------|-------------------|---------------------|
| <b>Proposed Area Schedule (Sq.Ft.):</b> | Heated: | Unheated: | Accessory Heated: | Accessory Unheated: |
|---|---------|-----------|-------------------|---------------------|

|                                       |  |        |       |           |          |        |
|---------------------------------------|--|--------|-------|-----------|----------|--------|
| <b>Proposed Finished Grade (ft.):</b> | N/A: <input checked="" type="checkbox"/> | House: | Pool: | Driveway: | Parking: | Other: |
|---------------------------------------|--|--------|-------|-----------|----------|--------|

|                                |                   |                  |   |
|--------------------------------|-------------------|------------------|---|
| <b>Floodplain Development:</b> | Flood Zone: VE-12 | Structure Value: | Storage Below BFE: <input type="checkbox"/> |
|--------------------------------|-------------------|------------------|---|

|  |  |                        |                 |                         |
|--|--|------------------------|-----------------|-------------------------|
| <b>Vegetation Management (Sq.Ft.):</b> | N/A: <input checked="" type="checkbox"/> | Required Coverage: 0.0 | Area Preserved: | Required Plantings: 0.0 |
|--|--|------------------------|-----------------|-------------------------|

|                               |                 |                   |                   |                 |            |              |              |
|-------------------------------|-----------------|-------------------|-------------------|-----------------|------------|--------------|--------------|
| <b>Project Cost Estimate:</b> | <b>Building</b> | <b>Electrical</b> | <b>Mechanical</b> | <b>Plumbing</b> | <b>Gas</b> | <b>Other</b> | <b>Total</b> |
|                               | \$2,800.00      | \$0.00            | \$0.00            | \$0.00          | \$0.00     | \$0.00       | \$2,800.00   |

- Permit Conditions:**
- Any change or changes in the plans for development, construction or land use activities will require a re-evaluation and modification of this permit.
  - The erection (including excavation), demolition, alteration or repair of any building in a residential or business district other than between the hours of 7 am and 6 pm, Monday through Saturday is prohibited.
  - Dune walkover structures shall be constructed so that the staircase turns parallel to the dune if there is more than a 12-foot-vertical rise in the staircase required to provide access to the surface of the beach.
  - Stairs and/or walkway can be no wider than four feet measured at the widest outside dimension unless an engineered design is provided that meets the V-Zone provisions of the building code.
  - The underside of the dune walkover structure across the frontal or primary dune shall be a minimum of 18 inches and a maximum of 30 inches above grade.
  - Call for final inspection.

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

  5-16-18  
 Applicant Signature      Date



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

Date Issued:  
**MAY 18 2018**

Permit #:  
 B18-000139

**Building/Floodplain Development Permit**

**Project Address:** 106 South BAUM TRL  
**Property Owner:** GROHOWSKI, LEO

**PIN #:** 995109261659  
**Mailing Address:** 166 LIBERTY CORNER RD  
 FAR HILLS, NJ 07931

**Contractor:**

**Company Name:** Todd Coyle Construction, LLC  
**Phone:** (252) 261-9728  
**Email:** tccllc@charter.net

**Contact Name:** Todd Coyle  
**Address:** P O Box 1094  
 Kitty Hawk, NC 27949

**Classification:** General Contractor  
**NC State License #:** 60830 - U  
**Expiration Date:**

**Description of Work:** Add 30' of new walkway and set of stairs off of an existing dune deck

**Use:**  
 Beach Stair/Access

**Structure/Work Type:**

Primary Structure:  
 Pool/Hot Tub:  
 Deck:  
 Demo:

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

**Permit Amount:**  
 100.00

**Proposed Area Schedule (Sq.Ft.):** Heated: Unheated: Accessory Heated: Accessory Unheated:

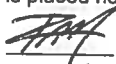
**Proposed Finished Grade (ft.):** N/A:  House: Pool: Driveway: Parking: Other:

**Floodplain Development:** Flood Zone: VE-12 Structure Value: Storage Below BFE:


**Vegetation Management (Sq.Ft.):** N/A:  Required Coverage: 0.0 Area Preserved: Required Plantings: 0.0

| Project Cost Estimate: | Building | Electrical | Mechanical | Plumbing | Gas    | Other  | Total  |
|------------------------|----------|------------|------------|----------|--------|--------|--------|
|                        | \$0.00   | \$0.00     | \$0.00     | \$0.00   | \$0.00 | \$0.00 | \$0.00 |

**Permit Conditions:**

- Any change or changes in the plans for development, construction or land use activities will require a re-evaluation and modification of this permit.
- Concrete driveway limited to 20 in width.
- Dune walkover structures shall be constructed so that the staircase turns parallel to the dune if there is more than a 12-foot-vertical rise in the staircase required to provide access to the surface of the beach. The requirement to turn the stairs shall not apply in instances where it would preclude the placement of the stairs entirely within the subject property.
- Stairs and/or walkway can be no wider than four feet measured at the widest outside dimension unless an engineered design is provided that meets the V-Zone provisions of the building code.
- The underside of the dune walkover structure across the frontal or primary dune shall be a minimum of 18 inches and a maximum of 30 inches above grade.
- Dune walkover structures shall be located such that the first step down to the beach is placed no farther seaward than the beginning of the downward slope of the dune.
- Call for an on-site meeting prior to the start of construction and for a final inspection.  initial
- Call for final inspection.

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

  
 Applicant Signature

5/18/18  
 Date



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

Date Issued:  
**MAY 18 2018**

Permit #:  
 B18-000141

**Building/Floodplain Development Permit**

Project Address: 118 SANDY RIDGE RD  
 Property Owner: SHAW, BRUCE M

PIN #: 985908897196  
 Mailing Address: 51219 E CHURCH  
 CHAPEL HILL, NC 27517

**Contractor:**

Company Name: Olin Finch & Co.  
 Phone: 252-202-9879  
 Email: marcemurray@gmail.com

Contact Name: Marc Murray  
 Address: 116 Sandy Ridge Road  
 Duck, NC 27949

Classification: General Contractor  
 NC State License #: 52567  
 Expiration Date:

**Description of Work:** Addition of garage and storage under existing structure. Total enclosure 480 s.f. total. No heated space. No change to footprint.

**Use:**  
 Single Family

**Structure/Work Type:**  
 Primary Structure: 2.Addition  
 Pool/Hot Tub:  
 Deck:  
 Demo:

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

**Permit Amount:**  
 203.00

|   |  |                               |  |                         |            |              |              |
|---|--|-------------------------------|--|-------------------------|------------|--------------|--------------|
| <b>Proposed Area Schedule (Sq.Ft.):</b> | Heated:                                  | Unheated: 480                 | Accessory Heated:                                      | Accessory Unheated:     |            |              |              |
| <b>Proposed Finished Grade (ft.):</b>   | N/A: <input checked="" type="checkbox"/> | House:                        | Pool:  | Driveway:               | Parking:   | Other:       |              |
| <b>Floodplain Development:</b>          | Flood Zone: AE-9                         | Structure Value: \$181,700.00 | Storage Below BFE: <input checked="" type="checkbox"/> |                         |            |              |              |
| <b>Vegetation Management (Sq.Ft.):</b>  | N/A: <input checked="" type="checkbox"/> | Required Coverage: 0.0        | Area Preserved:  | Required Plantings: 0.0 |            |              |              |
| <b>Project Cost Estimate:</b>           | <b>Building</b>                          | <b>Electrical</b>             | <b>Mechanical</b>                                      | <b>Plumbing</b>         | <b>Gas</b> | <b>Other</b> | <b>Total</b> |
|   | \$5,000.00                               | \$2,000.00                    | \$0.00   | \$2,000.00              | \$0.00     | \$0.00       | \$9,000.00   |

**Permit Conditions:**

- Any change or changes in the plans for development, construction or land use activities will require a re-evaluation and modification of this permit.
- The erection (including excavation), demolition, alteration or repair of any building in a residential or business district other than between the hours of 7 am and 6 pm, Monday through Saturday is prohibited.
- No change to coverage or footprint.
- Elevation Certificate required prior to CO.
- 1/2" drywall on wall adjacent to storage area required and 20 minute fire door required for storage entry.
- Typical trade inspections required.
- Flood openings must be provide in at least two of the walls forming the enclosure and the bottom of each flood opening must be no more than 1 foot above the adjacent grade outside the wall.
- Call for final inspection.

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

Applicant Signature

5/18/2018  
 Date





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

Date Issued:  
**MAY 18 2018**  
 Permit #:  
 B18-000145

**Building/Floodplain Development Permit**

Project Address: 117 B310 SEA COLONY DR  
 Property Owner: WUCKOVICH, MARK

PIN #: 98590897572242  
 Mailing Address: 6706 HUNTSMAN BLVD  
 SPRINGFIELD, VA 22152

**Contractor:**

Company Name: Trulane Builders  
 Phone: (252) 904-7399  
 Email: trulane.builders@yahoo.com

Contact Name: Lane Johnson  
 Address: 6728 Bethany Church Rd  
 Wendell, NC 27591

Classification: General Contractor  
 NC State License #: 30280  
 Expiration Date:

**Description of Work:** Remove and replace kitchen cabinets and counter tops, bathroom vanities and toilets; new tile in kitchen, hallway, bathrooms and shower

**Use:**  
 Multi Family

**Structure/Work Type:**  
 Primary Structure: **3.Remodel**  
 Pool/Hot Tub:  
 Deck:  
 Demo:

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

**Permit Amount:**  
 230.00

**Proposed Area Schedule (Sq.Ft.):** Heated: Unheated: 300 Accessory Heated: Accessory Unheated:

**Proposed Finished Grade (ft.):** N/A:  House: Pool: Driveway: Parking: Other:

**Floodplain Development:** Flood Zone: AE-9 Structure Value: Storage Below BFE:

**Vegetation Management (Sq.Ft.):** N/A:  Required Coverage: 0.0 Area Preserved: Required Plantings: 0.0

| Project Cost Estimate: | Building    | Electrical | Mechanical | Plumbing | Gas    | Other  | Total       |
|------------------------|-------------|------------|------------|----------|--------|--------|-------------|
|                        | \$20,000.00 | \$0.00     | \$0.00     | \$0.00   | \$0.00 | \$0.00 | \$20,000.00 |

**Permit Conditions:**

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

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

*Lane Johnson* 5-18-18  
 Applicant Signature Date



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

**Date Issued:**  
05/18/2018

**Permit #:**  
TR18-000141

## Mechanical Trade Permit

**Project Address:** 127 SKIMMER WAY

**PIN #:** 995006498813

**Property Owner:** MCKENNA, STEPHEN J

**Mailing Address:** PO BOX 8396  
KITTY HAWK, NC 27949

### Permit Types:

Plumbing  Electrical  Mechanical  Gas

### Contractor:

**Company Name:** North Beach Services Heating and Cooling

**Phone:** (252) 491-2878

**Contact Name:** Gabby Willis

PO Box 181

**Address:**

Kitty Hawk , NC 27949

**NC State License #:**

**Description of Work:** Replacement of HVAC system with Trane 14 Seer 3 ton heat pump and matching air handler

**Project Cost Estimate:** 6,190.00

**Permit Amount:** 160.00

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

Applicant Signature

Date

 5-23-18



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

**Date Issued:**  
05/18/2018

**Permit #:**  
TR18-000142

## Mechanical Trade Permit

**Project Address:** 117 SHIPS WATCH DR  
**Property Owner:** SHIPS WATCH ASSOCIATION

**PIN #:** 985908881527

**Mailing Address:** 1251 DUCK RD  
KITTY HAWK, NC 27949

### Permit Types:

Plumbing  Electrical  Mechanical  Gas

### Contractor:

**Company Name:** North Beach Services Heating and Cooling  
**Phone:** (252) 491-2878

**Contact Name:** Gabby Willis  
PO Box 181

**NC State License #:**

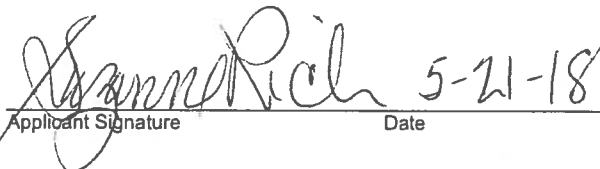
**Address:**  
Kitty Hawk , NC 27949

**Description of Work:** Replacement of HVAC system with Trane 14.5 Seer, 3.5 ton heat pump and matching air handler

**Project Cost Estimate:** 13,353.00

**Permit Amount:** 160.00

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

  
Applicant Signature Date



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

**Date Issued:**  
05/18/2018

**Permit #:**  
TR18-000143

## Mechanical Trade Permit

**Project Address:** 118 FLIGHT DR  
**Property Owner:** CHIFFRILLER, THOMAS

**PIN #:** 995006488949

**Mailing Address:** 5205 W GRACE ST  
RICHMOND, VA 23226

### Permit Types:

Plumbing  Electrical  Mechanical  Gas

### Contractor:

**Company Name:** All Seasons Heating & Cooling  
**Phone:** (252) 491-9232

**Contact Name:** Joe Simpson  
P.O. Box 244

**NC State License #:** H3Class1: 19091

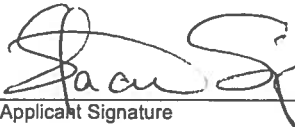
**Address:**  
Point Harbor, NC 27964

**Description of Work:** Installation of a new 3 ton RUUD split system heat pump paired with a 1200 cfm constant torque air handler to replace the existing 3 ton system currently conditioning the downstairs living area of the home.

**Project Cost Estimate:** 6,340.00

**Permit Amount:** 160.00

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

  
Applicant Signature

5-18-18  
Date



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

**Date Issued:**  
05/18/2018

**Permit #:**  
TR18-000144

## Mechanical Trade Permit

**Project Address:** 102 WAXWING CT  
**Property Owner:** SANDCASTLES FAMILY LTD

**PIN #:** 995118421147

**Mailing Address:** 6637 MADISON-MCLEAN DR  
C/O JOHN J HUGHE ES JR  
MC LEAN, VA 22101

### Permit Types:

Plumbing  Electrical  Mechanical  Gas

### Contractor:

**Company Name:** All Seasons Heating & Cooling  
**Phone:** (252) 491-9232

**Contact Name:** Joe Simpson  
P.O. Box 244

**Address:**  
Point Harbor, NC 27964

**NC State License #:** H3Class1: 19091

**Description of Work:** Replacement of upstairs and downstairs 3 ton split system heat pumps and air handlers with new split system heat pumps and air handlers

**Project Cost Estimate:** 18,100.00

**Permit Amount:** 220.00

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

  
Applicant Signature

5-18-18  
Date



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

**Date Issued:**  
05/21/2018

**Permit #:**  
TR18-000145

## Mechanical Trade Permit

**Project Address:** 106 103 TRINITIE DR  
**Property Owner:** SUE BRAUN, AGENT

**PIN #:** 99501156490703

**Mailing Address:** 109 SANDY TRL  
KILL DEVIL HILLS, NC 27948

### Permit Types:

Plumbing  Electrical  Mechanical  Gas

### Contractor:

**Company Name:** Atlantic Heating & Cooling, LTD  
**Phone:** (252) 441-7642

**Contact Name:** Henry Liverman  
P.O. Box 132

**NC State License #:** 9665, H2, H3, Class 1

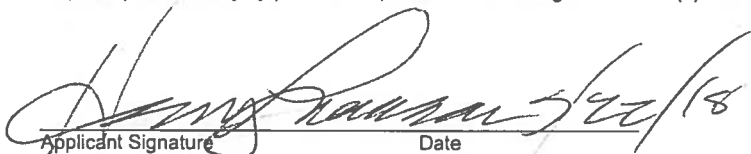
**Address:**  
Kill Devil Hills, NC 27948

**Description of Work:** 106 Trinitie Drive, #103  
Remove & replace the outdoor section of the HVAC system using a 2 ton 14 SEER R410A Goodman heat pump.

**Project Cost Estimate:** 2,900.00

**Permit Amount:** 130.00

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

  
Applicant Signature                      Date



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

**Date Issued:**  
05/21/2018

**Permit #:**  
TR18-000146

## Electrical Trade Permit

**Project Address:** 107 PELICAN WAY

**Property Owner:** DROST, DALE J

**PIN #:** 995118411121

**Mailing Address:** 107 PELICAN WAY  
KITTY HAWK, NC 27949

### Permit Types:

Plumbing  Electrical  Mechanical  Gas

### Contractor:

**Company Name:** Suburban Electric Contractors of NC, Inc.

**Phone:** (252) 475-1372

**NC State License #:** 30633

**Contact Name:** Mark Melton

1400 Maritime Woods Dr

**Address:**

Manteo, NC 27954

**Description of Work:** Install Generac 22 KW Generator

**Project Cost Estimate:** 8,000.00

**Permit Amount:** 130.00

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

**New generator location must meet the minimum floodplain requirement in place at the time of original construction (AE7') SM initial.**

Applicant Signature

Date

SM

5/24/18



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

**Date Issued:**  
05/21/2018

**Permit #:**  
TR18-000147

### Mechanical Trade Permit

**Project Address:** 100 South BAUM TRL  
**Property Owner:** 100 BAUM TRAIL LLC

**PIN #:** 995109263317  
**Mailing Address:** 5378 BLACK LANE  
FAIRBORN, OH 45324

### Permit Types:

Plumbing  Electrical  Mechanical  Gas

### Contractor:

**Company Name:** Outer Banks Elevator  
**Phone:** (252) 491-5490

**Contact Name:** Laurel Smith  
PO Box 219

**NC State License #:** 13234-SP EL

**Address:**  
Duck, NC

**Description of Work:** Installation of residential elevator

**Project Cost Estimate:** 21,000.00

**Permit Amount:** 130.00

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

  
Applicant Signature

5-22-18  
Date





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

**Date Issued:**  
05/21/2018

**Permit #:**  
TR18-000148

## Mechanical Trade Permit

**Project Address:** 142 North SPINNAKER CT  
**Property Owner:** SHIPS WATCH ASSOCIATION

**PIN #:** 985908980910

**Mailing Address:** 1251 DUCK RD  
KITTY HAWK, NC 27949

### Permit Types:

Plumbing  Electrical  Mechanical  Gas

### Contractor:

**Company Name:** North Beach Services Heating and Cooling  
**Phone:** (252) 491-2878

**Contact Name:** Gabby Willis  
PO Box 181

**Address:**  
Kitty Hawk, NC 27949

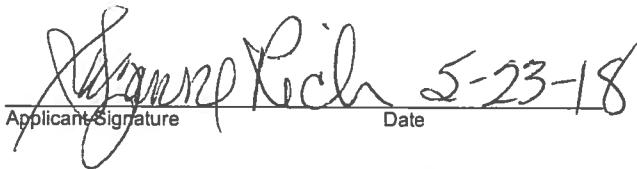
**NC State License #:**

**Description of Work:** Replacement of HVAC system with Trane 14 Seer 2.5 ton heat pump and matching air handler

**Project Cost Estimate:** 5,128.00

**Permit Amount:** 160.00

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

  
Applicant Signature Date



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

Date Issued:  
**MAY 21 2018**

Permit #:  
 LD18-000009

## Land Disturbance/Floodplain Development Permit

Project Address: 1562 DUCK RD

PIN #: 995109252090

Property Owner: SPEIGHT, CATHERINE W by Joe Speight

Mailing Address: 160 HOLLY TRL  
 KITTY HAWK, NC 27949

**Contractor:**

Company Name:

Contact Name: SPEIGHT, JOSEPH POWELL III

Classification:

Phone:

Address:

NC State License #:

Email:

Expiration Date:

Description of Work: Fill vacant lot 8-12 inches

Permit Amount: 100.00

**Land Disturbing Activity:**

- |  |                                     |  |  |   |
|--|-------------------------------------|--|--|---|
| <input type="checkbox"/> Parking                   | <input type="checkbox"/> Driveway   | <input type="checkbox"/> New Septic    | <input type="checkbox"/> Stormwater Conveyance | <input checked="" type="checkbox"/> Grading/Filling |
| <input type="checkbox"/> Landscaping/Minor Grading | <input type="checkbox"/> Irrigation | <input type="checkbox"/> Septic Repair | <input type="checkbox"/> Stormwater Retention  | <input type="checkbox"/> Vegetation Removal         |

**Proposed Finished Grade (ft.):**

N/A:

Driveway:

Parking:

Other:

**Floodplain Development:**

Flood Zone: AE-8

BF: 8

**Vegetation Management (Sq.Ft.):**

N/A:

Required Coverage: 0.0

Area Preserved:

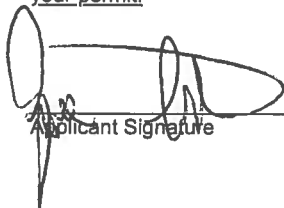
Required Plantings:

Estimated Project Cost: 1500

**Permit Conditions:**

- Any change or changes in the plans for development, construction or land use activities will require a re-evaluation and modification of this permit.
- No land disturbing activity within 5 feet of property line.
- Stabilize all disturbed areas prior to CO.
- No land disturbing activity within 5 feet of property line.
- 12" - 18" of fill is permitted in the low areas in the SE corner of the property as designated on the approved plan.
- Call for inspection once stabilization has been completed.

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

  
 Applicant Signature

5-21-18  
 Date



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

Date Issued: **MAY 22 2011**

Permit #: B18-000146

**Building Permit**

**Project Address:** 126 BUFFELL HEAD RD  
**Property Owner:** BAUM, DAVID A

**PIN #:** 995011657095  
**Mailing Address:** 720 STURGES WAY  
 ALPHARETTA, GA 30022

**Contractor/Company Name:** Ryan Waddell  
**Phone:** (252) 599-1611  
**Email:** ryanwaddell@rocketmail.com

**Contact Name:** Ryan Waddell  
**Address:** 2604 S. Memorial Avenue  
 Nags Head, NC 27959

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

**Description of Work:** Replace deck and railing on top level decking of house

**Use:**  
 Single Family

**Structure/Work Type:**

Primary Structure:  
 Pool/Hot Tub:  
 Deck:  
 Demo:

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

**Permit Amount:**  
 \$100.00

|   |  |                             |                             |                           |                      |                        |                            |
|---|--|-----------------------------|-----------------------------|---------------------------|----------------------|------------------------|----------------------------|
| <b>Proposed Area Schedule (Sq.Ft.):</b> | Heated:                                  | Unheated:                   | Accessory Heated:           | Accessory Unheated:       |                      |                        |                            |
| <b>Proposed Finished Grade (ft.):</b>   | N/A: <input checked="" type="checkbox"/> | House:                      | Pool:                       | Driveway:                 | Parking:             | Other:                 |                            |
| <b>Vegetation Management (Sq.Ft.):</b>  | N/A: <input checked="" type="checkbox"/> | Area Preserved:             | Required Coverage: 0.0      | Required Plantings: 0.0   |                      |                        |                            |
| <b>Project Cost Estimate:</b>           | <b>Building</b><br>\$6,500.00            | <b>Electrical</b><br>\$0.00 | <b>Mechanical</b><br>\$0.00 | <b>Plumbing</b><br>\$0.00 | <b>Gas</b><br>\$0.00 | <b>Other</b><br>\$0.00 | <b>Total</b><br>\$6,500.00 |

**Permit Conditions:**

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

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

Applicant Signature

Date S-22-1E



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

**Date Issued:**  
05/22/2018

**Permit #:**  
TR18-000149

## Mechanical Trade Permit

**Project Address:** 1466 DUCK RD

**PIN #:** 995006396946

**Property Owner:** HULETTE, LAYTON T

**Mailing Address:** 340 FARNHEM DR  
RICHMOND, VA 23236

### Permit Types:

Plumbing  Electrical  Mechanical  Gas

### Contractor:

**Company Name:** Delta T HVAC

**Phone:** (252) 261-0404

**NC State License #:**

**Contact Name:** Ross Craig

162 Yaupon Trail

**Address:**

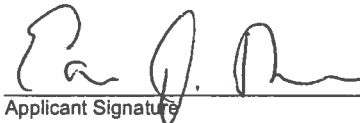
Southern Shores, NC 27949

**Description of Work:** Replace both heat pump systems on house with Rheem 14 Seer 2.5 ton and 2 ton systems. Upper and lower level.

**Project Cost Estimate:** 8,500.00

**Permit Amount:** 220.00

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

 5/22/18  
Applicant Signature Date



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

**Date Issued:**  
05/22/2018

**Permit #:**  
TR18-000150

## Mechanical Trade Permit

**Project Address:** 127 WAXWING LN  
**Property Owner:** NELSON, ROBERT J

**PIN #:** 995114336086  
**Mailing Address:** 1 GREENWAY LN  
RICHMOND, VA 23226

### Permit Types:

Plumbing  Electrical  Mechanical  Gas

### Contractor:

**Company Name:** Air Handlers OBX  
**Phone:** (252) 491-8637

**Contact Name:** Jesse Owens  
P.o. Box 309

**Address:**  
Harbinger, NC 27941

**NC State License #:**

**Description of Work:** Remove and replace three 2- Ton Trane 14 SEER heat pumps and air handlers and rewire

**Project Cost Estimate:** 16,316.00

**Permit Amount:** 280.00

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

  
Applicant Signature

5-24-18  
Date



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

**Date Issued:**  
05/22/2018

**Permit #:**  
TR18-000151

## Mechanical Trade Permit

**Project Address:** 103 AMY LN

**Property Owner:** GORDON, WILLIAM S JR

**PIN #:** 985920827086

**Mailing Address:** 9802 KOHOUTEK CT  
VIENNA, VA 22182

### Permit Types:

Plumbing  Electrical  Mechanical  Gas

### Contractor:

**Company Name:** Norris Mechanical

**Phone:** (252) 491-2673

**NC State License #:** 11100

**Contact Name:** Hersey Norris

P.O. Box 217

**Address:**

Harbinger, NC 27941

**Description of Work:** Change out 4 ton heat pump and install 9000 btu mini-split system

**Project Cost Estimate:** 0.00

**Permit Amount:** 190.00

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

 5-22-18  
Applicant Signature Date



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

**Date Issued:**  
05/22/2018

**Permit #:**  
TR18-000152

## Mechanical Trade Permit

**Project Address:** 112 POTESKEET DR  
**Property Owner:** GITLER, STEFANIE ILENE

**PIN #:** 985916849592

**Mailing Address:** 3136 17TH ST NW  
WASHINGTON, DC 20010

### Permit Types:

Plumbing  Electrical  Mechanical  Gas

### Contractor:

**Company Name:** Air-O-Smith  
**Phone:** (252) 261-5238

**Contact Name:** Steven Smith  
330 N. Dogwood Trail

**NC State License #:** 30070 H3

**Address:**  
Southern Shores, NC 27949

**Description of Work:** REPLACE 3.5-TON SPLIT HVAC SYSTEM. LINE AND LOW VOLTAGE WIRING.

**Project Cost Estimate:** 6,253.00

**Permit Amount:** 160.00

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

Applicant Signature \_\_\_\_\_

Date \_\_\_\_\_



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

**Date Issued:**  
05/23/2018

**Permit #:**  
TR18-000153

## Mechanical Trade Permit

**Project Address:** 117 A304 SEA COLONY DR

**PIN #:** 98590897572218

**Property Owner:** BECKMAN, ANGELA C

**Mailing Address:** PO Box 8197  
Duck, NC 27949

### Permit Types:

Plumbing  Electrical  Mechanical  Gas

### Contractor:

**Company Name:** All Seasons Heating & Cooling

**Contact Name:** Joe Simpson

**Phone:** (252) 491-9232

P.O. Box 244

**NC State License #:** H3Class1: 19091

**Address:**

Point Harbor, NC 27964

**Description of Work:** Replace existing system with a 2 ton split system heat pump and air handler

**Project Cost Estimate:** 5,900.00

**Permit Amount:** 160.00

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

Sydney Reek      5/23/18  
Applicant Signature      Date





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

**Date Issued:**  
05/23/2018

**Permit #:**  
TR18-000154

## Plumbing Trade Permit

**Project Address:** 1396 DUCK RD  
**Property Owner:** WRENN, KENIE

**PIN #:** 995010468206  
**Mailing Address:** 4722 BROOKHAVEN DRIVE  
RALEIGH, NC 27612

### Permit Types:

Plumbing  Electrical  Mechanical  Gas

### Contractor:

**Company Name:** Roy O. Davis  
**Phone:**

**Contact Name:** Roy O. Davis  
2914 S. Virginia Dare Trail  
**Address:**  
Nags Head, NC 27959

**NC State License #:** 30147

**Description of Work:** Plumbing work in downstairs bathroom remodel

**Project Cost Estimate:** 1,200.00

**Permit Amount:** 140.00

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

  
Applicant Signature

5-23-18  
Date



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

**Date Issued:**  
05/24/2018

**Permit #:**  
TR18-000155

## Electrical Trade Permit

**Project Address:** 1193 DUCK RD  
**Property Owner:** BIG MOMMA, LLC

**PIN #:** 985916845553  
**Mailing Address:** 239 HILLCREST DR  
KITTY HAWK, NC 27949

### Permit Types:

Plumbing  Electrical  Mechanical  Gas

### Contractor:

**Company Name:** Davco Electric Inc.  
**Phone:** (252) 441-4106

**Contact Name:** Grant Davenport  
406 W. Lake Drive

**NC State License #:** 4354-U

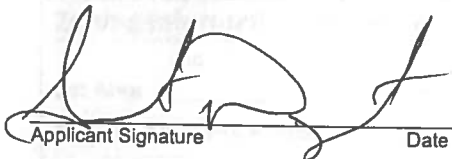
**Address:**  
Kill Devil Hills, NC 27948

**Description of Work:** Adding lights and four GFCI outlets on new front deck/ porch

**Project Cost Estimate:** 1,500.00

**Permit Amount:** 100.00

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

  
Applicant Signature

Date

5/24/18



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

**Date Issued:**  
05/24/2018

**Permit #:**  
TN18-000003

### Tent Permit

**Project Address:** 1240 DUCK RD  
**Property Owner:** ALLIS HOLDINGS LLC

**PIN #:** 985911761465

**Mailing Address:** P O BOX 1544  
VIRGINIA BEACH, VA 23451

### Applicant:

**Company Name:** Barr-ee Station  
**Phone:** 252-261-1650

**Address:** 1240 Duck Road  
Duck, NC 27949

### Contractor:

**Company Name:** Ocean Atlantic Rentals  
**Phone:** 252-261-4346

**Contact Name:** Ben Fulton  
1194 Duck Road

**Classification:**  
**NC State License #:** 1]

**Email:** benfulton@hotmail.com

**Address:**  
Duck, NC 27949

**Expiration Date:**

**Description of Work:** Temporary tent (05/24/2018 - 05/26/2018)

**Tent Size:** 800 (square feet)

**Tent Dates:** 05/24/2018 - 05/26/2018

**Estimated Project Cost:** 750

### Permit Conditions:

1. Temporary Tent only on dates defined above;
2. No smoking signs must be posted;
3. Two portable fire extinguishers required;
4. Tent may not be used for cooking;
5. All illumination and outside outlets must be GFI protected;
6. Exits must posted & emergency exit lights in place;
7. Qualified staff on duty.

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

Sue Vogel 5-24-18  
Applicant Signature Date



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

Date Issued:

MAY 24 2018

Permit #: B18-000129

**Building/Floodplain Development Permit**

Project Address: 178 OCEAN WAY CT  
 Property Owner: MATTHEWS, WILLIAM B

PIN #: 986913133719  
 Mailing Address: P O BOX 571  
 KITTY HAWK, NC 27949

Contractor:  
 Company Name:  
 Phone: 252-261-4982  
 Email:

Contact Name: MATTHEWS, WILLIAM B  
 Address: P O BOX 571  
 KITTY HAWK, NC 27949

Classification:  
 NC State License #:  
 Expiration Date:

Description of Work: 10 x 15 trellis system

Use:  
 Other

Structure/Work Type:  
 Primary Structure:  
 Pool/Hot Tub:  
 Deck:  
 Demo:

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

Permit Amount:  
 125.00

|                                  |  |           |                   |                     |          |        |
|----------------------------------|--|-----------|-------------------|---------------------|----------|--------|
| Proposed Area Schedule (Sq.Ft.): | Heated:                                  | Unheated: | Accessory Heated: | Accessory Unheated: |          |        |
| Proposed Finished Grade (ft.):   | N/A: <input checked="" type="checkbox"/> | House:    | Pool:             | Driveway:           | Parking: | Other: |

|                         |                   |                  |   |
|-------------------------|-------------------|------------------|---|
| Floodplain Development: | Flood Zone: VE-12 | Structure Value: | Storage Below BFE: <input type="checkbox"/> |
|-------------------------|-------------------|------------------|---|

|                                 |  |                        |                 |                         |
|---------------------------------|--|------------------------|-----------------|-------------------------|
| Vegetation Management (Sq.Ft.): | N/A: <input checked="" type="checkbox"/> | Required Coverage: 0.0 | Area Preserved: | Required Plantings: 0.0 |
|---------------------------------|--|------------------------|-----------------|-------------------------|

|                        |          |            |            |          |        |        |          |
|------------------------|----------|------------|------------|----------|--------|--------|----------|
| Project Cost Estimate: | Building | Electrical | Mechanical | Plumbing | Gas    | Other  | Total    |
|                        | \$600.00 | \$0.00     | \$0.00     | \$0.00   | \$0.00 | \$0.00 | \$600.00 |

- Permit Conditions:**
- Any change or changes in the plans for development, construction or land use activities will require a re-evaluation and modification of this permit.
  - The erection (including excavation), demolition, alteration or repair of any building in a residential or business district other than between the hours of 7 am and 6 pm, Monday through Saturday is prohibited.
  - All principal and accessory structures must meet MBL setbacks.
  - No change to coverage or footprint.
  - Provide Final As-Built Survey with Updated Coverage Breakdown.
  - Call for final inspection.

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

W B Matthews      May 24, 2018  
 Applicant Signature      Date



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

Date Issued:  
**MAY 25 2018**  
 Permit #:  
 B18-000150

**Building/Floodplain Development Permit**

Project Address: 106 STATION BAY DR  
 Property Owner: CONOLOGUE, MATTHEW J

PIN #: 995114249811  
 Mailing Address: 1217 STAFFORD AVE  
 FREDERICKSBURG, VA 22401

Contractor:  
 Company Name: **Contact Name: CONOLOGUE, MATTHEW J**  
 Phone: 252-619-1421 **Address: 1217 STAFFORD AVE**  
 Email: **FREDERICKSBURG, VA 22401** **Classification:**  
**NC State License #:**  
**Expiration Date:**

Description of Work: Raise existing dune deck (8' x 16'); modify existing west elevation stairs; build new east elevation stairs

Use: Beach Stair/Access **Structure/Work Type:**  
 Primary Structure:   
 Pool/Hot Tub:   
 Deck:   
 Demo:   
 Accessory Building:   
 Bukhead (L.F.):   
 Pier (L.F.):   
 House Moving:   
 Permit Amount: 100.00

Proposed Area Schedule (Sq.Ft.): Heated: Unheated: 128 Accessory Heated: Accessory Unheated:

Proposed Finished Grade (ft.): N/A:  House: Pool: Driveway: Parking: Other:

Floodplain Development: Flood Zone: VE-12 Structure Value: Storage Below BFE:

Vegetation Management (Sq.Ft.): N/A:  Required Coverage: 0.0 Area Preserved: Required Plantings: 0.0

| Project Cost Estimate: | Building   | Electrical | Mechanical | Plumbing | Gas    | Other  | Total      |
|------------------------|------------|------------|------------|----------|--------|--------|------------|
|                        | \$3,000.00 | \$0.00     | \$0.00     | \$0.00   | \$0.00 | \$0.00 | \$3,000.00 |

- Permit Conditions:**
- Any change or changes in the plans for development, construction or land use activities will require a re-evaluation and modification of this permit.
  - The erection (including excavation), demolition, alteration or repair of any building in a residential or business district other than between the hours of 7 am and 6 pm, Monday through Saturday is prohibited.
  - Dune walkover structures shall be constructed so that the staircase turns parallel to the dune if there is more than a 12-foot-vertical rise in the staircase required to provide access to the surface of the beach. The requirement to turn the stairs shall not apply in instances where it would preclude the placement of the stairs entirely within the subject property.
  - Stairs and/or walkway can be no wider than four feet measured at the widest outside dimension unless an engineered design is provided that meets the V-Zone provisions of the building code.
  - The underside of the dune walkover structure across the frontal or primary dune shall be a minimum of 18 inches and a maximum of 30 inches above grade.
  - Call for an on-site meeting prior to the start of construction and for a final inspection. TC initial
  - Dune walkover structures shall be located such that the first step down to the beach is placed no farther seaward than the beginning of the downward slope of the dune.
  - Call for final inspection.

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

[Signature] 5/25/18  
 Applicant Signature Date



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

**Date Issued:**  
 05/25/2018

**Permit #:**  
 LD18-000012

**Land Disturbance Permit**

**Project Address:** 177 TERESA CT  
**Property Owner:** FIELD QUARTER, LLC

**PIN #:** 986913035994  
**Mailing Address:** 19 RIDING PATH  
 HAMPTON, VA 23669

**Contractor:**

**Company Name:** Silver Seas, LLC  
**Phone:** (252) 489-9313  
**Email:** jonyounts@gmail.com

**Contact Name:** Jon Younts  
**Address:** 5150 The Woods Road  
 Kitty Hawk, NC 27949

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

**Description of Work:** Replace septic system to increase occupancy to 5 sleeping 10

**Permit Amount:** 200.00

**Land Disturbing Activity:**

- Parking
- Driveway
- New Septic
- Stormwater Conveyance
- Grading/Filling
- Landscaping/Minor Grading
- Irrigation
- Septic Repair
- Stormwater Retention
- Vegetation Removal

**Proposed Finished Grade (ft.):**

N/A:  Driveway: Parking: Other:

**Vegetation Management (Sq.Ft.):**

N/A:  Required Coverage: n/a Area Preserved: unknown Required Plantings: stabilization required

**Estimated Project Cost:** \$5,000.00

**Permit Conditions:**

- All parking outside of 20 feet wide drive aisle to be gravel or semi-permeable material shall be bordered in a manner which retains the stone in the driveway area.
- Driveways and associated parking areas shall be located no closer than 5 feet to a side or rear lot line.
- As-Built Survey required detailing required parking and coverage breakdown.
- Work completed without a permit subject to double permit fees.

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

Kathy Younts                      May 29, 2018  
 Applicant Signature                      Date



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

**Date Issued:**  
05/29/2018

**Permit #:**  
TR18-000156

## Mechanical Trade Permit

**Project Address:** 1171 DUCK RD

**Property Owner:** SCARBOROUGH LANE SHOPPES LLC

**PIN #:** 985916835584

**Mailing Address:** 6477 COLLEGE PARK SQ  
VIRGINIA BEACH, VA 23464

### Permit Types:

Plumbing  Electrical  Mechanical  Gas

### Contractor:

**Company Name:** Atlantic Heating & Cooling, LTD

**Phone:** (252) 441-7642

**NC State License #:** 9665, H2, H3, Class 1

**Contact Name:** Henry Liverman

P.O. Box 132

**Address:**

Kill Devil Hills, NC 27948

**Description of Work:** Christmas Mouse store in Scarborough Lane Shoppes:  
Remove & replace the indoor & outdoor sections of the C1 HVAC system using a 3.5 ton 14 SEER R410A Goodman heat pump & a matching Goodman air handler.

**Project Cost Estimate:** 6,890.00

**Permit Amount:** 160.00

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

  
Applicant Signature \_\_\_\_\_ Date \_\_\_\_\_



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

**Date Issued:**  
05/29/2018

**Permit #:**  
TR18-000157

## Mechanical Trade Permit

**Project Address:** 154 CHEROKEE CT  
**Property Owner:** KEPERLING, WILMER E

**PIN #:** 986913046743

**Mailing Address:** 703 BUCKWOOD LN  
LITITZ, PA 17543

### Permit Types:

Plumbing  Electrical  Mechanical  Gas

### Contractor:

**Company Name:** North Beach Services Heating and Cooling  
**Phone:** (252) 491-2878

**Contact Name:** Gabby Willis

PO Box 181

**Address:**

Kitty Hawk , NC 27949

**NC State License #:**

**Description of Work:** Replacement of HVAC system with Trane 15 Seer 2 ton heat pump and matching air handler

**Project Cost Estimate:** 5,670.00

**Permit Amount:** 160.00

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

  
Applicant Signature      Date 5-30-18





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

**Date Issued:**  
05/29/2018

**Permit #:**  
TR18-000158

## Mechanical Trade Permit

**Project Address:** 138 SHIPS WATCH DR  
**Property Owner:** SHIPS WATCH ASSOCIATION

**PIN #:** 985908980764  
**Mailing Address:** 1251 DUCK RD  
KITTY HAWK, NC 27949

### Permit Types:

Plumbing  Electrical  Mechanical  Gas

### Contractor:

**Company Name:** North Beach Services Heating and Cooling  
**Phone:** (252) 491-2878

**Contact Name:** Gabby Willis  
PO Box 181

**NC State License #:**

**Address:**  
Kitty Hawk , NC 27949

**Description of Work:** Replacement of lower HVAC system with Trane 14 Seer 2.5 ton heat pump and matching air handler

**Project Cost Estimate:** 5,360.00

**Permit Amount:** 160.00

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

 5-30-18  
Applicant Signature Date



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

**Date Issued:**  
 05/29/2018

**Permit #:**  
 TR18-000159

**Mechanical Trade Permit**

**Project Address:** 1280 DUCK RD  
**Property Owner:** SHIPS WATCH ASSOCIATION

**PIN #:** 985907782870  
**Mailing Address:** 1251 DUCK RD  
 KITTY HAWK, NC 27949

**Permit Types:**

Plumbing  Electrical  Mechanical  Gas

**Contractor:**

**Company Name:** North Beach Services Heating and Cooling  
**Phone:** (252) 491-2878

**Contact Name:** Gabby Willis  
 PO Box 181  
**Address:**  
 Kitty Hawk , NC 27949

**NC State License #:**

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

**Project Cost Estimate:** 8,917.00

**Permit Amount:** 160.00

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

  
 Applicant Signature Date



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

**Date Issued:**  
05/29/2018

**Permit #:**  
TR18-000160

## Mechanical Trade Permit

**Project Address:** 191 OCEAN FRONT DR  
**Property Owner:** UGLY ORANGE CAT, LLC

**PIN #:** 986913047032

**Mailing Address:** 6025 MARTIN'S POINT RD  
KITTY HAWK, NC 27949

### Permit Types:

Plumbing  Electrical  Mechanical  Gas

### Contractor:

**Company Name:** North Beach Services Heating and Cooling  
**Phone:** (252) 491-2878

**Contact Name:** Gabby Willis  
PO Box 181

**NC State License #:**

**Address:**  
Kitty Hawk, NC 27949

**Description of Work:** Replacement of lower level HVAC system with Trane 14 seer 2 ton heat pump and matching air handler

**Project Cost Estimate:** 5,490.00

**Permit Amount:** 160.00

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

  
Applicant Signature 5-30-18  
Date



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

**Date Issued:**  
05/29/2018

**Permit #:**  
TR18-000161

## Mechanical Trade Permit

**Project Address:** 108 OLDE DUCK RD

**Property Owner:** SPIEGEL, DENNIS

**PIN #:** 985908776946

**Mailing Address:** 9600 CROSSPOINTE DR  
FAIRFAX STATION, VA 22039

### Permit Types:

Plumbing  Electrical  Mechanical  Gas

### Contractor:

**Company Name:** Air-O-Smith

**Phone:** (252) 261-5238

**NC State License #:** 30070 H3

**Contact Name:** Steven Smith

330 N. Dogwood Trail

**Address:**

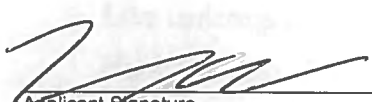
Southern Shores, NC 27949

**Description of Work:** REPLACE UPPER LEVEL 16 SEER HVAC SYSTEM. LINE AND LOW VOLTAGE WIRING.

**Project Cost Estimate:** 7,100.00

**Permit Amount:** 160.00

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

  
Applicant Signature

Date

5/31/18



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

Date Issued:  
**MAY 30 2018**  
 Permit #:  
 B18-000149

**Building Permit**

**Project Address:** 123 SCHOONER RIDGE DR  
**Property Owner:** BERTOLET, GEORGE R

**PIN #:** 985912953134  
**Mailing Address:** 101 DEEP RUN RD  
 DUBLIN, PA 18917

**Contractor/Company Name:** Ken Green & Associates  
**Phone:** (252) 491-8127  
**Email:** kgreen@kg-a.com

**Contact Name:** Ken Green  
**Address:** P.O. Box 372  
 Harbinger, NC 27941

**Classification:** General Contract  
**NC State License #:** 68343  
**Expiration Date:**

**Description of Work:** Building an 8 x 24 deck and installing a cargo lift with roof over it

|                                   |  |  |
|-----------------------------------|--|--|
| <b>Use:</b><br>Single Family      | <b>Structure/Work Type:</b><br>Primary Structure:<br>Pool/Hot Tub:<br>Deck: <b>Addition</b><br>Demo: | <b>Accessory Building:</b><br>Bukhead (L.F.):<br>Pier (L.F.):<br>House Moving: |
| <b>Permit Amount:</b><br>\$185.00 |  |  |

|   |         |               |                   |                     |
|---|---------|---------------|-------------------|---------------------|
| <b>Proposed Area Schedule (Sq.Ft.):</b> | Heated: | Unheated: 192 | Accessory Heated: | Accessory Unheated: |
|---|---------|---------------|-------------------|---------------------|

|                                       |  |        |       |           |          |        |
|---------------------------------------|--|--------|-------|-----------|----------|--------|
| <b>Proposed Finished Grade (ft.):</b> | N/A: <input checked="" type="checkbox"/> | House: | Pool: | Driveway: | Parking: | Other: |
|---------------------------------------|--|--------|-------|-----------|----------|--------|

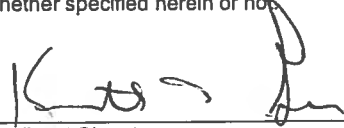
|  |  |                 |                        |                         |
|--|--|-----------------|------------------------|-------------------------|
| <b>Vegetation Management (Sq.Ft.):</b> | N/A: <input checked="" type="checkbox"/> | Area Preserved: | Required Coverage: 0.0 | Required Plantings: 0.0 |
|--|--|-----------------|------------------------|-------------------------|

|                               |                                |                                 |                             |                           |                      |                        |                        |
|-------------------------------|--------------------------------|---------------------------------|-----------------------------|---------------------------|----------------------|------------------------|------------------------|
| <b>Project Cost Estimate:</b> | <b>Building</b><br>\$34,650.00 | <b>Electrical</b><br>\$1,000.00 | <b>Mechanical</b><br>\$0.00 | <b>Plumbing</b><br>\$0.00 | <b>Gas</b><br>\$0.00 | <b>Other</b><br>\$0.00 | <b>Tot</b><br>\$35,650 |
|-------------------------------|--------------------------------|---------------------------------|-----------------------------|---------------------------|----------------------|------------------------|------------------------|

**Permit Conditions:**

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

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

 5-31-18  
 Applicant Signature Date



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

Date Issued:

**MAY 31 2018**  
 Permit #:  
 B18-000147

**Building/Floodplain Development Permit**

Project Address: 161 MANTOAC CT  
 Property Owner: WINDUNE LLC

PIN #: 986913140562  
 Mailing Address: 105 BERRY MOUNTAIN RD  
 CRAMERTON, NC 28032

**Contractor:**

Company Name: Precision Pools  
 Phone: (252) 423-0616  
 Email: creations@obxprecision.com

Contact Name: Brian Dietz  
 Address: 116-K Ballast Road Road  
 Powell's Point, NC 27966

Classification: Pool Contractors  
 NC State License #:  
 Expiration Date:

Description of Work: Addendum to add hot tub to new pool deck

Use:  
 Other

**Structure/Work Type:**

Primary Structure:  
 Pool/Hot Tub: Hot Tub - Portable  
 Deck:  
 Demo:

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

Permit Amount:  
 150.00

Proposed Area Schedule (Sq.Ft.): Heated: Unheated: Accessory Heated: Accessory Unheated:

Proposed Finished Grade (ft.): N/A:  House: Pool: Driveway: Parking: Other:

Floodplain Development: Flood Zone: VE-14 Structure Value: Storage Below BFE:

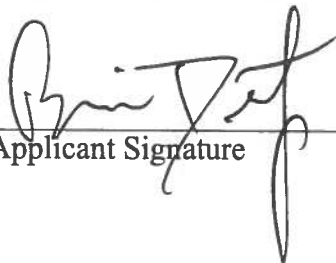
Vegetation Management (Sq.Ft.): N/A:  Required Coverage: 0.0 Area Preserved: Required Plantings: 0.0

| Project Cost Estimate: | Building   | Electrical | Mechanical | Plumbing | Gas    | Other  | Total      |
|------------------------|------------|------------|------------|----------|--------|--------|------------|
|                        | \$6,000.00 | \$0.00     | \$0.00     | \$0.00   | \$0.00 | \$0.00 | \$6,000.00 |

**Permit Conditions:**

- Any change or changes in the plans for development, construction or land use activities will require a re-evaluation and modification of this permit.
- The erection (including excavation), demolition, alteration or repair of any building in a residential or business district other than between the hours of 7 am and 6 pm, Monday through Saturday is prohibited.
- Addendum to Permit #B18-0099.
- Call for final inspection.

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

  
 Applicant Signature

5-31-18  
 Date



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

**Date Issued:**  
05/31/2018

**Permit #:**  
TR18-000162

## Mechanical Trade Permit

**Project Address:** 120 SEA TERN DR  
**Property Owner:** KENTON, STEVEN J

**PIN #:** 995007578539

**Mailing Address:** 836 NETHERCLIFFE HALL RD  
GREAT FALLS, VA 22066

### Permit Types:

Plumbing  Electrical  Mechanical  Gas

### Contractor:

**Company Name:** Outer Banks Heating & Cooling  
**Phone:** (252) 441-1740

**Contact Name:** Brian McDonald  
P.O. Box 1415

**NC State License #:** 12643

**Address:**  
Nags Head, NC 27959

**Description of Work:** Replace Hvac with 14 seer 3 ton Carrier air handler and heat pump

**Project Cost Estimate:** 7,278.79

**Permit Amount:** 160.00

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

 5/31-18

Applicant Signature

Date



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

**Date Issued:**  
05/31/2018

**Permit #:**  
TR18-000163

## Mechanical Trade Permit

**Project Address:** 1245 DUCK RD  
**Property Owner:** BARRIER ISLAND STATION

**PIN #:** 985908880490

**Mailing Address:** ONE CYPRESS KNEE TRAIL  
Kitty Hawk, NC 27949

### Permit Types:

Plumbing  Electrical  Mechanical  Gas

### Contractor:

**Company Name:** Outer Banks Heating & Cooling  
**Phone:** (252) 441-1740

**Contact Name:** Brian McDonald  
P.O. Box 1415

**NC State License #:** 12643


**Address:**  
Nags Head, NC 27959

**Description of Work:** Replace Heat pump[outdoor only] with 14 seer 5 ton Daikin for the Indoor pool building

**Project Cost Estimate:** 4,926.66

**Permit Amount:** 130.00

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

  
Applicant Signature

5-31-18  
Date





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

**Date Issued:**  
05/31/2018  
**Permit #:**  
TR18-000164

## Mechanical Trade Permit

**Project Address:** 1245 DUCK RD  
**Property Owner:** BARRIER ISLAND STATION INC

**PIN #:** 985908982236

**Mailing Address:** 1 CYPRESS KNEE TRL  
KITTY HAWK, NC 27949

### Permit Types:

Plumbing  Electrical  Mechanical  Gas

### Contractor:

**Company Name:** Outer Banks Heating & Cooling  
**Phone:** (252) 441-1740

**Contact Name:** Brian McDonald  
P.O. Box 1415

**NC State License #:** 12643

**Address:**  
Nags Head, NC 27959

**Description of Work:** Replac Hvac with 14 seer 3 ton Daikin air handler and heat pump for 809A

**Project Cost Estimate:** 7,250.90

**Permit Amount:** 160.00

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

*T. H. M.* 5-31-18  
Applicant Signature Date



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

**Date Issued:**  
05/31/2018

**Permit #:**  
TR18-000165

## Mechanical Trade Permit

**Project Address:** 1245 DUCK RD  
**Property Owner:** BARRIER ISLAND STATION INC

**PIN #:** 985908889405

**Mailing Address:** 1 CYPRESS KNEE TRL  
KITTY HAWK, NC 27949

### Permit Types:

Plumbing  Electrical  Mechanical  Gas

### Contractor:

**Company Name:** Outer Banks Heating & Cooling  
**Phone:** (252) 441-1740

**Contact Name:** Brian McDonald  
P.O. Box 1415

**NC State License #:** 12643

**Address:**  
Nags Head, NC 27959

**Description of Work:** Replace heat pump [outdoor only] with 14 seer 3 ton Carrier

#712A

**Project Cost Estimate:** 4,145.27

**Permit Amount:** 130.00

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

*John A. Mc...*

Applicant Signature

5-31-18

Date



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

**Date Issued:**  
05/31/2018

**Permit #:**  
TR18-000166

## Mechanical Trade Permit

**Project Address:** 1245 DUCK RD

**PIN #:** 98590898039400

**Property Owner:** BARRIER ISLAND STATION PROPERTY OWNERS

**Mailing Address:** 1245 DUCK RD  
KITTY HAWK, NC 27949

### Permit Types:

Plumbing  Electrical  Mechanical  Gas

### Contractor:

**Company Name:** Outer Banks Heating & Cooling  
**Phone:** (252) 441-1740

**Contact Name:** Brian McDonald  
P.O. Box 1415

**NC State License #:** 12643

**Address:**  
Nags Head, NC 27959

**Description of Work:** Replace Hvac with 14 seer 3 ton Carrier air handler and heat pump

#415

**Project Cost Estimate:** 7,896.05

**Permit Amount:** 160.00

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

  
Applicant Signature

5-31-18  
Date



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

**Date Issued:**  
05/31/2018

**Permit #:**  
TR18-000167

## Mechanical Trade Permit

**Project Address:** 1245 DUCK RD

**PIN #:** 98590898039400

**Property Owner:** BARRIER ISLAND STATION PROPERTY OWNERS

**Mailing Address:** 1245 DUCK RD  
KITTY HAWK, NC 27949

### Permit Types:

Plumbing  Electrical  Mechanical  Gas

### Contractor:

**Company Name:** Outer Banks Heating & Cooling

**Contact Name:** Brian McDonald

**Phone:** (252) 441-1740

P.O. Box 1415

**Address:**

**NC State License #:** 12643

Nags Head, NC 27959

**Description of Work:** Replace heat pump [outdoor only] with 14 seer 3 ton Daikin

#414

**Project Cost Estimate:** 4,768.50

**Permit Amount:** 130.00

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

*John Green* 5-31-18

Applicant Signature

Date



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

**Date Issued:**  
05/31/2018  
**Permit #:**  
TR18-000168

## Mechanical Trade Permit

**Project Address:** 115 DUNE RD  
**Property Owner:** HUEHNERGARTH, NILS

**PIN #:** 985912870024  
**Mailing Address:** 5 WEIDEL DR  
PENNINGTON, NJ 08534

### Permit Types:

Plumbing  Electrical  Mechanical  Gas

### Contractor:

**Company Name:** Outer Banks Heating & Cooling  
**Phone:** (252) 441-1740

**Contact Name:** Brian McDonald  
P.O. Box 1415

**NC State License #:** 12643

**Address:**  
Nags Head, NC 27959

**Description of Work:** Replace 2 Hvac units with 14 seer 3 and 3.5 ton Daikin air handlers and heat pumps

**Project Cost Estimate:** 15,778.88

**Permit Amount:** 220.00

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

  
Applicant Signature

5-31-18  
Date



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

**PERMIT**

Permit NO. **17735**  
 Permit Type: Residential  
 Work Classification: [Permit Type]  
 Permit Status: Pending

Issue Date: 5/3/2018

Expires: 10/30/2018

Main Permit: Main Permit

**Project Address**

5208 Lunar Drive

**Lot**

28

**Flood Zone**

X

**Owner Information**

Clarence J & Maureen Howard

**Applicant Information**

Finch & Company, Inc.

**Zoning**

BR-1

**Block**

**Constuction Type**

New Single-Family Home

**Address**

1601 Big Tree Road, Unit 1001  
 Daytona Beach FL 32119

**Address**

116 Sandy Ridge Road  
 Duck, NC 27949

**Subdivision**

SEA SCAPE SEC 1

**PIN**

987605094552

**Building Code**

BLDG2012

**Phone**

**Phone**

252-202-9879

| <u>Contractor(s)</u>  | <u>Phone</u>  | <u>Contractor Type</u> | <u>License Number</u> | <u>Construction Cost:</u> | <u>207953.00</u> |
|-----------------------|---------------|------------------------|-----------------------|---------------------------|------------------|
| Finch & Company, Inc. | (252)261-8710 | General                | 52567                 | <u>Unheated Sq. Feet</u>  | <u>511.00</u>    |
| TBD                   | 000-000-0000  | Mechanical             | 00000                 | <u>Total Sq. Feet:</u>    | <u>1202.00</u>   |
| TBD                   | 000-000-0000  | Plumbing               | 00000                 |                           |                  |
| TBD                   | 000-000-0000  | Electrical             | 00000                 |                           |                  |

**Description of Work: New SFR 3 bedrooms 2 baths 1202 heated sq. ft.; 333 sq.ft. attached garage; 82 sq. ft. of porch and 96 sq. ft. of deck**

**Building Comments:**

Permit Cost - \$1680.00 The following documentation is needed: Duct Test due prior to Rough-In Inspection; Termite Affidavit due prior to Rough-In Inspection; Energy Certification due prior to Pre-Final Inspection; Address posted with minimum 4" letter prior to Pre-Final Inspection;

**Planning Conditions:**

Flood Zone-Shaded X; Map#-3720987600J; Effective-09/20/2006; Height Certification due prior to Rough-In Inspection; As-Built Survey due prior to Final Inspection; Finished Elevation Certificate due prior to Final Inspection; See Zoning Permit for additional requirements.

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

\_\_\_\_\_  
**Owner / Applicant / Contractor / Agent**

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

\_\_\_\_\_  
**Building Official**

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



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

**PERMIT**

Permit NO. **17736**  
 Permit Type: Residential  
 Work Classification: [Permit Type]  
 Permit Status: Pending

Issue Date: 5/3/2018

Expires: 10/30/2018

Main Permit: Main Permit

**Project Address**

3403 Briggs Street

**Lot**

8

**Flood Zone**

AE

**Owner Information**

Mark A & Cheryl Fulghum

**Applicant Information**

Christopher Carroll

**Zoning**

BR-1

**Block**

**Constuction Type**

Repair/Replace

**Address**

12510 Walton Lake Drive  
 Midlothian VA 23114

**Address**

P O Box 1905  
 Kitty Hawk, NC 27949

**Subdivision**

B M HEDRICK

**PIN**

987512958245

**Building Code**

BLDG2012

**Phone**

**Phone**

252-489-0090

|                           |         |
|---------------------------|---------|
| <b>Construction Cost:</b> | 3500.00 |
| <b>Unheated Sq. Feet</b>  | 0.00    |
| <b>Total Sq. Feet:</b>    | 0.00    |

| <b>Contractor(s)</b> | <b>Phone</b> | <b>Contractor Type</b> | <b>License Number</b> |
|----------------------|--------------|------------------------|-----------------------|
| Christopher Carroll  |              | Other                  | 00000                 |

**Description of Work: Replace deck boards and railings on upper deck**

**Building Comments:**

Permit Cost - \$100.00

**Planning Conditions:**

Flood Zone-AE; Elevation-9'+1'=10'; Map#-3720987500J; Effective-09/20/2006

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

\_\_\_\_\_  
**Owner / Applicant / Contractor / Agent** **Date**

\_\_\_\_\_  
**Building Official** **Date**



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

**PERMIT**

Permit NO. **17737**  
 Permit Type: Residential  
 Work Classification: [Permit Type]  
 Permit Status: Pending

Issue Date: 5/3/2018

Expires: 10/30/2018

Main Permit: Main Permit

**Project Address**  
 4108 Lindbergh Avenue

**Lot**  
 2

**Flood Zone**  
 AE

**Owner Information**  
 Brenda W Pope

**Applicant Information**  
 William Pope

**Zoning**  
 BR-1  
**Block**

**Constuction Type**  
 Repair/Replace

**Address**  
 4108 Lindbergh Avenue  
 Kitty Hawk NC 27949

**Address**  
 4108 Lindberg Avenue  
 Kitty Hawk, NC 27949

**Subdivision**  
 REMELE SUBDIVISION

**PIN**  
 98761961216

**Building Code**  
 BLDG2012

**Phone**

**Phone**  
 252-255-0834

|                           |         |
|---------------------------|---------|
| <b>Construction Cost:</b> | 9300.00 |
| <b>Unheated Sq. Feet</b>  | 0.00    |
| <b>Total Sq. Feet:</b>    | 0.00    |

| <b>Contractor(s)</b> | <b>Phone</b> | <b>Contractor Type</b> | <b>License Number</b> |
|----------------------|--------------|------------------------|-----------------------|
| Owner                | 000-000-0000 | General                | 00000                 |

**Description of Work: Replace deck boards, railings and steps**

**Building Comments:**

Permit Cost - \$130.00

**Planning Conditions:**

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

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

\_\_\_\_\_  
**Owner / Applicant / Contractor / Agent** **Date**

\_\_\_\_\_  
**Building Official** **Date**





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

**PERMIT**

Permit NO. **17738**  
 Permit Type: Residential  
 Work Classification: [Permit Type]  
 Permit Status: Pending

Issue Date: 5/3/2018

Expires: 10/30/2018  
 Main Permit: Main Permit

**Project Address**  
 4504 N Virginia Dare Trail  
**Lot**

**Zoning**  
 BR-1  
**Block**

**Subdivision**  
 KITTY HAWK BEACH REV SEC A  
**PIN**

**Flood Zone**  
 VE

**Constuction Type**  
 Repair/Replace

987610454478

**Building Code**  
 MECH2012

**Owner Information**  
 PETE HETH

**Address**  
 4338 FAIRVIEW RD  
 COLUMBIA PA 17512

**Phone**

**Applicant Information**  
 Roberson Heating & Air, Inc.

**Address**  
 14698 US Highway 65  
 Williamston, NC 27892

**Phone**  
 252-792-3006

| Contractor(s) | Phone | Contractor Type | License Number | Construction Cost: | 4078.00 |
|---------------|-------|-----------------|----------------|--------------------|---------|
|               |       |                 |                | Unheated Sq. Feet  | 0.00    |
|               |       |                 |                | Total Sq. Feet:    | 0.00    |

**Building Comments:**

**Description of Work: HVAC  
 change out of 2 ton system for  
 upper level**

Permit Cost \$50.00

**Planning Conditions:**

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

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

\_\_\_\_\_  
**Owner / Applicant / Contractor / Agent** **Date**

\_\_\_\_\_  
**Building Official** **Date**



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

**PERMIT**

Permit NO. 17727  
 Permit Type: Residential  
 Work Classification: [Permit Type]  
 Permit Status: Pending

Issue Date: 5/1/2018

Expires: 10/28/2018  
 Main Permit: Main Permit

**Project Address**

3706 N Virginia Dare Trail

**Lot**

**Zoning**

BR-1

**Block**

**Subdivision**

HURDLE, PERRY, JOHNSON & WHITE

**PIN**

987508879641

**Flood Zone**

VE

**Constuction Type**

Beach Dune Walk Way

**Building Code**

BLDG2012

**Owner Information**

Ju Yang

**Address**

16336 Fox Creek Dr.  
 Moseley, VA 23126

**Phone**

**Applicant Information**

Matt Conway

**Address**

208 Shiloh Street  
 Kill Devil Hills, NC 27948

**Phone**

252-207-5322

| Contractor(s)  | Phone         | Contractor Type | License Number | Construction Cost: | 3900.00 |
|--|---------------|-----------------|----------------|--------------------|---------|
| Conway Construction<br>And Design t/a St.<br>Michaels Construction,<br>LLC | (252)207-5322 | General         | 57219          | Unheated Sq. Feet  | 0.00    |
|  |               |                 |                | Total Sq. Feet:    | 0.00    |

**Building Comments:**

Permit Cost \$110.00

**Description of Work: Build beach access walk way**

**Planning Conditions:**

Flood Zone-VE; Elevation-12'+1'=13'; Map#-3720987500J; Effective-09/20/2006; NO SOLID RISERS ON STEPS; No alteration of sand dunes and no fill used for structural support; As-Built Survey prior to final inspection; Engineer's Certification that requirements of the Flood Damage Prevention Ordinance have been met due prior to pre-final inspection. See Zoning Permit for additional requirements;

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

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

Owner / Applicant / Contractor / Agent \_\_\_\_\_ Date \_\_\_\_\_

Building Official \_\_\_\_\_ Date \_\_\_\_\_



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

**PERMIT**

Permit NO. **17749**  
 Permit Type: Residential  
 Work Classification: [Permit Type]  
 Permit Status: Pending

Issue Date: 5/10/2018

Expires: 11/6/2018

Main Permit: Main Permit

**Project Address**

105 Edgerton Court

**Lot**

2

**Flood Zone**

AE

**Owner Information**

Justin D Kole & Kaitlin D Gibson

**Applicant Information**

Justin Kole

**Zoning**

VC-1

**Block**

**Constuction Type**

Accessory Structure

**Address**

105 Edgerton Court  
 Kitty Hawk NC 27949

**Address**

105 Edgerton Court  
 Kitty Hawk, NC 27949

**Subdivision**

PAWPAW RIDGE

**PIN**

987506380766

**Building Code**

BLDG2012

**Phone**

**Phone**

252-489-1656

|                           |         |
|---------------------------|---------|
| <b>Construction Cost:</b> | 1000.00 |
| <b>Unheated Sq. Feet</b>  | 160.00  |
| <b>Total Sq. Feet:</b>    | 0.00    |

| <b>Contractor(s)</b> | <b>Phone</b> | <b>Contractor Type</b> | <b>License Number</b> |
|----------------------|--------------|------------------------|-----------------------|
| Owner                | 000-000-0000 | General                | 00000                 |

**Building Comments:**

Permit Cost \$135.00

**Planning Conditions:**

Flood Zone-AE; Elevation-8.3'+1'=9.3'; Map#-3720987500J; Effective-09/20/2006; An As-Built Survey required prior to final inspection; Elevation Certificate required prior to Final Inspection; See Zoning Permit for additional requirements included flood vents

**Description of Work: Add a 10 x 16 storage building**

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

\_\_\_\_\_  
**Owner / Applicant / Contractor / Agent** **Date**

\_\_\_\_\_  
**Building Official** **Date**



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

**PERMIT**

Permit NO. **17750**  
 Permit Type: Commercial  
 Work Classification: [Permit Type]  
 Permit Status: Pending

Issue Date: 5/10/2018

Expires: 11/6/2018

Main Permit: Main Permit

**Project Address**

3928 N Croatan Highway

**Lot**

2

**Flood Zone**

X

**Owner Information**

Itchka, LLC/Att: Le Anna Lupean

**Applicant Information**

Howard Hanna Real Estate Services

**Zoning**

BC-1

**Block**

**Constuction Type**

Remodeling

**Address**

3928 N Croatan Highway  
 Kitty Hawk NC 27949

**Address**

800 Newtown Road  
 Virginia Beach, VA 23462

**Subdivision**

SUBDIVISION - NONE

**PIN**

9875007695724

**Building Code**

BLDG2012

**Phone**

**Phone**

757-289-8032

**Construction Cost:** 23000.00

**Unheated Sq. Feet** 0.00

**Total Sq. Feet:** 0.00

| Contractor(s)                   | Phone         | Contractor Type | License Number |
|---------------------------------|---------------|-----------------|----------------|
| Owner                           | 000-000-0000  | General         | 00000          |
| Angel Advanced Technologies LLC | (252)207-7519 | Electrical      | 30701-L        |

**Description of Work: Office build out for new Real Estate Office**

**Building Comments:**

Permit Cost \$450.00

**Planning Conditions:**

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

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

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

\_\_\_\_\_  
**Owner / Applicant / Contractor / Agent** **Date**

\_\_\_\_\_  
**Building Official** **Date**



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

**PERMIT**

Permit NO. **17753**  
 Permit Type: Residential  
 Work Classification: [Permit Type]  
 Permit Status: Pending

Issue Date: 5/11/2018

Expires: 11/7/2018

Main Permit: Main Permit

**Project Address**

5107 N Virginia Dare Trail  
 Lot

**Zoning**

BR-1

**Block**

**Subdivision**

KITTY HAWK BEACH REV SEC A  
 PIN

987717202271

**Building Code**

BLDG2012

**Phone**

757-404-0418

**Flood Zone**

VE

**Constuction Type**

Repair/Replace

**Address**

3210 Lilac Dr  
 Portsmouth VA 23703

**Address**

P O Box 448  
 Nags Head, NC 27959

**Phone**

252-261-2212

**Owner Information**

Rita Roquena-Jones

**Applicant Information**

Emanuelson & Dad, Inc.

|                           |         |
|---------------------------|---------|
| <b>Construction Cost:</b> | 2940.00 |
| <b>Unheated Sq. Feet</b>  | 0.00    |
| <b>Total Sq. Feet:</b>    | 0.00    |

| <u>Contractor(s)</u>  | <u>Phone</u>  | <u>Contractor Type</u> | <u>License Number</u> |
|-----------------------|---------------|------------------------|-----------------------|
| Emanuelson & Dad Inc. | (252)261-2212 | Other                  | 00000                 |

**Building Comments:**

Permit Cost - \$130.00

**Planning Conditions:**

Flood Zone-VE; Elevation-12'+1'=13'; Map#-3720987700J; Effective-09/20/2006; No change in footprint proposed; There shall be no alteration of sand dunes and there shall be no fill used for structural support

**Description of Work: Replace 2 pilings**

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

\_\_\_\_\_  
**Owner / Applicant / Contractor / Agent** **Date**

\_\_\_\_\_  
**Building Official** **Date**



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

**PERMIT**

Permit NO. **17756**  
 Permit Type: Residential  
 Work Classification: [Permit Type]  
 Permit Status: Pending

Issue Date: 5/14/2018

Expires: 11/10/2018

Main Permit: Main Permit

**Project Address**

4205 Worthington Lane

**Lot**

6

**Flood Zone**

X

**Owner Information**

John Berry & Ann Drew Harvey

**Applicant Information**

Caribbean Pools

**Zoning**

BR-1

**Block**

**Constuction Type**

Pool

**Address**

4205 Worthington Lane

Kitty Hawk NC 27949

**Address**

P O Box 65

Kitty Hawk, NC 27949

**Subdivision**

SEA SCAPE FAIRWAY

**PIN**

987618426228

**Building Code**

BLDG2012

**Phone**

757-620-3097

**Phone**

252-207-1773

**Construction Cost:** 41099.00

**Unheated Sq. Feet** 0.00

**Total Sq. Feet:** 0.00

| <b>Contractor(s)</b>                          | <b>Phone</b>  | <b>Contractor Type</b> | <b>License Number</b> |
|---|---------------|------------------------|-----------------------|
| Caribbean Pool & Spa of the Outer Banks, Inc. | (252)480-2900 | General                | 73571                 |
| TBD   | 000-000-0000  | Electrical             | 00000                 |

**Description of Work: Install 12 x 25 in-ground pool and relocate septic system**

**Building Comments:**

Permit Cost - \$340.00

**Planning Conditions:**

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

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

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

**Owner / Applicant / Contractor / Agent** \_\_\_\_\_ **Date** \_\_\_\_\_

**Building Official** \_\_\_\_\_ **Date** \_\_\_\_\_



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

**PERMIT**

Permit NO. 17759  
 Permit Type: Residential  
 Work Classification: [Permit Type]  
 Permit Status: Pending

Issue Date: 5/15/2018

Expires: 11/11/2018  
 Main Permit: Main Permit

**Project Address**  
 5206 Lindbergh Avenue  
**Lot**  
 11 N Pt 12  
**Flood Zone**  
 AE  
**Owner Information**  
 Clyde W Hargrave, Jr.

**Zoning**  
 BH-1  
**Block**  
 9  
**Constuction Type**  
 Repair/Replace  
**Address**  
 P O Box 266  
 Kitty Hawk NC 27949  
**Address**  
 P O Box 266  
 Kitty Hawk, NC 27949

**Subdivision**  
 KITT HAWK BEACH REV SEC A  
**PIN**  
 987717102695  
**Building Code**  
 BLDG2012  
**Phone**  
  
**Phone**  
 252-532-0715

**Applicant Information**  
 Clyde Hargrave, Jr.

| Contractor(s) | Phone        | Contractor Type | License Number | Construction Cost: | 600.00 |
|---------------|--------------|-----------------|----------------|--------------------|--------|
| Owner         | 000-000-0000 | General         | 00000          | Unheated Sq. Feet  | 0.00   |
|               |              |                 |                | Total Sq. Feet:    | 0.00   |

**Description of Work: Replace decking boards, pickets, railings and seating on existing deck**

**Building Comments:**

Permit Cost \$100.00

**Planning Conditions:**

Flood Zone-AE; Elevation-9'+1'=10'; Map#-3720987700J; Effective-09/20/2006

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

\_\_\_\_\_  
**Owner / Applicant / Contractor / Agent** **Date**

\_\_\_\_\_  
**Building Official** **Date**



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

**PERMIT**

Permit NO. **17761**  
 Permit Type: Residential  
 Work Classification: [Permit Type]  
 Permit Status: Open

Issue Date: 5/16/2018

Expires: 11/12/2018

Main Permit: Main Permit

**Project Address**  
 4238 Ride Lane  
**Lot**

**Zoning**  
 BR-1  
**Block**

**Subdivision**  
 KITTY HAWK BEACH REV SEC A  
**PIN**

**Flood Zone**  
 X

**Constuction Type**  
 Accessory Structure

987615530254  
**Building Code**  
 BLDG2012

**Owner Information**  
 KENNETH G APP

**Address**  
 100 SLEEPY RIDGE CT  
 SUFFOLK VA 23435

**Phone**

**Applicant Information**  
 All Level Lifts

**Address**  
 124 N Harbinger Ridge Road  
 Harbinger, NC 27941

**Phone**  
 252-706-0509

**Construction Cost:** 10000.00  
**Unheated Sq. Feet** 0.00  
**Total Sq. Feet:** 0.00

| <b>Contractor(s)</b>            | <b>Phone</b>  | <b>Contractor Type</b> | <b>License Number</b> |
|---------------------------------|---------------|------------------------|-----------------------|
| All Level Lifts, Inc.           | 252-491-2606  | General                | 00000                 |
| Angel Advanced Technologies LLC | (252)207-7519 | Electrical             | 30701-L               |

**Building Comments:**

**Description of Work: Install cargo lift on NW corner of existing house**

Permit Cost - \$195.00

**Planning Conditions:**

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

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

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

**Owner / Applicant / Contractor / Agent** \_\_\_\_\_ **Date** \_\_\_\_\_

**Building Official** \_\_\_\_\_ **Date** \_\_\_\_\_





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

**PERMIT**

Permit NO. **17764**  
 Permit Type: Residential  
 Work Classification: [Permit Type]  
 Permit Status: Pending

Issue Date: 5/17/2018

Expires: 11/13/2018

Main Permit: Main Permit

**Project Address**

209 E Balchen Street

**Lot**

2A

**Flood Zone**

AE

**Owner Information**

Boyce E Spicer

**Applicant Information**

Joey Owens

**Zoning**

BR-1

**Block**

30

**Constuction Type**

Repair/Replace

**Address**

136 Beachwood Road  
 Ahoskie NC 27910

**Address**

110 Pine Street  
 Jarvisburg, NC 27939

**Subdivision**

KITTY HAWK BEACH REV SEC A

**PIN**

987615533732

**Building Code**

BLDG2012

**Phone**

**Phone**

252-599-6929

| Contractor(s) | Phone        | Contractor Type | License Number | Construction Cost: | Unheated Sq. Feet | Total Sq. Feet: |
|---------------|--------------|-----------------|----------------|--------------------|-------------------|-----------------|
| Joey Owens    | 252-599-6929 | General         | 00000          | 4500.00            | 0.00              | 0.00            |

**Building Comments:**

Permit Cost - \$115.00

**Planning Conditions:**

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

**Description of Work: Replace existing deck - no change in footprint**

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

\_\_\_\_\_  
**Owner / Applicant / Contractor / Agent** **Date**

\_\_\_\_\_  
**Building Official** **Date**



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

**PERMIT**

Permit NO. **17765**  
 Permit Type: Residential  
 Work Classification: [Permit Type]  
 Permit Status: Pending

Issue Date: 5/16/2018

Expires: 11/12/2018

Main Permit: Main Permit

**Project Address**

200 E Sibbern Drive, Lo 90

**Lot**

14 & 15 17-19

**Flood Zone**

AE

**Owner Information**

DECHARMARNEL INC

**Applicant Information**

Keith Gibson

**Zoning**

BH-1

**Block**

**Constuction Type**

Repair/Replace

**Address**

108 E SIBBERN DR  
 KITTY HAWK NC 27949

**Address**

122 Meadow Lane  
 Jarvisburg, NC 27947

**Subdivision**

W J TATE - DB 78 PG 0394

**PIN**

0

**Building Code**

BLDG2012

**Phone**

**Phone**

252-207-2700

| <u>Contractor(s)</u> | <u>Phone</u> | <u>Contractor Type</u> | <u>License Number</u> | <u>Construction Cost:</u> | <u>4750.00</u> |
|----------------------|--------------|------------------------|-----------------------|---------------------------|----------------|
| William K Gibson     | 252-207-2700 | Other                  | 0000                  | <u>Unheated Sq. Feet</u>  | <u>380.00</u>  |
|                      |              |                        |                       | <u>Total Sq. Feet:</u>    | <u>0.00</u>    |

**Building Comments:**

Permit Cost \$115.00

**Planning Conditions:**

Flood Zone-AE; Elevation-9'+1'=10'; Map#-3720987500J; Effective-09/20/2006

**Description of Work: Replace 2  
 10 x 12 deck and a 10 x 14  
 awning top**

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

\_\_\_\_\_  
**Owner / Applicant / Contractor / Agent** **Date**

\_\_\_\_\_  
**Building Official** **Date**



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

**PERMIT**

Permit NO. **17767**  
 Permit Type: Residential  
 Work Classification: [Permit Type]  
 Permit Status: Pending

Issue Date: 5/17/2018

Expires: 11/13/2018  
 Main Permit: Main Permit

**Project Address**  
 4803 N Virginia Dare Trail  
**Lot**

**Zoning**  
 BR-1  
**Block**

**Subdivision**  
 KITTY HAWK BEACH REV SEC A  
**PIN**  
 987606375823

**Flood Zone**  
 VE

**Constuction Type**  
 Repair/Replace

**Building Code**

**Owner Information**  
 GLADYS T DANIELS

**Address**  
 1618 ROCHELLE DR  
 ELIZABETH CITY NC 27909

**Phone**

**Applicant Information**  
 Roy Daniels

**Address**  
 1618 Rochelle Drive  
 Elizabeth City, NC 27909

**Phone**  
 252-330-4575

| Contractor(s) | Phone        | Contractor Type | License Number | Construction Cost: | 10000.00 |
|---------------|--------------|-----------------|----------------|--------------------|----------|
| Owner         | 000-000-0000 | General         | 00000          | Unheated Sq. Feet  | 0.00     |
|               |              |                 |                | Total Sq. Feet:    | 0.00     |

**Building Comments:**

**Description of Work: Replace  
 682 sq ft of decking and railings;  
 Replace front set of steps (63 sq  
 ft)**

Permit Cost - \$130.00

**Planning Conditions:**

Flood Zone-VE; Elevation-12'+1'=13'; Map#-3720987600J; Effective-09/20/2006; No solid risers; No alteration of sand dunes and no fill for structural support; See Zoning Permit for additional requirements; Value of house-\$94,000; 50% cost of house-\$47,000; Cost of work proposed-\$10,000; Value of work left in 12 months-\$37,000;

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

\_\_\_\_\_  
**Owner / Applicant / Contractor / Agent** **Date**

\_\_\_\_\_  
**Building Official** **Date**



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

**PERMIT**

Permit NO. **17771**  
 Permit Type: Residential  
 Work Classification: [Permit Type]  
 Permit Status: Open

Issue Date: 5/21/2018

Expires: 11/17/2018

Main Permit: Main Permit

**Project Address**

207 Eagle Landing

**Lot**

77

**Flood Zone**

X

**Owner Information**

Gerald W Writtenberry & Linda S Writtenberry

**Applicant Information**

Forrest Seal

**Zoning**

BR-1

**Block**

2

**Constuction Type**

New Single-Family Home

**Address**

812 General Pickett Drive  
 Suffolk VA 23434

**Address**

P O Box 2333  
 Kitty Hawk, NC 27949

**Subdivision**

FIRST FLIGHT RIDGE

**PIN**

987512776142

**Building Code**

BLDG2012

**Phone**

**Phone**

252-599-2521

| <b>Contractor(s)</b> | <b>Phone</b>  | <b>Contractor Type</b> | <b>License Number</b> | <b>Construction Cost:</b> | <b>685000.00</b> |
|----------------------|---------------|------------------------|-----------------------|---------------------------|------------------|
| Forrest Seal, LLC    | (252)599-2521 | General                | 57289                 | <b>Unheated Sq. Feet</b>  | <b>2415.00</b>   |
| TBD                  | 000-000-0000  | Mechanical             | 00000                 | <b>Total Sq. Feet:</b>    | <b>3202.00</b>   |
| TBD                  | 000-000-0000  | Plumbing               | 00000                 |                           |                  |
| TBD                  | 000-000-0000  | Fuel Piping            | 00000                 |                           |                  |
| TBD                  | 000-000-0000  | Electrical             | 00000                 |                           |                  |

**Description of Work: New 3 story SFR 4 bedrooms 5 full baths and 2 half baths - 3202 sq. ft. heated space; 701 sq. ft. attached garage; 328 sq. ft. of patio; 397 sq. ft. of covered porch and 989 sq. ft. of decks; In-ground Pool; Add Retaining Wall;**

**Building Comments:**

Permit Cost \$4640.00 The following items are needed: Duct Test required prior to Rough-In Inspection; Termite Affidavit required prior to Rough-In Inspection; Energy Certification required prior to Pre-Final Inspection; Address posted (minimum 4" numbers) required prior to Pre-Final; Completed Septic Permit required prior to Final Inspection;

**Planning Conditions:**

Flood Zone-Shaded X; Map#-3720987500; Effective-09/20/2006; Height Certificate due prior to Rough-In Inspection; Elevation Certificate due prior to Pre-Final Inspection; As-Built Survey due prior to Final Inspection. See Zoning Permit for any additional requirements.

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



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

**PERMIT**

Permit NO. **17769**  
 Permit Type: Commercial  
 Work Classification: [Permit Type]  
 Permit Status: Pending

Issue Date: 5/23/2018

Expires: 11/19/2018

Main Permit: Main Permit

**Project Address**  
 6146 N Croatan Highway

**Lot**  
 12-16

**Flood Zone**  
 AE

**Owner Information**  
 Banks Land Company LLC

**Applicant Information**  
 Alex LeFevre

**Zoning**  
 BC-2

**Block**  
 64

**Constuction Type**  
 Remodeling

**Address**  
 P O Box 432  
 Kitty Hawk NC 27949

**Address**  
 P O Box 432  
 Kitty Hawk, NC 27949

**Subdivision**  
 KITTY HAWK BEACH

**PIN**  
 986606398081

**Building Code**  
 BLDG2012

**Phone**  
 252-202-1482

**Phone**  
 252-202-1452

**Construction Cost:** 10000.00  
**Unheated Sq. Feet** 0.00  
**Total Sq. Feet:** 400.00

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

**Description of Work: Renovate 400 sq ft with new windows, doors, emergency exit lights**

**Building Comments:**

Permit Cost - \$160.00

**Planning Conditions:**

Flood Zone-AE; Elevation-8.3'+1'=9.3; Map#-3720986600J; Effective-9/20/2006; Windborne Debris Regulations, DP Ratings for windows and doors apply; An updated Flood Proofing Plan is required prior to final inspection; An updated Flood Certificate is required prior to final inspection

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

\_\_\_\_\_  
**Owner / Applicant / Contractor / Agent** **Date**

\_\_\_\_\_  
**Building Official** **Date**



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

**PERMIT**

Permit NO. **17775**  
 Permit Type: Residential  
 Work Classification: [Permit Type]  
 Permit Status: Pending

Issue Date: 5/22/2018

Expires: 11/18/2018

Main Permit: Main Permit

**Project Address**

899 Emeline Lane

**Lot**

2

**Flood Zone**

AE

**Owner Information**

Christopher R & Lisa V Difilippo

**Applicant Information**

Morris Construction Company, LLC

**Zoning**

VR-1

**Block**

**Constuction Type**

New Single-Family Home

**Address**

P O Box 305  
 Kill Devil Hills NC 27948

**Address**

P O Box 1189  
 Kitty Hawk, NC 27949

**Subdivision**

SUBDIVISION - NONE

**PIN**

987505183321

**Building Code**

BLDG2012

**Phone**

**Phone**

252-715-1194

**Construction Cost:** 136050.00

**Unheated Sq. Feet** 216.00

**Total Sq. Feet:** 1000.00

| <b>Contractor(s)</b>             | <b>Phone</b> | <b>Contractor Type</b> | <b>License Number</b> |
|----------------------------------|--------------|------------------------|-----------------------|
| Morris Construction Company, LLC | 252-715-1194 | General                | 77581                 |
| TBD                              | 000-000-0000 | Electrical             | 00000                 |
| TBD                              | 000-000-0000 | Mechanical             | 00000                 |
| TBD                              | 000-000-0000 | Plumbing               | 00000                 |

**Description of Work: New SFR 3 bedrooms 2 baths; 1000 sq ft heated space and 216 sq ft of decks**

**Building Comments:**

Permit Cost - \$1305.00 The following items are needed: Duct Test due prior to Rough-In Inspection; Termite Affidavit due prior to Rough-In Inspection; Energy Certification due prior to Pre-Final Inspection; Address (minimum 4" numbers) posted prior to Pre-Final Inspection; Completed Septic Permit prior to Final Inspection;

**Planning Conditions:**

Flood Zone-AE; Elevation-8.3'+1'=9.3'; Map#-3720987500J; Effective-09/20/2006; An Under Construction Elevation Certificate due prior to Rough-In Inspection; Height Certificate due prior to Rough-In Inspection; A Finished Elevation Certificate due prior to Pre-Final Inspection; An As-Built Survey due prior to Final Inspection;

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

**Owner / Applicant / Contractor / Agent** \_\_\_\_\_ **Date** \_\_\_\_\_

**Building Official** \_\_\_\_\_ **Date** \_\_\_\_\_



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

**PERMIT**

Permit NO. 17779  
 Permit Type: Residential  
 Work Classification: [Permit Type]  
 Permit Status: Pending

Issue Date: 5/24/2018

Expires: 11/20/2018

Main Permit: Main Permit

**Project Address**

200 Fonck Street

**Lot**

30 W PT 31

**Flood Zone**

AE

**Owner Information**

Melvin R & Christy L Cole

**Applicant Information**

To The T Construction

**Zoning**

BC-1

**Block**

21

**Constuction Type**

Repair/Replace

**Address**

203 Pine Bluff Road  
 Portsmouth VA 23701

**Address**

100 Ivy Drive  
 Manteo, NC 27954

**Subdivision**

KITTY HAWK BEACH REV SEC A

**PIN**

987605198889

**Building Code**

BLDG2012

**Phone**

757-488-9580

**Phone**

252-216-8991

**Construction Cost:** 27000.00

**Unheated Sq. Feet** 0.00

**Total Sq. Feet:** 0.00

| Contractor(s)         | Phone         | Contractor Type | License Number |
|-----------------------|---------------|-----------------|----------------|
| To The T Construction | (252)216-8991 | General         | 63750          |

**Description of Work: Replace siding and windows, reface decks and rebuild stairs and handrails**

**Building Comments:**

Permit Cost - \$395.00

**Planning Conditions:**

Flood Zone-AE; Elevation-9'+1'=10'; Map#-3720987600J; Effective-09/20/2006;

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

\_\_\_\_\_  
**Owner / Applicant / Contractor / Agent** **Date**

\_\_\_\_\_  
**Building Official** **Date**



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

**PERMIT**

Permit NO. **17786**  
 Permit Type: Residential  
 Work Classification: [Permit Type]  
 Permit Status: Pending

Issue Date: 5/25/2018

Expires: 11/21/2018

Main Permit: Main Permit

**Project Address**

105 First Flight Run

**Lot**

82

**Flood Zone**

X

**Owner Information**

Margaret J Quinn & Ann M Wellham

**Applicant Information**

Ann Wellham

**Zoning**

BR-1

**Block**

1

**Constuction Type**

Accessory Structure

**Address**

P O Box 3091  
 Swanton MD 21561

**Address**

P O Box 1001  
 Kitty Hawk, NC 27949

**Subdivision**

FIRST FLIGHT RIDGE

**PIN**

987512776458

**Building Code**

BLDG2012

**Phone**

**Phone**

301-501-0110

| <b>Contractor(s)</b> | <b>Phone</b> | <b>Contractor Type</b> | <b>License Number</b> | <b>Construction Cost:</b> | <b>3775.00</b> |
|----------------------|--------------|------------------------|-----------------------|---------------------------|----------------|
| HR Building          | 252-489-1338 | General                | 00000                 | <b>Unheated Sq. Feet</b>  | <b>95.00</b>   |
|                      |              |                        |                       | <b>Total Sq. Feet:</b>    | <b>0.00</b>    |

**Building Comments:**

Permit Cost \$100.00

**Planning Conditions:**

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

**Description of Work: Add storage under existing house**

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

\_\_\_\_\_  
**Owner / Applicant / Contractor / Agent** **Date**

\_\_\_\_\_  
**Building Official** **Date**





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

**PERMIT**

Permit NO. **17782**  
 Permit Type: Residential  
 Work Classification: [Permit Type]  
 Permit Status: Pending

Issue Date: 5/24/2018

Expires: 11/20/2018

Main Permit: Main Permit

**Project Address**

4271 Worthington Lane

**Lot**

**Flood Zone**

X

**Owner Information**

PAUL FALACCO

**Applicant Information**

Sea Level Siding

**Zoning**

BR-1

**Block**

**Constuction Type**

Repair/Replace

**Address**

4271 WORTHINGTON LN  
 KITTY HAWK NC 27949

**Address**

101 Azalea Court  
 Kitty Hawk, NC 27949

**Subdivision**

KITTY HAWK WOODS-LINKSIDE  
 WDS

**PIN**

987618326452

**Building Code**

BLDG2012

**Phone**

**Phone**

252-207-2075

| <u>Contractor(s)</u> | <u>Phone</u>  | <u>Contractor Type</u> | <u>License Number</u> | <u>Construction Cost:</u> | <u>3400.00</u> |
|----------------------|---------------|------------------------|-----------------------|---------------------------|----------------|
| Sea Level Siding     | (252)255-4646 | Other                  | 00000                 | <u>Unheated Sq. Feet</u>  | <u>0.00</u>    |
|                      |               |                        |                       | <u>Total Sq. Feet:</u>    | <u>0.00</u>    |

**Description of Work: Replace 3rd floor door, railings and deck boards. Frame new roof and replace siding and porch ceiling**

**Building Comments:**

Permit Cost - \$110.00

**Planning Conditions:**

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

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

\_\_\_\_\_  
**Owner / Applicant / Contractor / Agent** **Date**

\_\_\_\_\_  
**Building Official** **Date**



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

**PERMIT**

Permit NO. **17783**  
 Permit Type: Residential  
 Work Classification: [Permit Type]  
 Permit Status: Open

Issue Date: 5/24/2018

Expires: 11/20/2018

Main Permit: Main Permit

**Project Address**

1066 W Kitty Hawk Road

**Lot**

1

**Flood Zone**

AE

**Owner Information**

Joseph Levi & Bobbi Jo Burge

**Applicant Information**

Compass Edge Construction

**Zoning**

VR-1

**Block**

**Constuction Type**

New Single-Family Home

**Address**

1311 W Kitty Hawk Road  
 Kitty Hawk NC 27949

**Address**

103 High Dune Loop  
 Southern Shores, NC 27949

**Subdivision**

DIVISION OF LAND OF WM T  
 PERRY

**PIN**

986620802806

**Building Code**

BLDG2012

**Phone**

**Phone**

252-202-4217

**Construction Cost:** 156000.00

**Unheated Sq. Feet** 176.00

**Total Sq. Feet:** 1920.00

| <b>Contractor(s)</b>            | <b>Phone</b>  | <b>Contractor Type</b> | <b>License Number</b> |
|---------------------------------|---------------|------------------------|-----------------------|
| Compass Edge Construction, Inc. | (252)255-5093 | General                | 56041                 |
| TBD                             | 000-000-0000  | Mechanical             | 00000                 |
| TBD                             | 000-000-0000  | Plumbing               | 00000                 |
| TBD                             | 000-000-0000  | Fuel Piping            | 00000                 |
| TBD                             | 000-000-0000  | Electrical             | 00000                 |

**Description of Work: New SFR 3 bedrooms 2.5 baths - 1920 heated sq ft and 176 sq ft of decks**

**Building Comments:**

Permit Cost - \$1465.00 The following items are needed: Duct Test prior to Rough-In Inspection; Termite Affidavit prior to Rough-In Inspection; Energy Certification prior to Pre-Final Inspection; Address (minimum 4" numbers) posted on house prior to Pre-Final Inspection; Completed Septic Permit prior to Final Inspection;

**Planning Conditions:**

Flood Zone-AE; Elevation-8.3'+1'=9.3'; Map#-3720986600J; Effective-09/20/2006; Height Certificate due prior to Rough-In Inspection; Under Construction Elevation Certificate due prior to Rough-In Inspection; Finished Elevation Certificate due prior to Pre-Final Inspection; As-Built Survey due prior to Final Inspection; See Zoning Permit for additional requirements

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

**Owner / Applicant / Contractor / Agent**

**Date**



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

**PERMIT**

Permit NO. **17792**  
 Permit Type: Residential  
 Work Classification: [Permit Type]  
 Permit Status: Pending

Issue Date: 5/30/2018

Expires: 11/26/2018

Main Permit: Main Permit

**Project Address**  
 4723 N Virginia Dare Trail  
**Lot**

**Zoning**  
 BR-1  
**Block**

**Subdivision**  
 KITTY HAWK BEACH REV SEC A  
**PIN**

**Flood Zone**  
 VE

**Constuction Type**  
 Accessory Structure

987606376592

**Building Code**  
 BLDG2012

**Owner Information**  
 RYAN J NELMS

**Address**  
 PO BOX 5064  
 SUFFOLK VA 23435

**Phone**

**Applicant Information**  
 Richard Scott Noble

**Address**  
 3121 Maryhill Court  
 Kill Devil Hills, NC 27948

**Phone**  
 252-202-2453

|                           |          |
|---------------------------|----------|
| <b>Construction Cost:</b> | 11300.00 |
| <b>Unheated Sq. Feet</b>  | 198.00   |
| <b>Total Sq. Feet:</b>    | 0.00     |

| <b>Contractor(s)</b> | <b>Phone</b> | <b>Contractor Type</b> | <b>License Number</b> |
|----------------------|--------------|------------------------|-----------------------|
| Richard Scott Noble  | 252-202-2453 | General                | 52132                 |

**Building Comments:**

**Description of Work: Add an 18 x 11 roof over existing deck**

Permit Cost - \$115.00

**Planning Conditions:**

Flood Zone-VE; Elevation-12'+1'=13'; Map#-3720987600J; Effective-09/20/2006; "Not Substantial Improvement"

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

\_\_\_\_\_  
**Owner / Applicant / Contractor / Agent** **Date**

\_\_\_\_\_  
**Building Official** **Date**



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

**PERMIT**

Permit NO. 17777  
 Permit Type: Residential  
 Work Classification: [Permit Type]  
 Permit Status: Open

Issue Date: 5/22/2018

Expires: 11/18/2018

Main Permit: Main Permit

**Project Address**  
 610 W Kitty Hawk Road  
**Lot**

**Zoning**  
 VR-1  
**Block**

**Subdivision**  
 SUBDIVISION - NONE  
**PIN**

**Flood Zone**  
 AE

**Constuction Type**  
 Temp Pole

987506487415  
**Building Code**  
 ELEC2014

**Owner Information**  
 Thomas Heffner & Lynn McLean

**Address**  
 610 W Kitty Hawk Road  
 Kitty Hawk NC 27949

**Phone**

**Applicant Information**  
 Davco Electric

**Address**  
 406 W Lake Drive  
 Kill Devil Hills, NC 27948

**Phone**  
 252-441-4106

| <u>Contractor(s)</u> | <u>Phone</u> | <u>Contractor Type</u> | <u>License Number</u> | <u>Construction Cost:</u> | <u>500.00</u> |
|----------------------|--------------|------------------------|-----------------------|---------------------------|---------------|
|                      |              |                        |                       | <u>Unheated Sq. Feet</u>  | <u>0.00</u>   |
|                      |              |                        |                       | <u>Total Sq. Feet:</u>    | <u>0.00</u>   |

**Building Comments:**

Permit Cost - \$40.00

**Planning Conditions:**

**Description of Work: Install temp pole**

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

\_\_\_\_\_  
**Owner / Applicant / Contractor / Agent** **Date**

\_\_\_\_\_  
**Building Official** **Date**



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

**PERMIT**

Permit NO. 17778  
 Permit Type: Residential  
 Work Classification: [Permit Type]  
 Permit Status: Pending

Issue Date: 5/23/2018

Expires: 11/19/2018

Main Permit: Main Permit

**Project Address**  
 4500 Johnston Lane

**Lot**  
 319

**Flood Zone**  
 X

**Owner Information**  
 G Michael Flagg

**Applicant Information**  
 Power Home Solar

**Zoning**  
 BR-1  
**Block**

**Constuction Type**  
 Electrical

**Address**  
 P O Box 2975  
 Kitty Hawk NC 27949

**Address**  
 919 N Main Street  
 Mooresville, NC 28115

**Subdivision**  
 KITTY HAWK BEACH SEC C  
**PIN**

987614347968

**Building Code**  
 ELEC2014

**Phone**

**Phone**  
 704-209-9893

|                           |          |
|---------------------------|----------|
| <b>Construction Cost:</b> | 35586.00 |
| <b>Unheated Sq. Feet</b>  | 0.00     |
| <b>Total Sq. Feet:</b>    | 0.00     |

| Contractor(s)                            | Phone        | Contractor Type | License Number |
|--|--------------|-----------------|----------------|
| Power Home Solar/ResComm Development LLC | 704-209-9893 | General         | 60946          |
| TBD                                      | 000-000-0000 | Electrical      | 00000          |

**Description of Work: Add 27 roof mounted modules, grid tied 7,97 KW solar installation on existing residence**

**Building Comments:**

Permit Cost - \$292.00

**Planning Conditions:**

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

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

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

\_\_\_\_\_  
**Owner / Applicant / Contractor / Agent** **Date**

\_\_\_\_\_  
**Building Official** **Date**



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

**PERMIT**

Permit NO. **17751**  
 Permit Type: Residential  
 Work Classification: [Permit Type]  
 Permit Status: Pending

Issue Date: 5/10/2018

Expires: 11/6/2018

Main Permit: Main Permit

**Project Address**

215 Heritage Lane

**Lot**

477-478

**Flood Zone**

X

**Owner Information**

Stephen Jon & Leslie Ann Goyette

**Applicant Information**

Angel Advanced Technologies

**Zoning**

BR-1

**Block**

**Constuction Type**

Electrical

**Address**

108 Jester Court  
 Elizabeth City NC 27909

**Address**

125 S Albetuck Road  
 Point Harbor, NC 27964

**Subdivision**

SEA SCAPE SEC 1

**PIN**

987614340205

**Building Code**

ELEC2014

**Phone**

757-201-8774

**Phone**

252-207-7519

|                           |        |
|---------------------------|--------|
| <b>Construction Cost:</b> | 975.00 |
| <b>Unheated Sq. Feet</b>  | 0.00   |
| <b>Total Sq. Feet:</b>    | 0.00   |

| <b>Contractor(s)</b>            | <b>Phone</b>  | <b>Contractor Type</b> | <b>License Number</b> |
|---------------------------------|---------------|------------------------|-----------------------|
| Angel Advanced Technologies LLC | (252)207-7519 | Electrical             | 30701-L               |

**Building Comments:**

Permit Cost - \$165.00

**Planning Conditions:**

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

**Description of Work: Add an electrical circuit for hottub**

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

\_\_\_\_\_  
**Owner / Applicant / Contractor / Agent** **Date**

\_\_\_\_\_  
**Building Official** **Date**



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

**PERMIT**

Permit NO. **17752**  
 Permit Type: Residential  
 Work Classification: [Permit Type]  
 Permit Status: Pending

Issue Date: 5/10/2018

Expires: 11/6/2018

Main Permit: Main Permit

**Project Address**

301 W Kitty Hawk Road  
 Lot

**Zoning**

BR-1

**Block**

**Subdivision**

SUBDIVISION - NONE

**PIN**

987507589714

**Flood Zone**

X

**Constuction Type**

Electrical

**Building Code**

ELEC2014

**Owner Information**

Roman Catholic Diocese C/O Luis Rafael  
 Zarama Bishop

**Address**

715 Nazareth Street

**Phone**

252-261-4700

Raleigh NC 27606

**Applicant Information**

Angel Advance Technologies

**Address**

125 S Albetuck Road

**Phone**

252-207-7519

Point Harbor, NC 27964

| <u>Contractor(s)</u>            | <u>Phone</u>  | <u>Contractor Type</u> | <u>License Number</u> | <u>Construction Cost:</u> | <u>3350.00</u> |
|---------------------------------|---------------|------------------------|-----------------------|---------------------------|----------------|
| Angel Advanced Technologies LLC | (252)207-7519 | Electrical             | 30701-L               | <u>Unheated Sq. Feet</u>  | <u>0.00</u>    |
|                                 |               |                        |                       | <u>Total Sq. Feet:</u>    | <u>0.00</u>    |

**Building Comments:**

Permit Cost \$65.00

**Description of Work: Add 3 120V duplex receptacles**

**Planning Conditions:**

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

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

\_\_\_\_\_  
**Owner / Applicant / Contractor / Agent** **Date**

\_\_\_\_\_  
**Building Official** **Date**



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

**PERMIT**

Permit NO. **17744**  
 Permit Type: Residential  
 Work Classification: [Permit Type]  
 Permit Status: Pending

Issue Date: 5/9/2018

Expires: 11/5/2018

Main Permit: Main Permit

**Project Address**  
 4509 Seascape Drive  
**Lot**

**Zoning**  
 BR-1  
**Block**

**Subdivision**  
 SEA SCAPE SEC 1  
**PIN**

**Flood Zone**  
 X

**Constuction Type**  
 Repair/Replace

**Building Code**  
 ELEC2014

**Owner Information**  
 ANDREW COUEY

**Address**  
 4509 SEASCAPE DR  
 KITTY HAWK NC 27949

**Phone**

**Applicant Information**  
 Cabe & Son Electric

**Address**  
 2907 S Lost Colony Drive  
 Nags Head, NC 27959

**Phone**  
 252-996-0338

| <u>Contractor(s)</u> | <u>Phone</u> | <u>Contractor Type</u> | <u>License Number</u> | <b>Construction Cost:</b> | 800.00 |
|----------------------|--------------|------------------------|-----------------------|---------------------------|--------|
|                      |              |                        |                       | <b>Unheated Sq. Feet</b>  | 0.00   |
|                      |              |                        |                       | <b>Total Sq. Feet:</b>    | 0.00   |

**Building Comments:**

Permit Cost - \$115.00

**Planning Conditions:**

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

**Description of Work: Replace panel; replace meter base**

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

\_\_\_\_\_  
**Owner / Applicant / Contractor / Agent** **Date**

\_\_\_\_\_  
**Building Official** **Date**





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

**PERMIT**

Permit NO. **17733**  
 Permit Type: Commercial  
 Work Classification: [Permit Type]  
 Permit Status: Pending

Issue Date: 5/1/2018

Expires: 10/28/2018

Main Permit: Main Permit

**Project Address**

4112 N Croatan Highway

**Lot**

7

**Flood Zone**

X

**Owner Information**

Robert E & Dewey W Wells

**Applicant Information**

Delta T HVAC

**Zoning**

BC-1

**Block**

**Constuction Type**

Repair/Replace

**Address**

P O Box 1486  
 Kitty Hawk NC 27949

**Address**

162 Yaupon Trail  
 Southern Shores, NC 27949

**Subdivision**

SANDERLIN SHORES ADD TO  
 SEC 1

**PIN**

987619516327

**Building Code**

MECH2012

**Phone**

**Phone**

252-256-2436

|                           |         |
|---------------------------|---------|
| <b>Construction Cost:</b> | 3200.00 |
| <b>Unheated Sq. Feet</b>  | 0.00    |
| <b>Total Sq. Feet:</b>    | 0.00    |

| <b>Contractor(s)</b>                     | <b>Phone</b> | <b>Contractor Type</b> | <b>License Number</b> |
|--|--------------|------------------------|-----------------------|
| Delta T Heating & Air Conditioning, Inc. | 252-256-2436 | Mechanical             | 23299                 |
| TBD                                      | 000-000-0000 | Electrical             | 00000                 |

**Building Comments:**

**Description of Work: HVAC change out of a 3.5 ton system for the lobby**

Permit Cost - \$50.00

**Planning Conditions:**

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

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

\_\_\_\_\_  
**Owner / Applicant / Contractor / Agent** **Date**

\_\_\_\_\_  
**Building Official** **Date**



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

**PERMIT**

Permit NO. **17734**  
 Permit Type: Residential  
 Work Classification: [Permit Type]  
 Permit Status: Pending

Issue Date: 5/2/2018

Expires: 10/29/2018

Main Permit: Main Permit

**Project Address**

207 Harbour Bay Drive

**Lot**

21

**Flood Zone**

X

**Owner Information**

Alan W & Carol A Giese, Sr.

**Applicant Information**

All-in-One Mechanical, LLC

**Zoning**

BR-1

**Block**

**Constuction Type**

Repair/Replace

**Address**

P O Box 271208  
 Louisville CO 80027

**Address**

114-A Ballast Road  
 Powells Point, NC 27966

**Subdivision**

HARBOUR BAY

**PIN**

987511658652

**Building Code**

MECH2012

**Phone**

**Phone**

252-202-5350

|                           |         |
|---------------------------|---------|
| <b>Construction Cost:</b> | 5200.00 |
| <b>Unheated Sq. Feet</b>  | 0.00    |
| <b>Total Sq. Feet:</b>    | 0.00    |

| <b>Contractor(s)</b>          | <b>Phone</b>  | <b>Contractor Type</b> | <b>License Number</b> |
|-------------------------------|---------------|------------------------|-----------------------|
| All-In-One Mechanical, L.L.C. | (252)491-5334 | Mechanical             | 27675                 |
| Herbert Wallace Francis Jr.   | (252)202-5350 | Electrical             | 07784-L               |

**Description of Work: HVAC change out of 2.5 ton system**

**Building Comments:**

Permit Cost \$50.00

**Planning Conditions:**

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

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

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

**Owner / Applicant / Contractor / Agent** \_\_\_\_\_ **Date** \_\_\_\_\_

**Building Official** \_\_\_\_\_ **Date** \_\_\_\_\_



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

**PERMIT**

Permit NO. **17739**  
 Permit Type: Residential  
 Work Classification: [Permit Type]  
 Permit Status: Pending

Issue Date: 5/4/2018

Expires: 10/31/2018  
 Main Permit: Main Permit

**Project Address**  
 4817 Ride Lane  
 Lot

**Zoning**  
 BR-1  
**Block**

**Subdivision**  
 KITTY HAWK BEACH REV SEC A  
**PIN**

**Flood Zone**  
 X

**Constuction Type**  
 Repair/Replace

987606276850

**Building Code**  
 MECH2012

**Owner Information**  
 KENNETH E GOLDSBY

**Address**  
 25260 LAKE SHR  
 CHANTILLY VA 20152

**Phone**

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

**Address**  
 3908 N Croatan Highway  
 Kitty Hawk, NC 27949

**Phone**  
 252-261-2008

|                           |         |
|---------------------------|---------|
| <b>Construction Cost:</b> | 5604.00 |
| <b>Unheated Sq. Feet</b>  | 0.00    |
| <b>Total Sq. Feet:</b>    | 0.00    |

| <b>Contractor(s)</b>                       | <b>Phone</b>  | <b>Contractor Type</b> | <b>License Number</b> |
|--|---------------|------------------------|-----------------------|
| R. A. Hoy Heating & Air Conditioning, Inc. | (252)261-2008 | Mechanical             | 13056                 |
| R A Hoy Heating & Air Conditioning, Inc.   | (252)261-2008 | Electrical             | 22222-L               |

**Building Comments:**

**Description of Work: HVAC change out of a 2 ton system**

Permit Cost \$50.00

**Planning Conditions:**

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

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

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

**Owner / Applicant / Contractor / Agent** \_\_\_\_\_ **Date** \_\_\_\_\_

**Building Official** \_\_\_\_\_ **Date** \_\_\_\_\_



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

**PERMIT**

Permit NO. **17740**  
 Permit Type: Residential  
 Work Classification: [Permit Type]  
 Permit Status: Pending

Issue Date: 5/7/2018

Expires: 11/3/2018

Main Permit: Main Permit

**Project Address**

4002 N Virginia Dare Trail

**Lot**

50

**Flood Zone**

VE

**Owner Information**

Mildred H Roughton

**Applicant Information**

Beach Air Heating & Cooling

**Zoning**

BR-1

**Block**

**Constuction Type**

Repair/Replace

**Address**

P O Box 1877  
 Kill Devil Hills NC 27949

**Address**

551 NC 345  
 Manteo, NC 27959

**Subdivision**

KITTY HAWK BEACH TERR AMD

**PIN**

987619619049

**Building Code**

MECH2012

**Phone**

**Phone**

252-473-1995

|                           |         |
|---------------------------|---------|
| <b>Construction Cost:</b> | 6380.00 |
| <b>Unheated Sq. Feet</b>  | 0.00    |
| <b>Total Sq. Feet:</b>    | 0.00    |

| <b>Contractor(s)</b>          | <b>Phone</b> | <b>Contractor Type</b> | <b>License Number</b> |
|-------------------------------|--------------|------------------------|-----------------------|
| Beach Air Heating and Cooling | 252-473-1995 | Mechanical             | 29768                 |
| TBD                           | 000-000-0000 | Electrical             | 00000                 |

**Description of Work: HVAC change out of a 3 ton system**

**Building Comments:**

Permit Cost - \$50.00

**Planning Conditions:**

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

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

\_\_\_\_\_  
**Owner / Applicant / Contractor / Agent** **Date**

\_\_\_\_\_  
**Building Official** **Date**



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

**PERMIT**

Permit NO. **17741**  
 Permit Type: Residential  
 Work Classification: [Permit Type]  
 Permit Status: Pending

Issue Date: 5/8/2018

Expires: 11/4/2018

Main Permit: Main Permit

**Project Address**  
 4812 Vista Lane  
**Lot**

**Zoning**  
 BR-1  
**Block**

**Subdivision**  
 SEA SCAPE SEC 2  
**PIN**

**Flood Zone**  
 AE

**Constuction Type**  
 Repair/Replace

**Building Code**  
 MECH2012

**Owner Information**  
 SUSANN S WRIGHT

**Address**  
 408 BEACON DR  
 KITTY HAWK NC 27949

**Phone**

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

**Address**  
 3908 N Croatan Highway  
 Kitty Hawk, NC 27949

**Phone**  
 252-261-2008

**Construction Cost:** 5544.00  
**Unheated Sq. Feet** 0.00  
**Total Sq. Feet:** 0.00

| Contractor(s)                              | Phone         | Contractor Type | License Number |
|--|---------------|-----------------|----------------|
| R. A. Hoy Heating & Air Conditioning, Inc. | (252)261-2008 | Mechanical      | 13056          |
| R A Hoy Heating & Air Conditioning, Inc.   | (252)261-2008 | Electrical      | 22222-L        |

**Description of Work: HVAC change out of a 3 ton system**

**Building Comments:**  
 Permit Cost \$50.00

**Planning Conditions:**  
 Flood Zone-AE; Elevation-8.3'+1'=9.3'; Map#-3720987600J; Effective-09/20/2006;

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

**Owner / Applicant / Contractor / Agent** \_\_\_\_\_ **Date** \_\_\_\_\_

**Building Official** \_\_\_\_\_ **Date** \_\_\_\_\_



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

**PERMIT**

Permit NO. **17742**  
 Permit Type: Residential  
 Work Classification: [Permit Type]  
 Permit Status: Pending

Issue Date: 5/9/2018

Expires: 11/5/2018  
 Main Permit: Main Permit

**Project Address**

5020 Lindbergh Avenue

**Lot**

N Pt 35

**Flood Zone**

AE

**Owner Information**

Brian G & Valerie U Gentilini

**Applicant Information**

Airhandlers OBX

**Zoning**

BR-1

**Block**

32

**Constuction Type**

Repair/Replace

**Address**

3529 Pine Road  
 Portsmouth VA 23703

**Address**

8788 N Carataoke Highway  
 Harbinger, NC 27941

**Subdivision**

KITTY HAWK BEACH REV SEC A

**PIN**

987605199522

**Building Code**

MECH2012

**Phone**

**Phone**

252-491-8637

|                           |         |
|---------------------------|---------|
| <b>Construction Cost:</b> | 4800.00 |
| <b>Unheated Sq. Feet</b>  | 0.00    |
| <b>Total Sq. Feet:</b>    | 0.00    |

| <b>Contractor(s)</b>                               | <b>Phone</b> | <b>Contractor Type</b> | <b>License Number</b> |
|--|--------------|------------------------|-----------------------|
| Air Handlers OBX                                   | 252-491-8637 | Mechanical             | 5314                  |
| Sun Realty of Nags<br>Head Inc/Air Handlers<br>OBX | 252-491-8637 | Electrical             | 07514-L               |

**Building Comments:**

Permit Cost - \$50.00

**Planning Conditions:**

Flood Zone-AE; Elevation-9'+1'=10'; Map#-3720987600J; Effective-09/20/2006

**Description of Work: HVAC  
 change out of a 2.5 ton system**

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

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

**Owner / Applicant / Contractor / Agent** \_\_\_\_\_ **Date** \_\_\_\_\_

**Building Official** \_\_\_\_\_ **Date** \_\_\_\_\_



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

**PERMIT**

Permit NO. **17743**  
 Permit Type: Residential  
 Work Classification: [Permit Type]  
 Permit Status: Pending

Issue Date: 5/9/2018

Expires: 11/5/2018

Main Permit: Main Permit

**Project Address**  
 4426 N Virginia Dare Trail  
**Lot**

**Zoning**  
 BR-1  
**Block**

**Subdivision**  
 KITTY HAWK BEACH REV SEC A  
**PIN**

**Flood Zone**  
 VE

**Constuction Type**  
 Repair/Replace

987610456135

**Building Code**  
 MECH2012

**Owner Information**  
 GAYLE E MCCROSKEY

**Address**  
 213 NORTH COURT ST  
 LEWISBURG WV 24901

**Phone**

**Applicant Information**  
 Air Handlers OBX

**Address**  
 8788 N Caratoke Highway  
 Harbinger, NC 27920

**Phone**  
 252-491-8637

|                           |         |
|---------------------------|---------|
| <b>Construction Cost:</b> | 5922.00 |
| <b>Unheated Sq. Feet</b>  | 0.00    |
| <b>Total Sq. Feet:</b>    | 0.00    |

| <b>Contractor(s)</b>                         | <b>Phone</b> | <b>Contractor Type</b> | <b>License Number</b> |
|--|--------------|------------------------|-----------------------|
| Air Handlers OBX                             | 252-491-8637 | Mechanical             | 5314                  |
| Sun Realty of Nags Head Inc/Air Handlers OBX | 252-491-8637 | Electrical             | 07514-L               |

**Building Comments:**

**Description of Work: HVAC**  
**Change out of a 3 ton system**

Permit Cost - \$50.00

**Planning Conditions:**

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

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

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

\_\_\_\_\_  
**Owner / Applicant / Contractor / Agent** **Date**

\_\_\_\_\_  
**Building Official** **Date**



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

**PERMIT**

Permit NO. **17772**  
 Permit Type: Residential  
 Work Classification: [Permit Type]  
 Permit Status: Pending

Issue Date: 5/21/2018

Expires: 11/17/2018

Main Permit: Main Permit

**Project Address**  
 4240 Seascape Drive  
**Lot**

**Zoning**  
 BR-1  
**Block**

**Subdivision**  
 SEA SCAPE SEC 1  
**PIN**

**Flood Zone**  
 X

**Constuction Type**  
 Repair/Replace

**Building Code**  
 MECH2012

**Owner Information**  
 MARK T ERNST

**Address**  
 4240 SEACAPE DR  
 KITTY HAWK NC 27949

**Phone**

**Applicant Information**  
 Master Heating & Cooling

**Address**  
 P O Box 707  
 Kitty Hawk, NC 27949

**Phone**  
 252-255-0095

| <u>Contractor(s)</u> | <u>Phone</u> | <u>Contractor Type</u> | <u>License Number</u> | <b>Construction Cost:</b> | <u>6250.00</u> |
|----------------------|--------------|------------------------|-----------------------|---------------------------|----------------|
|                      |              |                        |                       | <b>Unheated Sq. Feet</b>  | <u>0.00</u>    |
|                      |              |                        |                       | <b>Total Sq. Feet:</b>    | <u>0.00</u>    |

**Building Comments:**

**Description of Work: HVAC  
 change out of a 3 ton system**

Permit Cost - \$50.00

**Planning Conditions:**

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

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

**Owner / Applicant / Contractor / Agent** \_\_\_\_\_ **Date** \_\_\_\_\_

**Building Official** \_\_\_\_\_ **Date** \_\_\_\_\_





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

**PERMIT**

Permit NO. **17773**  
 Permit Type: Residential  
 Work Classification: [Permit Type]  
 Permit Status: Pending

Issue Date: 5/21/2018

Expires: 11/17/2018

Main Permit: Main Permit

**Project Address**

3403 N Virginia Dare Trail  
**Lot**

**Zoning**

BR-1

**Block**

**Subdivision**

SUBDIVISION - NONE

**PIN**

988509054581

**Building Code**

MECH2012

**Phone**

**Flood Zone**

VE

**Constuction Type**

Repair/Replace

**Address**

8568 Executive Drive

Norfolk VA 23503

**Address**

3908 N Croatan Highway

Kitty Hawk, NC 27949

**Phone**

252-261-2008

**Owner Information**

Sandra Steele McMullen & Judson Grant  
 Steele, III

**Applicant Information**

R A Hoy Heating & Air Conditioning

|                           |         |
|---------------------------|---------|
| <b>Construction Cost:</b> | 3696.00 |
| <b>Unheated Sq. Feet</b>  | 0.00    |
| <b>Total Sq. Feet:</b>    | 0.00    |

| <b>Contractor(s)</b>                       | <b>Phone</b>  | <b>Contractor Type</b> | <b>License Number</b> |
|--|---------------|------------------------|-----------------------|
| R. A. Hoy Heating & Air Conditioning, Inc. | (252)261-2008 | Mechanical             | 13056                 |
| R A Hoy Heating & Air Conditioning, Inc.   | (252)261-2008 | Electrical             | 22222-L               |

**Building Comments:**

Permit Cost - \$50.00

**Planning Conditions:**

Flood Zone-VE; Elevation-14'+1'=15'; Map#-3720988500J; Effective-09/20/2006;

**Description of Work: HVAC  
 change out of a 2 ton outdoor  
 unit only**

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

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

**Owner / Applicant / Contractor / Agent** \_\_\_\_\_ **Date** \_\_\_\_\_

**Building Official** \_\_\_\_\_ **Date** \_\_\_\_\_



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

**PERMIT**

Permit NO. 17774  
 Permit Type: Residential  
 Work Classification: [Permit Type]  
 Permit Status: Pending

Issue Date: 5/22/2018

Expires: 11/18/2018

Main Permit: Main Permit

**Project Address**  
 108 Thickety Point Road  
**Lot**

**Zoning**  
 VR-1  
**Block**

**Subdivision**  
 B L C VENTURES SUBDIVISION  
**PIN**

**Flood Zone**  
 AE

**Constuction Type**  
 Repair/Replace

987510476258  
**Building Code**  
 MECH2012

**Owner Information**  
 JOHN HOMCY

**Address**  
 P O BOX 2905  
 KILL DEVIL HILLS NC 27948

**Phone**

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

**Address**  
 3908 N Croatan Highway  
 Kitty Hawk, NC 27949

**Phone**  
 252-261-2008

|                           |         |
|---------------------------|---------|
| <b>Construction Cost:</b> | 5896.00 |
| <b>Unheated Sq. Feet</b>  | 0.00    |
| <b>Total Sq. Feet:</b>    | 0.00    |

| <b>Contractor(s)</b>                       | <b>Phone</b>  | <b>Contractor Type</b> | <b>License Number</b> |
|--|---------------|------------------------|-----------------------|
| R. A. Hoy Heating & Air Conditioning, Inc. | (252)261-2008 | Mechanical             | 13056                 |
| R A Hoy Heating & Air Conditioning, Inc.   | (252)261-2008 | Electrical             | 22222-L               |

**Description of Work: HVAC changeout of a 2 ton downstairs system**

**Building Comments:**

Permit Cost - \$50.00

**Planning Conditions:**

Flood Zone-AE; Elevation-8.3'+1'=9.3'; Map#-3720987500J; Effective-09/20/2006;

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

\_\_\_\_\_  
**Owner / Applicant / Contractor / Agent** **Date**

\_\_\_\_\_  
**Building Official** **Date**



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

**PERMIT**

Permit NO. **17768**  
 Permit Type: Residential  
 Work Classification: [Permit Type]  
 Permit Status: Open

Issue Date: 5/18/2018

Expires: 11/14/2018

Main Permit: Main Permit

**Project Address**

3968 N Virginia Dare Trail  
 Lot

**Zoning**

BR-1  
 Block

**Subdivision**

KITTY HAWK BEACH TERR AMD  
 PIN

**Flood Zone**

VE

**Constuction Type**

Repair/Replace

**Building Code**

MECH2012

**Owner Information**

JAMES H TRUSTEES SCHRADER

**Address**

104 GOLDEN MAPLE DR  
 CHESAPEAKE VA 23322

**Phone**

**Applicant Information**

Jerry Ange

**Address**

3900 Ivy Lane  
 Kitty Hawk, NC 27949

**Phone**

757-404-3921

|                           |         |
|---------------------------|---------|
| <b>Construction Cost:</b> | 5000.00 |
| <b>Unheated Sq. Feet</b>  | 0.00    |
| <b>Total Sq. Feet:</b>    | 0.00    |

| <b>Contractor(s)</b> | <b>Phone</b>  | <b>Contractor Type</b> | <b>License Number</b> |
|----------------------|---------------|------------------------|-----------------------|
| Jerry Lee Ange       | (252)441-6380 |                        | 31386                 |

**Building Comments:**

Permit Cost - \$50.00

**Planning Conditions:**

**Description of Work: HVAC  
 change out 2 ton system**

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

\_\_\_\_\_  
**Owner / Applicant / Contractor / Agent** **Date**

\_\_\_\_\_  
**Building Official** **Date**



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

**PERMIT**

Permit NO. **17766**  
 Permit Type: Residential  
 Work Classification: [Permit Type]  
 Permit Status: Pending

Issue Date: 5/17/2018

Expires: 11/13/2018

Main Permit: Main Permit

**Project Address**

4241 N Virginia Dare Trail  
 Lot

**Zoning**

BR-1

**Block**

**Subdivision**

KITTY HAWK BEACH REV SEC A

**PIN**

987615337702

**Building Code**

MECH2012

**Flood Zone**

VE

**Constuction Type**

Repair/Replace

**Phone**

**Owner Information**

ALINA F BEQUER

**Address**

10205 SW 58TH ST

MIAMI FL 33173

**Applicant Information**

Air Handlers OBX

**Address**

P O Box 309

Harbinger, NC 27941

**Phone**

252-491-8637

**Construction Cost:** 10000.00

**Unheated Sq. Feet** 0.00

**Total Sq. Feet:** 0.00

| <b>Contractor(s)</b>                               | <b>Phone</b> | <b>Contractor Type</b> | <b>License Number</b> |
|--|--------------|------------------------|-----------------------|
| Air Handlers OBX                                   | 252-491-8637 | Mechanical             | 5314                  |
| Sun Realty of Nags<br>Head Inc/Air Handlers<br>OBX | 252-491-8637 | Electrical             | 07514-L               |

**Description of Work: HVAC  
 change out of two systems a 2  
 ton and a 2.5 ton**

**Building Comments:**

Permit Cost \$100.00

**Planning Conditions:**

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

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

\_\_\_\_\_  
**Owner / Applicant / Contractor / Agent** **Date**

\_\_\_\_\_  
**Building Official** **Date**



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

**PERMIT**

Permit NO. **17762**  
 Permit Type: Residential  
 Work Classification: [Permit Type]  
 Permit Status: Pending

Issue Date: 5/16/2018

Expires: 11/12/2018

Main Permit: Main Permit

**Project Address**  
 4420 Seascape Drive  
**Lot**  
 473  
**Flood Zone**  
 X  
**Owner Information**  
 MICHAEL E PRINGLE

**Zoning**  
 BR-1  
**Block**  
  
**Constuction Type**  
 Repair/Replace  
**Address**  
 P O BOX 2830  
 KITTY HAWK NC 27949  
**Address**  
 3908 N Croatan Highway  
 Kitty Hawk, NC 27949

**Subdivision**  
 SEA SCAPE SEC 1  
**PIN**  
 987614344301  
**Building Code**  
 MECH2012  
**Phone**  
  
**Phone**  
 252-261-2008

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

|                           |         |
|---------------------------|---------|
| <b>Construction Cost:</b> | 5700.00 |
| <b>Unheated Sq. Feet</b>  | 0.00    |
| <b>Total Sq. Feet:</b>    | 0.00    |

| <b>Contractor(s)</b>                       | <b>Phone</b>  | <b>Contractor Type</b> | <b>License Number</b> |
|--|---------------|------------------------|-----------------------|
| R. A. Hoy Heating & Air Conditioning, Inc. | (252)261-2008 | Mechanical             | 13056                 |
| R A Hoy Heating & Air Conditioning, Inc.   | (252)261-2008 | Electrical             | 22222-L               |

**Description of Work: HVAC change out of a 2.5 ton system for top level**

**Building Comments:**

Permit Cost - \$50.00

**Planning Conditions:**

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

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

\_\_\_\_\_  
**Owner / Applicant / Contractor / Agent** **Date**

\_\_\_\_\_  
**Building Official** **Date**



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

**PERMIT**

Permit NO. **17763**  
 Permit Type: Commercial  
 Work Classification: [Permit Type]  
 Permit Status: Pending

Issue Date: 5/16/2018

Expires: 11/12/2018

Main Permit: Main Permit

**Project Address**

5136 N Croatan Highway

**Lot**

1

**Flood Zone**

X

**Owner Information**

MPB, INC C/O Tax Department

**Applicant Information**

All-In-One Mechanical

**Zoning**

MS-1

**Block**

**Constuction Type**

Repair/Replace

**Address**

6015 Poplar Hall Drive  
 Norfolk VA 23502

**Address**

114-A Ballast Road  
 Powells Point, NC 27966

**Subdivision**

KITTY HAWK BEACH SEC C

**PIN**

987717100119

**Building Code**

MECH2012

**Phone**

**Phone**

252-202-5350

|                           |         |
|---------------------------|---------|
| <b>Construction Cost:</b> | 5500.00 |
| <b>Unheated Sq. Feet</b>  | 0.00    |
| <b>Total Sq. Feet:</b>    | 0.00    |

| <b>Contractor(s)</b>          | <b>Phone</b>  | <b>Contractor Type</b> | <b>License Number</b> |
|-------------------------------|---------------|------------------------|-----------------------|
| All-In-One Mechanical, L.L.C. | (252)491-5334 | Mechanical             | 27675                 |
| Herbert Wallace Francis Jr.   | (252)202-5350 | Electrical             | 07784-L               |

**Building Comments:**

**Description of Work: HVAC change out to a new 16 SEER, 9000 BTU ductless mini-split system**

Permit Cost - \$50.00

**Planning Conditions:**

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

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

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

\_\_\_\_\_  
**Owner / Applicant / Contractor / Agent** **Date**

\_\_\_\_\_  
**Building Official** **Date**



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

**PERMIT**

Permit NO. **17757**  
 Permit Type: Residential  
 Work Classification: [Permit Type]  
 Permit Status: Pending

Issue Date: 5/15/2018

Expires: 11/11/2018

Main Permit: Main Permit

|                              |   |                                  |
|------------------------------|---|----------------------------------|
| <b>Project Address</b>       | <b>Zoning</b>   | <b>Subdivision</b>               |
| 1705 Sand Dollar Circle      | BR-2  | SANDPIPER CAY CONDOS<br>PHASE 30 |
| <b>Lot</b>                   | <b>Block</b>  | <b>PIN</b>                       |
|                              |   | 98761842707605                   |
| <b>Flood Zone</b>            | <b>Constuction Type</b>   | <b>Building Code</b>             |
| X                            | Repair/Replace  | MECH2012                         |
| <b>Owner Information</b>     | <b>Address</b>  | <b>Phone</b>                     |
| BARBARA HALL                 | HALL, RUBY 934 W KITTY HAWK<br>RD SUITE 11<br>KITTY HAWK NC 27949 |                                  |
| <b>Applicant Information</b> | <b>Address</b>  | <b>Phone</b>                     |
| Delta T Heating & Cooling    | 162 Yaupon Trail<br>Kitty Hawk, NC 27949                          | 252-256-2436                     |

|                           |                |
|---------------------------|----------------|
| <b>Construction Cost:</b> | <u>4400.00</u> |
| <b>Unheated Sq. Feet</b>  | <u>0.00</u>    |
| <b>Total Sq. Feet:</b>    | <u>0.00</u>    |

| <b>Contractor(s)</b>                     | <b>Phone</b> | <b>Contractor Type</b> | <b>License Number</b> |
|--|--------------|------------------------|-----------------------|
| Delta T Heating & Air Conditioning, Inc. | 252-256-2436 | Mechanical             | 23299                 |
| TBD                                      | 000-000-0000 | Electrical             | 00000                 |

**Description of Work: HVAC change out of a 2 ton system**

Permit Cost \$50.00

**Planning Conditions:**

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

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

\_\_\_\_\_  
**Owner / Applicant / Contractor / Agent** **Date**

\_\_\_\_\_  
**Building Official** **Date**



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

**PERMIT**

Permit NO. **17758**  
 Permit Type: Residential  
 Work Classification: [Permit Type]  
 Permit Status: Pending

Issue Date: 5/15/2018

Expires: 11/11/2018

Main Permit: Main Permit

**Project Address**

4221 Ivy Lane

**Lot**

**Zoning**

VR-1

**Block**

**Subdivision**

SUBDIVISION - NONE

**PIN**

986507594003

**Building Code**

MECH2012

**Phone**

**Flood Zone**

AE

**Owner Information**

Jeremy D & Christine R Schleiden

**Constuction Type**

Repair/Replace

**Address**

4221 Ivy Lane  
 Kitty Hawk NC 27949

**Phone**

252-256-2436

**Applicant Information**

Deleta T Heating & Air

**Address**

162 Yaupon Trail  
 Kitty Hawk, NC 27949

|                           |         |
|---------------------------|---------|
| <b>Construction Cost:</b> | 3700.00 |
| <b>Unheated Sq. Feet</b>  | 0.00    |
| <b>Total Sq. Feet:</b>    | 0.00    |

| <b>Contractor(s)</b>                     | <b>Phone</b> | <b>Contractor Type</b> | <b>License Number</b> |
|--|--------------|------------------------|-----------------------|
| Delta T Heating & Air Conditioning, Inc. | 252-256-2436 | Mechanical             | 23299                 |
| TBD                                      | 000-000-0000 | Electrical             | 00000                 |

**Building Comments:**

**Description of Work: HVAC change out of a 5 ton outdoor unit**

Permit Cost \$50.00

**Planning Conditions:**

Flood Zone-AE; Elevation-8.3'+1'=9.3'; Map#-3720986500J; Effective-09/20/2006

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

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

**Owner / Applicant / Contractor / Agent** \_\_\_\_\_ **Date** \_\_\_\_\_

**Building Official** \_\_\_\_\_ **Date** \_\_\_\_\_





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

**PERMIT**

Permit NO. **17780**  
 Permit Type: Residential  
 Work Classification: [Permit Type]  
 Permit Status: Open

Issue Date: 5/24/2018

Expires: 11/20/2018

Main Permit: Main Permit

**Project Address**

4308 Lindbergh Avenue

**Lot**

38

**Flood Zone**

X

**Owner Information**

Harry A & Laura Z Farrell

**Applicant Information**

American Home Services, Inc.

**Zoning**

BC-1

**Block**

39

**Constuction Type**

Repair/Replace

**Address**

8700 Camborne Court

Richmond VA 23235

**Address**

P O Box 3054

Kitty Hawk, NC 27949

**Subdivision**

KITTY HAWK BEACH REV SEC A

**PIN**

987614438889

**Building Code**

MECH2012

**Phone**

**Phone**

252-480-3400

**Construction Cost:** 6587.00

**Unheated Sq. Feet** 0.00

**Total Sq. Feet:** 0.00

| <b>Contractor(s)</b>         | <b>Phone</b>  | <b>Contractor Type</b> | <b>License Number</b> |
|------------------------------|---------------|------------------------|-----------------------|
| American Home Services, Inc. | (252)480-3400 | Mechanical             | 27257                 |
| TBD                          | 000-000-0000  | Electrical             | 00000                 |

**Building Comments:**

Permit Cost - \$50.00

**Planning Conditions:**

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

**Description of Work: HVAC change out of a 4 ton system**

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

**Owner / Applicant / Contractor / Agent** \_\_\_\_\_ **Date** \_\_\_\_\_

**Building Official** \_\_\_\_\_ **Date** \_\_\_\_\_



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

**PERMIT**

Permit NO. **17781**  
 Permit Type: Residential  
 Work Classification: [Permit Type]  
 Permit Status: Open

Issue Date: 5/24/2018

Expires: 11/20/2018

Main Permit: Main Permit

**Project Address**  
 3628 Goosdander Street  
**Lot**  
 4

**Flood Zone**  
 AE

**Owner Information**  
 Sheila Riggs Edwards

**Applicant Information**  
 David Armstrong Services

**Zoning**  
 BR-1  
**Block**

**Constuction Type**

**Address**  
 P O Box 258  
 Camden NC 27921

**Address**  
 20 Albermarle Shores Road  
 Columbia, NC

**Subdivision**  
 KITTY DUNES EAST EXTENDED  
**PIN**

987512868545  
**Building Code**  
 MECH2012

**Phone**

**Phone**  
 252-394-5315

|                           |         |
|---------------------------|---------|
| <b>Construction Cost:</b> | 4950.00 |
| <b>Unheated Sq. Feet</b>  | 0.00    |
| <b>Total Sq. Feet:</b>    | 0.00    |

| <b>Contractor(s)</b>               | <b>Phone</b> | <b>Contractor Type</b> | <b>License Number</b> |
|------------------------------------|--------------|------------------------|-----------------------|
| David Armstrong, Jr. Services, LLC | 252-796-4290 | Mechanical             | 21460                 |

**Building Comments:**

Permit Cost - \$50.00

**Planning Conditions:**

Flood Zone-AE; Elevation-9'+1'=10'; Map#-3720987500J; Effective-09/20/2006

**Description of Work: HVAC change out of a 2.5 ton system**

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

\_\_\_\_\_  
**Owner / Applicant / Contractor / Agent** **Date**

\_\_\_\_\_  
**Building Official** **Date**



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

**PERMIT**

Permit NO. **17776**  
 Permit Type: Residential  
 Work Classification: [Permit Type]  
 Permit Status: Open

Issue Date: 5/22/2018

Expires: 11/18/2018

Main Permit: Main Permit

**Project Address**

3836 N Virginia Dare Trail, Unit I-6  
 Lot

**Zoning**

BR-3  
 Block

**Subdivision**

SEA DUNES CONDOS PHASE 3  
 PIN

**Flood Zone**

AE

**Constuction Type**

Repair/Replace

987508880950

**Building Code**

MECH2012

**Owner Information**

RICHARD H TRUSTEES KOCH

**Address**

2245 WELTON POND CT  
 JEFFERSONTON VA 22724

**Phone**

**Applicant Information**

Brian Hedrick

**Address**

17 Palmetto Lane  
 Southern Shores, NC 27949

**Phone**

252-489-5836

|                           |         |
|---------------------------|---------|
| <b>Construction Cost:</b> | 5200.00 |
| <b>Unheated Sq. Feet</b>  | 0.00    |
| <b>Total Sq. Feet:</b>    | 0.00    |

| <b>Contractor(s)</b> | <b>Phone</b>  | <b>Contractor Type</b> | <b>License Number</b> |
|----------------------|---------------|------------------------|-----------------------|
| Brian Mace Hedrick   | (252)715-1448 | Mechanical             | 32559                 |
| TBD                  | 000-000-0000  | Electrical             | 00000                 |

**Building Comments:**

Permit Cost \$50.00

**Description of Work: HVAC  
 change out of a 2.5 ton system**

**Planning Conditions:**

Flood Zone-AE; Elevation-10'+1'=11'; Map#-3720987500J; Effective-09/20/2006

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

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

\_\_\_\_\_  
**Owner / Applicant / Contractor / Agent** **Date**

\_\_\_\_\_  
**Building Official** **Date**



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

**PERMIT**

Permit NO. **17793**  
 Permit Type: Residential  
 Work Classification: [Permit Type]  
 Permit Status: Pending

Issue Date: 5/31/2018

Expires: 11/27/2018

Main Permit: Main Permit

**Project Address**

2803 Seahorse Court

**Lot**

**Flood Zone**

X

**Owner Information**

BRYAN W HUDGINS

**Applicant Information**

Master Heating & Cooling

**Zoning**

BR-2

**Block**

**Constuction Type**

Repair/Replace

**Address**

149 CORNER HIGH RD  
 EURE NC 27935

**Address**

P O Box 707  
 Kitty Hawk, NC 27949

**Subdivision**

SANDPIPER CAY CONDOS  
 PHASE 20

**PIN**

98761841314503

**Building Code**

MECH2012

**Phone**

**Phone**

252-255-0095

|                           |         |
|---------------------------|---------|
| <b>Construction Cost:</b> | 5650.00 |
| <b>Unheated Sq. Feet</b>  | 0.00    |
| <b>Total Sq. Feet:</b>    | 0.00    |

| <b>Contractor(s)</b>     | <b>Phone</b>  | <b>Contractor Type</b> | <b>License Number</b> |
|--------------------------|---------------|------------------------|-----------------------|
| Master Heating & Cooling | (252)255-0095 | Mechanical             | 18066                 |
| TBD                      | 000-000-0000  | Electrical             | 00000                 |

**Building Comments:**

Permit Cost - \$50.00

**Planning Conditions:**

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

**Description of Work: HVAC  
 change out of a 1.5 ton system**

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

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

\_\_\_\_\_  
**Owner / Applicant / Contractor / Agent** **Date**

\_\_\_\_\_  
**Building Official** **Date**



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

**PERMIT**

Permit NO. **17784**  
 Permit Type: Residential  
 Work Classification: [Permit Type]  
 Permit Status: Pending

Issue Date: 5/25/2018

Expires: 11/21/2018  
 Main Permit: Main Permit

**Project Address**

4338 Worthington Lane

**Lot**

38R

**Flood Zone**

AE

**Owner Information**

LEON SCOTT WILKINSON

**Applicant Information**

Atlantic Heating & Cooling

**Zoning**

BR-1

**Block**

**Constuction Type**

Mechanical

**Address**

4338 WORTHINGTON LN  
 KITTY HAWK NC 27949

**Address**

P O Box 132  
 Kill Devil Hills, NC 27948

**Subdivision**

KITTY HAWK WOODS-LINKSIDE  
 WDS

**PIN**

987614237328

**Building Code**

MECH2012

**Phone**

252-202-6611

**Phone**

252-441-7642

|                           |         |
|---------------------------|---------|
| <b>Construction Cost:</b> | 3600.00 |
| <b>Unheated Sq. Feet</b>  | 0.00    |
| <b>Total Sq. Feet:</b>    | 0.00    |

| <b>Contractor(s)</b>           | <b>Phone</b>  | <b>Contractor Type</b> | <b>License Number</b> |
|--------------------------------|---------------|------------------------|-----------------------|
| Atlantic Heating & Cooling Ltd | (252)441-7642 | Mechanical             | 11618                 |
| TBD                            | 000-000-0000  | Electrical             | 00000                 |

**Building Comments:**

**Description of Work: New install of a one ductless mini-split HVAC system for guest house**

Permit Cost - \$136.00

**Planning Conditions:**

Flood Zone-AE; Elevation-8.3'+1'=9.3'; Map#-3720987600J; Effective-09/20/2006

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

\_\_\_\_\_  
**Owner / Applicant / Contractor / Agent** **Date**

\_\_\_\_\_  
**Building Official** **Date**



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

**PERMIT**

Permit NO. **17788**  
 Permit Type: Residential  
 Work Classification: [Permit Type]  
 Permit Status: Pending

Issue Date: 5/29/2018

Expires: 11/25/2018

Main Permit: Main Permit

**Project Address**

4636 Tamarack Drive

**Lot**

37

**Flood Zone**

X

**Owner Information**

Cynthia F Gunn & Christine M Andrews

**Applicant Information**

All-In-One Mechanical

**Zoning**

BR-3

**Block**

**Constuction Type**

Repair/Replace

**Address**

3206 Traveler Street  
 Fairfax VA 22030

**Address**

P O Box 3392  
 Kitty Hawk, NC 27949

**Subdivision**

KITTY HAWK WOODS-LINKSIDE  
 WDS

**PIN**

987609159739

**Building Code**

MECH2012

**Phone**

**Phone**

252-619-0049

| <u>Contractor(s)</u>          | <u>Phone</u>  | <u>Contractor Type</u> | <u>License Number</u> | <u>Construction Cost:</u> | <u>10500.00</u> |
|-------------------------------|---------------|------------------------|-----------------------|---------------------------|-----------------|
| All-In-One Mechanical, L.L.C. | (252)491-5334 | Mechanical             | 27675                 | <u>Unheated Sq. Feet</u>  | <u>0.00</u>     |
| Herbert Wallace Francis Jr.   | (252)202-5350 | Electrical             | 07784-L               | <u>Total Sq. Feet:</u>    | <u>0.00</u>     |

**Description of Work: HVAC change of a 1.5 ton system for top level and a 3 ton system for mid/ground level**

**Building Comments:**

Permit Cost \$100.00

**Planning Conditions:**

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

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

\_\_\_\_\_  
**Owner / Applicant / Contractor / Agent** **Date**

\_\_\_\_\_  
**Building Official** **Date**



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

**PERMIT**

Permit NO. **17789**  
 Permit Type: Residential  
 Work Classification: [Permit Type]  
 Permit Status: Pending

Issue Date: 5/29/2018

Expires: 11/25/2018

Main Permit: Main Permit

**Project Address**

4404 Ride Lane  
 Lot

**Zoning**

BR-1  
 Block

**Subdivision**

KITTY HAWK BEACH REV SEC A  
**PIN**

987614443489

**Flood Zone**

X

**Constuction Type**

Repair/Replace

**Building Code**

MECH2012

**Owner Information**

ALFRED M TORIBIO

**Address**

5504 TEAK CT  
 ALEXANDRIA VA 22309

**Phone**

**Applicant Information**

All-In-One

**Address**

P O Box 3392  
 Kitty Hawk, NC 27949

**Phone**

252-619-0049

|                           |         |
|---------------------------|---------|
| <b>Construction Cost:</b> | 5500.00 |
| <b>Unheated Sq. Feet</b>  | 0.00    |
| <b>Total Sq. Feet:</b>    | 0.00    |

| <b>Contractor(s)</b>          | <b>Phone</b>  | <b>Contractor Type</b> | <b>License Number</b> |
|-------------------------------|---------------|------------------------|-----------------------|
| All-In-One Mechanical, L.L.C. | (252)491-5334 | Mechanical             | 27675                 |
| Herbert Wallace Francis Jr.   | (252)202-5350 | Electrical             | 07784-L               |

**Description of Work: HVAC change out of a 2.5 ton system**

**Building Comments:**

Permit Cost - \$50.00

**Planning Conditions:**

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

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

**Owner / Applicant / Contractor / Agent** \_\_\_\_\_ **Date** \_\_\_\_\_

**Building Official** \_\_\_\_\_ **Date** \_\_\_\_\_



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

**PERMIT**

Permit NO. **17791**  
 Permit Type: Residential  
 Work Classification: [Permit Type]  
 Permit Status: Pending

Issue Date: 5/30/2018

Expires: 11/26/2018

Main Permit: Main Permit

**Project Address**

3835 Keepers Way

**Lot**

24

**Flood Zone**

X

**Owner Information**

Elizabeth C Mignogna

**Applicant Information**

All Seasons Heating & Cooling

**Zoning**

BR-1

**Block**

**Constuction Type**

Repair/Replace

**Address**

3835 Keepers Way  
 Kitty Hawk NC 27949

**Address**

P O Box 244  
 Point Harbor, NC 27964

**Subdivision**

KEEPERS HILL SEC 4

**PIN**

987511670284

**Building Code**

MECH2012

**Phone**

**Phone**

252-491-9232

**Construction Cost:** 13020.00

**Unheated Sq. Feet** 0.00

**Total Sq. Feet:** 0.00

| Contractor(s)                       | Phone         | Contractor Type | License Number |
|-------------------------------------|---------------|-----------------|----------------|
| All Seasons Heating & Cooling, Inc. | (252)491-9232 | Mechanical      | 19091          |
| TBD                                 | 000-000-0000  | Electrical      | 00000          |

**Description of Work: HVAC change out of a 2.5 ton system for upper level and a a 2 ton system for lower level**

**Building Comments:**

Permit Cost - \$100.00

**Planning Conditions:**

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

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

\_\_\_\_\_  
**Owner / Applicant / Contractor / Agent** **Date**

\_\_\_\_\_  
**Building Official** **Date**





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

**PERMIT**

Permit NO. **17770**  
 Permit Type: Commercial  
 Work Classification: [Permit Type]  
 Permit Status: Pending

Issue Date: 5/21/2018

Expires: 11/17/2018

Main Permit: Main Permit

**Project Address**

4371 The Woods Road  
 Lot

**Zoning**

VC-2  
 Block

**Subdivision**

JOHN W HARRIS TRACT  
 PIN

**Flood Zone**

AE

**Constuction Type**

Repair/Replace

**Building Code**

BLDG2012

**Owner Information**

LLC HAPPY BOXES THREE

**Address**

999 WATERSIDE DR STE 2220  
 NORFOLK VA 23510

**Phone**

**Applicant Information**

New Cingular Wireless DBA AT&T

**Address**

4801 Cox Road, Ste 300  
 Glen Allen VA 23060

**Phone**

919-909-9745

| Contractor(s)         | Phone        | Contractor Type | License Number | Construction Cost: | 16000.00 |
|-----------------------|--------------|-----------------|----------------|--------------------|----------|
| Fairmount Contractors | 336-366-9608 | General         | 78861          | Unheated Sq. Feet  | 0.00     |
|                       |              |                 |                | Total Sq. Feet:    | 0.00     |

**Description of Work: Remove 3 existing antennas and 3 TMAs, Install 3 antennas, 3 RRUs, 1 DC6 Squid, 2 DC cables and 1 fiber cable on existing tower. 2 RRUs to be installed on bridge post**

**Building Comments:**

Permit Cost - \$35.00

**Planning Conditions:**

Flood Zone-AE; Elevation-8.3'+1'=9.3'; Map#-3720986600J; Effective-09/20/2006

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

\_\_\_\_\_  
**Owner / Applicant / Contractor / Agent** **Date**

\_\_\_\_\_  
**Building Official** **Date**



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

**PERMIT**

Permit NO. **17748**  
 Permit Type: Residential  
 Work Classification: [Permit Type]  
 Permit Status: Pending

Issue Date: 5/10/2018

Expires: 11/6/2018

Main Permit: Main Permit

**Project Address**

4006 Welch Street

**Lot**

**Flood Zone**

X

**Owner Information**

Artim Zendell

**Applicant Information**

Artim Zendeli

**Zoning**

BR-1

**Block**

**Constuction Type**

Accessory Structure

**Address**

4006 Welch Street  
 Kitty Hawk NC 27949

**Address**

4006 Welch Street  
 Kitty Hawk, NC 27949

**Subdivision**

TED WOOD KITTY HAWK TERR  
 ADD

**PIN**

987619507555

**Building Code**

BLDG2012

**Phone**

**Phone**

252-207-3805

| <u>Contractor(s)</u> | <u>Phone</u> | <u>Contractor Type</u> | <u>License Number</u> | <b>Construction Cost:</b> | <u>350.00</u> |
|----------------------|--------------|------------------------|-----------------------|---------------------------|---------------|
| Owner                | 000-000-0000 | General                | 00000                 | <b>Unheated Sq. Feet</b>  | <u>96.00</u>  |
|                      |              |                        |                       | <b>Total Sq. Feet:</b>    | <u>0.00</u>   |

**Building Comments:**

Permit Cost - \$35.00

**Planning Conditions:**

Flood Zone-Shaded X; Map#-3720987600J; Effective-09/20/2006; An As-Built Survey required prior to a final inspection;

**Description of Work: Add 8 x 12 storage building**

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

\_\_\_\_\_  
**Owner / Applicant / Contractor / Agent** **Date**

\_\_\_\_\_  
**Building Official** **Date**

# TOWN OF NAGS HEAD

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



## Building Permit

**BR2018-0594**

|   |  |
|---|--|
| <b>Owner Name:</b> Campbell, Kenneth R , Campbell, Lisa M | <b>Owner</b> 3904 Parkway Rd             |
| <b>Owner Phone:</b> 757 435 2459                          | <b>Address:</b> Cheasapeake VA 23321     |
| <b>Parcel PIN:</b> 989211650295                           | <b>Zoning:</b> Imported Default District |
| <b>Address:</b> 3419 S Memorial Ave S                     | <b>Lot/Block/Sec:</b> LOT: 397 BLK: SEC: |
| <b>Subdivision:</b> GEOT STRONACH                         |  |
| <b>Contractor Name:</b> Forrest Seal, LLC                 | <b>Contractor</b> PO Box 2333            |
| <b>Contractor Phone:</b> 252-599-2521                     | <b>Address:</b> Kitty Hawk NC 27949      |

**Description:** Construct new Single Family Dwelling on slab & pilings, 5 bedroom, 5.1 bathrooms, pool with concrete deck & pergola

|                                      |  |
|--------------------------------------|--|
| <b>Construction Value:</b> 822000.00 | <b>Construction Type:</b> New Construction         |
| <b>Foundation Type:</b>              | <b>Heated Space:</b> 4166 <b>Unheated Space:</b> 0 |
|                                      | <b># of Bedrooms:</b> 5 <b># of Baths:</b> 5.1     |

|                               |                            |
|-------------------------------|----------------------------|
| <b>Zoning Permit:</b> ZN2018- | <b>FEMA Flood Zone:</b> ae |
| <b>Septic Permit:</b> 27535   | <b>Lot Elevation:</b>      |
| <b>CAMA Permit:</b> n/a       | <b>BFE:</b> 10             |
| <b>PW Permit#</b> PW2018-0596 |                            |

**Total Fees Paid/Due:** 3509.83 / **Invoice #:** 2018-00622

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

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

|                    |            |                   |      |
|--------------------|------------|-------------------|------|
| Building Inspector | 05/29/2018 | Responsible Party | Date |
|--------------------|------------|-------------------|------|

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

### Conditions:

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

truss (original) drawings required prior to framing inspection

# TOWN OF NAGS HEAD

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



## Building Permit

**BR2018-0764**

|  |   |
|--|---|
| <b>Owner Name:</b> Wilson, Jeffrey M EUX - Wilson, Aimee Lynn EUX                      | <b>Owner</b> PO Box 1933                  |
| <b>Owner Phone:</b> 810 599 6438   | <b>Address:</b> Kill Devil Hills NC 27948 |
| <b>Parcel PIN:</b> 989112961366  | <b>Zoning:</b> Imported Default District  |
| <b>Address:</b> 220 W Barracuda Dr   | <b>Lot/Block/Sec:</b> LOT: 34 BLK: SEC: F |
| <b>Subdivision:</b> OLD NAGS HEAD COVE SEC F   |   |
| <b>Contractor Name:</b> Conway Construction & Design, St. Michael Construction T/A     | <b>Contractor</b> 208 Shiloh St           |
| <b>Contractor Phone:</b> 252-261-1298  | <b>Address:</b> KILL DEVIL HILLS NC 27948 |
| <b>Description:</b> Construct new single family dwelling, 3 bedroom, 3 bath on pilings |   |

|                                      |  |
|--------------------------------------|--|
| <b>Construction Value:</b> 240000.00 | <b>Construction Type:</b> New Construction         |
| <b>Foundation Type:</b>              | <b>Heated Space:</b> 1956 <b>Unheated Space:</b> 0 |
|                                      | <b># of Bedrooms:</b> 3 <b># of Baths:</b> 3.0     |

|  |                            |
|--|----------------------------|
| <b>Zoning Permit:</b> ZN2018-0106 3 BR | <b>FEMA Flood Zone:</b> ae |
| <b>Septic Permit:</b> 27583            | <b>Lot Elevation:</b>      |
| <b>CAMA Permit:</b> n/a                | <b>BFE:</b> 9              |
| <b>PW Permit#</b> PW2018-0783 3 BR     |                            |

**Total Fees Paid/Due:** 2183.33 / **Invoice #:** 2018-00464

- All work shall conform to all applicable North Carolina State Building codes and Ordinances of the Town of Nags Head and shall be the responsibility of the undersigned applicant.  
- All work shall conform to the plans and specifications provided with the application.  
- Any damage to the multi-use path or adjoining right-of-way shall be immediately repaired by the owner and/or applicant.  
**In accordance with GS160A-418, a permit expires 6 months after the date of issuance if the work authorized by the permit has not been commenced. If, after commencement, the work is discontinued for a period of 12 months (no inspections have taken place) the permit immediately expires. No work authorized by a permit that has expired may be performed until a new permit has been issued.**

|                    |            |                   |      |
|--------------------|------------|-------------------|------|
| Building Inspector | 04/26/2018 | Responsible Party | Date |
|--------------------|------------|-------------------|------|

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

### Conditions:

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

see ZN2018-0106

# TOWN OF NAGS HEAD

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



## Building Permit

**RE2018-0942**

|   |  |
|---|--|
| <b>Owner Name:</b> O'BRIEN, MICHAEL P - NANCY E<br>O'BRIEN ETUX | <b>Owner</b> P O Box 902                               |
| <b>Owner Phone:</b> 252 202 2149                                | <b>Address:</b> NAGS HEAD NC 27959                     |
| <b>Parcel PIN:</b> 989205273536                                 | <b>Zoning:</b> Imported Default District               |
| <b>Address:</b> 2820 S Lost Colony Dr S                         |  |
| <b>Subdivision:</b> VISTA COLONY WEST                           | <b>Lot/Block/Sec:</b> LOT: COMBINED PARCEL BLK: C SEC: |
| <b>Contractor Name:</b> Property Owner                          | <b>Contractor</b>                                      |
| <b>Contractor Phone:</b>  | <b>Address:</b> Nags Head NC                           |

**Description:** 2 story 26' x 26' addition for 1 bedroom, 1 bathroom, storage, workout & rec room

|                                     |   |
|-------------------------------------|---|
| <b>Construction Value:</b> 70000.00 | <b>Construction Type:</b> Addition              |
| <b>Foundation Type:</b>             | <b>Heated Space:</b> 0 <b>Unheated Space:</b> 0 |
|                                     | <b># of Bedrooms:</b> 0 <b># of Baths:</b> 0    |

|                                 |                           |
|---------------------------------|---------------------------|
| <b>Zoning Permit:</b> 2018.0133 | <b>FEMA Flood Zone:</b> x |
| <b>Septic Permit:</b> 10453     | <b>BFE:</b>               |
| <b>CAMA Permit:</b> na          | <b>Flood Permit:</b>      |
| <b>PW Permit#:</b> na           |                           |

### Conditions:

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

Address#s on home if none are present. Review inspection procedure handout. Subs shall pull permits prior to starting work for all required inspections. Call for final inspection..

**Total Fees Paid/Due:** 315.00 **Invoice #:** 2018-00508

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

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

Building Inspector 05/07/2018

Responsible Party Date

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

# TOWN OF NAGS HEAD

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



## Building Permit

**RE2018-0852**

**Owner Name:** SNYDER, ROBERT S III - SYNDER,  
BARBARA JETUX  
**Owner Phone:** 301 524 6131

**Owner** 6225 Green Valley Rd  
**Address:** New Market MD 21774

**Parcel PIN:** 080117019891  
**Address:** 111 W Bonnie Ln W  
**Subdivision:** REFLECTIONS

**Zoning:** Imported Default District  
**Lot/Block/Sec:** LOT: 20 BLK: SEC:

**Contractor Name:** Haddon Homes, Inc.  
**Contractor Phone:** 252 267 2287

**Contractor** PO Box 1868  
**Address:** NAGS HEAD NC 27959

**Description:** Siding & window replacement on East & South elevations

**Construction Value:** 38880.00  
**Foundation Type:**

**Construction Type:** Repair  
**Heated Space:** 0 **Unheated Space:** 0  
**# of Bedrooms:** 0 **# of Baths:** 0

**Zoning Permit:** see file  
**Septic Permit:** village  
**CAMA Permit:** n/a  
**PW Permit#** n/a

**FEMA Flood Zone:** shaded X  
**Lot Elevation:**  
**BFE:**

**Total Fees Paid/Due:** 225.00 /

**Invoice #:** 2018-00512

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

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

Building Inspector 05/08/2018

Responsible Party Date

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

### Conditions:

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

call for any sheathing replacement

**TOWN OF NAGS HEAD**

PO Box 99  
Nags Head, NC 27959  
Phone (252) 441-7016 Fax (252) 441-4290



**Demolition Permit  
DC2018-0849**

**Owner Name:** Gemcap Development      **Owner** 210 W Fourth St Ste 200  
**Owner Phone:** 336 724 0153      **Address:** Winston Salem NC 27101

**Parcel PIN:** 080011556975      **Zoning:** C2 (General Commercial District)  
**Address:** 6813 S Croatan Hwy S  
**Subdivision:** WHALEBONE BEACHES REVISED      **Lot/Block/Sec:** LOT: 10A BLK: 2 SEC:

**Applicant Name:** Gemcap Development      **Applicant** 210 W Fourth St Ste 200  
**Applicant Phone:** 336 724 0153      **Address:** Winston Salem NC 27101

**Contractor Name:** IB Builders, Inc.      **Contractor** PO Box 610  
**Contractor Phone:** 252 235 2115      **Address:** Bailey NC 27807-0610

**Total Fees Due/Paid:** 1150.00      **Invoice #:** 2018-00529

**Conditions:**

CALL FOR ALL REQUIRED INSPECTIONS; Piling inspection required; Water credits and facility fees are available on this lot for a period of 5 years from the issuance of the CO; Review Demo Inspection Procedures to avoid fines;  
Review demolition procedure handout. Call for all required inspections. Review zoning permit conditions. Call for final inspection

**Project Description:** Demo existing structure and fill and grade lot to ready land for new Sherwin Williams store

**Land Use:** Accessory Structure      **# of Units:** 1  
**CAMA Permit/Exemption#:** N/A      **# of Bedrooms:** 0  
**FEMA Flood:** ae

**Comments:**

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

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

ANY DAMAGE TO THE MULTI-USE PATH OR ADJOINING RIGHT-OF-WAY SHALL BE IMMEDIATELY REPAIRED BY THE OWNER AND/OR APPLICANT.

\_\_\_\_\_  
Building Inspector

\_\_\_\_\_  
Date

\_\_\_\_\_  
Applicant

\_\_\_\_\_  
Date

**Conditions for demolition are attached.**

# TOWN OF NAGS HEAD

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



## Building Permit

RE2018-1038

|   |   |
|---|---|
| <b>Owner Name:</b> Nielsen, Connie - Nielsen, Kevin | <b>Owner</b> 3801 Barn Owl Ln                       |
| <b>Owner Phone:</b> 804 357 7000                    | <b>Address:</b> Glen Allen VA 23060                 |
| <b>Parcel PIN:</b> 989211655590                     | <b>Zoning:</b> CR (Commercial Residential District) |
| <b>Address:</b> 3419 S Va Dare Trl S                | <b>Lot/Block/Sec:</b> LOT: 81 & 186 BLK: SEC:       |
| <b>Subdivision:</b> GEOT STRONACH                   |   |

|  |                              |
|--|------------------------------|
| <b>Contractor Name:</b> Property Owner | <b>Contractor</b>            |
| <b>Contractor Phone:</b>               | <b>Address:</b> Nags Head NC |

**Description:** Add dormer on north elevation of top floor for bathroom/mechanical and add bathroom on south elevation on 2nd floor for a total of 180 additional heated square feet

|                                     |   |
|-------------------------------------|---|
| <b>Construction Value:</b> 75000.00 | <b>Construction Type:</b> Addition              |
| <b>Foundation Type:</b>             | <b>Heated Space:</b> 0 <b>Unheated Space:</b> 0 |
|                                     | <b># of Bedrooms:</b> 0 <b># of Baths:</b> 0    |

|                                |                            |
|--------------------------------|----------------------------|
| <b>Zoning Permit:</b> see file | <b>FEMA Flood Zone:</b> ve |
| <b>Septic Permit:</b> 27738    | <b>BFE:</b> 11             |
| <b>CAMA Permit:</b> 18-036     | <b>Flood Permit:</b> 12    |
| <b>PW Permit#</b> na           |                            |

### Conditions:

CALL FOR ALL REQUIRED INSPECTIONS; All subcontractors shall obtain all permits required by State building codes prior to starting work; All new work to meet current code; See CONDITIONS on Zoning Permit; Additional engineering may be required; Dwelling is not compliant with floodplain regulations and all work must be within 50% of building value as documented in the substantial improvement forms; Receipts of all expenditures are required prior to the issuance of a C/O; Work must meet previously submitted and approved plans; **FINAL INSPECTION REQUIRED PRIOR TO ISSUANCE OF CERTIFICATE OF COMPLIANCE** Address #s on home if none are present. Smoke and co2 detectors to code throughout home. Call for site visit to go over job plan. Substantial improvement required. Receipts for job required as well. Call for final inspection

**Total Fees Paid/Due:** 345.00      **Invoice #:** 2018-00551

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

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

Building Inspector      05/16/2018

Responsible Party      Date

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



# TOWN OF NAGS HEAD

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



## Building Permit

**BR2018-1054**

|   |   |
|---|---|
| <b>Owner Name:</b> Mekonnen, Daniel Yacob TIC                       | <b>Owner</b> 7551 Glen Point Ct                     |
| <b>Owner Phone:</b> 703 209 3091                                    | <b>Address:</b> Springfield VA 22153                |
| <b>Parcel PIN:</b> 989314235424                                     | <b>Zoning:</b> CR (Commercial Residential District) |
| <b>Address:</b> 2111 A S Va Dare Trl                                |   |
| <b>Subdivision:</b> NAGS HEAD SHORES AMENDED SEC 4                  | <b>Lot/Block/Sec:</b> LOT: PT 6 BLK: 2 SEC: 4       |
| <b>Contractor Name:</b> Bryan R. Weisbecker General Contractor, LLC | <b>Contractor</b> PO Box 55                         |
| <b>Contractor Phone:</b> 252 441 5001                               | <b>Address:</b> Kitty Hawk NC 27949                 |

**Description:** Construct new single family dwelling on piling foundation, 7 bedrooms, 7.1 baths

|                                      |   |
|--------------------------------------|---|
| <b>Construction Value:</b> 599900.00 | <b>Construction Type:</b> New Construction            |
| <b>Foundation Type:</b>              | <b>Heated Space:</b> 3458 <b>Unheated Space:</b> 2755 |
|                                      | <b># of Bedrooms:</b> 7 <b># of Baths:</b> 7.5        |

|                                   |                            |
|-----------------------------------|----------------------------|
| <b>Zoning Permit:</b> ZN2018-1055 | <b>FEMA Flood Zone:</b> VE |
| <b>Septic Permit:</b> 27356       | <b>Lot Elevation:</b>      |
| <b>CAMA Permit:</b> 18-037        | <b>BFE:</b> 11             |
| <b>PW Permit#</b> PW2018-1056     |                            |

**Total Fees Paid/Due:** 3094.34 / **Invoice #:** 2018-00569

- All work shall conform to all applicable North Carolina State Building codes and Ordinances of the Town of Nags Head and shall be the responsibility of the undersigned applicant.  
- All work shall conform to the plans and specifications provided with the application.  
- Any damage to the multi-use path or adjoining right-of-way shall be immediately repaired by the owner and/or applicant.  
**In accordance with GS160A-418, a permit expires 6 months after the date of issuance if the work authorized by the permit has not been commenced. If, after commencement, the work is discontinued for a period of 12 months (no inspections have taken place) the permit immediately expires. No work authorized by a permit that has expired may be performed until a new permit has been issued.**

|                    |            |                   |      |
|--------------------|------------|-------------------|------|
| Building Inspector | 05/18/2018 | Responsible Party | Date |
|--------------------|------------|-------------------|------|

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

**Conditions:**  
CALL FOR ALL REQUIRED INSPECTIONS; See CONDITIONS on Zoning Permit; Piling inspection required; FINAL INSPECTION REQUIRED PRIOR TO ISSUANCE OF CERTIFICATE OF COMPLIANCE;

# TOWN OF NAGS HEAD

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



## Building Permit

RE2018-1132

|   |  |
|---|--|
| <b>Owner Name:</b> TOMASZEWSKI, WILLIAM   | <b>Owner</b> 7867 Alcorn Rd                          |
| <b>Owner Phone:</b> 336 972 1222          | <b>Address:</b> Oak Ridge NC 27310                   |
| <b>Parcel PIN:</b> 070905093058           | <b>Zoning:</b> R1 (Low Density Residential District) |
| <b>Address:</b> 129 S West Shore Rd S     | <b>Lot/Block/Sec:</b> LOT: 20 BLK: SEC: 1            |
| <b>Subdivision:</b> POND ISLAND MARINA    |  |
| <b>Contractor Name:</b> Lyn Small, Inc.   | <b>Contractor</b> 113 Ballast Rock Dr                |
| <b>Contractor Phone:</b> 252 491 8562     | <b>Address:</b> Powells Point NC 27966               |
| <b>Description:</b> 100' pier with gazebo |  |

**Construction Value:** 58000.00  
**Foundation Type:**

**Construction Type:** Repair  
**Heated Space:** 0 **Unheated Space:** 0  
**# of Bedrooms:** 0 **# of Baths:** 0

**Zoning Permit:** 2018.0149  
**Septic Permit:** na  
**CAMA Permit:** 71474  
**PW Permit#** na

**FEMA Flood Zone:** V  
**BFE:** 10  
**Flood Permit:** na

### Conditions:

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

Address #s on pier ore at land. Call for material check Call for final inspection

**Total Fees Paid/Due:** 285.00 **Invoice #:** 2018-00600

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

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

Building Inspector 05/23/2018

Responsible Party Date

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

# TOWN OF NAGS HEAD

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



## Building Permit

**RE2018-0963**

|   |  |
|---|--|
| <b>Owner Name:</b> FRAMPTON, HUGH M - FRAMPTON,<br>KATHLEEN W TIC | <b>Owner</b> 1345 Windmill Ln            |
| <b>Owner Phone:</b>   | <b>Address:</b> SILVER SPRING MD 20905   |
| <b>Parcel PIN:</b> 080118310095                                   | <b>Zoning:</b> Imported Default District |
| <b>Address:</b> 5608 S Sandbar Dr S                               | <b>Lot/Block/Sec:</b> LOT: 27 BLK: SEC:  |
| <b>Subdivision:</b> DOLPHIN RUN                                   |  |
| <b>Contractor Name:</b> So Nice Again (SNA)                       | <b>Contractor</b> PO Box 253             |
| <b>Contractor Phone:</b> 252 261 8448                             | <b>Address:</b> Kitty Hawk NC 27949      |

**Description:** Insulation, drywall, painting, flooring of water damaged area

**Construction Value:** 16000.00

**Foundation Type:**

**Construction Type:** Repair

**Heated Space:** 0

**Unheated Space:** 0

**# of Bedrooms:** 0

**# of Baths:** 0

**Zoning Permit:** see file

**Septic Permit:** na

**CAMA Permit:** na

**PW Permit#** na

**FEMA Flood Zone:** AE

**BFE:** 9

**Flood Permit:** 2018.0964

### Conditions:

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

Address #s on home if none are present. Call for a demo inspection before starting restoration. Pull all required trade permits. Smokes and Co2 detectors to code throughout home. Call for final inspection.

**Total Fees Paid/Due:** 165.00

**Invoice #:** 2018-00489

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

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

Building Inspector 05/01/2018

Responsible Party Date

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

# TOWN OF NAGS HEAD

PO Box 99

Nags Head, NC 27959

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



## Building Permit

**RE2018-0966**

**Owner Name:** Carpenter, Sharon

**Owner** 161 Handsom Ave

**Owner Phone:** 970 331 7777

**Address:** Sayville NY 11782

**Parcel PIN:** 071909068177

**Zoning:** Imported Default District

**Address:** 8643 A S Old Oregon Inlet Rd

**Subdivision:** DUNES SOUTH

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

**Contractor Name:** Emanuelson & Dad, Inc

**Contractor** 4717 N Croatan Hwy

**Contractor Phone:** 252 261 2212

**Address:** Kitty Hawk NC 27949

**Description:** Unit A Replace 7 rotten piles, replace 6x24 deck & 6x12 deck (same footprint), replace landing at top of stairs

**Construction Value:** 19925.00

**Construction Type:** Repair

**Foundation Type:**

**Heated Space:** 0

**Unheated Space:** 0

**# of Bedrooms:** 0

**# of Baths:** 0

**Zoning Permit:** 2018.0126

**FEMA Flood Zone:** AE

**Septic Permit:** 27744

**BFE:** 10

**CAMA Permit:** na

**Flood Permit:** 2018.0965

**PW Permit#**

### Conditions:

CALL FOR ALL REQUIRED INSPECTIONS; All new work to meet current code; See CONDITIONS on Zoning Permit; Additional engineering may be required; Piling inspection required; FINAL INSPECTION REQUIRED PRIOR TO ISSUANCE OF CERTIFICATE OF COMPLIANCE;

Address #s on building if none are present. Call for piling inspection. Call for final inspection

**Total Fees Paid/Due:** 165.00

**Invoice #:** 2018-00488

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

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

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

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

Building Inspector

05/01/2018

Responsible Party

Date

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

# TOWN OF NAGS HEAD

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



## Building Permit

CA2018-0873

|   |   |
|---|---|
| <b>Owner Name:</b> SURFSIDE PLAZA PROPERTIES, LLC | <b>Owner</b> P O Box 745                        |
| <b>Owner Phone:</b>                               | <b>Address:</b> NAGS HEAD NC 27959              |
| <b>Parcel PIN:</b> 989108983875                   | <b>Zoning:</b> C2 (General Commercial District) |
| <b>Address:</b> 4104 S Va Dare Trl S              | <b>Lot/Block/Sec:</b> LOT: 42-51 BLK: SEC:      |
| <b>Subdivision:</b> C W HOLLOWELL DB 17-79        |   |
| <b>Contractor Name:</b> Ballance's Inc.           | <b>Contractor</b> 1125 US Hwy 17 S              |
| <b>Contractor Phone:</b> 252 338 6130             | <b>Address:</b> Elizabeth City NC 27909         |
| <b>Description:</b> Installation of hood          |   |

|  |   |
|--|---|
| <b>Construction Value:</b> 10000.00              | <b>Construction Type:</b> Remodel               |
| <b>Foundation Type:</b>                          | <b>Heated Space:</b> 0 <b>Unheated Space:</b> 0 |
|  | <b># of Bedrooms:</b> 0 <b># of Baths:</b> 0    |
| <b>Zoning Permit:</b> ZN2018-0120                | <b>FEMA Flood Zone:</b> ae                      |
| <b>Septic Permit:</b> see floor layout for stamp | <b>Lot Elevation:</b>                           |
| <b>CAMA Permit:</b> n/a                          | <b>BFE:</b> 10                                  |
| <b>PW Permit#:</b> n/a                           |   |

**Total Fees Paid/Due:** 135.00 / **Invoice #:** 2018-00493

- All work shall conform to all applicable North Carolina State Building codes and Ordinances of the Town of Nags Head and shall be the responsibility of the undersigned applicant.  
- All work shall conform to the plans and specifications provided with the application.  
- Any damage to the multi-use path or adjoining right-of-way shall be immediately repaired by the owner and/or applicant.  
**In accordance with GS160A-418, a permit expires 6 months after the date of issuance if the work authorized by the permit has not been commenced. If, after commencement, the work is discontinued for a period of 12 months (no inspections have taken place) the permit immediately expires. No work authorized by a permit that has expired may be performed until a new permit has been issued.**

|                    |            |                   |      |
|--------------------|------------|-------------------|------|
| Building Inspector | 05/03/2018 | Responsible Party | Date |
|--------------------|------------|-------------------|------|

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

### Conditions:

CALL FOR ALL REQUIRED INSPECTIONS; All subcontractors shall obtain all permits required by State building codes prior to starting work; See CONDITIONS on Zoning Permit; Additional engineering may be required; Please call the Town of Nags Head Fire Department at 252-441-5909 for inspections; Work must meet previously submitted and approved plans; FINAL INSPECTION REQUIRED PRIOR TO ISSUANCE OF CERTIFICATE OF COMPLIANCE;  
hood tests and fire suppression system will require testing

# TOWN OF NAGS HEAD

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



## Building Sign Permit

**SG2018-0296**

**Owner Name:** NAGS HEAD PARTNERS, LLC      **Owner** 1004 Wake Forest Rd  
**Owner Phone:** 919-872-5702      **Address:** Raleigh NC 27604

**Parcel PIN:** 989318208263      **Zoning:** Imported Default District  
**Address:** 2525 S Croatan Hwy S  
**Subdivision:** SHOPPES AT 10.5      **Lot/Block/Sec:** THE

**Contractor Name/Sign Media Inc**      **Contractor** 2109 Mingee Dr  
**Phone Number:** 757 826 7128      **Address:** Hampton VA 23661

**Description:** Sign being changed due to new awning/canopy being installed. Same style sign (sandblasted wood attached to aluminum backer) non-illuminated 3/22/18 Replace all (4) oval signs with rectangular signs

**Construction Value:** 12000.00

**Construction Type:** Accessory Structure

**Foundation Type:**

### Conditions:

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

Call for final. Electrician needs to pull permit

**Total Fees Paid/Due:** 75.00

**Invoice #:** 2018-00498

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

This permit is valid for 180 days in which time construction must begin and proceed in a normal fashion.

Work must be completed within 18 months.

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

05/04/2018

Building Inspector

Date

Responsible Party

Date

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

# TOWN OF NAGS HEAD

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



## Building Permit

**RE2018-0978**

|   |   |
|---|---|
| <b>Owner Name:</b> Parker, Dalton Murray Jr - Parker, Cynthia F               | <b>Owner</b> 4204 Cobbs Way               |
| <b>Owner Phone:</b> 919 356 3467  | <b>Address:</b> Nags Head NC 27959        |
| <b>Parcel PIN:</b> 989112779351   | <b>Zoning:</b> Imported Default District  |
| <b>Address:</b> 4204 W Cobbs Way W  | <b>Lot/Block/Sec:</b> LOT: 41 BLK: SEC: 2 |
| <b>Subdivision:</b> SOUTHRIDGE SEC 2  |   |
| <b>Contractor Name:</b> Suburban Electrical Services Inc (Mark Casson Melton) | <b>Contractor</b> 1400 Maritime Woods Dr  |
| <b>Contractor Phone:</b> 252 475 1372   | <b>Address:</b> Manteo NC 27954           |
| <b>Description:</b> Install 22 kw generator & platform                        |   |

**Construction Value:** 8000.00

**Foundation Type:**

**Construction Type:** Accessory Structure

**Heated Space:** 0

**Unheated Space:** 0

**# of Bedrooms:** 0

**# of Baths:** 0

**Zoning Permit:** ZN2018-0130

**Septic Permit:** 27761

**CAMA Permit:** N/A

**PW Permit#** N/A

**FEMA Flood Zone:** AE-9

**Lot Elevation:**

**BFE:** 10.2

**Total Fees Paid/Due:** 135.00 /

**Invoice #:** 2018-00504

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

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

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

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

Building Inspector

05/04/2018

Responsible Party

Date

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

**Conditions:**

SEE BACK OF PAGE FOR ADDITIONAL CONDITIONS

# TOWN OF NAGS HEAD

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



## Building Permit

**RE2018-0969**

---

|   |   |
|---|---|
| <b>Owner Name:</b> Gates, Keith J EUX - Gates, Lynn S EUX | <b>Owner</b> 12648 Magna Carta Rd                       |
| <b>Owner Phone:</b> 703 476 4022                          | <b>Address:</b> Herndon VA 20171                        |
| <b>Parcel PIN:</b> 071815647503                           | <b>Zoning:</b> R2 (Medium Density Residential District) |
| <b>Address:</b> 119 E Oriental St E                       | <b>Lot/Block/Sec:</b> LOT: 34 & PT 33 BLK: SEC:         |
| <b>Subdivision:</b> OCEAN COLONY SOUTH                    |   |
| <b>Contractor Name:</b> Emanuelson & Dad, Inc             | <b>Contractor</b> 4717 N Croatan Hwy                    |
| <b>Contractor Phone:</b> 252 261 2212                     | <b>Address:</b> Kitty Hawk NC 27949                     |

---

**Description:** 2 sister piles, replace septic field, repair hvac stand

---

|                                    |   |
|------------------------------------|---|
| <b>Construction Value:</b> 8900.00 | <b>Construction Type:</b> Repair                |
| <b>Foundation Type:</b>            | <b>Heated Space:</b> 0 <b>Unheated Space:</b> 0 |
|                                    | <b># of Bedrooms:</b> 0 <b># of Baths:</b> 0    |

---

|  |                                  |
|--|----------------------------------|
| <b>Zoning Permit:</b> ZN2018-0131                                | <b>FEMA Flood Zone:</b> VE       |
| <b>Septic Permit:</b> 970008892                                  | <b>BFE:</b> 12                   |
| <b>CAMA Permit:</b> Exemption Letter 2018-026 issued by M. Kerr. | <b>Flood Permit:</b> FL2018-0970 |
| <b>PW Permit#</b> N/A  |                                  |

---

### Conditions:

CALL FOR ALL REQUIRED INSPECTIONS;

- Piles to be sistered and bolted per engineering letter prepared by Hal Goodman.

---

**Total Fees Paid/Due:** 135.00 **Invoice #:** 2018-00503

---

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

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

---

Building Inspector 05/04/2018

---

Responsible Party Date

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



# TOWN OF NAGS HEAD

PO Box 99

Nags Head, NC 27959

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



## Building Permit

RE2018-0971

**Owner Name:** TOLOCZKO, LYNN B - MATTHEW  
TOLOCZKO  
**Owner Phone:** 703 623 9191

**Owner** 11147 Rich Meadow Dr  
**Address:** Great Falls VA 22066

**Parcel PIN:** 071815648103  
**Address:** 217 E Altoona South St E  
**Subdivision:** OCEAN COLONY SOUTH

**Zoning:** R2 (Medium Density Residential District)

**Lot/Block/Sec:** LOT: 50 & PT 49 BLK: SEC:

**Contractor Name:** Emanuelson & Dad, Inc  
**Contractor Phone:** 252 261 2212

**Contractor** 4717 N Croatan Hwy  
**Address:** Kitty Hawk NC 27949

**Description:** Repair broken sewer line, 1 set of stairs & handrails, framing dry entryway (girder & joists)

**Construction Value:** 8150.00

**Construction Type:** Repair

**Foundation Type:**

**Heated Space:** 0 **Unheated Space:** 0

**# of Bedrooms:** 0

**# of Baths:** 0

**Zoning Permit:** ZN2018-0129

**FEMA Flood Zone:** VE

**Septic Permit:** N/A

**BFE:** 12

**CAMA Permit:** 18-034

**Flood Permit:** FL2018-0972

**PW Permit#** N/A

### Conditions:

CALL FOR ALL REQUIRED INSPECTIONS;

**Total Fees Paid/Due:** 135.00

**Invoice #:** 2018-00502

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

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

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

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

Building Inspector

05/04/2018

Responsible Party

Date

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

**TOWN OF NAGS HEAD**

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



**Building Permit**

**RE2018-0990**

|   |   |
|---|---|
| <b>Owner Name:</b> Shari Pire                       | <b>Owner</b> 10105 W Flower Gate Ter Apt 18C            |
| <b>Owner Phone:</b> 301 219 8052                    | <b>Address:</b> Potomac MD 20854                        |
| <b>Parcel PIN:</b> 071820719181                     | <b>Zoning:</b> R2 (Medium Density Residential District) |
| <b>Address:</b> 10421 S Old Oregon Inlet Rd S       | <b>Lot/Block/Sec:</b> LOT: BLK: SEC:                    |
| <b>Subdivision:</b> SUBDIVISION-NONE                |   |
| <b>Contractor Name:</b> Sea Thru Construction, Inc. | <b>Contractor PO</b> Box 2471                           |
| <b>Contractor Phone:</b> 252-491-6964               | <b>Address:</b> KITTYHAWK NC 27949                      |

**Description:** Install 16' set of steps to platform, install 2nd set of steps going to the south to the beach

|                                    |   |
|------------------------------------|---|
| <b>Construction Value:</b> 4000.00 | <b>Construction Type:</b> Repair                |
| <b>Foundation Type:</b>            | <b>Heated Space:</b> 0 <b>Unheated Space:</b> 0 |
|                                    | <b># of Bedrooms:</b> 0 <b># of Baths:</b> 0    |

|                                 |                           |
|---------------------------------|---------------------------|
| <b>Zoning Permit:</b> 2018.0134 | <b>FEMA Flood Zone:</b> V |
| <b>Septic Permit:</b> na        | <b>BFE:</b> 11            |
| <b>CAMA Permit:</b>             | <b>Flood Permit:</b> na   |
| <b>PW Permit#</b> na            |                           |

**Conditions:**

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

Address #s at end of walkway. Call for final inspection

|                                    |                              |
|------------------------------------|------------------------------|
| <b>Total Fees Paid/Due:</b> 105.00 | <b>Invoice #:</b> 2018-00499 |
|------------------------------------|------------------------------|

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

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

|                    |            |                   |      |
|--------------------|------------|-------------------|------|
| Building Inspector | 05/04/2018 | Responsible Party | Date |
|--------------------|------------|-------------------|------|

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

# TOWN OF NAGS HEAD

PO Box 99

Nags Head, NC 27959

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



## Building Permit

RE2018-1011

**Owner Name:** Hacker, Jim A - Hacker, Pamela J

**Owner** 505 Meadow View Ln

**Owner Phone:** 804 334 4682

**Address:** Manakin Sabot VA 23103

**Parcel PIN:** 989210459699

**Zoning:** R3 (High Density Residential District)

**Address:** 3310 S Linda Ln S

**Subdivision:** EDWARDS SUBDIV

**Lot/Block/Sec:** LOT: 10 BLK: C SEC:

**Contractor Name:** Pain Construction Company

**Contractor** 407 Raceview Ct

**Contractor Phone:** 252 256 1055

**Address:** Nags Head NC 27959

**Description:** Replace deck boards & railings on upper West & upper East decks using treated lumber

**Construction Value:** 6000.00

**Construction Type:** Repair

**Foundation Type:**

**Heated Space:** 0

**Unheated Space:** 0

**# of Bedrooms:** 0

**# of Baths:** 0

**Zoning Permit:** see file

**FEMA Flood Zone:** AE

**Septic Permit:**

**BFE:** 10

**CAMA Permit:** na

**Flood Permit:** 2018.1012

**PW Permit#** na

### Conditions:

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

Address #s on home if none are present. Review deck repair condition handout. Notching of 4 x 4 posts is prohibited. call for final inspection

**Total Fees Paid/Due:** 135.00

**Invoice #:** 2018-00500

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

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

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

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

Building Inspector

05/04/2018

Responsible Party

Date

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

# TOWN OF NAGS HEAD

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



## Building Permit

**RE2018-1042**

|   |   |
|---|---|
| <b>Owner Name:</b> Feild, David J - Feild, Cathie C | <b>Owner</b> 106 Elsmore Ct                             |
| <b>Owner Phone:</b> 9194144258                      | <b>Address:</b> Raleigh NC 27607                        |
| <b>Parcel PIN:</b> 989205199543                     | <b>Zoning:</b> R2 (Medium Density Residential District) |
| <b>Address:</b> 2515 S Compass Ln S                 | <b>Lot/Block/Sec:</b> LOT: 89 BLK: SEC: 3               |
| <b>Subdivision:</b> NAGS HEAD ACRES SECTION 3       |   |
| <b>Contractor Name:</b> Charles Winston Roberts     | <b>Contractor</b> 310 Eagle Dr                          |
| <b>Contractor Phone:</b> 2524803209                 | <b>Address:</b> Kill Devil Hills NC 27948               |

**Description:** Remove/replace one window with an Andersen DP50; replace section of T1-11 and repair plywood

|                                    |   |
|------------------------------------|---|
| <b>Construction Value:</b> 1500.00 | <b>Construction Type:</b> Repair                |
| <b>Foundation Type:</b>            | <b>Heated Space:</b> 0 <b>Unheated Space:</b> 0 |
|                                    | <b># of Bedrooms:</b> 0 <b># of Baths:</b> 0    |

|   |                           |
|---|---------------------------|
| <b>Zoning Permit:</b> No zoning permit required. Zoning | <b>FEMA Flood Zone:</b> X |
| <b>Septic Permit:</b> <del>NO</del> approval issued.    | <b>BFE:</b>               |
| <b>CAMA Permit:</b> N/A                                 | <b>Flood Permit:</b> N/A  |
| <b>PW Permit#</b> N/A                                   |                           |

**Conditions:**  
CALL FOR ALL REQUIRED INSPECTIONS;

- Call for inspection if rot damaged framing is discovered beyond scope listed on building permit.
- Any trade work, if applicable, will require sign-offs from licensed trade contractors.

**Total Fees Paid/Due:** 85.00      **Invoice #:** 2018-00507

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

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

|                    |            |                   |      |
|--------------------|------------|-------------------|------|
| Building Inspector | 05/07/2018 | Responsible Party | Date |
|--------------------|------------|-------------------|------|

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

# TOWN OF NAGS HEAD

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



## Building Permit

**RE2018-0981**

**Owner Name:** VANDERMYDE, JOHN PHILIP      **Owner** 261 N Dogwood Trl  
**Owner Phone:** 252 202 6603      **Address:** Southern Shores NC 27949

**Parcel PIN:** 989116949668      **Zoning:** Imported Default District  
**Address:** 202 W Dolphin Ct W  
**Subdivision:** OLD NAGS HEAD COVE SEC A      **Lot/Block/Sec:** LOT: 90 BLK: SEC: A

**Contractor Name:** Property Owner      **Contractor**  
**Contractor Phone:**      **Address:** Nags Head NC

**Description:** Staircase & deck repair, removing existing deck boards, stringers & decking, replace with new wood

**Construction Value:** 2000.00      **Construction Type:** Repair  
**Foundation Type:**      **Heated Space:** 0      **Unheated Space:** 0  
**# of Bedrooms:** 0      **# of Baths:** 0

**Zoning Permit:** see file      **FEMA Flood Zone:** AE  
**Septic Permit:** na      **BFE:** 9  
**CAMA Permit:** na      **Flood Permit:** 2018.0982  
**PW Permit#** na

### Conditions:

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

Address #s on home if none are present. 4 x 4 posts shall not be notched. Remove all unsafe conditions. All work shall meet todays code. Call for final inspection.

**Total Fees Paid/Due:** 75.00      **Invoice #:** 2018-00514

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

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

Building Inspector      05/08/2018

Responsible Party      Date

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# TOWN OF NAGS HEAD

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



## Building Permit

RE2018-0984

|  |   |
|--|---|
| <b>Owner Name:</b> JOHNSON, DWIGHT L - JOHNSON,<br>ARVELLAC ETUX | <b>Owner</b> 613 Stanwich Ter             |
| <b>Owner Phone:</b>  | <b>Address:</b> Upper Marlboro MD 20774   |
| <b>Parcel PIN:</b> 080011565810                                  | <b>Zoning:</b> Imported Default District  |
| <b>Address:</b> 6704 S Va Dare Trl S                             | <b>Lot/Block/Sec:</b> LOT: 32 BLK: D SEC: |
| <b>Subdivision:</b> WHALEBONE BEACH EXT AT NH                    |   |
| <b>Contractor Name:</b> Reigle Contracting                       | <b>Contractor P O</b> Box 283             |
| <b>Contractor Phone:</b> 252 455 1705                            | <b>Address:</b> Jarvisburg NC 27947       |

**Description:** Reinforce 3rd floor decking to support new hot tub

**Construction Value:** 2000.00

**Foundation Type:**

**Construction Type:** Remodel

**Heated Space:** 0

**Unheated Space:** 0

**# of Bedrooms:** 0

**# of Baths:** 0

**Zoning Permit:** see file

**Septic Permit:**

**CAMA Permit:** na

**PW Permit#** na

**FEMA Flood Zone:** AE

**BFE:** 9

**Flood Permit:** 2018.0985

### Conditions:

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

Address #s on home if none are present. Review deck condition handout we have provided. 4 x 4 post notching is prohibited. Electrician shall pull permit for hot tub. All electrical work shall comply with Article 680 of the 2014 NEC

**Total Fees Paid/Due:** 75.00

**Invoice #:** 2018-00518

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

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

Building Inspector 05/09/2018

Responsible Party Date

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# TOWN OF NAGS HEAD

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



## Building Permit

RE2018-1026

|  |   |
|--|---|
| <b>Owner Name:</b> Thomas P Landers          | <b>Owner</b> 6261 Habersham Dr                          |
| <b>Owner Phone:</b>                          | <b>Address:</b> Henrico VA 23231                        |
| <b>Parcel PIN:</b> 989112877132              | <b>Zoning:</b> R2 (Medium Density Residential District) |
| <b>Address:</b> 312 W Barracuda Dr W         | <b>Lot/Block/Sec:</b> LOT: 50 BLK: SEC: E               |
| <b>Subdivision:</b> OLD NAGS HEAD COVE SEC E |   |
| <b>Contractor Name:</b> Reigle Contracting   | <b>Contractor P O</b> Box 283                           |
| <b>Contractor Phone:</b> 252 455 1705        | <b>Address:</b> Jarvisburg NC 27947                     |

**Description:** Install siding over existing wood 5/14/18 Replacing 2 sliding doors

|                                     |   |
|-------------------------------------|---|
| <b>Construction Value:</b> 19700.00 | <b>Construction Type:</b> Repair                |
| <b>Foundation Type:</b>             | <b>Heated Space:</b> 0 <b>Unheated Space:</b> 0 |
|                                     | <b># of Bedrooms:</b> 0 <b># of Baths:</b> 0    |

|                           |                           |
|---------------------------|---------------------------|
| <b>Zoning Permit:</b> N/A | <b>FEMA Flood Zone:</b> X |
| <b>Septic Permit:</b> N/A | <b>BFE:</b>               |
| <b>CAMA Permit:</b> N/A   | <b>Flood Permit:</b>      |
| <b>PW Permit#:</b> N/A    |                           |

### Conditions:

-Call for inspection if rot found.

**Total Fees Paid/Due:** 165.00 **Invoice #:** 2018-00519

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

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

|                    |            |                   |      |
|--------------------|------------|-------------------|------|
| Building Inspector | 05/09/2018 | Responsible Party | Date |
|--------------------|------------|-------------------|------|

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# TOWN OF NAGS HEAD

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



## Building Permit

**RE2018-1027**

**Owner Name:** BERGO, ALAN R - BERGO, JEAN J ETUX **Owner** 13576 Castlebridge Ln  
**Owner Phone:** **Address:** WOODBRIDGE VA 22193

**Parcel PIN:** 989206478907 **Zoning:** Imported Default District  
**Address:** 303 E Bonnett St E  
**Subdivision:** NAGS HEAD SHORES AMENDED SEC 1 **Lot/Block/Sec:** LOT: 14 BLK: 7 SEC: 1

**Contractor Name:** JB Construction **Contractor** 432 Colington Dr  
**Contractor Phone:** 252 455 1000 **Address:** Kill Devil Hills NC 27948

**Description:** Replace existing decks in existing footprint

**Construction Value:** 16000.00

**Construction Type:** Repair

**Foundation Type:**

**Heated Space:** 0 **Unheated Space:** 0

**# of Bedrooms:** 0 **# of Baths:** 0

**Zoning Permit:** Zoning permit not required. Zoning

**FEMA Flood Zone:** AE

**Septic Permit:** Approval issued.

**BFE:** 9

**CAMA Permit:** N/A

**Flood Permit:** FL2018-1028

**PW Permit#** N/A

### Conditions:

CALL FOR ALL REQUIRED INSPECTIONS;

- Provide engineering evaluation of structural conditions that exceed prescriptive requirements in NC Residential Building Code.

**Total Fees Paid/Due:** 165.00

**Invoice #:** 2018-00525

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

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

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

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

Building Inspector

05/09/2018

Responsible Party

Date

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# TOWN OF NAGS HEAD

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



## Building Permit

**RE2018-1033**

|   |   |
|---|---|
| <b>Owner Name:</b> Murdock, Joseph C, Jr. - Murdock, Nancy<br>O | <b>Owner</b> 217 Founders Point Trl       |
| <b>Owner Phone:</b> 757 715 7288                                | <b>Address:</b> Carrollton VA 23314       |
| <b>Parcel PIN:</b> 080006483699                                 | <b>Zoning:</b> Imported Default District  |
| <b>Address:</b> 6114 E Baymeadow Dr E                           | <b>Lot/Block/Sec:</b> LOT: 49 BLK: SEC:   |
| <b>Subdivision:</b> SEASIDE SOUTH SEC 2                         |   |
| <b>Contractor Name:</b> Coastal Roofing and Siding, Inc.        | <b>Contractor</b> 2401 Colington Rd       |
| <b>Contractor Phone:</b> 252 480 0515                           | <b>Address:</b> KILL DEVIL HILLS NC 27948 |

**Description:** Cedar Shake roof replacement

**Construction Value:** 15170.00  
**Foundation Type:**

**Construction Type:** Repair  
**Heated Space:** 0 **Unheated Space:** 0  
**# of Bedrooms:** 0 **# of Baths:** 0

**Zoning Permit:** N/A  
**Septic Permit:** N/A  
**CAMA Permit:** N/A  
**PW Permit#** N/A

**FEMA Flood Zone:** ae  
**BFE:** 9  
**Flood Permit:** FL2018-1034

**Conditions:**

**Total Fees Paid/Due:** 175.00 **Invoice #:** 2018-00524

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

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

Building Inspector 05/09/2018

Responsible Party Date

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# TOWN OF NAGS HEAD

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



## Building Permit

**RE2018-1041**

**Owner Name:** DALEN, BRENDA J - CECE, JOHN M JR  
**Owner:** 5015 Links #63 Dr  
**Owner Phone:** ETVR  
**Address:** NAGS HEAD NC 27959  
**Parcel PIN:** 080113025663  
**Zoning:** SPD-C SF-3 (Village Detached Residential Single Family)  
**Address:** 5015 S Links Dr S  
**Subdivision:** WEDGES  
**Lot/Block/Sec:** THE

**Contractor Name:** Property Owner  
**Contractor:**  
**Contractor Phone:**  
**Address:** Nags Head NC

**Description:** Enclose a 510 sf area (unheated) to create a one car garage

**Construction Value:** 7600.00  
**Construction Type:** Remodel  
**Heated Space:** 0  
**Unheated Space:** 0  
**Foundation Type:**  
**# of Bedrooms:** 0  
**# of Baths:** 0

**Zoning Permit:** 2018.0140  
**Septic Permit:** village approved  
**CAMA Permit:** na  
**PW Permit#:** na  
**FEMA Flood Zone:** X  
**BFE:**  
**Flood Permit:**

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

Address #s on home if none are present. Call for framing and sheathing inspection. Minimum electrical to code in garage. 5/8 type X sheetrock on ceiling in garage. Garage door shall meet the minimum DP rating for the 130 MPH wind rating. Smokes and Co2 detectors to code throughout home. Call us with any Questions. 252 441 7016

**Total Fees Paid/Due:** 135.00  
**Invoice #:** 2018-00531

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

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

Building Inspector 05/10/2018 Responsible Party Date

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

# TOWN OF NAGS HEAD

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



## Building Permit

RE2018-1031

Owner Name: Wood, David E - Wood, Joann M

Owner 40751 S 40 Dr

Owner Phone:

Address: Leonardtown MD 20650

Parcel PIN: 080113144858

Zoning: SPD-C SF-2 (Village Detached Residential Single Family)

Address: 4802 E Engagement Hill Loop E

Subdivision: SEVEN SISTERS

Lot/Block/Sec: LOT: 2 BLK: SEC:

Contractor Name: Coastal Roofing and Siding, Inc.

Contractor 2401 Colington Rd

Contractor Phone: 252 480 0515

Address: KILL DEVIL HILLS NC 27948

Description: Cedar shake roof replacement

Construction Value: 26125.00

Construction Type: Repair

Foundation Type:

Heated Space: 0

Unheated Space: 0

# of Bedrooms: 0

# of Baths: 0

Zoning Permit: N/A

FEMA Flood Zone: ae

Septic Permit: N/A

BFE: 11

CAMA Permit: N/A

Flood Permit: FL2018-1032

PW Permit# N/A

Conditions:

Total Fees Paid/Due: 205.00

Invoice #: 2018-00530

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

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

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

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

Building Inspector

05/10/2018

Responsible Party

Date

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# TOWN OF NAGS HEAD

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



## Building Permit

**RE2018-1075**

|  |   |
|--|---|
| <b>Owner Name:</b> DUNCAN, FRED - DUNCAN, DONNA<br>ETUX  | <b>Owner</b> P O Box 1098 Ln                    |
| <b>Owner Phone:</b> 704-880-7347   | <b>Address:</b> West Jefferson NC 28694         |
| <b>Parcel PIN:</b> 080118205765  | <b>Zoning:</b> Imported Default District        |
| <b>Address:</b> 5716 Ridge Ln  | <b>Lot/Block/Sec:</b> THE                       |
| <b>Subdivision:</b> RIDGES SEC 2   |   |
| <b>Contractor Name:</b> Affordable Bill's  | <b>Contractor</b> 300 Albemarle Dr              |
| <b>Contractor Phone:</b> 252 489 9555  | <b>Address:</b> NAGS HEAD NC 27959              |
| <b>Description:</b> Remove siding and any rotted sheathing, replace sheathing with #30 felt paper, replace siding, replace deck board & stair treads on N side deck, replace stair treads on S side deck |   |
| <b>Construction Value:</b> 15000.00  | <b>Construction Type:</b> Repair                |
| <b>Foundation Type:</b>  | <b>Heated Space:</b> 0 <b>Unheated Space:</b> 0 |
|  | <b># of Bedrooms:</b> 0 <b># of Baths:</b> 0    |
| <b>Zoning Permit:</b> see file   | <b>FEMA Flood Zone:</b> AE                      |
| <b>Septic Permit:</b> na   | <b>BFE:</b> 9                                   |
| <b>CAMA Permit:</b> na   | <b>Flood Permit:</b> 2018.1077                  |
| <b>PW Permit#</b> naq  |   |

### Conditions:

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

address #s on home if none are present. Call for sheathing repair inspections. Call for final inspection

**Total Fees Paid/Due:** 165.00 **Invoice #:** 2018-00536

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

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

Building Inspector 05/11/2018

Responsible Party Date

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

# TOWN OF NAGS HEAD

PO Box 99

Nags Head, NC 27959

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



## Building Permit

CA2018-1013

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**Owner Name:** LOGANS' ICE CREAM COTTAGE, LLC     **Owner:** 116 Sunrise Ln  
**Owner Phone:**     **Address:** KILL DEVIL HILLS     NC     27948  
**Parcel PIN:** 989206384481     **Zoning:** C2 (General Commercial District)  
**Address:** 2805 S Croatan Hwy  
**Subdivision:** VISTA COLONY SECTION 2     **Lot/Block/Sec:** LOT: 1R BLK: SEC:

---

**Contractor Name:** Property Owner     **Contractor:**  
**Contractor Phone:**     **Address:** Nags Head     NC

**Description:** Construct 3' raised platform 11'x14' abutting SE corner of existing building for purpose of supporting walk-in freezer (8'x10'). Access to proposed platform via new external door, no public access, lattice screening on 3 sides, platform set on 6x6 pilings (9)  
**Construction Value:** 9800.00     **Construction Type:** Accessory Structure  
**Foundation Type:**     **Heated Space:** 0     **Unheated Space:** 0  
   **# of Bedrooms:** 0     **# of Baths:** 0

---

**Zoning Permit:** ZN2018-0143     **FEMA Flood Zone:** X  
**Septic Permit:** 27733     **Lot Elevation:**  
**CAMA Permit:** N/A     **BFE:**  
**PW Permit#:** N/A

---

**Total Fees Paid/Due:** 135.00     /     **Invoice #:** 2018-00540

- All work shall conform to all applicable North Carolina State Building codes and Ordinances of the Town of Nags Head and shall be the responsibility of the undersigned applicant.
  - All work shall conform to the plans and specifications provided with the application.
  - Any damage to the multi-use path or adjoining right-of-way shall be immediately repaired by the owner and/or applicant.
- In accordance with GS160A-418, a permit expires 6 months after the date of issuance if the work authorized by the permit has not been commenced. If, after commencement, the work is discontinued for a period of 12 months (no inspections have taken place) the permit immediately expires. No work authorized by a permit that has expired may be performed until a new permit has been issued.

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Building Inspector    05/14/2018    Responsible Party    Date

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

Conditions:

SEE NEXT PAGE FOR ADDITIONAL CONDITIONS

# TOWN OF NAGS HEAD

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



## Building Permit

RE2018-0452

|  |   |
|--|---|
| <b>Owner Name:</b> CREMIA, GREGORY W         | <b>Owner</b> P O Box 972                  |
| <b>Owner Phone:</b>                          | <b>Address:</b> NAGS HEAD NC 27959        |
| <b>Parcel PIN:</b> 989116933983              | <b>Zoning:</b> Imported Default District  |
| <b>Address:</b> 4639 S Roanoke Way S         |   |
| <b>Subdivision:</b> OLD NAGS HEAD COVE SEC D | <b>Lot/Block/Sec:</b> LOT: 39 BLK: SEC: D |
| <b>Contractor Name:</b> Evans Homes, LLC     | <b>Contractor</b> 5121 Winsor Pl          |
| <b>Contractor Phone:</b> 252 255 5552        | <b>Address:</b> KITTYHAWK NC 27949        |

**Description:** New deck boards & railings

|                                    |   |
|------------------------------------|---|
| <b>Construction Value:</b> 7864.00 | <b>Construction Type:</b> Repair                |
| <b>Foundation Type:</b>            | <b>Heated Space:</b> 0 <b>Unheated Space:</b> 0 |
|                                    | <b># of Bedrooms:</b> 0 <b># of Baths:</b> 0    |

|                                |                                |
|--------------------------------|--------------------------------|
| <b>Zoning Permit:</b> see file | <b>FEMA Flood Zone:</b> AE     |
| <b>Septic Permit:</b> na       | <b>BFE:</b> 9                  |
| <b>CAMA Permit:</b> na         | <b>Flood Permit:</b> 2018.0453 |
| <b>PW Permit#</b> na           |                                |

### Conditions:

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

Address #s on home if none are present. Call for framing inspection. Call for final inspection

**Total Fees Paid/Due:** 135.00 **Invoice #:** 2018-00537

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

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

Building Inspector 05/14/2018

Responsible Party Date

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

# TOWN OF NAGS HEAD

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



## Building Permit

**RE2018-1066**

|  |  |
|--|--|
| <b>Owner Name:</b> Nolin, Dianne Williams TTEE TRE | <b>Owner</b> 2784 Middleton Farm Ct      |
| <b>Owner Phone:</b> 703 622 1373                   | <b>Address:</b> Oak Hill VA 20171        |
| <b>Parcel PIN:</b> 080006298752                    | <b>Zoning:</b> Imported Default District |
| <b>Address:</b> 110 W Marsh Cove Dr W              | <b>Lot/Block/Sec:</b> LOT: 24 BLK: SEC:  |
| <b>Subdivision:</b> MARSHLINKS PARCELD             |  |
| <b>Contractor Name:</b> Emanuelson & Dad, Inc      | <b>Contractor</b> 4717 N Croatan Hwy     |
| <b>Contractor Phone:</b> 252 261 2212              | <b>Address:</b> Kitty Hawk NC 27949      |

**Description:** Install 1 new 8x8x16 pile to replace rotten piling

**Construction Value:** 3700.00

**Construction Type:** Repair

**Foundation Type:**

**Heated Space:** 0

**Unheated Space:** 0

**# of Bedrooms:** 0

**# of Baths:** 0

**Zoning Permit:** see file

**FEMA Flood Zone:** AE

**Septic Permit:** na

**BFE:** 9

**CAMA Permit:** na

**Flood Permit:** 2018.0167

**PW Permit#:** na

### Conditions:

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

Address #s on home if none are present. Call fgor piling inspection. Call fore final inspection

**Total Fees Paid/Due:** 105.00

**Invoice #:** 2018-00539

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

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

Building Inspector

05/14/2018

Responsible Party

Date

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

# TOWN OF NAGS HEAD

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



## Building Permit

**RE2018-1053**

|   |   |
|---|---|
| <b>Owner Name:</b> Benninger, James Micheal - Benninger,<br>Barbara R | <b>Owner</b> 133 Benninger Rd                           |
| <b>Owner Phone:</b>   | <b>Address:</b> Smithfield VA 15478                     |
| <b>Parcel PIN:</b> 071820801822                                       | <b>Zoning:</b> R2 (Medium Density Residential District) |
| <b>Address:</b> 10435 S Old Oregon Inlet Rd S                         | <b>Lot/Block/Sec:</b> LOT: 2 BLK: SEC:                  |
| <b>Subdivision:</b> DR. JOHN CRAWFORD S/D                             |   |
| <b>Contractor Name:</b> Pain Construction Company                     | <b>Contractor</b> 407 Raceview Ct                       |
| <b>Contractor Phone:</b> 252 256 1055                                 | <b>Address:</b> Nags Head NC 27959                      |

**Description:** Construct steps to beach from existing walkway

**Construction Value:** 2000.00

**Construction Type:** Repair

**Foundation Type:**

**Heated Space:** 0

**Unheated Space:** 0

**# of Bedrooms:** 0

**# of Baths:** 0

**Zoning Permit:** 2018.0145

**FEMA Flood Zone:** AE

**Septic Permit:** na

**BFE:**

**CAMA Permit:** 18-28

**Flood Permit:**

**PW Permit#** na

### Conditions:

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

Address #s to code at residence if none are present. Street, house and at beach walkway. Call for final inspection

**Total Fees Paid/Due:** 75.00

**Invoice #:** 2018-00554

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

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

Building Inspector

05/17/2018

Responsible Party

Date

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



# TOWN OF NAGS HEAD

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



## Building Permit

RE2018-1120

**Owner Name:** Warren, Denise M - Snyder, Jennifer L      **Owner**      158 Killdeer Ln  
**Owner Phone:** 724 238 5731      **Address:** Ligonier      PA      15658  
**Parcel PIN:** 071820726006      **Zoning:** R2 (Medium Density Residential District)  
**Address:** 10327 S Old Oregon Inlet Rd S  
**Subdivision:** SUBDIVISION-NONE      **Lot/Block/Sec:** LOT: BLK: SEC:

**Contractor Name:** Property Owner      **Contractor**  
**Contractor Phone:**      **Address:** Nags Head      NC

**Description:** Remove broken concrete, old appliances, fix flood damage to storage area where washer/dryer are kept, fix walls, may have to replace water tank

**Construction Value:** 4500.00      **Construction Type:** Repair  
**Foundation Type:**      **Heated Space:** 0      **Unheated Space:** 0  
   **# of Bedrooms:** 0      **# of Baths:** 0

**Zoning Permit:**      **FEMA Flood Zone:**  
**Septic Permit:**      **BFE:**  
**CAMA Permit:**      **Flood Permit:**  
**PW Permit#**

### Conditions:

CALL FOR ALL REQUIRED INSPECTIONS; All new work to meet current code; Dwelling is not compliant with floodplain regulations and all work must be within 50% of building value as documented in the substantial improvement forms; FINAL INSPECTION REQUIRED PRIOR TO ISSUANCE OF CERTIFICATE OF COMPLIANCE;

**Total Fees Paid/Due:** 105.00      **Invoice #:** 2018-00553

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

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

Building Inspector      05/17/2018

Responsible Party      Date

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

# TOWN OF NAGS HEAD

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



## Building Permit

**RE2018-1149**

|  |   |
|--|---|
| <b>Owner Name:</b> Duncan, Gary S - Duncan, Tricia E | <b>Owner</b> 5109 Klinge St NW                  |
| <b>Owner Phone:</b> 202 288 5498                     | <b>Address:</b> Washington DC 20016             |
| <b>Parcel PIN:</b> 989211566638                      | <b>Zoning:</b> C2 (General Commercial District) |
| <b>Address:</b> 3212 S Va Dare Trl S                 |   |
| <b>Subdivision:</b> NAGS HEAD SHORES AMENDED SEC 3   | <b>Lot/Block/Sec:</b> LOT: 7 BLK: 1 SEC: 3      |
| <b>Contractor Name:</b> Four Seasons Pools           | <b>Contractor P O</b> Box 25                    |
| <b>Contractor Phone:</b> 252 207 6986                | <b>Address:</b> Point Harbor NC 27964           |

**Description:** Install pool heat pump on stand

|                                    |   |
|------------------------------------|---|
| <b>Construction Value:</b> 2900.00 | <b>Construction Type:</b> Accessory Structure   |
| <b>Foundation Type:</b>            | <b>Heated Space:</b> 0 <b>Unheated Space:</b> 0 |
|                                    | <b># of Bedrooms:</b> 0 <b># of Baths:</b> 0    |
| <b>Zoning Permit:</b> 2018.0148    | <b>FEMA Flood Zone:</b> AE                      |
| <b>Septic Permit:</b> na           | <b>BFE:</b> 10                                  |
| <b>CAMA Permit:</b> na             | <b>Flood Permit:</b> 2018.1150                  |
| <b>PW Permit#</b> na               |   |

### Conditions:

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

Address #s on home if none are present. Electrical and mechanical permits are required to install heat pump. Equipment shall be elevated at or above the regulatory flood elevation of 11 feet. Please call to discuss this ( 252 449 2005 ). All insulated conductors to the heat pump. GFCI protect heat pump circuit. Call for final inspection.

**Total Fees Paid/Due:** 105.00      **Invoice #:** 2018-00567

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

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

Building Inspector      05/18/2018

Responsible Party      Date

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

# TOWN OF NAGS HEAD

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



## Building Permit

**RE2018-1035**

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|   |   |
|---|---|
| <b>Owner Name:</b> Rowland, Shannon O Ttee - Taylor, Jeffrey<br>R Tre | <b>Owner</b> PO Box 2202                  |
| <b>Owner Phone:</b>   | <b>Address:</b> Leonardtown MD 20650      |
| <b>Parcel PIN:</b> 080113145922                                       | <b>Zoning:</b> Imported Default District  |
| <b>Address:</b> 4800 E Engagement Hill Loop E                         | <b>Lot/Block/Sec:</b> LOT: 1 BLK: SEC:    |
| <b>Subdivision:</b> SEVEN SISTERS                                     |   |
| <b>Contractor Name:</b> Coastal Roofing and Siding, Inc.              | <b>Contractor</b> 2401 Colington Rd       |
| <b>Contractor Phone:</b> 252 480 0515                                 | <b>Address:</b> KILL DEVIL HILLS NC 27948 |

---

**Description:** Cedar shake roof replacement

**Construction Value:** 25870.00

**Construction Type:** Repair

**Foundation Type:**

**Heated Space:** 0

**Unheated Space:** 0

**# of Bedrooms:** 0

**# of Baths:** 0

**Zoning Permit:** N/A

**FEMA Flood Zone:** AE

**Septic Permit:** N/A

**BFE:** 11

**CAMA Permit:** N/A

**Flood Permit:** FL2018-1036

**PW Permit#** N/A

**Conditions:**

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**Total Fees Paid/Due:** 205.00

**Invoice #:** 2018-00566

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

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

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Building Inspector 05/18/2018

Responsible Party Date

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

**TOWN OF NAGS HEAD**

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



**Building Permit**

**RE2018-1113**

**Owner Name:** MCCANN, ANDREW D - LOVIE W  
MCCANN ETUX  
**Owner Phone:** \_\_\_\_\_  
**Owner:** P O Box 7  
**Address:** NAGS HEAD NC 27959

**Parcel PIN:** 989205284289  
**Address:** 215 W Albemarle Dr W  
**Subdivision:** VISTA COLONY WEST  
**Zoning:** Imported Default District  
**Lot/Block/Sec:** LOT: 7 BLK: E SEC:

**Contractor Name:** W.H. Longworth Construction  
**Contractor Phone:** 252 441 7186  
**Contractor PO Box 774**  
**Address:** NAGS HEAD NC 27959

**Description:** Replace existing stairway & railings & repair other railings where needed

**Construction Value:** 1900.00  
**Foundation Type:** \_\_\_\_\_  
**Construction Type:** Repair  
**Heated Space:** 0  
**# of Bedrooms:** 0  
**Unheated Space:** 0  
**# of Baths:** 0

**Zoning Permit:** see file  
**Septic Permit:** na  
**CAMA Permit:** na  
**PW Permit#:** na  
**FEMA Flood Zone:** x  
**BFE:** \_\_\_\_\_  
**Flood Permit:** \_\_\_\_\_

**Conditions:**

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

Address #s on home if none are present. Remove all unsafe conditions. Call for final inspections

**Total Fees Paid/Due:** 75.00                      **Invoice #:** 2018-00563

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

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

Building Inspector                      05/18/2018

Responsible Party                      Date

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

# TOWN OF NAGS HEAD

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



## Building Permit

**RE2018-1151**

|  |   |
|--|---|
| <b>Owner Name:</b> BDJMLLC             | <b>Owner</b> 3757 River Oak Cir                       |
| <b>Owner Phone:</b> 757 620 1483       | <b>Address:</b> Virginia Beach VA 23456               |
| <b>Parcel PIN:</b> 989215643697        | <b>Zoning:</b> R3 (High Density Residential District) |
| <b>Address:</b> 3513 S Memorial Ave S  | <b>Lot/Block/Sec:</b> LOT: 385 BLK: SEC:              |
| <b>Subdivision:</b> GEOT STRONACH      |   |
| <b>Contractor Name:</b> Property Owner | <b>Contractor</b>                                     |
| <b>Contractor Phone:</b>               | <b>Address:</b> Nags Head NC                          |

**Description:** Resurface decking & install new rails for three decks & 2 stairs

|                                     |   |
|-------------------------------------|---|
| <b>Construction Value:</b> 20000.00 | <b>Construction Type:</b> Repair                |
| <b>Foundation Type:</b>             | <b>Heated Space:</b> 0 <b>Unheated Space:</b> 0 |
|                                     | <b># of Bedrooms:</b> 0 <b># of Baths:</b> 0    |

|                                |                                |
|--------------------------------|--------------------------------|
| <b>Zoning Permit:</b> see file | <b>FEMA Flood Zone:</b> AE     |
| <b>Septic Permit:</b> na       | <b>BFE:</b> 10                 |
| <b>CAMA Permit:</b> na         | <b>Flood Permit:</b> 2018.1152 |
| <b>PW Permit#</b> na           |                                |

### Conditions:

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

Address #s on home if none are present. Please review deck permit condition handout. If using vyny or composite materials call to discuss how to go about this. Remove unsafe conditions. Call for final inspection.

**Total Fees Paid/Due:** 165.00 **Invoice #:** 2018-00565

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

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

Building Inspector 05/18/2018

Responsible Party Date

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# TOWN OF NAGS HEAD

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



## Building Permit

RE2018-0611

|  |   |
|--|---|
| <b>Owner Name:</b> Nina K Compton                        | <b>Owner</b> 328 W Sandpiper Ter                        |
| <b>Owner Phone:</b>                                      | <b>Address:</b> Nags Head NC 27959                      |
| <b>Parcel PIN:</b> 080113031703                          | <b>Zoning:</b> R2 (Medium Density Residential District) |
| <b>Address:</b> 328 W Sandpiper Ter W                    |   |
| <b>Subdivision:</b> OLD NAGS HEAD COVE SEC B             | <b>Lot/Block/Sec:</b> LOT: 67 BLK: SEC: B               |
| <b>Contractor Name:</b> Premier Coastal Contracting, LLC | <b>Contractor</b> PO Box 2359                           |
| <b>Contractor Phone:</b> 252 305 8067                    | <b>Address:</b> Manteo NC 27954                         |

**Description:** Expand existing ground floor enclosure by 10.5' x 13' (137 SF Heated) within existing footprint to add bedroom & bathroom 5/9 Unable to add bedroom, amend permit to change from bedroom to bonus room

|                                     |   |
|-------------------------------------|---|
| <b>Construction Value:</b> 25000.00 | <b>Construction Type:</b> Addition              |
| <b>Foundation Type:</b>             | <b>Heated Space:</b> 0 <b>Unheated Space:</b> 0 |
|                                     | <b># of Bedrooms:</b> 0 <b># of Baths:</b> 0    |

|                                |                           |
|--------------------------------|---------------------------|
| <b>Zoning Permit:</b> 20180090 | <b>FEMA Flood Zone:</b> X |
| <b>Septic Permit:</b> 27197    | <b>BFE:</b>               |
| <b>CAMA Permit:</b> na         | <b>Flood Permit:</b> na   |
| <b>PW Permit#</b> na           |                           |

### Conditions:

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

Smokes and Co2 detectors to code throughout home and addition. Address #s on home if none are present. Provide vapor protection in new and existing slab. All trade shall pull permits prior to starting any work. Provide proper Egress out of new space. Shall meet all requirements of the NC 2012 Residential code.

**Total Fees Paid/Due:** 205.00 **Invoice #:** 2018-00572

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

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

Building Inspector 05/21/2018 Responsible Party Date

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

# TOWN OF NAGS HEAD

PO Box 99

Nags Head, NC 27959

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



## Building Permit

RE2018-1057

Owner Name: Bakus, Kari A TTEE TRE

Owner 8604 E Tides Dr

Owner Phone: 646 345 7722

Address: Nags Head NC 27959

Parcel PIN: 071909065822

Zoning: R2 (Medium Density Residential District)

Address: 8604 E Tide Dr E

Subdivision: TIDESTIME

Lot/Block/Sec: LOT: 12 BLK: SEC:

Contractor Name: Surfside Construction

Contractor 115 Saint Clair Rd

Contractor Phone: 252 548 9253

Address: Kill Devil Hills NC 27948

Description: Enclose carport (East Side) for garage

Construction Value: 10950.00

Construction Type: Remodel

Foundation Type:

Heated Space: 0 Unheated Space: 0

# of Bedrooms: 0 # of Baths: 0

Zoning Permit: 2018.0152

FEMA Flood Zone: AE

Septic Permit: 27773

BFE: 10

CAMA Permit: na

Flood Permit: 2018.1058

PW Permit#: na

### Conditions:

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

Address #s on home if none are present. see building permit for additional permit conditions

Total Fees Paid/Due: 165.00

Invoice #: 2018-00577

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

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

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

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

Building Inspector 05/22/2018

Responsible Party Date

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

# TOWN OF NAGS HEAD

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



## Building Permit

RE2018-1047

|   |  |
|---|--|
| <b>Owner Name:</b> PWH PROPERTIES, LLC            | <b>Owner</b> PO Box 586                      |
| <b>Owner Phone:</b> 804 338 1797                  | <b>Address:</b> EMPORIA VA 23847             |
| <b>Parcel PIN:</b> 080011652309                   | <b>Zoning:</b> Imported Default District     |
| <b>Address:</b> 6930 S Va Dare Trl S              |  |
| <b>Subdivision:</b> WHALEBONE BEACHES - COMP. MAP | <b>Lot/Block/Sec:</b> LOT: PAR A BLK: 3 SEC: |
| <b>Contractor Name:</b> JB Construction           | <b>Contractor</b> 432 Colington Dr           |
| <b>Contractor Phone:</b> 252 455 1000             | <b>Address:</b> Kill Devil Hills NC 27948    |

**Description:** Replace windows and siding; repair rot as necessary 5/25/18 More repairs than originally planned

|                                     |   |
|-------------------------------------|---|
| <b>Construction Value:</b> 15000.00 | <b>Construction Type:</b> Repair                |
| <b>Foundation Type:</b>             | <b>Heated Space:</b> 0 <b>Unheated Space:</b> 0 |
|                                     | <b># of Bedrooms:</b> 0 <b># of Baths:</b> 0    |

|  |                                  |
|--|----------------------------------|
| <b>Zoning Permit:</b> REPAIR ONLY - ZONING | <b>FEMA Flood Zone:</b> AE       |
| <b>Septic Permit:</b> PERMIT NOT REQUIRED  | <b>BFE:</b> 9                    |
| <b>CAMA Permit:</b> N/A                    | <b>Flood Permit:</b> FL2018-1048 |
| <b>PW Permit#:</b> N/A                     |                                  |

### Conditions:

CALL FOR ALL REQUIRED INSPECTIONS;

**Total Fees Paid/Due:** 165.00 **Invoice #:** 2018-00613

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

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

|                    |            |                   |      |
|--------------------|------------|-------------------|------|
| Building Inspector | 05/25/2018 | Responsible Party | Date |
|--------------------|------------|-------------------|------|

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



# TOWN OF NAGS HEAD

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



## Building Permit

**RE2018-1169**

|  |  |
|--|--|
| <b>Owner Name:</b> Lombardo, Carol E TTEE TRE    | <b>Owner</b> 9401 Damascus Rd  |
| <b>Owner Phone:</b> 301 908 6040                 | <b>Address:</b> Damascus MD 20872                                      |
| <b>Parcel PIN:</b> 080006485738                  | <b>Zoning:</b> SPD-C SF-3 (Village Detached Residential Single Family) |
| <b>Address:</b> 101 E Sun Dancer Ct E            | <b>Lot/Block/Sec:</b> LOT: 43 BLK: SEC:                                |
| <b>Subdivision:</b> SEASIDE SOUTH                |  |
| <b>Contractor Name:</b> Frasca Custom Homes, LLC | <b>Contractor</b> 2401 Collington Rd KK                                |
| <b>Contractor Phone:</b> 252 480 0515            | <b>Address:</b> Kill Devil Hills NC 27948                              |

**Description:** Replace cedar shake roof

**Construction Value:** 31000.00

**Construction Type:** Repair

**Foundation Type:**

**Heated Space:** 0

**Unheated Space:** 0

**# of Bedrooms:** 0

**# of Baths:** 0

**Zoning Permit:** N/A

**FEMA Flood Zone:** AE9

**Septic Permit:** N/A

**BFE:** 10

**CAMA Permit:**

**Flood Permit:** FL2018-1170

**PW Permit#** N/A

### Conditions:

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

**Total Fees Paid/Due:** 235.00

**Invoice #:** 2018-00614

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

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

Building Inspector

05/25/2018

Responsible Party

Date

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

# TOWN OF NAGS HEAD

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



## Building Permit

**RE2018-1137**

**Owner Name:** Clayton, Howard B - Clayton, Peggy D      **Owner**      P O Box 388  
**Owner Phone:** 804 898 2341      **Address:** Sutherland      VA      23885  
**Parcel PIN:** 080113041490      **Zoning:** R2 (Medium Density Residential District)  
**Address:** 200 W Albacore Dr W  
**Subdivision:** OLD NAGS HEAD COVE SEC A      **Lot/Block/Sec:** LOT: 102 BLK: SEC: A

**Contractor Name:** Property Owner      **Contractor**  
**Contractor Phone:**      **Address:** Nags Head      NC

**Description:** 8x8 platform & 12c9 cantilevered boat lift & 6" walkway (44.9 ft)

**Construction Value:** 8000.00

**Foundation Type:**

**Construction Type:** Accessory Structure

**Heated Space:** 0      **Unheated Space:** 0

**# of Bedrooms:** 0      **# of Baths:** 0

**Zoning Permit:** 2018.1137

**Septic Permit:** na

**CAMA Permit:** 71493

**PW Permit#** na

**FEMA Flood Zone:** AE

**BFE:** 9

**Flood Permit:** 2018.1138

### Conditions:

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

Call for material check. Call for floor framing at bulkhead. Call for material check. Lets talk about electrical requirements prior to starting work. Call for final inspections.

**Total Fees Paid/Due:** 135.00

**Invoice #:** 2018-00626

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

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

Building Inspector      05/29/2018

Responsible Party      Date

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

# TOWN OF NAGS HEAD

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



## Building Permit

RE2018-1049

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|  |   |
|--|---|
| <b>Owner Name:</b> Fox, Emily T EVR - Raccah, Fabien EVR | <b>Owner</b> 4331 S Hesperides Dr                       |
| <b>Owner Phone:</b> 303 505 7277                         | <b>Address:</b> Nags Head NC 27959                      |
| <b>Parcel PIN:</b> 989112866193                          | <b>Zoning:</b> R2 (Medium Density Residential District) |
| <b>Address:</b> 4331 S Hesperides Dr S                   | <b>Lot/Block/Sec:</b> LOT: 62 BLK: SEC: E               |
| <b>Subdivision:</b> OLD NAGS HEAD COVE SEC E             |   |
| <b>Contractor Name:</b> Emanuelson & Dad, Inc            | <b>Contractor</b> 4717 N Croatan Hwy                    |
| <b>Contractor Phone:</b> 252 261 2212                    | <b>Address:</b> Kitty Hawk NC 27949                     |

---

**Description:** Construct a 5' X 88' retaining wall

**Construction Value:** 10940.00

**Foundation Type:**

**Construction Type:** Accessory Structure

**Heated Space:** 0

**Unheated Space:** 0

**# of Bedrooms:** 0

**# of Baths:** 0

**Zoning Permit:** 2018.0147

**Septic Permit:** 27772

**CAMA Permit:**

**PW Permit#** na

**FEMA Flood Zone:** X

**BFE:**

**Flood Permit:**

### Conditions:

CALL FOR ALL REQUIRED INSPECTIONS; Additional engineering may be required; Material check inspection required; Piling inspection required; FINAL INSPECTION REQUIRED PRIOR TO ISSUANCE OF CERTIFICATE OF COMPLIANCE;

Address #s on home if none are present. call for material check . Call for deadmen inspection. Call for final inspection

---

**Total Fees Paid/Due:** 165.00

**Invoice #:** 2018-00634

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

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

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

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

---

Building Inspector

05/31/2018

Responsible Party

Date

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

TOWN OF SOUTHERN SHORES  
PLANNING AND CODE  
ENFORCEMENT  
5375 N Virginia Dare Trl  
Southern Shores NC 27949  
(252) 261-2394 ext 4 tel  
(252) 255-0876 fax  
www.southernshores-nc.gov



**SUB-CONTRACTOR SIGN OFF AND/OR PERMIT**

Date 4/30/18

PROJECT ADDRESS 140 Ocean Blvd.

Owner Jim Klein  
Mailing Address 7150 Bagland Rd, Lot 17  
City, State, Zip Cincinnati, OH, 45244  
Phone 513-260-3533

Permit Number 10110  
Fee \$ 100

EXISTING Building Permit Number \_\_\_\_\_ NO FEE (if work is associated with a Building Permit) \_\_\_\_\_

**ELECTRICAL** = Licensee Name Justin Cabe NC License/Classification SP-SFD 32136  
Company Name Cabe and Son Electric  
Address 2907 S. Lost Colony Dr. Phone 252-996-0338  
City State & zip Nags Head, NC 27959 Estimated Project Cost 1,800.00  
Description of Work: Swap out 2 200amp main disconnects + 400amp meter base; they're rusted out.

**PLUMBING** = Licensee Name \_\_\_\_\_ NC License/Classification \_\_\_\_\_  
Company Name \_\_\_\_\_  
Address \_\_\_\_\_ Phone \_\_\_\_\_  
City State & zip \_\_\_\_\_ Estimated Project Cost \_\_\_\_\_  
Description of Work: \_\_\_\_\_

**GAS** = Licensee Name \_\_\_\_\_ NC License/Classification \_\_\_\_\_  
Company Name \_\_\_\_\_  
Address \_\_\_\_\_ Phone \_\_\_\_\_  
City State & zip \_\_\_\_\_ Estimated Project Cost \_\_\_\_\_  
Description of Work: \_\_\_\_\_

**MECHANICAL** = Licensee Name \_\_\_\_\_ NC License/Classification \_\_\_\_\_  
Company Name \_\_\_\_\_  
Address \_\_\_\_\_ Phone \_\_\_\_\_  
City State & zip \_\_\_\_\_ Estimated Project Cost \_\_\_\_\_  
Description of Work: \_\_\_\_\_

**FIRE SPRINKLER** = Licensee Name \_\_\_\_\_ NC License/Classification \_\_\_\_\_  
Company Name \_\_\_\_\_  
Address \_\_\_\_\_ Phone \_\_\_\_\_  
City State & zip \_\_\_\_\_ Estimated Project Cost \_\_\_\_\_  
Description of Work: \_\_\_\_\_

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

[Signature] 5/1/18  
Signature of Licensee Date

[Signature] 5-1-18  
Signature of Permit Official Date  
BV: VA



**TOWN OF SOUTHERN SHORES  
PLANNING AND CODE ENFORCEMENT**  
5375 N Virginia Dare Trail, Southern Shores, NC 27949  
(252) 261-2394 Ext 4 - Office (252) 255-0876 - Fax  
[www.southernshores-nc.gov](http://www.southernshores-nc.gov)

**RESIDENTIAL  
BUILDING/FLOODPLAIN DEVELOPMENT PERMIT  
BUILDING PERMIT #10109**

Location: 131 Tall Pine Ln.

Parcel: 022335002 PIN: 986705188354

District: 20- SOUTHERN SHORES

Subdivision: SO/SH SOUNDSIDE BLKS 124-125

LotBlkSect: LOT: 3 BLK: 125 SEC:

HETTENHOUSE, GEORGE W EUX

HETTENHOUSE, NANCY A EUX

131 TALL PINE LN

SOUTHERN SHORES NC 27949

PHONE #: 252-255-1396

CELL #:

BUSINESS NAME: Albemarle Bulkheads  
CONTRACTOR'S NAME: William Patterson  
ADDRESS: PO Box 50  
CITY, STATE, ZIP: Kill Devil Hills, NC 27948  
OFFICE#: 252-261-7466  
CELL#: 252-256-0857  
FAX#: 2582-715-1986  
EMAIL: [whitpatterson0857@gmail.com](mailto:whitpatterson0857@gmail.com)

NC G.C. LICENSED CONTRACTOR: \_\_\_ YES  NO

NC G.C. LICENSE NUMBER:

LIMITATION:

CLASSIFICATION:

QUALIFIER:

LIEN AGENT: n/a

DESCRIPTION OF WORK – (Any deviation from the Building Plan or Site Plan requires prior approval): Installation of 120 ft. of vinyl bulkhead 2 ft. from original wooden bulkhead – pursuant to conditions of CAMA General Permit

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

|   |                     |  |
|---|---------------------|--|
| TYPE OF CONSTRUCTION: Other - bulkhead  | TYPE OF FOUNDATION: | PERMIT TYPE: Residential                         |
| TOTAL HEATED/LIVING AREAS (SF):         | HEAT:               | RESIDENCE/2 <sup>nd</sup> HOME/RENTAL: Residence |
| TOTAL NON-HEATED AREAS (SF):            | A/C:                | PROPERTY USE: Single Family Dwelling             |
| NUMBER OF STORIES:                      | INTERIOR WALLS:     | ZONING DISTRICT: RS-1                            |
| BEDROOMS:                               | EXTERIOR WALLS:     | ZONING PERMIT #: n/a                             |
| SEPTIC CAPACITY # OF PERSONS:           | FIREPLACE:          | DATE ISSUED:                                     |
| BATHS: ½ BATHS:                         | ROOF:               | CAMA PERMIT #: General A 71426                   |
| GARAGE: STORAGE BLDG:                   | INSULATION:         | DATE ISSUED: 4/24/2018                           |
| STORAGE ENCLOSURE: POOL:                | ELEVATOR (SF):      | SEPTIC PERMIT #: n/a                             |
| FLOOD ZONE: AE                          | DECKS:              | DATE ISSUED:                                     |
| BASE FLOOD ELEVATION: 7ft PLUS 2FT= 9ft | PORCHES:            | WINDOWS MAKE:                                    |
|   | TYPE:               |  |

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

|   |   |  |                 |
|---|---|--|-----------------|
| TOTAL CONSTRUCTION COST                                     | \$27,397  |  |                 |
| HEATED/LIVING AREA (sf)<br>(new square footage)             | X .60/sf (single family) =<br>X .75/sf (all others) = |  | \$              |
| NON-HEATED AREA (sf)<br>(new square footage)                | X .30/sf (single family) =<br>X .35/sf (all others) = |  | \$              |
| REMODEL/REPAIR/ALTERATION<br>(no additional square footage) | \$ X \$10 per \$1,000 of cost =                       |  | \$              |
|   | Pool = \$125  |  | \$              |
|   | Zoning Permit Fee = \$50                              |  | \$              |
|   | Plan Review Fee = \$150 or \$100                      |  | \$              |
|   | Minimum Permit Fee = \$100                            |  | \$100.00        |
|   | Homeowner's Recovery Fund \$10                        |  | \$              |
|   | <b>TOTAL FEE</b>                                      |  | <b>\$100.00</b> |

Applicant - Owner/Contractor

(Please print and sign name)

Date Issued

*Bobby Smith*

*Maribeth Umer*

4-26-18

Building/Code/Zoning Official

*By: WA*

*Maribeth Umer*

Date Approved

*Slit 18*



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

**SUBCONTRACTOR SIGN OFF AND/OR PERMIT**

Date 5/1/2018  
 PROJECT ADDRESS 243 OCEAN BLVD  
 Owner BARBARA BEYNA  
 Mailing Address 6014 HAWTHORNE STREET  
 City, State, Zip CHEVERLY, M.D. 20785  
 Phone 252-261-7542

Permit Number 10111

Fee \$ 100

EXISTING Building Permit Number \_\_\_\_\_ NO FEE \_\_\_\_\_

**ELECTRICAL** = Licensee Name FREDERICK MARKLIN NC License/Classification 22222-L / LTD  
 Company Name R A HOY HEATING & A/C INC  
 Address P O BOX 179 Phone (252) 261-2008  
 City State & zip KITTY HAWK, NC 27949 Estimated Project Cost INCL in MECH  
 Description of Work: CONNECTION OF MECH EQUIP BELOW

**PLUMBING** = Licensee Name \_\_\_\_\_ NC License/Classification \_\_\_\_\_  
 Company Name \_\_\_\_\_  
 Address \_\_\_\_\_ Phone \_\_\_\_\_  
 City State & zip \_\_\_\_\_ Estimated Project Cost \_\_\_\_\_  
 Description of Work: \_\_\_\_\_

**GAS** = Licensee Name \_\_\_\_\_ NC License/Classification \_\_\_\_\_  
 Company Name \_\_\_\_\_  
 Address \_\_\_\_\_ Phone \_\_\_\_\_  
 City State & zip \_\_\_\_\_ Estimated Project Cost \_\_\_\_\_  
 Description of Work: \_\_\_\_\_

**MECHANICAL** = Licensee Name DOUGLAS WAKELEY NC License/Classification 13056 / H 2 & 3 P-1  
 Company Name R A HOY HEATING & A/C, INC  
 Address P O BOX 179 Phone (252) 261-2008  
 City State & zip KITTY HAWK, NC 27949 Estimated Project Cost 5557  
 Description of Work: C/O 2 TON 16 SEER TRANE SYSTEM DOWNSTAIRS WITH T6 WIFI TSTAT

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

Douglas Wakeley 5/1/2018  
 Signature of Licensee Date

Barbara Beyna 5-1-18  
 Signature of Permit Official Date

Andrew John Marklin (ELEC)

Ry: WA



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

**SUBCONTRACTOR SIGN OFF AND/OR PERMIT**

Date 4/30/2018  
 PROJECT ADDRESS 83 OCEAN BLVD  
 Owner RON & BEVERLY LAMAR  
 Mailing Address PO BOX 1985  
 City, State, Zip KITTY HAWK, N.C. 27949  
 Phone 252-261-9393

Permit Number 10112  
 Fee \$ 100

EXISTING Building Permit Number \_\_\_\_\_ NO FEE \_\_\_\_\_

**ELECTRICAL** = Licensee Name FREDERICK MARKLIN NC License/Classification 22222-L / LTD  
 Company Name R A HOY HEATING & A/C INC  
 Address P O BOX 179 Phone (252) 261-2008  
 City State & zip KITTY HAWK, NC 27949 Estimated Project Cost INCL in MECH  
 Description of Work: CONNECTION OF MECH EQUIP BELOW

**PLUMBING** = Licensee Name \_\_\_\_\_ NC License/Classification \_\_\_\_\_  
 Company Name \_\_\_\_\_  
 Address \_\_\_\_\_ Phone \_\_\_\_\_  
 City State & zip \_\_\_\_\_ Estimated Project Cost \_\_\_\_\_  
 Description of Work: \_\_\_\_\_

**GAS** = Licensee Name \_\_\_\_\_ NC License/Classification \_\_\_\_\_  
 Company Name \_\_\_\_\_  
 Address \_\_\_\_\_ Phone \_\_\_\_\_  
 City State & zip \_\_\_\_\_ Estimated Project Cost \_\_\_\_\_  
 Description of Work: \_\_\_\_\_

**MECHANICAL** = Licensee Name DOUGLAS WAKELEY NC License/Classification 13056 / H 2 & 3 P-1  
 Company Name R A HOY HEATING & A/C INC  
 Address P O BOX 179 Phone (252) 261-2008  
 City State & zip KITTY HAWK, NC 27949 Estimated Project Cost 9000  
 Description of Work: C/O 3 TON & 1.5 TON GROUND AND FIRST FLOOR SYSTEMS WITH XR14 SEER

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

Douglas Wakeley 4/30/2018  
 Signature of Licensee Date  
Frederick Marklin (ELEC)

Beverly Lamar 5-1-18  
 Signature of Permit Official Date  
By: WL



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

**SUBCONTRACTOR SIGN OFF AND/OR PERMIT**

Date 5/1/2018  
 PROJECT ADDRESS 274 WAX MYRTLE TRAIL  
 Owner JOHN DAVIS  
 Mailing Address 208 MELWOOD LANE  
 City, State, Zip RICHMOND, V.A. 23229  
 Phone 804-282-0749

Permit Number 10113

Fee \$ 100

EXISTING Building Permit Number \_\_\_\_\_ NO FEE \_\_\_\_\_

**ELECTRICAL** = Licensee Name FREDERICK MARKLIN NC License/Classification 22222-L / LTD  
 Company Name R A HOY HEATING & A/C INC  
 Address P O BOX 179 Phone (252) 261-2008  
 City State & zip KITTY HAWK, NC 27949 Estimated Project Cost INCL in MECH  
 Description of Work: CONNECTION OF MECH EQUIP BELOW

**PLUMBING** = Licensee Name \_\_\_\_\_ NC License/Classification \_\_\_\_\_  
 Company Name \_\_\_\_\_  
 Address \_\_\_\_\_ Phone \_\_\_\_\_  
 City State & zip \_\_\_\_\_ Estimated Project Cost \_\_\_\_\_  
 Description of Work: \_\_\_\_\_

**GAS** = Licensee Name \_\_\_\_\_ NC License/Classification \_\_\_\_\_  
 Company Name \_\_\_\_\_  
 Address \_\_\_\_\_ Phone \_\_\_\_\_  
 City State & zip \_\_\_\_\_ Estimated Project Cost \_\_\_\_\_  
 Description of Work: \_\_\_\_\_

**MECHANICAL** = Licensee Name DOUGLAS WAKELEY NC License/Classification 13056 / H 2 & 3 P-1  
 Company Name R A HOY HEATING & A/C INC  
 Address P O BOX 179 Phone (252) 261-2008  
 City State & zip KITTY HAWK, NC 27949 Estimated Project Cost 3150  
 Description of Work: REPLACE R-4.2 OWIL FLEW DUCT SYSTEM WITH R-8 INSULATED ROUND SHEET METAL TRUNK LINE AND NEW R-8 INSULATED BRANCH FLEX RUNS

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

Douglas Wakeley 5/1/2018  
 Signature of Licensee Date  
Frederick Marklin (ELEC)

Brian Shaw 5-1-18  
 Signature of Permit Official Date  
By: WA



TOWN OF SOUTHERN SHORES  
PLANNING AND CODE  
ENFORCEMENT  
5375 N Virginia Dare Trl  
Southern Shores NC 27949  
(252) 261-2394 ext 4 tel  
(252) 255-0876 fax  
www.southernshores-nc.gov



**SUB-CONTRACTOR SIGN OFF AND/OR PERMIT**

Date MAY 01/2018

PROJECT ADDRESS 72 SPINDRIFT TRAIL

Owner THOMAS MICHAUD

Mailing Address 69 LYNN DR

City, State, Zip ANDOVER, NJ 07821

Phone 973-202-4994

Permit Number 10114  
Fee \$ \_\_\_\_\_

EXISTING Building Permit Number \_\_\_\_\_ NO FEE (if work is associated with a Building Permit) \_\_\_\_\_

**ELECTRICAL** = Licensee Name TIMOTHIE GRIFFITHS NC License/Classification 26180-UL

Company Name GRIFFITHS ELECTRICAL

Address P.O. BOX 82 Phone 252-599-7891

City State & zip HARBINGER, NC 27941 Estimated Project Cost 200.00

Description of Work: LINE AND LOW VOLTAGE WIRING

*Tom Griffiths 5-1-18*

**PLUMBING** = Licensee Name \_\_\_\_\_ NC License/Classification \_\_\_\_\_

Company Name \_\_\_\_\_

Address \_\_\_\_\_ Phone \_\_\_\_\_

City State & zip \_\_\_\_\_ Estimated Project Cost \_\_\_\_\_

Description of Work: \_\_\_\_\_

**GAS** = Licensee Name \_\_\_\_\_ NC License/Classification \_\_\_\_\_

Company Name \_\_\_\_\_

Address \_\_\_\_\_ Phone \_\_\_\_\_

City State & zip \_\_\_\_\_ Estimated Project Cost \_\_\_\_\_

Description of Work: \_\_\_\_\_

**MECHANICAL** = Licensee Name STEVE SMITH NC License/Classification 30070 H3

Company Name AIR-O-SMITH, INC.

Address 330 N. DOGWOOD TRAIL Phone 252-261-5238

City State & zip SOUTHERN SHORES, NC 27949 Estimated Project Cost 12,600.00

Description of Work: REPLACE (1) 15 SEER, 1.5 TON HVAC SYSTEM

REPLACE (1) 2-TON, 15 SEER, HVAC SYSTEM

**FIRE SPRINKLER** = Licensee Name \_\_\_\_\_ NC License/Classification \_\_\_\_\_

Company Name \_\_\_\_\_

Address \_\_\_\_\_ Phone \_\_\_\_\_

City State & zip \_\_\_\_\_ Estimated Project Cost \_\_\_\_\_

Description of Work: \_\_\_\_\_

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

Steven M. Smith, President Digitally signed by Steven M. Smith, President  
DN: cn=Steven M. Smith, President, ou=Air-O-Smith, Inc., ou=air-o-smith, email=sm@air-o-smith.com, c=US  
Date: 2018.05.01 12:28:17 -0400 05/01/2018

Signature of Licensee \_\_\_\_\_ Date \_\_\_\_\_

*Ruby Shul* 5-2-18  
Signature of Permit Official \_\_\_\_\_ Date \_\_\_\_\_  
*By: WA*



**TOWN OF SOUTHERN SHORES**  
 5375 N Virginia Dare Trl  
 Southern Shores, NC 27949  
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 www.southernshores-nc.gov

**SUBCONTRACTOR SIGN OFF AND/OR PERMIT**

Date 05/02/2018  
 PROJECT ADDRESS 154 CLAMSHELL DRIVE <sup>Trl</sup>  
 Owner HARRY DEMAREST  
 Mailing Address 582 30TH STREET  
 City, State, Zip SAN FRANCISCO, C.A. 94131  
 Phone 628-246-6395

Permit Number 10116

Fee \$ 100

EXISTING Building Permit Number \_\_\_\_\_ NO FEE \_\_\_\_\_

**ELECTRICAL** = Licensee Name FREDERICK MARKLIN NC License/Classification 22222-L / LTD  
 Company Name R A HOY HEATING & A/C. INC  
 Address P O BOX 179 Phone (252) 261-2008  
 City State & zip KITTY HAWK, NC 27949 Estimated Project Cost INCL in MECH  
 Description of Work: CONNECTION OF MECH EQUIP BELOW

**PLUMBING** = Licensee Name \_\_\_\_\_ NC License/Classification \_\_\_\_\_  
 Company Name \_\_\_\_\_  
 Address \_\_\_\_\_ Phone \_\_\_\_\_  
 City State & zip \_\_\_\_\_ Estimated Project Cost \_\_\_\_\_  
 Description of Work: \_\_\_\_\_

**GAS** = Licensee Name \_\_\_\_\_ NC License/Classification \_\_\_\_\_  
 Company Name \_\_\_\_\_  
 Address \_\_\_\_\_ Phone \_\_\_\_\_  
 City State & zip \_\_\_\_\_ Estimated Project Cost \_\_\_\_\_  
 Description of Work: \_\_\_\_\_

**MECHANICAL** = Licensee Name DOUGLAS WAKELEY NC License/Classification 13058 / H 2 & 3 P-1  
 Company Name R A HOY HEATING & A/C. INC  
 Address P O BOX 179 Phone (252) 261-2008  
 City State & zip KITTY HAWK, NC 27949 Estimated Project Cost \$5000  
 Description of Work: C/O 1.5 & 2 TON 16 SEER TRANE SYSTEM TOP & LOWER LEVEL WITH (2) T6 WIFI TSTATS

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

Douglas Wakeley 5/2/2018  
 Signature of Licensee Date  
Douglas Wakeley (ELEC)

Benny J. O'Brien 5-3-18  
 Signature of Permit Official Date  
J. D. S.

TOWN OF SOUTHERN SHORES  
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Southern Shores NC  
27949  
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**SUB-CONTRACTOR SIGN OFF AND/OR PERMIT**

Date 5/1/18

PROJECT ADDRESS 45 Scuppernon Lane

Owner Michael Barclay  
Mailing Address 45 Scuppernon Ln  
City, State, Zip Southern Shores NC 27949  
Phone 252-261-0158

Permit Number 10017  
Fee \$ 100

EXISTING Building Permit Number \_\_\_\_\_ NO FEE (if work is associated with a Building Permit) \_\_\_\_\_

**ELECTRICAL** = Licensee Name Jimmy Weaver NC License/Classification 24744  
Company Name North Beach Services  
Address P.O. Box 181 Phone 252-491-2878  
City State & zip Kitty Hawk NC Estimated Project Cost 100  
Description of Work: All necessary electrical hook ups

**PLUMBING** = Licensee Name \_\_\_\_\_ NC License/Classification \_\_\_\_\_  
Company Name \_\_\_\_\_  
Address \_\_\_\_\_ Phone \_\_\_\_\_  
City State & zip \_\_\_\_\_ Estimated Project Cost \_\_\_\_\_  
Description of Work: \_\_\_\_\_

**GAS** = Licensee Name \_\_\_\_\_ NC License/Classification \_\_\_\_\_  
Company Name \_\_\_\_\_  
Address \_\_\_\_\_ Phone \_\_\_\_\_  
City State & zip \_\_\_\_\_ Estimated Project Cost \_\_\_\_\_  
Description of Work: \_\_\_\_\_

**MECHANICAL** = Licensee Name Suzanne Rich NC License/Classification 33023  
Company Name North Beach Services  
Address P.O. Box 181 Phone 252-491-2878  
City State & zip Kitty Hawk NC Estimated Project Cost 3977.00  
Description of Work: Replace existing heat pump with matching 4 ton heat pump

no  
air  
handler

**FIRE SPRINKLER** = Licensee Name \_\_\_\_\_ NC License/Classification \_\_\_\_\_  
Company Name \_\_\_\_\_  
Address \_\_\_\_\_ Phone \_\_\_\_\_  
City State & zip \_\_\_\_\_ Estimated Project Cost \_\_\_\_\_  
Description of Work: \_\_\_\_\_

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

Signature of Licensee Jimmy Weaver Date \_\_\_\_\_

Signature of Permit Official Becky Smith Date 5-3-18  
JL/DVS

TOWN OF SOUTHERN SHORES  
 PLANNING AND CODE  
 ENFORCEMENT  
 5375 N Virginia Dare Trl  
 Southern Shores NC 27949  
 (252) 261-2394 ext 4 tel  
 (252) 255-0876 fax  
 www.southernshores-nc.gov



**SUB-CONTRACTOR SIGN OFF AND/OR PERMIT**

Date May 2 2018

PROJECT ADDRESS 18 FIRST AVE

Owner J AYDLETT  
 Mailing Address 134 LAUREN LN  
 City, State, Zip CAMDEN NC 27921  
 Phone \_\_\_\_\_

*please call* → SCOT 252 473 7487

Permit Number 10115  
 Fee \$ 100

EXISTING Building Permit Number \_\_\_\_\_ NO FEE (if work is associated with a Building Permit) \_\_\_\_\_

CHRIS KNIGHT

**ELECTRICAL** = Licensee Name OUTER BANKS ELECTRIC NC License/Classification 24451-0

Company Name OUTER BANKS ELECTRIC  
 Address 1210 BURNSIDE RD Phone 252 473-3033  
 City State & zip MANTO NC 27954 Estimated Project Cost 250

Description of Work: RECONNECT HOT TUB

**PLUMBING** = Licensee Name \_\_\_\_\_ NC License/Classification \_\_\_\_\_

Company Name \_\_\_\_\_  
 Address \_\_\_\_\_ Phone \_\_\_\_\_  
 City State & zip \_\_\_\_\_ Estimated Project Cost \_\_\_\_\_

Description of Work: \_\_\_\_\_

**GAS** = Licensee Name \_\_\_\_\_ NC License/Classification \_\_\_\_\_

Company Name \_\_\_\_\_  
 Address \_\_\_\_\_ Phone \_\_\_\_\_  
 City State & zip \_\_\_\_\_ Estimated Project Cost \_\_\_\_\_

Description of Work: \_\_\_\_\_

**MECHANICAL** = Licensee Name \_\_\_\_\_ NC License/Classification \_\_\_\_\_

Company Name \_\_\_\_\_  
 Address \_\_\_\_\_ Phone \_\_\_\_\_  
 City State & zip \_\_\_\_\_ Estimated Project Cost \_\_\_\_\_

Description of Work: \_\_\_\_\_

**FIRE SPRINKLER** = Licensee Name \_\_\_\_\_ NC License/Classification \_\_\_\_\_

Company Name \_\_\_\_\_  
 Address \_\_\_\_\_ Phone \_\_\_\_\_  
 City State & zip \_\_\_\_\_ Estimated Project Cost \_\_\_\_\_

Description of Work: \_\_\_\_\_

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

[Signature]  
 Signature of Licensee  
May 2 2018  
 Date

[Signature]  
 Signature of Permit Official  
5-1-18  
 Date



**SUBCONTRACTOR SIGN OFF AND/OR PERMIT**

Date 5-3-18  
Owner Jeffrey Dowdy  
Mailing Address 61 Duck Woods Dr.  
City State, Zip Southern Shores NC 27949  
Street Address 61 Duck Woods Dr.  
Subdivision Sol Sho Btk 227  
Lot 18 Block 227 Section \_\_\_\_\_  
PIN 98671553 6091  
Flood Zone: \_\_\_\_\_

**TOWN OF SOUTHERN SHORES**  
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(252) 261-2394 tel (252) 255-0876 fax  
www.southernshores-nc.gov

Permit Number 10119  
Fee \$100

**ELECTRICAL** Licensee Name Nathan Owens NC License/Classification 33601  
Company Name Jesse N. Owens Electrical Corp.  
Address 123 Jesse Owens Dr. Phone 473-8923  
City State & zip Harbinger NC 27941 Estimated Project Cost \_\_\_\_\_  
Description of Work: Electrical associated w/ system replacement.

**PLUMBING** Licensee Name \_\_\_\_\_ NC License/Classification \_\_\_\_\_  
Company Name \_\_\_\_\_  
Address \_\_\_\_\_ Phone \_\_\_\_\_  
City State & zip \_\_\_\_\_ Estimated Project Cost \_\_\_\_\_  
Description of Work: \_\_\_\_\_

**GAS** Licensee Name \_\_\_\_\_ NC License/Classification \_\_\_\_\_  
Company Name \_\_\_\_\_  
Address \_\_\_\_\_ Phone \_\_\_\_\_  
City State & zip \_\_\_\_\_ Estimated Project Cost \_\_\_\_\_  
Description of Work: \_\_\_\_\_

**MECHANICAL** Licensee Name Joseph Simpson NC License/Classification 19091  
Company Name All Seasons Heating & Cooling  
Address PO Box 244 Phone 491-9232  
City State & zip Point Harbor, NC 27941 Estimated Project Cost 5940.00  
Description of Work: Replace system w/ a 3.5 ton heat pump & air handler

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

Signature of Licensee [Signature] Date 5-3-18

Signature of Permit Official [Signature] Date 5-4-18



**TOWN OF SOUTHERN SHORES  
PLANNING AND CODE ENFORCEMENT**  
5375 N Virginia Dare Trail, Southern Shores, NC 27949  
(252) 261-2394 Ext 4 - Office (252) 255-0876 - Fax  
[www.southernshores-nc.gov](http://www.southernshores-nc.gov)

**RESIDENTIAL  
BUILDING/FLOODPLAIN DEVELOPMENT PERMIT  
BUILDING PERMIT #10118**

**Location:** 52 E Dogwood Trail  
**Parcel:** 022186000 PIN: 986818305999  
**District:** 20- SOUTHERN SHORES  
**Subdivision:** SO/SH SOUND SIDE BLK 95  
**LotBlkSect:** LOT: 28 BLK: 95 SEC

**WHITHAM, DEBRA J EUX**  
52 E DOGWOOD TRL  
KITTY HAWK NC 27949  
  
PHONE #: \_\_\_\_\_ CELL #: \_\_\_\_\_

**BUSINESS NAME:** Simple Side Construction  
**CONTRACTOR'S NAME:** Grant Smith  
**ADDRESS:** 308 W Helga Street  
**CITY, STATE, ZIP:** Kill Devil Hills, NC 27948  
**OFFICE#:**  
**CELL#:** 252-564-8307  
**FAX#:**  
**EMAIL:** [grant@simplesideobx.com](mailto:grant@simplesideobx.com)

**NC G.C. LICENSED CONTRACTOR:**  YES  NO  
**NC G.C. LICENSE NUMBER:** 78583  
**LIMITATION:** Limited  
**CLASSIFICATION:** Residential  
**QUALIFIER:** Grant Smith  
  
**LIEN AGENT:** n/a

**DESCRIPTION OF WORK – (Any deviation from the Building Plan or Site Plan requires prior approval):** Replace front deck with a new 8x10 porch – Expand back deck 4'x24.5' to become a 12'x24.5' deck

**SPECIAL CONDITIONS -** Last foot of rear deck expansion must be cantilevered - pursuant to condition of DCEHD permit

|  |                                   |  |
|--|-----------------------------------|--|
| <b>TYPE OF CONSTRUCTION:</b> Addition (deck/porch) | <b>TYPE OF FOUNDATION:</b> Piling | <b>PERMIT TYPE:</b> Residential                        |
| <b>TOTAL HEATED/LIVING AREAS (SF):</b>             | <b>HEAT:</b>                      | <b>RESIDENCE/2<sup>nd</sup> HOME/RENTAL:</b> Residence |
| <b>TOTAL NON-HEATED AREAS (SF):</b> 178            | <b>A/C:</b>                       | <b>PROPERTY USE:</b> Single Family Dwelling            |
| <b>NUMBER OF STORIES:</b>                          | <b>INTERIOR WALLS:</b>            | <b>ZONING DISTRICT:</b> RS-1                           |
| <b>BEDROOMS:</b>                                   | <b>EXTERIOR WALLS:</b>            | <b>ZONING PERMIT #:</b> 2018-51                        |
| <b>SEPTIC CAPACITY # OF PERSONS:</b>               | <b>FIREPLACE:</b>                 | <b>DATE ISSUED:</b> 5/2/2018                           |
| <b>BATHS:</b> ½ BATHS:                             | <b>ROOF:</b> Asphalt              | <b>CAMA PERMIT #:</b> n/a                              |
| <b>GARAGE:</b> STORAGE BLDG:                       | <b>INSULATION:</b>                | <b>DATE ISSUED:</b>                                    |
| <b>STORAGE ENCLOSURE:</b> POOL:                    | <b>ELEVATOR (SF):</b>             | <b>SEPTIC PERMIT #:</b> 27715                          |
| <b>FLOOD ZONE:</b> Shaded X                        | <b>DECKS (SF):</b> 98             | <b>DATE ISSUED:</b> 4/10/2018                          |
| <b>BASE FLOOD ELEVATION:</b> PLUS 2FT=             | <b>PORCHES (SF):</b> 80           |  |
|  | <b>WINDOWS MAKE:</b>              |  |
|  | <b>TYPE:</b>                      |  |

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

|   |          |                                  |                 |
|---|----------|----------------------------------|-----------------|
| <b>TOTAL CONSTRUCTION COST</b>                                  | \$14,851 |                                  |                 |
| <b>HEATED/LIVING AREA (sf) (new square footage)</b>             |          | X .60/sf (single family) =       | \$              |
|   |          | X .75/sf (all others) =          |                 |
| <b>NON-HEATED AREA (sf) (new square footage)</b>                | 178      | X .30/sf (single family) =       | \$0             |
|   |          | X .35/sf (all others) =          |                 |
| <b>REMODEL/REPAIR/ALTERATION (no additional square footage)</b> | \$       | X \$10 per \$1,000 of cost =     | \$              |
|   |          | Pool = \$125                     | \$              |
|   |          | Zoning Permit Fee = \$50         | \$50.00         |
|   |          | Plan Review Fee = \$150 or \$100 | \$              |
|   |          | Minimum Permit Fee = \$100       | \$100.00        |
|   |          | Homeowner's Recovery Fund \$10   | \$10.00         |
|   |          | <b>TOTAL FEE</b>                 | <b>\$160.00</b> |

Applicant - Owner/Contractor *[Signature]* (Please print and sign name) **Grant Smith** Date Issued **5/4/18**  
 Building/Code/Zoning Official *[Signature]* **DKS** Date Approved **5-3-18**



**TOWN OF SOUTHERN SHORES**  
**PLANNING AND CODE ENFORCEMENT**  
 5375 N Virginia Dare Trail, Southern Shores, NC 27949  
 (252) 261-2394 Ext 4 - Phone (252) 255-0876 - Fax  
 www.southernshores-nc.gov

**COMMERCIAL**  
**BUILDING/FLOODPLAIN DEVELOPMENT PERMIT**  
**BUILDING PERMIT #: 10025**

**Location:** 144A Ocean Blvd  
  
**Parcel:** 029702940 PIN: 986708797026  
**District:** 20- SOUTHERN SHORES  
**Subdivision:** SO/SH AMENDED PLAT B SEC 3  
**LotBlkSect:** LOT: ACCESS OCEAN FRONT BLK: SEC: 2

**SOUTHERN SHORES CIVIC ASSOC INC**  
**5377 VIRGINIA DARE TRL N**  
**KITTY HAWK NC 27949**  
  
**PHONE #:** 252-261-8617 **CELL #:**

**BUSINESS NAME:** Jon Boy's Building Services  
**CONTRACTOR'S NAME:** Jonathan St. Leger  
**ADDRESS:** 307 Woodard Rd  
**CITY, STATE, ZIP:** Kitty Hawk, NC 27949  
**OFFICE#:** 252-202-6918  
**CELL#:**  
**FAX#:**  
**EMAIL:** jonboyy14@msn.com

**NC G.C. LICENSED CONTRACTOR:**  YES  NO  
**NC G.C. LICENSE NUMBER:**  
**LIMITATION:**  
**CLASSIFICATION:**  
**QUALIFIER:**  
  
**LIEN AGENT:** n/a

**DESCRIPTION OF WORK – (Any deviation from the Building Plan or Site Plan requires prior approval):** Repair/Replace existing beach access walkway with a 6'x8' new section including built in benches

**SPECIAL CONDITIONS - (accessway shall not exceed 6ft in width)**

|   |                                   |  |
|---|-----------------------------------|--|
| <b>TYPE OF CONSTRUCTION:</b> Repair/Replace beach accessway | <b>TYPE OF FOUNDATION:</b> Piling | <b>PERMIT TYPE:</b> Commercial                   |
| <b>HEATED/LIVING AREAS (SF):</b>                            | <b>HEAT:</b>                      | <b>RESIDENCE/2<sup>nd</sup> HOME/RENTAL:</b> n/a |
| <b>NON-HEATED AREAS (SF):</b>                               | <b>A/C:</b>                       | <b>PROPERTY USE:</b> Community Beach Access      |
| <b>NUMBER OF STORIES:</b>                                   | <b>INTERIOR WALLS:</b>            | <b>ZONING DISTRICT:</b> RS-1                     |
| <b>HABITABLE ROOMS:</b>                                     | <b>EXTERIOR WALLS:</b>            | <b>ZONING PERMIT #:</b> n/a                      |
| <b>BEDROOMS:</b>  | <b>FIREPLACE:</b>                 | <b>DATE ISSUED:</b>                              |
| <b>OCCUPANCY:</b>   | <b>ROOF:</b>                      |  |
| <b>BATHS:</b> ½ BATHS:                                      | <b>INSULATION:</b>                | <b>CAMA PERMIT #:</b> Exemption #2018-09         |
| <b>GARAGE:</b> <b>SHED:</b> <b>STORAGE ENCLOSURE:</b>       | <b>FLOORING:</b>                  | <b>DATE ISSUED:</b> 4/3/2018                     |
| <b>FLOOD ZONE:</b> VE                                       | <b>ELEVATOR (SF):</b>             | <b>SEPTIC PERMIT #:</b> n/a                      |
| <b>BASE FLOOD ELEVATION:</b> 12FT PLUS 2FT= 14FT            | <b>WINDOWS:</b>                   | <b>DATE ISSUED:</b>                              |
|   | <b>MAKE:</b>                      |  |

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

|  |                   |                                  |                 |
|--|-------------------|----------------------------------|-----------------|
| <b>TOTAL CONSTRUCTION COST</b>                                     | <b>\$7,879.00</b> |                                  |                 |
| <b>HEATED/LIVING AREA (sf)</b><br>(new square footage)             |                   | X .60/sf (single family) =       | \$              |
|  |                   | X .75/sf (all others) =          |                 |
| <b>NON-HEATED AREA (sf)</b><br>(new square footage)                |                   | X .30/sf (single family) =       | \$              |
|  |                   | X .35/sf (all others) =          |                 |
| <b>REMODEL/REPAIR/ALTERATION</b><br>(no additional square footage) | \$                | X \$10 per \$1,000 of cost =     | \$              |
|  |                   | Pool = \$125                     |                 |
|  |                   | Zoning Permit = \$50             |                 |
|  |                   | Plan Review Fee = \$150 or \$100 |                 |
|  |                   | Minimum Permit Fee = \$100       | \$100.00        |
|  |                   | Homeowner's Recovery Fund\$10    |                 |
|  |                   | <b>TOTAL FEE</b>                 | <b>\$100.00</b> |

*[Signature]* **JONATHAN D. STILEGER** **5-7-18**  
 Applicant - Owner/Contractor (Please print and sign name) Date Issued  
*[Signature]* **4-3-18**  
 Building/Code/Zoning official Date Approved  
*[Signature]*



**TOWN OF SOUTHERN SHORES  
PLANNING AND CODE ENFORCEMENT**  
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**COMMERCIAL  
BUILDING/FLOODPLAIN DEVELOPMENT PERMIT  
BUILDING PERMIT # 10030**

**Parcel:** 029702941  
**PIN:** 986708880407  
**Location:** 132 A OCEAN BLVD  
**District:** [20] SOUTHERN SHORES  
**Subdiv:** [S623] SO/SH SEC 2  
**Lot-Block-Sect:** LOT: BLK: SEC:

**Owner:** SOUTHERN SHORES CIVIC ASSOC INC  
**Address:** 5377 VIRGINIA DARE TRL N  
KITTY HAWK NC 27949

**PHONE #:** 252-261-8617

**CELL #:**

**BUSINESS NAME:** Jon Boy's Building Services  
**CONTRACTOR'S NAME:** Jonathan St. Leger  
**ADDRESS:** 307 Woodard Rd  
**CITY, STATE, ZIP:** Kitty Hawk, NC 27949  
**OFFICE#:** 252-202-6918  
**CELL#:**  
**FAX#:**  
**EMAIL:** jonboyy14@msn.com

**NC G.C. LICENSED CONTRACTOR:**  YES  NO  
**NC G.C. LICENSE NUMBER:**  
**LIMITATION:**  
**CLASSIFICATION:**  
**QUALIFIER:**

**LIEN AGENT:** n/a

**DESCRIPTION OF WORK – (Any deviation from the Building Plan or Site Plan requires prior approval):** Replace a portion of existing beach access walkway stairs with a landing and stairs to the north/south

**SPECIAL CONDITIONS –**

|   |                            |  |
|---|----------------------------|--|
| <b>TYPE OF CONSTRUCTION:</b> Repair                   | <b>TYPE OF FOUNDATION:</b> | <b>PERMIT TYPE:</b> Commercial                   |
| <b>HEATED/LIVING AREAS (SF):</b>                      | <b>HEAT:</b>               | <b>RESIDENCE/2<sup>nd</sup> HOME/RENTAL:</b> n/a |
| <b>NON-HEATED AREAS (SF):</b>                         | <b>A/C:</b>                | <b>PROPERTY USE:</b> Community Beach Access      |
| <b>NUMBER OF STORIES:</b>                             | <b>INTERIOR WALLS:</b>     | <b>ZONING DISTRICT:</b> RS-1                     |
| <b>HABITABLE ROOMS:</b>                               | <b>EXTERIOR WALLS:</b>     | <b>ZONING PERMIT #:</b> n/a                      |
| <b>BEDROOMS:</b>                                      | <b>FIREPLACE:</b>          | <b>DATE ISSUED:</b>                              |
| <b>OCCUPANCY:</b>                                     | <b>ROOF:</b>               |  |
| <b>BATHS:</b> ½ BATHS:                                | <b>INSULATION:</b>         | <b>CAMA PERMIT #:</b> Exemption #2018-06         |
| <b>GARAGE:</b> <b>SHED:</b> <b>STORAGE ENCLOSURE:</b> | <b>FLOORING:</b>           | <b>DATE ISSUED:</b> 3/12/2018                    |
| <b>FLOOD ZONE:</b> VE                                 | <b>ELEVATOR (SF):</b>      | <b>SEPTIC PERMIT #:</b>                          |
| <b>BASE FLOOD ELEVATION:</b> 12FT PLUS 2FT= 14FT      | <b>WINDOWS:</b>            | <b>DATE ISSUED:</b>                              |
|   | <b>MAKE:</b>               |  |
|   | <b>TYPE:</b>               |  |

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

|  |                |                                  |                 |
|--|----------------|----------------------------------|-----------------|
| <b>TOTAL CONSTRUCTION COST</b>                                     | <b>\$3,500</b> |                                  |                 |
| <b>HEATED/LIVING AREA (sf)</b><br>(new square footage)             |                | X .60/sf (single family) =       | \$              |
|  |                | X .75/sf (all others) =          |                 |
| <b>NON-HEATED AREA (sf)</b><br>(new square footage)                |                | X .30/sf (single family) =       | \$              |
|  |                | X .35/sf (all others) =          |                 |
| <b>REMODEL/REPAIR/ALTERATION</b><br>(no additional square footage) | \$             | X \$10 per \$1,000 of cost =     | \$              |
|  |                | Pool = \$125                     |                 |
|  |                | Other (dune deck) = \$100        |                 |
|  |                | Plan Review Fee = \$150 or \$100 |                 |
|  |                | Minimum Permit Fee = \$100       | \$100.00        |
|  |                | Homeowner's Recovery Fund\$10    |                 |
|  |                | <b>TOTAL FEE</b>                 | <b>\$100.00</b> |

*Jonathan D. St. Leger*  
Applicant - Owner/Contractor (Please print and sign name)

5-7-18  
Date Issued

*Bunbury She Hox*  
Building/Code/Zoning Official

3-12-18  
Date Approved

*DJ DVS*



TOWN OF SOUTHERN SHORES  
 PLANNING AND CODE  
 ENFORCEMENT  
 5375 N Virginia Dare Trl  
 Southern Shores NC 27949  
 (252) 261-2394 ext 4 tel  
 (252) 255-0876 fax  
 www.southernshores-nc.gov



SUB-CONTRACTOR SIGN OFF AND/OR PERMIT

Date 4-27-18  
 PROJECT ADDRESS 17 GINQUITE  
 Owner ROBERT CASTERL JR Joe Cowles  
 Mailing Address \_\_\_\_\_  
 City, State, Zip \_\_\_\_\_  
 Phone 703-687-2005

Permit Number 10125  
 Fee \$ 100

EXISTING Building Permit Number \_\_\_\_\_ NO FEE (if work is associated with a Building Permit) \_\_\_\_\_

**ELECTRICAL** = Licensee Name JASON TURNER NC License/Classification 28692-I  
 Company Name BEACON ELECTRIC  
 Address 129 SLUPPERNONG RD. Phone 489 5680  
 City State & zip MANTEO NC 27954 Estimated Project Cost 150.00  
 Description of Work: REPLACED 3 BREAKERS PER SPECS ON EQUIP.

*Jason Turner*  
 5/2/18

**PLUMBING** = Licensee Name \_\_\_\_\_ NC License/Classification \_\_\_\_\_  
 Company Name \_\_\_\_\_  
 Address \_\_\_\_\_ Phone \_\_\_\_\_  
 City State & zip \_\_\_\_\_ Estimated Project Cost \_\_\_\_\_  
 Description of Work: \_\_\_\_\_

**GAS** = Licensee Name MICHAEL BRYNTESON NC License/Classification 3349  
 Company Name LAND AND SEA MECHANICAL  
 Address 178 OBERLIN RD Phone 252-473-3836  
 City State & zip WAREHOSE, NC 27981 Estimated Project Cost \_\_\_\_\_  
 Description of Work: DUAL FUEL AIR HANDLER FOR DOWNSTAIRS

3349  
 gas/  
 propane  
 LP  
 class  
 B

**MECHANICAL** = Licensee Name MICHAEL BRYNTESON NC License/Classification H-3  
 Company Name LAND AND SEA MECHANICAL # 33450  
 Address 128 OBERLIN RD Phone 252-473-3836  
 City State & zip WAREHOSE NC 27981 Estimated Project Cost 12,000  
 Description of Work: CHANGE OUT 2 EXISTING SYSTEMS

**FIRE SPRINKLER** = Licensee Name \_\_\_\_\_ NC License/Classification \_\_\_\_\_  
 Company Name \_\_\_\_\_  
 Address \_\_\_\_\_ Phone \_\_\_\_\_  
 City State & zip \_\_\_\_\_ Estimated Project Cost \_\_\_\_\_  
 Description of Work: \_\_\_\_\_

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

*[Signature]* 4-27-18 Signature of Licensee Date  
*[Signature]* 5-8-18 Signature of Permit Official Date  
 JUDIS



**TOWN OF SOUTHERN SHORES**  
**PLANNING AND CODE ENFORCEMENT**  
 5375 N Virginia Dare Trail, Southern Shores, NC 27949  
 (252) 261-2394 Ext 4 - Office (252) 255-0876 - Fax  
[www.southernshores-nc.gov](http://www.southernshores-nc.gov)

**RESIDENTIAL**  
**BUILDING/FLOODPLAIN DEVELOPMENT PERMIT**  
**BUILDING PERMIT #10121**

Location: 237 Wax Myrtle Trl

Parcel: 021475000 PIN: 986814421519  
 District: 20- SOUTHERN SHORES  
 Subdivision: SO/SH BEACH BLK 74  
 LotBlkSect: LOT: 12 BLK: 74 SEC:

HAGENS, WINNETT W  
 3839 KEEPERS WAY  
 KITTY HAWK NC 27949

PHONE #:

CELL #: 252-207-9837

BUSINESS NAME:  
 CONTRACTOR'S NAME: Property Owner  
 ADDRESS:  
 CITY, STATE, ZIP:  
 OFFICE#:  
 CELL#:  
 FAX#:  
 EMAIL:

NC G.C. LICENSED CONTRACTOR:  YES  NO  
 NC G.C. LICENSE NUMBER:  
 LIMITATION:  
 CLASSIFICATION:  
 QUALIFIER:

LIEN AGENT: n/a

DESCRIPTION OF WORK – (Any deviation from the Building Plan or Site Plan requires prior approval): Convert exiting room over garage (unfinished storage) into enclosed living space as a 5<sup>th</sup> bedroom

SPECIAL CONDITIONS -

|  |                         |   |
|--|-------------------------|---|
| TYPE OF CONSTRUCTION: Addition         | TYPE OF FOUNDATION:     | PERMIT TYPE: Residential                                    |
|  | HEAT: heat pump         | RESIDENCE/2 <sup>nd</sup> HOME/RENTAL: 2 <sup>nd</sup> home |
| TOTAL HEATED/LIVING AREAS (SF): 402    | A/C: heat pump          | PROPERTY USE: Single Family Dwelling                        |
| TOTAL NON-HEATED AREAS (SF):           | INTERIOR WALLS: drywall | ZONING DISTRICT: RS-1                                       |
|  | EXTERIOR WALLS:         | ZONING PERMIT #: 2018-52                                    |
| NUMBER OF STORIES:                     | FIREPLACE:              | DATE ISSUED: 5/8/2018                                       |
| BEDROOMS: 1 proposed to become 5 total | ROOF:                   |   |
| SEPTIC CAPACITY # OF PERSONS: 10       | INSULATION: batt        | CAMA PERMIT #:  |
| BATHS: ½ BATHS:                        | ELEVATOR (SF):          | DATE ISSUED:  |
| GARAGE: STORAGE BLDG:                  | DECKS (SF):             | SEPTIC PERMIT #: 26700                                      |
| STORAGE ENCLOSURE: POOL:               | PORCHES (SF):           | DATE ISSUED: 4/9/2017                                       |
| FLOOD ZONE: Shaded X                   | WINDOWS MAKE:           |   |
| BASE FLOOD ELEVATION: PLUS 2FT=        | TYPE:                   |   |

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

|   |         |                                  |                 |
|---|---------|----------------------------------|-----------------|
| TOTAL CONSTRUCTION COST                                     | \$8,000 |                                  |                 |
| HEATED/LIVING AREA (sf)<br>(new square footage)             | 402     | X .60/sf (single family) =       | \$241.20        |
|   |         | X .75/sf (all others) =          |                 |
| NON-HEATED AREA (sf)<br>(new square footage)                |         | X .30/sf (single family) =       | \$              |
|   |         | X .35/sf (all others) =          |                 |
| REMODEL/REPAIR/ALTERATION<br>(no additional square footage) | \$      | X \$10 per \$1,000 of cost =     | \$              |
|   |         | Pool = \$125                     | \$              |
|   |         | Zoning Permit Fee = \$50         | \$50.00         |
|   |         | Plan Review Fee = \$150 or \$100 | \$              |
|   |         | Minimum Permit Fee = \$100       | \$              |
|   |         | Homeowner's Recovery Fund\$10    | \$              |
|   |         | <b>TOTAL FEE</b>                 | <b>\$291.20</b> |

Applicant - Owner/Contractor

Building/Code/Zoning Official

Benjamin L. Nelson *Winnett Hagens*  
 (Please print and sign name)

5-8-18

Date Issued

5-8-18

Date Approved

*DJ DVS*



**TOWN OF SOUTHERN SHORES**  
**PLANNING AND CODE ENFORCEMENT**  
 5375 N Virginia Dare Trail, Southern Shores, NC 27949  
 (252) 261-2394 Ext 4 - Office (252) 255-0876 - Fax  
[www.southernshores-nc.gov](http://www.southernshores-nc.gov)

**RESIDENTIAL**  
**BUILDING/FLOODPLAIN DEVELOPMENT PERMIT**  
**BUILDING PERMIT #10122**

**Location:** 284 Wax Myrtle Trail  
**Parcel:** 026097000 PIN: 986814342980  
**District:** 20- SOUTHERN SHORES  
**Subdivision:** SO/SH BEACH BLKS 63 73 83 82A  
**LotBlkSect:** LOT: 32 BLK: 63 SEC:

**WESCOAT, HAROLD J II EUX**  
**BARTELL, AMANDA J EUX**  
 284 WAX MYRTLE TRL  
 SOUTHERN SHORES NC 27949  
**PHONE #:** 804-357-1050 **CELL #:**

**BUSINESS NAME:** Emanuelson & Dad, Inc  
**CONTRACTOR'S NAME:** Jon Midgett  
**ADDRESS:** PO Box 448  
**CITY, STATE, ZIP:** Nags Head, NC 27959  
**OFFICE#:** 252-261-2212  
**CELL#:** 252-619-8096  
**FAX#:** 252-261-1115  
**EMAIL:** [emanuelson@embarqmail.com](mailto:emanuelson@embarqmail.com)

**NC G.C. LICENSED CONTRACTOR:** \_\_\_ YES X NO  
**NC G.C. LICENSE NUMBER:**  
**LIMITATION:**  
**CLASSIFICATION:**  
**QUALIFIER:**

**LIEN AGENT:** n/a

**DESCRIPTION OF WORK - (Any deviation from the Building Plan or Site Plan requires prior approval):** Replace 1 house piling and 3 deck pilings

**SPECIAL CONDITIONS -**

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

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

|  |            |                                  |                 |
|--|------------|----------------------------------|-----------------|
| <b>TOTAL CONSTRUCTION COST</b>                                     | \$2,895.00 |                                  |                 |
| <b>HEATED/LIVING AREA (sf)</b><br>(new square footage)             |            | X .60/sf (single family) =       | \$              |
|  |            | X .75/sf (all others) =          | \$              |
| <b>NON-HEATED AREA (sf)</b><br>(new square footage)                |            | X .30/sf (single family) =       | \$              |
|  |            | X .35/sf (all others) =          | \$              |
| <b>REMODEL/REPAIR/ALTERATION</b><br>(no additional square footage) | \$2,895.00 | X \$10 per \$1,000 of cost =     | \$              |
|  |            | Pool = \$125                     | \$              |
|  |            | Zoning Permit Fee = \$50         | \$              |
|  |            | Plan Review Fee = \$150 or \$100 | \$              |
|  |            | Minimum Permit Fee = \$100       | \$100.00        |
|  |            | Homeowner's Recovery Fund \$10   | \$              |
|  |            | <b>TOTAL FEE</b>                 | <b>\$100.00</b> |

*[Signature]* **F. DENIK STAINCO** 5-9-18  
 Applicant - Owner/Contractor (Please print and sign name) Date Issued  
*[Signature]*  
 Building/Code/Zoning Official **DY DVS** Date Approved

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



**SUBCONTRACTOR SIGN OFF AND/OR PERMIT**

Date 05/08/2018  
PROJECT ADDRESS 271 WAX MYRTLE TRAIL  
Owner BARRY AMBROSE  
Mailing Address 271 WAX MYRTLE TRAIL  
City, State, Zip SOUTHERN SHORES, N.C. 27949  
Phone \_\_\_\_\_

Permit Number 10126  
Fee \$ 100

EXISTING Building Permit Number \_\_\_\_\_ NO FEE \_\_\_\_\_

**ELECTRICAL** = Licensee Name FREDERICK MARKLIN NC License/Classification 22222-L / LTD  
Company Name R A HOY HEATING & A/C INC  
Address P O BOX 179 Phone (252) 261-2008  
City State & zip KITTY HAWK, NC 27949 Estimated Project Cost INCL in MECH  
Description of Work: CONNECTION OF MECH EQUIP BELOW

**PLUMBING** = Licensee Name \_\_\_\_\_ NC License/Classification \_\_\_\_\_  
Company Name \_\_\_\_\_  
Address \_\_\_\_\_ Phone \_\_\_\_\_  
City State & zip \_\_\_\_\_ Estimated Project Cost \_\_\_\_\_  
Description of Work: \_\_\_\_\_

**GAS** = Licensee Name \_\_\_\_\_ NC License/Classification \_\_\_\_\_  
Company Name \_\_\_\_\_  
Address \_\_\_\_\_ Phone \_\_\_\_\_  
City State & zip \_\_\_\_\_ Estimated Project Cost \_\_\_\_\_  
Description of Work: \_\_\_\_\_

**MECHANICAL** = Licensee Name DOUGLAS WAKELEY NC License/Classification 13056 / H 2 & 3 P-1  
Company Name R A HOY HEATING & A/C INC  
Address P O BOX 179 Phone (252) 261-2008  
City State & zip KITTY HAWK, NC 27949 Estimated Project Cost 6541  
Description of Work: C/O 4 TON 16 SEER TRANE SYSTEM TOP LEVEL REUSE EXISTING TSTAT

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

Douglas Wakeley 5/8/2018  
Signature of Licensee Date

Bunny Spelton 5-8-18  
Signature of Permit Official Date

Frederick Marklin (ELEC)

JYNS

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



**SUBCONTRACTOR SIGN OFF AND/OR PERMIT**

Date 05/08/2018  
PROJECT ADDRESS 132 W HOLLY TRAIL  
Owner DAMIAN DOMDERO  
Mailing Address 132 W HOLLY TRAIL  
City, State, Zip SOUTHERN SHORES, N.C. 27949  
Phone 252-489-8402

Permit Number 10127  
Fee \$ 100

EXISTING Building Permit Number \_\_\_\_\_ NO FEE \_\_\_\_\_

**ELECTRICAL** = Licensee Name FREDERICK MARKLIN NC License/Classification 22222-L / LTD  
Company Name R A HOY HEATING & A/C INC  
Address P O BOX 179 Phone (252) 261-2008  
City State & zip KITTY HAWK, NC 27949 Estimated Project Cost INCL in MECH  
Description of Work: CONNECTION OF MECH EQUIP BELOW

**PLUMBING** = Licensee Name \_\_\_\_\_ NC License/Classification \_\_\_\_\_  
Company Name \_\_\_\_\_  
Address \_\_\_\_\_ Phone \_\_\_\_\_  
City State & zip \_\_\_\_\_ Estimated Project Cost \_\_\_\_\_  
Description of Work: \_\_\_\_\_

**GAS** = Licensee Name \_\_\_\_\_ NC License/Classification \_\_\_\_\_  
Company Name \_\_\_\_\_  
Address \_\_\_\_\_ Phone \_\_\_\_\_  
City State & zip \_\_\_\_\_ Estimated Project Cost \_\_\_\_\_  
Description of Work: \_\_\_\_\_

**MECHANICAL** = Licensee Name DOUGLAS WAKELEY NC License/Classification 13056 / H 2 & 3 P-1  
Company Name R A HOY HEATING & A/C INC  
Address P O BOX 179 Phone (252) 261-2008  
City State & zip KITTY HAWK, NC 27949 Estimated Project Cost \$5,000  
Description of Work: C/O 4 TON 16 SEER TRANE SYSTEM GROUND LEVEL WITH HONEYWELL 3 TRUZONE & (2) XL624 TSTATS

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

Douglas Wakeley 05/08/2018  
Signature of Licensee Date  
Douglas Wakeley (ELEC)

Richard S. Seltzer 5-8-18  
Signature of Permit Official Date  
JY XS



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

**SUBCONTRACTOR SIGN OFF AND/OR PERMIT**

Date 05/09/2018  
PROJECT ADDRESS 4 SIXTH AVENUE  
Owner MARJUAN LIMITED PARTNERSHIP C/O ANN POWELL  
Mailing Address 17 CLUB TERRACE  
City, State, Zip NEWPORT NEWS, V.A 23606  
Phone 757-596-9482

Permit Number 10128  
Fee \$ 100

EXISTING Building Permit Number \_\_\_\_\_ NO FEE \_\_\_\_\_

**ELECTRICAL** = Licensee Name FREDERICK MARKLIN NC License/Classification 22222-L / LTD  
Company Name R A HOY HEATING & A/C, INC  
Address P O BOX 179 Phone (252) 261-2008  
City State & zip KITTY HAWK, NC 27949 Estimated Project Cost INCL in MECH  
Description of Work: CONNECTION OF MECH EQUIP BELOW

**PLUMBING** = Licensee Name \_\_\_\_\_ NC License/Classification \_\_\_\_\_  
Company Name \_\_\_\_\_  
Address \_\_\_\_\_ Phone \_\_\_\_\_  
City State & zip \_\_\_\_\_ Estimated Project Cost \_\_\_\_\_  
Description of Work: \_\_\_\_\_

**GAS** = Licensee Name \_\_\_\_\_ NC License/Classification \_\_\_\_\_  
Company Name \_\_\_\_\_  
Address \_\_\_\_\_ Phone \_\_\_\_\_  
City State & zip \_\_\_\_\_ Estimated Project Cost \_\_\_\_\_  
Description of Work: \_\_\_\_\_

**MECHANICAL** = Licensee Name DOUGLAS WAKELEY NC License/Classification 13056 / H 2 & 3 P-1  
Company Name R A HOY HEATING & A/C, INC  
Address P O BOX 179 Phone (252) 261-2008  
City State & zip KITTY HAWK, NC 27949 Estimated Project Cost \$5,000  
Description of Work: C/O 3.5 TON 16 SEER TRANE SYSTEM TOP LEVEL REUSE EXISITING TSTAT

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

Douglas Wakeley 05/09/2018  
Signature of Licensee Date  
Douglas Wakeley (ELEC)

Burley Shepton  
Signature of Permit Official Date  
JUL 11 2018

TOWN OF SOUTHERN SHORES  
PLANNING AND CODE  
ENFORCEMENT  
5375 N Virginia Dare Trl  
Southern Shores NC 27949  
(252) 261-2394 ext 4 tel  
(252) 255-0876 fax  
www.southernshores-nc.gov



**SUB-CONTRACTOR SIGN OFF AND/OR PERMIT**

Date May 9, 2018  
PROJECT ADDRESS 78 Ocean Blvd.  
Owner Ronald Estridge  
Mailing Address \_\_\_\_\_  
City, State, Zip \_\_\_\_\_  
Phone 804 \_\_\_\_\_

Permit Number 10131  
Fee \$ 100

EXISTING Building Permit Number \_\_\_\_\_ NO FEE (if work is associated with a Building Permit) \_\_\_\_\_

**ELECTRICAL** = Licensee Name Jean Strydom NC License/Classification 28390-L  
Company Name Backline Electric, LLC  
Address PO Box 2511 Phone 252-491-7084  
City State & zip Kitty Hawk, NC 27959 Estimated Project Cost \$900  
Description of Work: Replacing 400 amp meter base.

**PLUMBING** = Licensee Name \_\_\_\_\_ NC License/Classification \_\_\_\_\_  
Company Name \_\_\_\_\_  
Address \_\_\_\_\_ Phone \_\_\_\_\_  
City State & zip \_\_\_\_\_ Estimated Project Cost \_\_\_\_\_  
Description of Work: \_\_\_\_\_

**GAS** = Licensee Name \_\_\_\_\_ NC License/Classification \_\_\_\_\_  
Company Name \_\_\_\_\_  
Address \_\_\_\_\_ Phone \_\_\_\_\_  
City State & zip \_\_\_\_\_ Estimated Project Cost \_\_\_\_\_  
Description of Work: \_\_\_\_\_

**MECHANICAL** = Licensee Name \_\_\_\_\_ NC License/Classification \_\_\_\_\_  
Company Name \_\_\_\_\_  
Address \_\_\_\_\_ Phone \_\_\_\_\_  
City State & zip \_\_\_\_\_ Estimated Project Cost \_\_\_\_\_  
Description of Work: \_\_\_\_\_

**FIRE SPRINKLER** = Licensee Name \_\_\_\_\_ NC License/Classification \_\_\_\_\_  
Company Name \_\_\_\_\_  
Address \_\_\_\_\_ Phone \_\_\_\_\_  
City State & zip \_\_\_\_\_ Estimated Project Cost \_\_\_\_\_  
Description of Work: \_\_\_\_\_

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

[Signature] 5/9/18  
Signature of Licensee Date

Buddy Stroter 5-9-18  
Signature of Permit Official Date  
JUDIS

TOWN OF SOUTHERN SHORES  
 PLANNING AND CODE  
 ENFORCEMENT  
 5375 N Virginia Dare Trl  
 Southern Shores NC 27949  
 (252) 261-2394 ext 4 tel  
 (252) 255-0876 fax  
 www.southernshores-nc.gov



**SUB-CONTRACTOR SIGN OFF AND/OR PERMIT**

Date May 9, 2018  
 PROJECT ADDRESS 5 Seventh St.  
 Owner Gerald Cook  
 Mailing Address \_\_\_\_\_  
 City, State, Zip \_\_\_\_\_  
 Phone 703-489-0601

Permit Number 10132  
 Fee \$ 100

EXISTING Building Permit Number \_\_\_\_\_ NO FEE (if work is associated with a Building Permit) \_\_\_\_\_

**ELECTRICAL** = Licensee Name Sean Strydom NC License/Classification 28390-L  
 Company Name Backline Electric, LLC  
 Address PO Box 2511 Phone 252-491-7084  
 City State & zip Kitty Hawk, NC 27949 Estimated Project Cost \$1200  
 Description of Work: Replacing service meter 2 disconnect panels

**PLUMBING** = Licensee Name \_\_\_\_\_ NC License/Classification \_\_\_\_\_  
 Company Name \_\_\_\_\_  
 Address \_\_\_\_\_ Phone \_\_\_\_\_  
 City State & zip \_\_\_\_\_ Estimated Project Cost \_\_\_\_\_  
 Description of Work: \_\_\_\_\_

**GAS** = Licensee Name \_\_\_\_\_ NC License/Classification \_\_\_\_\_  
 Company Name \_\_\_\_\_  
 Address \_\_\_\_\_ Phone \_\_\_\_\_  
 City State & zip \_\_\_\_\_ Estimated Project Cost \_\_\_\_\_  
 Description of Work: \_\_\_\_\_

**MECHANICAL** = Licensee Name \_\_\_\_\_ NC License/Classification \_\_\_\_\_  
 Company Name \_\_\_\_\_  
 Address \_\_\_\_\_ Phone \_\_\_\_\_  
 City State & zip \_\_\_\_\_ Estimated Project Cost \_\_\_\_\_  
 Description of Work: \_\_\_\_\_

**FIRE SPRINKLER** = Licensee Name \_\_\_\_\_ NC License/Classification \_\_\_\_\_  
 Company Name \_\_\_\_\_  
 Address \_\_\_\_\_ Phone \_\_\_\_\_  
 City State & zip \_\_\_\_\_ Estimated Project Cost \_\_\_\_\_  
 Description of Work: \_\_\_\_\_

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

[Signature] 5/9/18  
 Signature of Licensee Date

[Signature] 5-9-18  
 Signature of Permit Official Date  
 JY DVS





**TOWN OF SOUTHERN SHORES**  
**PLANNING AND CODE ENFORCEMENT**  
 5375 N Virginia Dare Trail, Southern Shores, NC 27949  
 (252) 261-2394 Ext 4 - Office (252) 255-0876 - Fax  
 www.southernshores-nc.gov

**RESIDENTIAL**  
**BUILDING/FLOODPLAIN DEVELOPMENT PERMIT**  
**BUILDING PERMIT #10124**

Location: 244 Hillcrest Drive  
 Parcel: 021501000 PIN: 986818324464  
 District: 20- SOUTHERN SHORES  
 Subdivision: SO/SH BEACH BLK 84  
 LotBlkSect: LOT: 24 BLK: 84 SEC:

**CHUANG, JOHN H**  
 1000 CHARLTON PL  
 HERNDON VA 20170

PHONE #: 703-904-7914

CELL #:

**BUSINESS NAME:** Forrest Seal, LLC  
**CONTRACTOR'S NAME:** Forrest Seal  
**ADDRESS:** PO Box 2333  
**CITY, STATE, ZIP:** Kitty Hawk, NC 27949  
**OFFICE#:** 252-599-2521  
**CELL#:** same  
**FAX#:** 252-255-6339  
**EMAIL:** forrest.seal@gmail.com

**NC G.C. LICENSED CONTRACTOR:**  YES  NO  
**NC G.C. LICENSE NUMBER:** 57289  
**LIMITATION:** Intermediate  
**CLASSIFICATION:** Building  
**QUALIFIER:** Forrest Seal

**LIEN AGENT:** Fidelity National Title company, LLC Entry# 847287  
 19 W. Hargett Street, Suite 507, Raleigh, NC 27601

**DESCRIPTION OF WORK – (Any deviation from the Building Plan or Site Plan requires prior approval):** Construction of a new single family dwelling with an attached garage

**SPECIAL CONDITIONS -**

|  |                                   |  |
|--|-----------------------------------|--|
| <b>TYPE OF CONSTRUCTION:</b> New SFD           | <b>TYPE OF FOUNDATION:</b> Piling | <b>PERMIT TYPE:</b> Residential                        |
|  | <b>HEAT:</b> Heat Pump            | <b>RESIDENCE/2<sup>nd</sup> HOME/RENTAL:</b> Residence |
| <b>TOTAL HEATED/LIVING AREAS (SF):</b> 2,231   | <b>A/C:</b> Heat Pump             | <b>PROPERTY USE:</b> Single Family Dwelling            |
| <b>TOTAL NON-HEATED AREAS (SF):</b> 912        | <b>INTERIOR WALLS:</b> Drywall    | <b>ZONING DISTRICT:</b> RS-1                           |
|  | <b>EXTERIOR WALLS:</b> Vinyl      | <b>ZONING PERMIT #:</b> 2018-53                        |
| <b>NUMBER OF STORIES:</b> 2                    | <b>FIREPLACE:</b> Gas             | <b>DATE ISSUED:</b> 5/9/2018                           |
| <b>BEDROOMS:</b> 3                             | <b>ROOF:</b> Asphalt              |  |
| <b>SEPTIC CAPACITY # OF PERSONS:</b> 6         | <b>INSULATION:</b> Batt           | <b>CAMA PERMIT #:</b> n/a                              |
| <b>BATHS:</b> 2 ½ BATHS: 1                     | <b>ELEVATOR (SF):</b> n/a         | <b>DATE ISSUED:</b>                                    |
| <b>ATTACHED GARAGE:</b> 535                    | <b>DECKS (SF):</b> n/a            | <b>SEPTIC PERMIT #:</b> 27775                          |
| <b>STORAGE ENCLOSURE:</b> N/A <b>POOL:</b> N/A | <b>PORCHES (SF):</b> 377          | <b>DATE ISSUED:</b> 4/30/2018                          |
| <b>FLOOD ZONE:</b> Shaded X                    | <b>WINDOWS MAKE:</b> Viwinco      |  |
| <b>BASE FLOOD ELEVATION:</b> PLUS 2FT=         | <b>TYPE:</b> Double-Hung          |  |

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

|  |                  |                                  |                   |
|--|------------------|----------------------------------|-------------------|
| <b>TOTAL CONSTRUCTION COST</b>                                     | <b>\$398,000</b> |                                  |                   |
| <b>HEATED/LIVING AREA (sf)</b><br>(new square footage)             | 2,231            | X .60/sf (single family) =       | \$1,338.60        |
|  |                  | X .75/sf (all others) =          |                   |
| <b>NON-HEATED AREA (sf)</b><br>(new square footage)                | 912              | X .30/sf (single family) =       | \$273.60          |
|  |                  | X .35/sf (all others) =          |                   |
| <b>REMODEL/REPAIR/ALTERATION</b><br>(no additional square footage) | \$               | X \$10 per \$1,000 of cost =     | \$                |
|  |                  | Pool = \$125                     | \$                |
|  |                  | Zoning Permit Fee = \$50         | \$50.00           |
|  |                  | Plan Review Fee = \$150 or \$100 | \$pd              |
|  |                  | Minimum Permit Fee = \$100       | \$                |
|  |                  | Homeowner's Recovery Fund\$10    | \$10.00           |
|  |                  | <b>TOTAL FEE</b>                 | <b>\$1,672.20</b> |

*[Signature]*  
 Applicant - Owner/Contractor

*J. FORREST SEAL*  
 (Please print and sign name)

*5/10/18*  
 Date Issued

*Buddy Shelton*  
 Building/Code/Zoning Official

*DY DYS*

*5-9-18*  
 Date Approved



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

**SUBCONTRACTOR SIGN OFF AND/OR PERMIT**

FAX to 255-0876

Permit Number 10130 Fee \$100 E \_\_\_\_\_ P \_\_\_\_\_ M   
 Date 5/2/2018  
 Owner Mike Dianna / Megan Paul Street Address \_\_\_\_\_  
 Address #8 Mockingbird Ln. Lot \_\_\_\_\_ Block \_\_\_\_\_ Section \_\_\_\_\_  
 City State, Zip Kitty Hawk N.C. Subdivision \_\_\_\_\_  
 Telephone Number 599-7035 PIN \_\_\_\_\_  
 Flood Zone \_\_\_\_\_

**ELECTRICAL PERMIT**

Licensee Name \_\_\_\_\_ NC License \_\_\_\_\_  
 Company Name \_\_\_\_\_  
 Address \_\_\_\_\_ Phone \_\_\_\_\_  
 City State & zip \_\_\_\_\_ Estimated Project Cost \_\_\_\_\_  
 Description of Work: \_\_\_\_\_

\_\_\_\_\_  
 SIGNATURE OF LICENSEE DATE SIGNATURE OF PERMIT OFFICIAL DATE

**PLUMBING OR GAS PERMIT**

Licensee Name \_\_\_\_\_ NC License \_\_\_\_\_  
 Company Name \_\_\_\_\_  
 Address \_\_\_\_\_ Phone \_\_\_\_\_  
 City State & zip \_\_\_\_\_ Estimated Project Cost \_\_\_\_\_  
 Description of Work: \_\_\_\_\_

\_\_\_\_\_  
 SIGNATURE OF LICENSEE DATE SIGNATURE OF PERMIT OFFICIAL DATE

**MECHANICAL PERMIT**

Licensee Name Edwin T. Miller NC License 23299  
 Company Name Delta Home Heating & Air Cond. Inc. S.C.  
 Address 162 youpon Jr. Phone 252-250-2936  
 City State & zip Kitty Hawk NC. 27949 Estimated Project Cost \$15000  
 Description of Work: We are replacing his heat pump system with a 3.5 ton 14 seer American Standard indoor and outdoor and rework ducts to accommodate a zoning system

Edwin T. Miller \_\_\_\_\_ Buddy Shelton 5-10-18  
 SIGNATURE OF LICENSEE DATE SIGNATURE OF PERMIT OFFICIAL DATE

DUNIS

TOWN OF SOUTHERN SHORES  
 PLANNING AND CODE  
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 Southern Shores NC 27949  
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 www.southernshores-nc.gov



**SUB-CONTRACTOR SIGN OFF AND/OR PERMIT**

Date 5/10/2018  
 PROJECT ADDRESS 35 N. Fox Grape Lane  
 Owner Bill Ceaser  
 Mailing Address 35 N. Fox Grape Lane  
 City, State, Zip Southern Shores, NC 27949  
 Phone 252-202-7727

Permit Number 10134  
 Fee \$ 100

EXISTING Building Permit Number \_\_\_\_\_ NO FEE (if work is associated with a Building Permit) \_\_\_\_\_

**ELECTRICAL** = Licensee Name Barry Justice NC License/Classification 97164  
 Company Name Shoreline Electric of RDH Corp.  
 Address 126 Waterview Ct Phone 252-599-1967  
 City State & zip Grandy, NC 27939 Estimated Project Cost \$1000.00  
 Description of Work: Run 100 Amp 40 set Sub Panel on back of house & connect Septic System.

**PLUMBING** = Licensee Name \_\_\_\_\_ NC License/Classification \_\_\_\_\_  
 Company Name \_\_\_\_\_  
 Address \_\_\_\_\_ Phone \_\_\_\_\_  
 City State & zip \_\_\_\_\_ Estimated Project Cost \_\_\_\_\_  
 Description of Work: \_\_\_\_\_

**GAS** = Licensee Name \_\_\_\_\_ NC License/Classification \_\_\_\_\_  
 Company Name \_\_\_\_\_  
 Address \_\_\_\_\_ Phone \_\_\_\_\_  
 City State & zip \_\_\_\_\_ Estimated Project Cost \_\_\_\_\_  
 Description of Work: \_\_\_\_\_

**MECHANICAL** = Licensee Name \_\_\_\_\_ NC License/Classification \_\_\_\_\_  
 Company Name \_\_\_\_\_  
 Address \_\_\_\_\_ Phone \_\_\_\_\_  
 City State & zip \_\_\_\_\_ Estimated Project Cost \_\_\_\_\_  
 Description of Work: \_\_\_\_\_

**FIRE SPRINKLER** = Licensee Name \_\_\_\_\_ NC License/Classification \_\_\_\_\_  
 Company Name \_\_\_\_\_  
 Address \_\_\_\_\_ Phone \_\_\_\_\_  
 City State & zip \_\_\_\_\_ Estimated Project Cost \_\_\_\_\_  
 Description of Work: \_\_\_\_\_

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

Barry Justice 5/10/18 Buddy J. Howard 5-10-18  
 Signature of Licensee Date Signature of Permit Official Date  
 JH DS

TOWN OF SOUTHERN SHORES  
 PLANNING AND CODE  
 ENFORCEMENT  
 5375 N Virginia Dare Trl  
 Southern Shores NC 27949  
 (252) 261-2394 ext 4 tel  
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 www.southernshores-nc.gov



**SUB-CONTRACTOR SIGN OFF AND/OR PERMIT**

Date 5-11-18  
 PROJECT ADDRESS Town of Southern Shores  
Right-of-way - adjacent to  
 Owner \_\_\_\_\_  
 Mailing Address 15 Dogwood  
 City, State, Zip \_\_\_\_\_  
 Phone \_\_\_\_\_  
Trail

Permit Number 10135  
 Fee \$ n/a

EXISTING Building Permit Number \_\_\_\_\_ NO FEE (if work is associated with a Building Permit) \_\_\_\_\_

**ELECTRICAL** = Licensee Name William Cory Tate NC License/Classification 22087-L  
 Company Name Tate Electric  
 Address 152 Coinjock Canal Rd Phone 252-722-1257  
 City State & zip Coinjock, NC 27923 Estimated Project Cost \$600  
 Description of Work: Electrical service for license plate reader

**PLUMBING** = Licensee Name \_\_\_\_\_ NC License/Classification \_\_\_\_\_  
 Company Name \_\_\_\_\_  
 Address \_\_\_\_\_ Phone \_\_\_\_\_  
 City State & zip \_\_\_\_\_ Estimated Project Cost \_\_\_\_\_  
 Description of Work: \_\_\_\_\_

**GAS** = Licensee Name \_\_\_\_\_ NC License/Classification \_\_\_\_\_  
 Company Name \_\_\_\_\_  
 Address \_\_\_\_\_ Phone \_\_\_\_\_  
 City State & zip \_\_\_\_\_ Estimated Project Cost \_\_\_\_\_  
 Description of Work: \_\_\_\_\_

**MECHANICAL** = Licensee Name \_\_\_\_\_ NC License/Classification \_\_\_\_\_  
 Company Name \_\_\_\_\_  
 Address \_\_\_\_\_ Phone \_\_\_\_\_  
 City State & zip \_\_\_\_\_ Estimated Project Cost \_\_\_\_\_  
 Description of Work: \_\_\_\_\_

**FIRE SPRINKLER** = Licensee Name \_\_\_\_\_ NC License/Classification \_\_\_\_\_  
 Company Name \_\_\_\_\_  
 Address \_\_\_\_\_ Phone \_\_\_\_\_  
 City State & zip \_\_\_\_\_ Estimated Project Cost \_\_\_\_\_  
 Description of Work: \_\_\_\_\_

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

W.C. Tate 5/11/18  
 Signature of Licensee Date

Buddy Shepton 5-11-18  
 Signature of Permit Official Date  
JUDIS



**TOWN OF SOUTHERN SHORES  
PLANNING AND CODE ENFORCEMENT**  
5375 N Virginia Dare Trail, Southern Shores, NC 27949  
(252) 261-2394 Ext 4 - Office (252) 255-0876 - Fax  
www.southernshores-nc.gov

**RESIDENTIAL  
BUILDING/FLOODPLAIN DEVELOPMENT PERMIT  
BUILDING PERMIT #10133**

**Location:** 327 N Dogwood Trail  
**Parcel:** 020985000 PIN: 986809067920  
**District:** 20- SOUTHERN SHORES  
**Subdivision:** SO/SH BLK 92 LOTS 1-11  
**LotBlkSect:** LOT: 1 BLK: 92 SEC:

**DWYER, PATRICE M**  
327 N DOGWOOD TRL  
KITTY HAWK NC 27949  
**PHONE #:**  **CELL #:** 252-207-3393

**BUSINESS NAME:** Compass Edge Construction  
**CONTRACTOR'S NAME:** David Buchanan  
**ADDRESS:** 103 High Dune Lp  
**CITY, STATE, ZIP:** Southern Shores, NC 27949  
**OFFICE#:**  
**CELL#:** 252-202-4217  
**FAX#:**  
**EMAIL:** david@compassedge.com

**NC G.C. LICENSED CONTRACTOR:**  YES  NO  
**NC G.C. LICENSE NUMBER:** 56041  
**LIMITATION:** Intermediate  
**CLASSIFICATION:** Building  
**QUALIFIER:** David Buchanan  
**LIEN AGENT:** n/a

**DESCRIPTION OF WORK – (Any deviation from the Building Plan or Site Plan requires prior approval):** Remodel 2 bathrooms and replacing 4 windows

**SPECIAL CONDITIONS -**

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

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

|  |          |                                  |                 |
|--|----------|----------------------------------|-----------------|
| <b>TOTAL CONSTRUCTION COST</b>                                     | \$35,000 |                                  |                 |
| <b>HEATED/LIVING AREA (sf)</b><br>(new square footage)             |          | X .60/sf (single family) =       | \$              |
|  |          | X .75/sf (all others) =          |                 |
| <b>NON-HEATED AREA (sf)</b><br>(new square footage)                |          | X .30/sf (single family) =       | \$              |
|  |          | X .35/sf (all others) =          |                 |
| <b>REMODEL/REPAIR/ALTERATION</b><br>(no additional square footage) | \$35,000 | X \$10 per \$1,000 of cost =     | \$350.00        |
|  |          | Pool = \$125                     | \$              |
|  |          | Zoning Permit Fee = \$50         | \$              |
|  |          | Plan Review Fee = \$150 or \$100 | \$              |
|  |          | Minimum Permit Fee = \$100       | \$              |
|  |          | Homeowner's Recovery Fund \$10   | \$10.00         |
|  |          | <b>TOTAL FEE</b>                 | <b>\$360.00</b> |

*[Signature]* Applicant - Owner/Contractor  
*[Signature]* Building/Code/Zoning Official  
**DAVID P. BUCHANAN** (Please print and sign name)  
**5-11-18** Date Issued  
**5-11-18** Date Approved  
*[Signature]*



**TOWN OF SOUTHERN SHORES**  
**PLANNING AND CODE ENFORCEMENT**  
 5375 N Virginia Dare Trail, Southern Shores, NC 27949  
 (252) 261-2394 Ext 4 - Office (252) 255-0876 - Fax  
 www.southernshores-nc.gov

**RESIDENTIAL**  
**BUILDING/FLOODPLAIN DEVELOPMENT PERMIT**  
**BUILDING PERMIT #: 10078**

**Location: 3 SIXTH AVE**  
**Parcel: 021122000**  
**PIN: 986810463370**  
**District: [20] SOUTHERN SHORES**  
**Subdiv: [S265] SEA CREST VILLAGE**  
**Lot-Block-Sect: LOT: 3 BLK: 50 SEC:**

**Owner: CHAMBERS, WILLIAM R**  
**Owner: CHAMBERS, ELSIE F**  
**Address: 1209 BLACKSTONE PL**  
**LYNCHBURG VA 24503**

PHONE #: \_\_\_\_\_ CELL #: \_\_\_\_\_

**BUSINESS NAME: Sykes Custom Building**  
**CONTRACTOR'S NAME: Jeffrey J Sykes T/A Sykes custom Building**  
**ADDRESS: PO BOX 518**  
**CITY, STATE, ZIP: KITTY HAWK, NC 27949**  
**OFFICE#: 252-261-2809**  
**CELL#: 252-305-3199**  
**FAX#: 252-261-1613**  
**EMAIL: sykesbuildingobx@gmail.com**

**NC G.C. LICENSED CONTRACTOR:  YES  NO**  
**NC G.C. LICENSE NUMBER: 78636**  
**LIMITATION: LIMITED**  
**CLASSIFICATION: BUILDING**  
**QUALIFIER: JEFFREY J SYKES**

**LIEN AGENT: n/a**

**DESCRIPTION OF WORK – (Any deviation from the Building Plan or Site Plan requires prior approval): Reduce existing dune deck to a max 4ft wide beach access walkway and construct a new dune deck (200sq ft max) eastward**

**SPECIAL CONDITIONS -**

|  |                                   |   |
|--|-----------------------------------|---|
| <b>TYPE OF CONSTRUCTION: Accessory/Dune Deck</b> | <b>TYPE OF FOUNDATION: Piling</b> | <b>PERMIT TYPE: Residential</b>                     |
| <b>HEATED/LIVING AREAS (SF):</b>                 | <b>HEAT:</b>                      | <b>RESIDENCE/2<sup>nd</sup> HOME/RENTAL: Rental</b> |
| <b>NON-HEATED AREAS (SF):</b>                    | <b>A/C:</b>                       | <b>PROPERTY USE: Single Family Dwelling</b>         |
| <b>NUMBER OF STORIES:</b>                        | <b>INTERIOR WALLS:</b>            | <b>ZONING DISTRICT: RS-1</b>                        |
| <b>HABITABLE ROOMS:</b>                          | <b>EXTERIOR WALLS:</b>            | <b>ZONING PERMIT #: 2018-35</b>                     |
| <b>BEDROOMS:</b>                                 | <b>FIREPLACE:</b>                 | <b>DATE ISSUED: 4/3/2018</b>                        |
| <b>OCCUPANCY:</b>                                | <b>ROOF:</b>                      |   |
| <b>BATHS: ½ BATHS:</b>                           | <b>INSULATION:</b>                | <b>CAMA PERMIT #: Minor #2018-10</b>                |
| <b>GARAGE: SHED: STORAGE ENCLOSURE:</b>          | <b>ELEVATOR (SF):</b>             | <b>DATE ISSUED: 3/20/2018</b>                       |
|  |                                   | <b>SEPTIC PERMIT #: n/a</b>                         |
|  | <b>WINDOWS:</b>                   | <b>DATE ISSUED:</b>                                 |
| <b>FLOOD ZONE: VE</b>                            | <b>MAKE:</b>                      |   |
| <b>BASE FLOOD ELEVATION: 12FT PLUS 2FT=</b>      | <b>TYPE:</b>                      |   |

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

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

Applicant - Owner/Contractor: Jeffrey J Sykes (Please print and sign name) 5-15-18  
 Building/Code/Zoning Official: Burley Skelton Date Issued: 4-3-18  
Date Approved



**TOWN OF SOUTHERN SHORES**  
**PLANNING AND CODE ENFORCEMENT**  
 5375 N Virginia Dare Trail, Southern Shores, NC 27949  
 (252) 261-2394 Ext 4 - Office (252) 255-0876 - Fax  
 www.southernshores-nc.gov

**RESIDENTIAL**  
**BUILDING/FLOODPLAIN DEVELOPMENT PERMIT**  
**BUILDING PERMIT #10120**

Location: 77 Gravey Pond Lane

Parcel: 022475381 PIN: 986715644527

District: 20- SOUTHERN SHORES

Subdivision: CHICHAUK

LotBlkSect: LOT: 381 BLK: SEC:

JOHNSON, DIANA LEA  
 107 ERIC NELSON RUN  
 YORKTOWN VA 23693

PHONE #: 850-776-1017

CELL #:

**BUSINESS NAME:**

CONTRACTOR'S NAME: Shawn Johnson

ADDRESS: PO Box 2767

CITY, STATE, ZIP: Kitty Hawk, NC 27949

OFFICE#:

CELL#: 970-485-3904

252-457-5174

FAX#:

EMAIL:

NC G.C. LICENSED CONTRACTOR: \_\_\_ YES \_\_\_ X\_NO

NC G.C. LICENSE NUMBER:

LIMITATION:

CLASSIFICATION:

QUALIFIER:

LIEN AGENT: n/a

DESCRIPTION OF WORK - (Any deviation from the Building Plan or Site Plan requires prior approval): On the ground level - Replace window with an exterior door and install new window

**SPECIAL CONDITIONS -**

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

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

|  |          |                                  |                 |
|--|----------|----------------------------------|-----------------|
| TOTAL CONSTRUCTION COST                                  | \$300.00 |                                  |                 |
| HEATED/LIVING AREA (sf) (new square footage)             |          | X .60/sf (single family) =       | \$              |
|  |          | X .75/sf (all others) =          |                 |
| NON-HEATED AREA (sf) (new square footage)                |          | X .30/sf (single family) =       | \$              |
|  |          | X .35/sf (all others) =          |                 |
| REMODEL/REPAIR/ALTERATION (no additional square footage) | \$       | X \$10 per \$1,000 of cost =     | \$              |
|  |          | Pool = \$125                     | \$              |
|  |          | Zoning Permit Fee = \$50         | \$              |
|  |          | Plan Review Fee = \$150 or \$100 | \$              |
|  |          | Minimum Permit Fee = \$100       | \$100.00        |
|  |          | Homeowner's Recovery Fund\$10    | \$              |
|  |          | <b>TOTAL FEE</b>                 | <b>\$100.00</b> |

Shawn Johnson

*[Signature]*  
 (Please print and sign name)

5/15/18

Applicant - Owner/Contractor

Date Issued

Buddy Shelton

5-7-18

Building/Code/Zoning Official

Date Approved

DJ DVS



**TOWN OF SOUTHERN SHORES  
PLANNING AND CODE ENFORCEMENT**  
5375 N Virginia Dare Trail, Southern Shores, NC 27949  
(252) 261-2394 Ext 4 - Office (252) 255-0876 - Fax  
www.southernshores-nc.gov

**RESIDENTIAL  
BUILDING/FLOODPLAIN DEVELOPMENT PERMIT  
BUILDING PERMIT #9812**

Location: 258 N Dogwood Trail  
  
Parcel: 021390000 PIN: 986813137337  
District: 20- SOUTHERN SHORES  
Subdivision: SO/SH SOUNDSTIDE BLK 109  
LotBlkSect: LOT: 16 BLK: 109 SEC:

BACULIK, ROBERT A EUX  
BACULIK, SUSAN C EUX  
619 N SEGOE RD APT 316  
MADISON WI 53705  
  
PHONE #: \_\_\_\_\_ CELL #: \_\_\_\_\_

BUSINESS NAME: SeaGrove Homes, Inc  
CONTRACTOR'S NAME: Gary Cosgrove  
ADDRESS: PO Box 943  
CITY, STATE, ZIP: Kitty Hawk, NC 27949  
OFFICE#: 252-261-0187  
CELL#: 252-207-5736  
FAX#: 252-261-7664  
EMAIL: seagrovehomes@gmail.com

NC G.C. LICENSED CONTRACTOR:  YES  NO  
NC G.C. LICENSE NUMBER: 31525  
LIMITATION: Unlimited  
CLASSIFICATION: Residential  
QUALIFIER: Gary Cosgrove

LIEN AGENT: First American Title Insurance Company Entry#688697  
19 W. Hargett Street, Suite 507, Raleigh, NC 27601

DESCRIPTION OF WORK -- (Any deviation from the Building Plan or Site Plan requires prior approval): New construction of a single family dwelling  
\*Amended - 5-15-18 - add a 5th bedroom - convert existing bedroom into storage - new 790 sq ft = Additional fee \$474.00

|                                       |                               |  |
|---------------------------------------|-------------------------------|--|
| TYPE OF CONSTRUCTION: New SFD         | TYPE OF FOUNDATION: Piling    | PERMIT TYPE: Residential                         |
| TOTAL HEATED/LIVING AREAS (SF): 2,624 | HEAT: Electric                | RESIDENCE/2 <sup>nd</sup> HOME/RENTAL: Residence |
| TOTAL NON-HEATED AREAS (SF): 1,768    | A/C: Electric                 | PROPERTY USE: Single Family Dwelling             |
| NUMBER OF STORIES: 2                  | INTERIOR WALLS: Drywall       | ZONING DISTRICT: RS-1                            |
| BEDROOMS: 4                           | EXTERIOR WALLS: Composite Lap | ZONING PERMIT #: 2017-79                         |
| SEPTIC CAPACITY # OF PERSONS: 8       | FIREPLACE: Gas                | DATE ISSUED: 7/31/2017                           |
| BATHS: 3 1/2 BATHS: 1                 | ROOF: Asphalt                 | CAMA PERMIT #:                                   |
| ATTACHED GARAGE(SF): 998              | INSULATION: Batt              | DATE ISSUED:                                     |
| STORAGE ENCLOSURE: POOL:              | ELEVATOR (SF):                | SEPTIC PERMIT #: 26981                           |
| FLOOD ZONE: Shaded X                  | DECKS:                        | DATE ISSUED: 7/13/2017                           |
| BASE FLOOD ELEVATION: PLUS 2FT=       | PORCHES: 740                  |  |
|                                       | WINDOWS MAKE: Anderson        |  |
|                                       | TYPE: Double-Hung             |  |

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

|  |           |                                  |                   |
|--|-----------|----------------------------------|-------------------|
| TOTAL CONSTRUCTION COST                                  | \$577,809 | + \$65,000                       | \$642,809         |
| HEATED/LIVING AREA (sf) (new square footage)             | 2,624     | X .60/sf (single family)         | = \$1,574.40      |
| NON-HEATED AREA (sf) (new square footage)                | 1,768     | X .75/sf (all others)            | = \$530.40        |
| REMODEL/REPAIR/ALTERATION (no additional square footage) | \$        | X \$10 per \$1,000 of cost       | = \$              |
|  |           | Pool                             | = \$125 \$        |
|  |           | Zoning Permit Fee                | = \$50 \$50.00    |
|  |           | Plan Review Fee = \$150 or \$100 | \$pd              |
|  |           | Minimum Permit Fee = \$100       | \$                |
|  |           | Homeowner's Recovery Fund\$10    | \$10.00           |
|  |           | <b>TOTAL FEE</b>                 | <b>\$2,164.80</b> |

Gary Cosgrove Gary Cosgrove  
Applicant - Owner/Contractor (Please print and sign name)  
Buddy Shelton  
Building/Code/Zoning Official  
8-1-17  
Date Issued  
7-31-17  
Date Approved



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



**SUBCONTRACTOR SIGN OFF AND/OR PERMIT**

Date 5/16/2018  
PROJECT ADDRESS 217 HILLCREST DRIVE  
Owner FELICIA PARKINSON  
Mailing Address PO BOX 2115  
City, State, Zip KITTY HAWK, N.C. 27949  
Phone 703-303-9350

Permit Number 10136

Fee \$ 100

EXISTING Building Permit Number \_\_\_\_\_ NO FEE \_\_\_\_\_

**ELECTRICAL** = Licensee Name FREDERICK MARKLIN NC License/Classification 22222-L / LTD  
Company Name R A HOY HEATING & A/C INC  
Address P O BOX 179 Phone (252) 261-2008  
City State & zip KITTY HAWK, NC 27949 Estimated Project Cost INCL in MECH  
Description of Work: CONNECTION OF MECH EQUIP BELOW

**PLUMBING** = Licensee Name \_\_\_\_\_ NC License/Classification \_\_\_\_\_  
Company Name \_\_\_\_\_  
Address \_\_\_\_\_ Phone \_\_\_\_\_  
City State & zip \_\_\_\_\_ Estimated Project Cost \_\_\_\_\_  
Description of Work: \_\_\_\_\_

**GAS** = Licensee Name \_\_\_\_\_ NC License/Classification \_\_\_\_\_  
Company Name \_\_\_\_\_  
Address \_\_\_\_\_ Phone \_\_\_\_\_  
City State & zip \_\_\_\_\_ Estimated Project Cost \_\_\_\_\_  
Description of Work: \_\_\_\_\_

**MECHANICAL** = Licensee Name DOUGLAS WAKELEY NC License/Classification 13056 / H 2 & 3 P-1  
Company Name R A HOY HEATING & A/C INC  
Address P O BOX 179 Phone (252) 261-2008  
City State & zip KITTY HAWK, NC 27949 Estimated Project Cost ~~\$12,000~~ \$6,625  
Description of Work: C/O 3 TON 16 SEER TRANE SYSTEM WHOLE HOUSE

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

Douglas Wakeley 05/16/2018  
Signature of Licensee Date

Brandon J. [Signature] 5-16-18  
Signature of Permit Official Date

Andrew John [Signature] (ELEC)

JULIUS

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



**SUBCONTRACTOR SIGN OFF AND/OR PERMIT**

Date 05/15/2018  
PROJECT ADDRESS 154 CROOKED BACK LOOP  
Owner RICHARD LISTON  
Mailing Address 154 CROOKED BACK LOOP  
City, State, Zip SOUTHERN SHORES, N.C. 27949  
Phone 252-255-0252

Permit Number 10137  
Fee \$ 100

EXISTING Building Permit Number \_\_\_\_\_ NO FEE \_\_\_\_\_

**ELECTRICAL** = Licensee Name FREDERICK MARKLIN NC License/Classification 22222-L / LTD  
Company Name R A HOY HEATING & A/C INC  
Address P O BOX 179 Phone (252) 261-2008  
City State & zip KITTY HAWK, NC 27949 Estimated Project Cost INCL in MECH  
Description of Work: CONNECTION OF MECH EQUIP BELOW

**PLUMBING** = Licensee Name \_\_\_\_\_ NC License/Classification \_\_\_\_\_  
Company Name \_\_\_\_\_  
Address \_\_\_\_\_ Phone \_\_\_\_\_  
City State & zip \_\_\_\_\_ Estimated Project Cost \_\_\_\_\_  
Description of Work: \_\_\_\_\_

**GAS** = Licensee Name \_\_\_\_\_ NC License/Classification \_\_\_\_\_  
Company Name \_\_\_\_\_  
Address \_\_\_\_\_ Phone \_\_\_\_\_  
City State & zip \_\_\_\_\_ Estimated Project Cost \_\_\_\_\_  
Description of Work: \_\_\_\_\_

**MECHANICAL** = Licensee Name DOUGLAS WAKELEY NC License/Classification 13056 / H 2 & 3 P-1  
Company Name R A HOY HEATING & A/C INC  
Address P O BOX 179 Phone (252) 261-2008  
City State & zip KITTY HAWK, NC 27949 Estimated Project Cost ~~\$5,000~~ \$6,484  
Description of Work: C/O 2 TON 16 SEER TRANE SYSTEM LOWER LEVEL WITH T6 TSTAT

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

Douglas Wakeley 05/15/18  
Signature of Licensee Date  
Richard Liston (ELEC)

Buddy Shott 5-16-18  
Signature of Permit Official Date  
By DLS

TOWN OF SOUTHERN SHORES  
PLANNING AND CODE  
ENFORCEMENT  
5375 N Virginia Dare Trl  
Southern Shores NC 27949  
(252) 261-2394 ext 4 tel  
(252) 255-0876 fax  
[www.southernshores-nc.gov](http://www.southernshores-nc.gov)



**SUB-CONTRACTOR SIGN OFF AND/OR PERMIT**

Date 5-16-18

PROJECT ADDRESS 102 Duck Woods Dr

Owner John Kuhn  
Mailing Address 102 Duck Woods Dr  
City, State, Zip Southern Shores  
Phone 252-305-5586

Permit Number 10138  
Fee \$ 100

EXISTING Building Permit Number \_\_\_\_\_ NO FEE (if work is associated with a Building Permit) \_\_\_\_\_

**ELECTRICAL** = Licensee Name N.W. Francis NC License/Classification 7784-L  
Company Name N.W. Francis  
Address 4238 Poor Ridge Rd Phone 252-202-5350  
City State & zip Kitty Hawk, NC 27949 Estimated Project Cost \$300  
Description of Work: Check electrical installation of heat pump

**PLUMBING** = Licensee Name \_\_\_\_\_ NC License/Classification \_\_\_\_\_  
Company Name \_\_\_\_\_  
Address \_\_\_\_\_ Phone \_\_\_\_\_  
City State & zip \_\_\_\_\_ Estimated Project Cost \_\_\_\_\_  
Description of Work: \_\_\_\_\_

**GAS** = Licensee Name \_\_\_\_\_ NC License/Classification \_\_\_\_\_  
Company Name \_\_\_\_\_  
Address \_\_\_\_\_ Phone \_\_\_\_\_  
City State & zip \_\_\_\_\_ Estimated Project Cost \_\_\_\_\_  
Description of Work: \_\_\_\_\_

**MECHANICAL** = Licensee Name Ray Etheridge NC License/Classification 27675 H3F  
Company Name ALL-IN-ONE-MECH  
Address P.O. Box 3392 Phone 252-202-5350  
City State & zip Kitty Hawk, NC 27949 Estimated Project Cost \$3200  
Description of Work: install new 3 1/2 ton R410a, 14SEFR american standard heat pump.

**FIRE SPRINKLER** = Licensee Name \_\_\_\_\_ NC License/Classification \_\_\_\_\_  
Company Name \_\_\_\_\_  
Address \_\_\_\_\_ Phone \_\_\_\_\_  
City State & zip \_\_\_\_\_ Estimated Project Cost \_\_\_\_\_  
Description of Work: \_\_\_\_\_

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

N.W. Francis 5-16-18  
Signature of Licensee Date

Buddy Shelton 5-16-18  
Signature of Permit Official Date  
JM DS

TOWN OF SOUTHERN SHORES  
PLANNING AND CODE  
ENFORCEMENT  
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Southern Shores NC 27949  
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(252) 255-0876 fax  
www.southernshores-nc.gov



SUB-CONTRACTOR SIGN OFF AND/OR PERMIT

Date 5-16-18

PROJECT ADDRESS 78 Spindrift Tr.

Owner Nancy Hurdle  
Mailing Address 618 Windmere Road  
City, State, Zip Newport News Va 23602  
Phone 757-754-1841

Permit Number 10139  
Fee \$ 100

EXISTING Building Permit Number \_\_\_\_\_ NO FEE (if work is associated with a Building Permit) \_\_\_\_\_

**ELECTRICAL** = Licensee Name N.W. Francis NC License/Classification 7784-L  
Company Name N.W. Francis  
Address 4238 Pooe Ridge Rd Phone 252-202-5350  
City State & zip Kitty Hawk, N.C. Estimated Project Cost \$300  
Description of Work: Check electrical installation of heat pump system

**PLUMBING** = Licensee Name \_\_\_\_\_ NC License/Classification \_\_\_\_\_  
Company Name \_\_\_\_\_  
Address \_\_\_\_\_ Phone \_\_\_\_\_  
City State & zip \_\_\_\_\_ Estimated Project Cost \_\_\_\_\_  
Description of Work: \_\_\_\_\_

**GAS** = Licensee Name \_\_\_\_\_ NC License/Classification \_\_\_\_\_  
Company Name \_\_\_\_\_  
Address \_\_\_\_\_ Phone \_\_\_\_\_  
City State & zip \_\_\_\_\_ Estimated Project Cost \_\_\_\_\_  
Description of Work: \_\_\_\_\_

**MECHANICAL** = Licensee Name Ray Etteridge NC License/Classification 27675 H3I  
Company Name ALL-IN-ONE-MECH  
Address P.O. Box 3392 Phone 252-202-5350  
City State & zip Kitty Hawk, N.C. 27949 Estimated Project Cost \$5500  
Description of Work: Install new 2 1/2 ton, R410a, 14 SEER American Standard heat pump system for top level.

**FIRE SPRINKLER** = Licensee Name \_\_\_\_\_ NC License/Classification \_\_\_\_\_  
Company Name \_\_\_\_\_  
Address \_\_\_\_\_ Phone \_\_\_\_\_  
City State & zip \_\_\_\_\_ Estimated Project Cost \_\_\_\_\_  
Description of Work: \_\_\_\_\_

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

N.W. Francis 5-16-18  
Signature of Licensee Date

Buddy Sheeter 5-16-18  
Signature of Permit Official Date  
JLHS



**TOWN OF SOUTHERN SHORES  
PLANNING AND CODE ENFORCEMENT**  
5375 N Virginia Dare Trail, Southern Shores, NC 27949  
(252) 261-2394 Ext 4 - Office (252) 255-0876 - Fax  
[www.southernshores-nc.gov](http://www.southernshores-nc.gov)

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

**Location:** 1 Third Avenue  
**Parcel:** 021060000 PIN: 986810458266  
**District:** 20- SOUTHERN SHORES  
**Subdivision:** SEA CREST VILLAGE  
**LotBlkSect:** LOT: 4 BLK: 47 SEC:

**BOTTOMLEY, BRUCE D EUX  
BOTTOMLEY, SHARON A EUX  
30 LOST DISTRICT DR  
NEW CANAAN CT 06840**  
**PHONE #:** 203-918-3121 **CELL #:**

**BUSINESS NAME:** Joseph Edward Rhodes, Jr  
**CONTRACTOR'S NAME:** Joe Rhodes  
**ADDRESS:** 235 Roanoke Dr.  
**CITY, STATE, ZIP:** Kill Devil Hills, NC 27948  
**OFFICE#:**  
**CELL#:** 252-261-7020  
**FAX#:**  
**EMAIL:** joeobx7@gmail.com

**NC G.C. LICENSED CONTRACTOR:**  YES  NO  
**NC G.C. LICENSE NUMBER:** 23949  
**LIMITATION:** Intermediate  
**CLASSIFICATION:** Building  
**QUALIFIER:** Joseph Edward Rhodes, Jr

**LIEN AGENT:** Chicago Title Co. Entry # 799668  
19W. Hargett St, Suite 507 / Raleigh, NC 27601

**DESCRIPTION OF WORK - (Any deviation from the Building Plan or Site Plan requires prior approval):** Repair existing house pilings - sister pilings. *\*Amended 2-14-18 - new windows, siding, hvac, plumbing, etc = additional*

**SPECIAL CONDITIONS -** All wood below base flood elevation is required to be treated *2-14-18 J.R. cost = \$80,000*

|  |                                   |   |
|--|-----------------------------------|---|
| <b>TYPE OF CONSTRUCTION:</b> Repair              | <b>TYPE OF FOUNDATION:</b> piling | <b>PERMIT TYPE:</b> Residential                                   |
|  | <b>HEAT:</b>                      | <b>RESIDENCE/2<sup>nd</sup> HOME/RENTAL:</b> 2 <sup>nd</sup> Home |
| <b>TOTAL HEATED/LIVING AREAS (SF):</b>           | <b>A/C:</b>                       | <b>PROPERTY USE:</b> Single Family Dwelling                       |
| <b>TOTAL NON-HEATED AREAS (SF):</b>              | <b>INTERIOR WALLS:</b>            | <b>ZONING DISTRICT:</b> RS-1                                      |
|  | <b>EXTERIOR WALLS:</b>            | <b>ZONING PERMIT #:</b> n/a <i>2018-54</i>                        |
| <b>NUMBER OF STORIES:</b>                        | <b>FIREPLACE:</b>                 | <b>DATE ISSUED:</b> <i>5-17-18</i>                                |
| <b>BEDROOMS:</b>                                 | <b>ROOF:</b>                      |   |
| <b>SEPTIC CAPACITY # OF PERSONS:</b>             | <b>INSULATION:</b>                | <b>CAMA PERMIT #:</b> n/a <i>2018-13</i>                          |
| <b>BATHS:</b> 1/2 BATHS:                         | <b>ELEVATOR (SF):</b>             | <b>DATE ISSUED:</b> <i>5-14-18</i>                                |
| <b>GARAGE:</b> STORAGE BLDG:                     | <b>DECKS (SF):</b>                | <b>SEPTIC PERMIT #:</b> n/a                                       |
| <b>STORAGE ENCLOSURE:</b> POOL:                  | <b>PORCHES (SF):</b>              | <b>DATE ISSUED:</b>   |
| <b>FLOOD ZONE:</b> VE                            | <b>WINDOWS MAKE:</b>              |   |
| <b>BASE FLOOD ELEVATION:</b> 12FT PLUS 2FT= 14FT | <b>TYPE:</b>                      |   |

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

|   |         |                                  |                      |                 |
|---|---------|----------------------------------|----------------------|-----------------|
| <b>TOTAL CONSTRUCTION COST</b>                                  | \$5,600 | + \$80,000 = \$85,600            | + \$5,200 = \$90,800 |                 |
| <b>HEATED/LIVING AREA (sf) (new square footage)</b>             |         | X .60/sf (single family) =       |                      | \$              |
| <b>NON-HEATED AREA (sf) (new square footage)</b>                |         | X .75/sf (all others) =          |                      | \$              |
| <b>REMODEL/REPAIR/ALTERATION (no additional square footage)</b> | \$5,600 | X .30/sf (single family) =       |                      | \$              |
|   |         | X .35/sf (all others) =          |                      | \$              |
| <i>Amended - 2-14-18 (see above)*</i>                           |         | Pool = \$125                     |                      | \$              |
| <i>Additional const. cost = \$80,000</i>                        |         | Zoning Permit Fee = \$50         |                      | \$              |
| <i>Additional fee = \$800.00</i>                                |         | Plan Review Fee = \$150 or \$100 |                      | \$              |
|   |         | Minimum Permit Fee = \$100       |                      | \$100.00        |
|   |         | Homeowner's Recovery Fund \$10   |                      | \$10.00         |
|   |         | <b>TOTAL FEE</b>                 |                      | <b>\$110.00</b> |

*Joseph Edward Rhodes Jr* 12-6-17  
Applicant - Owner/Contractor (Please print and sign name) Date Issued  
*Buray Shelton* 12-5-17  
Building/Code/Zoning Official Date Approved  
*Jay DNS*

TOWN OF SOUTHERN SHORES  
PLANNING AND CODE  
ENFORCEMENT

5375 N Virginia Dare Trl  
Southern Shores NC 27949  
(252) 261-2394 ext 4 tel  
(252) 255-0876 fax  
[www.southernshores-nc.gov](http://www.southernshores-nc.gov)



**SUB-CONTRACTOR SIGN OFF AND/OR PERMIT**

Date 5/11/18

PROJECT ADDRESS 5597-A North Croatan Highway  
Kitty Hawk, NC 27949

Owner Starbucks  
Mailing Address 5597-A North Croatan Hwy  
City, State, Zip Kitty Hawk, NC 27949  
Phone 252-255-0790

Permit Number 10140  
Fee \$ ~~100~~ \$100

EXISTING Building Permit Number \_\_\_\_\_ NO FEE (if work is associated with a Building Permit) \_\_\_\_\_

**ELECTRICAL** = Licensee Name \_\_\_\_\_ NC License/Classification \_\_\_\_\_  
Company Name \_\_\_\_\_  
Address \_\_\_\_\_ Phone \_\_\_\_\_  
City State & zip \_\_\_\_\_ Estimated Project Cost \_\_\_\_\_  
Description of Work: \_\_\_\_\_

**PLUMBING** = Licensee Name \_\_\_\_\_ NC License/Classification \_\_\_\_\_  
Company Name \_\_\_\_\_  
Address \_\_\_\_\_ Phone \_\_\_\_\_  
City State & zip \_\_\_\_\_ Estimated Project Cost \_\_\_\_\_  
Description of Work: \_\_\_\_\_

**GAS** = Licensee Name \_\_\_\_\_ NC License/Classification \_\_\_\_\_  
Company Name \_\_\_\_\_  
Address \_\_\_\_\_ Phone \_\_\_\_\_  
City State & zip \_\_\_\_\_ Estimated Project Cost \_\_\_\_\_  
Description of Work: \_\_\_\_\_

**MECHANICAL** = Licensee Name Jeff Harris NC License/Classification 23944/mechanical  
Company Name CMS mechanical  
Address 445 West Dr Phone 321-473-0503  
City State & zip Melbourne FL 32904 Estimated Project Cost \$27,796.06  
Description of Work: HVAC replacement / like for like change out

**FIRE SPRINKLER** = Licensee Name \_\_\_\_\_ NC License/Classification \_\_\_\_\_  
Company Name \_\_\_\_\_  
Address \_\_\_\_\_ Phone \_\_\_\_\_  
City State & zip \_\_\_\_\_ Estimated Project Cost \_\_\_\_\_  
Description of Work: \_\_\_\_\_

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

Jeff Harris 5-11-18  
Signature of Licensee Date

Buddy Shelton 5-21-18  
Signature of Permit Official Date  
DU DLS



**TOWN OF SOUTHERN SHORES  
PLANNING AND CODE ENFORCEMENT**  
5375 N Virginia Dare Trail, Southern Shores, NC 27949  
(252) 261-2394 Ext 4 - Office (252) 255-0876 - Fax  
www.southernshores-nc.gov

**RESIDENTIAL  
BUILDING/FLOODPLAIN DEVELOPMENT PERMIT  
BUILDING PERMIT #10141**

Location: 333 Hillcrest Drive

Parcel: 020994004 PIN: 986809179161

District: 20- SOUTHERN SHORES

Subdivision: SO/SH BLK 60

LotBlkSect: LOT: 4 BLK: 60 SEC:

NOBLE, RICHARD SCOTT  
D/B/A R SCOTT NOBLE CONSTRUCTION  
3121 MARY HILL CT  
KILL DEVIL HILLS NC 27948

PHONE #:

CELL #: 252-202-2453

BUSINESS NAME: Richard Scott Noble  
CONTRACTOR'S NAME: Richard Scott Noble  
ADDRESS: 3121 Maryhill Ct  
CITY, STATE, ZIP: Kill Devil Hills, NC 27948  
OFFICE#:  
CELL#: 252-202-2453  
FAX#:  
EMAIL:

NC G.C. LICENSED CONTRACTOR:  YES  NO  
NC G.C. LICENSE NUMBER: 52132  
LIMITATION: Limited  
CLASSIFICATION: Residential  
QUALIFIER: Richard Scott Noble

LIEN AGENT: First American Title Insurance Company Entry# 851773  
19 W. Hargett Street, Suite 507, Raleigh, NC 27601

DESCRIPTION OF WORK – (Any deviation from the Building Plan or Site Plan requires prior approval): Construction of a new single family dwelling with an attached garage

SPECIAL CONDITIONS -

|                                       |                            |  |
|---------------------------------------|----------------------------|--|
| TYPE OF CONSTRUCTION: New SFD         | TYPE OF FOUNDATION: Piling | PERMIT TYPE: Residential                         |
| TOTAL HEATED/LIVING AREAS (SF): 2,773 | HEAT: Heat pump            | RESIDENCE/2 <sup>nd</sup> HOME/RENTAL: Residence |
| TOTAL NON-HEATED AREAS (SF): 1,405    | A/C: Heat pump             | PROPERTY USE: Single Family Dwelling             |
| NUMBER OF STORIES: 2                  | INTERIOR WALLS: Drywall    | ZONING DISTRICT: RS-1                            |
| BEDROOMS: 4                           | EXTERIOR WALLS: LP Smart   | ZONING PERMIT #: 2018-55                         |
| SEPTIC CAPACITY # OF PERSONS: 8       | FIREPLACE: Gas             | DATE ISSUED: 5/21/2018                           |
| BATHS: 3 ½ BATHS: 1                   | ROOF: Asphalt              | CAMA PERMIT #: n/a                               |
| ATTACHED GARAGE: 667                  | INSULATION: Batt           | DATE ISSUED:                                     |
| STORAGE ENCLOSURE: N/A POOL: N/A      | ELEVATOR (SF): n/a         | SEPTIC PERMIT #: 27817                           |
| FLOOD ZONE: Shaded X                  | DECKS (SF): 144            | DATE ISSUED: 5/15/2018                           |
| BASE FLOOD ELEVATION: PLUS 2FT=       | PORCHES (SF): 594          |  |
|                                       | WINDOWS MAKE: Viwinco      |  |
|                                       | TYPE: Double-hung          |  |

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

|   |           |                                    |                   |
|---|-----------|------------------------------------|-------------------|
| TOTAL CONSTRUCTION COST                                     | \$333,000 |                                    |                   |
| HEATED/LIVING AREA (sf)<br>(new square footage)             | 2,773     | X .60/sf (single family) =         | \$1,663.80        |
|   |           | X .75/sf (all others) =            |                   |
| NON-HEATED AREA (sf)<br>(new square footage)                | 1,405     | X .30/sf (single family) =         | \$421.50          |
|   |           | X .35/sf (all others) =            |                   |
| REMODEL/REPAIR/ALTERATION<br>(no additional square footage) | \$        | X \$10 per \$1,000 of cost =       | \$                |
|   |           | Pool = \$125                       | \$n/a             |
|   |           | Zoning Permit Fee = \$50           | \$50.00           |
|   |           | Lot Disturbance Permit Fee = \$100 | \$100.00          |
|   |           | Minimum Permit Fee = \$100         | \$                |
|   |           | Homeowner's Recovery Fund \$10     | \$10.00           |
|   |           | <b>TOTAL FEE</b>                   | <b>\$2,245.30</b> |

*Richard S. Noble*  
Applicant - Owner/Contractor (Please print and sign name)

5/23/18  
Date Issued

*Buddy Stewart*  
Building/Code/Zoning Official *DU DS*

5-21-18  
Date Approved

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



SUB-CONTRACTOR SIGN OFF AND/OR PERMIT

Date 5-24-18  
PROJECT ADDRESS 20 Third Ave.  
Owner Douglas R. Brindley  
Mailing Address 20 Third Ave  
City, State, Zip Kathy Hawk NC 27949  
Phone 261-4484

Permit Number 10146  
Fee \$ 100

EXISTING Building Permit Number \_\_\_\_\_ NO FEE (if work is associated with a Building Permit) \_\_\_\_\_

**ELECTRICAL** = Licensee Name Jeff Fischer NC License/Classification 15973-004  
Company Name Fischer Building Co  
Address 105 Rhodons Dr Phone 202-9468  
City State & zip Kath NC 27948 Estimated Project Cost 4000  
Description of Work: Wire air handlers & Lead pump

**PLUMBING** = Licensee Name \_\_\_\_\_ NC License/Classification \_\_\_\_\_  
Company Name \_\_\_\_\_  
Address \_\_\_\_\_ Phone \_\_\_\_\_  
City State & zip \_\_\_\_\_ Estimated Project Cost \_\_\_\_\_  
Description of Work: \_\_\_\_\_

**GAS** = Licensee Name \_\_\_\_\_ NC License/Classification \_\_\_\_\_  
Company Name \_\_\_\_\_  
Address \_\_\_\_\_ Phone \_\_\_\_\_  
City State & zip \_\_\_\_\_ Estimated Project Cost \_\_\_\_\_  
Description of Work: \_\_\_\_\_

**MECHANICAL** = Licensee Name Brian McDonald NC License/Classification 12643-H23 Chrs1  
Company Name Outer Banks Heating & Cooling  
Address Box 1415 Phone 441-1740  
City State & zip Marys Head NC 27959 Estimated Project Cost 8462  
Description of Work: Replace HVAC with 16.00 seer York air handler and heat pump

**FIRE SPRINKLER** = Licensee Name \_\_\_\_\_ NC License/Classification \_\_\_\_\_  
Company Name \_\_\_\_\_  
Address \_\_\_\_\_ Phone \_\_\_\_\_  
City State & zip \_\_\_\_\_ Estimated Project Cost \_\_\_\_\_  
Description of Work: \_\_\_\_\_

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

[Signature]  
Signature of Licensee  
5-8-18  
Date

Buddy Smith 5-24-18  
Signature of Permit Official Date  
[Signature]



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



SUB-CONTRACTOR SIGN OFF AND/OR PERMIT

Date 5-24-18  
PROJECT ADDRESS 183 Duck Rd.  
Owner Reese W. Patterson  
Mailing Address 700 W. Talloway  
City, State, Zip Kitty Hawk NC 27949  
Phone \_\_\_\_\_

Permit Number 10147  
Fee \$ 100

EXISTING Building Permit Number \_\_\_\_\_ NO FEE (if work is associated with a Building Permit) \_\_\_\_\_

**ELECTRICAL** = Licensee Name Jeff Fiedel NC License/Classification 15973-004  
Company Name Fischer Buildings Co  
Address 105 Rhodons Dr Phone 202-9468  
City State & zip KSH NC 27948 Estimated Project Cost 400.00  
Description of Work: wire air handler & heat pump

**PLUMBING** = Licensee Name \_\_\_\_\_ NC License/Classification \_\_\_\_\_  
Company Name \_\_\_\_\_  
Address \_\_\_\_\_ Phone \_\_\_\_\_  
City State & zip \_\_\_\_\_ Estimated Project Cost \_\_\_\_\_  
Description of Work: \_\_\_\_\_

**GAS** = Licensee Name \_\_\_\_\_ NC License/Classification \_\_\_\_\_  
Company Name \_\_\_\_\_  
Address \_\_\_\_\_ Phone \_\_\_\_\_  
City State & zip \_\_\_\_\_ Estimated Project Cost \_\_\_\_\_  
Description of Work: \_\_\_\_\_

**MECHANICAL** = Licensee Name Brian McDonald NC License/Classification 12443 H2-3 Class 1  
Company Name Outer Banks Heating & Cooling  
Address Bx 1415 Phone 441-1740  
City State & zip Nags Head NC 27959 Estimated Project Cost 6139.00  
Description of Work: Replace air handler & heat pump with 14 seer  
3 ton Daikin air handler & heat pump

**FIRE SPRINKLER** = Licensee Name \_\_\_\_\_ NC License/Classification \_\_\_\_\_  
Company Name \_\_\_\_\_  
Address \_\_\_\_\_ Phone \_\_\_\_\_  
City State & zip \_\_\_\_\_ Estimated Project Cost \_\_\_\_\_  
Description of Work: \_\_\_\_\_

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

[Signature]  
Signature of Licensee  
5-24-18  
Date

[Signature]  
Signature of Permit Official  
5-24-18  
Date



**TOWN OF SOUTHERN SHORES  
PLANNING AND CODE ENFORCEMENT**  
5375 N Virginia Dare Trail, Southern Shores, NC 27949  
(252) 261-2394 Ext 4 - Office (252) 255-0876 - Fax  
[www.southernshores-nc.gov](http://www.southernshores-nc.gov)

**COMMERCIAL  
BUILDING/FLOODPLAIN DEVELOPMENT PERMIT  
BUILDING PERMIT #10144**

**Location: 6 Juniper Trail**

**Parcel: 027050000 PIN: 986720817206  
District: 20- SOUTHERN SHORES  
Subdivision: SO/SH COMMERCIAL  
LotBlkSect: LOT: 2 BLK: SEC:**

**TOWNEBANK  
ATTN: ESCROW SERVICES  
PO BOX 5310  
GLEN ALLEN VA 23058**

**PHONE #: 757-638-6731**

**CELL #:**

**BUSINESS NAME: Sussex Development Corporation  
CONTRACTOR'S NAME: Sussex Development Corporation  
ADDRESS: 109 S Lynnhaven Rd, Suite 200  
CITY, STATE, ZIP: Virginia Beach, Virginia 23452  
OFFICE#: 757-422-2400  
CELL#: 757-636-5880  
FAX#: 757-422-0398  
EMAIL: rdavis@sussexdevelopment.com**

**NC G.C. LICENSED CONTRACTOR:  YES  NO  
NC G.C. LICENSE NUMBER: 47542  
LIMITATION: Unlimited  
CLASSIFICATION: Building  
QUALIFIER: Harry L. Davis, III**

**LIEN AGENT: n/a**

**DESCRIPTION OF WORK – (Any deviation from the Building Plan or Site Plan requires prior approval): Repair/replace – front wall of the over hang roof including closing over window and replacing siding**

**SPECIAL CONDITIONS - All wood below base flood elevation is required to be treated / Nonconforming structure (FEMA) - <than 50%**

|  |                            |  |
|--|----------------------------|--|
| <b>TYPE OF CONSTRUCTION: Repair</b>            | <b>TYPE OF FOUNDATION:</b> | <b>PERMIT TYPE: Commercial</b>                   |
|  | <b>HEAT:</b>               | <b>RESIDENCE/2<sup>nd</sup> HOME/RENTAL: n/a</b> |
| <b>TOTAL HEATED/LIVING AREAS (SF):</b>         | <b>A/C:</b>                | <b>PROPERTY USE: Commercial/Bank</b>             |
| <b>TOTAL NON-HEATED AREAS (SF):</b>            | <b>INTERIOR WALLS:</b>     | <b>ZONING DISTRICT: C-General Commercial</b>     |
|  | <b>EXTERIOR WALLS:</b>     | <b>ZONING PERMIT #: n/a</b>                      |
| <b>NUMBER OF STORIES:</b>                      | <b>FIREPLACE:</b>          | <b>DATE ISSUED:</b>                              |
| <b>BEDROOMS:</b>                               | <b>ROOF:</b>               |  |
| <b>SEPTIC CAPACITY # OF PERSONS:</b>           | <b>INSULATION:</b>         | <b>CAMA PERMIT #: n/a</b>                        |
| <b>BATHS: ½ BATHS:</b>                         | <b>ELEVATOR (SF):</b>      | <b>DATE ISSUED:</b>                              |
| <b>GARAGE: STORAGE BLDG:</b>                   | <b>DECKS:</b>              | <b>SEPTIC PERMIT #: n/a</b>                      |
| <b>STORAGE ENCLOSURE: POOL:</b>                | <b>PORCHES:</b>            | <b>DATE ISSUED:</b>                              |
| <b>FLOOD ZONE: AE</b>                          | <b>WINDOWS MAKE:</b>       |  |
| <b>BASE FLOOD ELEVATION: 7FT PLUS 2FT= 9FT</b> | <b>TYPE:</b>               |  |

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

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

**Applicant - Owner/Contractor**

**(Please print and sign name)**

**Date Issued**

**Building/Code/Zoning Official**

**Date Approved**

*[Signature]*  
**Bundy Shelton**

*[Signature]*

*5/24/18*  
**5-23-18**

*[Signature]*



**TOWN OF SOUTHERN SHORES  
PLANNING AND CODE ENFORCEMENT**  
5375 N Virginia Dare Trail, Southern Shores, NC 27949  
(252) 261-2394 Ext 4 - Office (252) 255-0876 - Fax  
[www.southernshores-nc.gov](http://www.southernshores-nc.gov)

**RESIDENTIAL  
BUILDING/FLOODPLAIN DEVELOPMENT PERMIT  
BUILDING PERMIT #10143**

**Location:** 14 Fourth Avenue  
**Parcel:** 021115000 PIN: 986810359695  
**District:** 20- SOUTHERN SHORES  
**Subdivision:** SEA CREST VILLAGE  
**LotBlkSect:** LOT: 18 BLK: 49 SEC:

**STEWART, JESSE JEROME JR TRUSTEE TRS  
STEWART, SUE JUDKINS TRUSTEE TRS**  
1600 RIVER FARM DR  
ALEXANDRIA VA 22308  
PHONE #: \_\_\_\_\_ CELL #: \_\_\_\_\_

**BUSINESS NAME:** PSS Construction - T/A Phillip Scott Simpson, Sr.  
**CONTRACTOR'S NAME:** Phillip Scott Simpson  
**ADDRESS:** PO Box 713  
**CITY, STATE, ZIP:** Kill Devil Hills, NC 27948  
**OFFICE#:**  
**CELL#:** 252-202-1280  
**FAX#:**  
**EMAIL:** [seatick09@gmail.com](mailto:seatick09@gmail.com)

**NC G.C. LICENSED CONTRACTOR:**  X  YES  NO  
**NC G.C. LICENSE NUMBER:** 57425  
**LIMITATION:** Limited  
**CLASSIFICATION:** Building  
**QUALIFIER:** Phillip Scott Simpson, Sr.

**LIEN AGENT:** n/a

**DESCRIPTION OF WORK – (Any deviation from the Building Plan or Site Plan requires prior approval):** Replace stairs, decking, railings, treads

**SPECIAL CONDITIONS -**

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

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

|  |          |                                  |                 |
|--|----------|----------------------------------|-----------------|
| <b>TOTAL CONSTRUCTION COST</b>                                     | \$18,000 |                                  |                 |
| <b>HEATED/LIVING AREA (sf)</b><br>(new square footage)             |          | X .60/sf (single family) =       | \$              |
|  |          | X .75/sf (all others) =          |                 |
| <b>NON-HEATED AREA (sf)</b><br>(new square footage)                |          | X .30/sf (single family) =       | \$              |
|  |          | X .35/sf (all others) =          |                 |
| <b>REMODEL/REPAIR/ALTERATION</b><br>(no additional square footage) | \$18,000 | X \$10 per \$1,000 of cost =     | \$180.00        |
|  |          | Pool = \$125                     | \$              |
|  |          | Zoning Permit Fee = \$50         | \$              |
|  |          | Plan Review Fee = \$150 or \$100 | \$              |
|  |          | Minimum Permit Fee = \$100       | \$              |
|  |          | Homeowner's Recovery Fund \$10   | \$10.00         |
|  |          | <b>TOTAL FEE</b>                 | <b>\$190.00</b> |

*Phillip Scott Simpson* Applicant - Owner/Contractor  
*Phillip Scott Simpson* (Please print and sign name)  
*Bobby Shelton* Building/Code/Zoning Official  
*DJ DVS*  
Date Issued: 5/24/18  
Date Approved: 5-23-18



**TOWN OF SOUTHERN SHORES**  
**PLANNING AND CODE ENFORCEMENT**  
 5375 N Virginia Dare Trail, Southern Shores, NC 27949  
 (252) 261-2394 Ext 4 - Office (252) 255-0876 - Fax  
 www.southernshores-nc.gov

**RESIDENTIAL**  
**BUILDING/FLOODPLAIN DEVELOPMENT PERMIT**  
**BUILDING PERMIT #: 10149**

**Parcel:** 021730000  
**PIN:** 986705194883  
**Location:** 159 YAUPON TRL  
**District:** [20] SOUTHERN SHORES  
**Subdiv:** [S629] SO/SH SOUND 110 111 120 121  
**Lot-Block-Sect:** LOT: 10 BLK: 121 SEC:

**Owner:** CICHOCKI, ANDREW R  
**Owner:** CICHOCKI, SHARON D  
**Address:** 1742 HAMILTON DR  
 PHOENIXVILLE PA 19460

**PHONE #:** 484-927-4467 **CELL #:**

**BUSINESS NAME:** Bryan R. Weisbecker G.C. LLC  
**CONTRACTOR'S NAME:** Bryan R. Weisbecker  
**ADDRESS:** PO Box 55  
**CITY, STATE, ZIP:** Kitty Hawk, NC 27949  
**OFFICE#:** 252-411-5001  
**CELL#:** 252-441-5001  
**FAX#:**  
**EMAIL:** builderscorner@embarqmail.com

**NC G.C. LICENSED CONTRACTOR:**  YES  NO  
**NC G.C. LICENSE NUMBER:** 45914  
**LIMITATION:** Intermediate  
**CLASSIFICATION:** Building  
**QUALIFIER:** Bryan R. Weisbecker

**LIEN AGENT:** N/A

**DESCRIPTION OF WORK – (Any deviation from the Building Plan or Site Plan requires prior approval):** Construction of a 3'x79' boardwalk landward of existing bulkhead and a 6'x57' walkway

**SPECIAL CONDITIONS -**

|  |                                   |   |
|--|-----------------------------------|---|
| <b>TYPE OF CONSTRUCTION:</b> Other – boardwalk & walkway | <b>TYPE OF FOUNDATION:</b> Piling | <b>PERMIT TYPE:</b> Residential                     |
| <b>HEATED/LIVING AREAS (SF):</b>                         | <b>HEAT:</b>                      | <b>RESIDENCE/2<sup>nd</sup> HOME/RENTAL:</b> Rental |
| <b>NON-HEATED AREAS (SF):</b>                            | <b>A/C:</b>                       | <b>PROPERTY USE:</b> Single Family Dwelling         |
| <b>NUMBER OF STORIES:</b>                                | <b>INTERIOR WALLS:</b>            | <b>ZONING DISTRICT:</b> RS-1                        |
| <b>HABITABLE ROOMS:</b>                                  | <b>EXTERIOR WALLS:</b>            | <b>ZONING PERMIT #:</b> 2018-59                     |
| <b>BEDROOMS:</b>   | <b>FIREPLACE:</b>                 | <b>DATE ISSUED:</b> 5/25/2018                       |
| <b>OCCUPANCY:</b>  | <b>ROOF:</b>                      | <b>CAMA PERMIT #:</b> Minor 2018-15                 |
| <b>BATHS:</b> ½ BATHS:                                   | <b>INSULATION:</b>                | <b>DATE ISSUED:</b> 5/17/2018                       |
| <b>GARAGE:</b>   | <b>ELEVATOR (SF):</b>             | <b>SEPTIC PERMIT #:</b>                             |
| <b>FLOOD ZONE:</b> AE                                    | <b>WINDOWS:</b>                   | <b>DATE ISSUED:</b>                                 |
| <b>BASE FLOOD ELEVATION:</b> 7FT PLUS 2FT= 9FT           | <b>MAKE:</b>                      | <b>WATER TAP#:</b>                                  |

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

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

Applicant - Owner/Contractor **Bundy Shelton** (Please print and sign name)  
 Building/Code/Zoning Official **Dy DVS**

Date Issued **5-25-18**  
 Date Approved **5-25-18**



**TOWN OF SOUTHERN SHORES  
PLANNING AND CODE ENFORCEMENT**  
5375 N Virginia Dare Trail, Southern Shores, NC 27949  
(252) 261-2394 Ext 4 - Office (252) 255-0876 - Fax  
[www.southernshores-nc.gov](http://www.southernshores-nc.gov)

**RESIDENTIAL  
BUILDING/FLOODPLAIN DEVELOPMENT PERMIT  
BUILDING PERMIT #10142**

Location: 135 Crooked Back Loop  
Parcel: 022383130 PIN: 986711667040  
District: 20- SOUTHERN SHORES  
Subdivision: CHICAHAWK  
LotBlkSect: LOT: 130 BLK: SEC:

KIMBALL, JOHN ALLEN EUX  
KIMBALL, LISA CORBY EUX  
2223 S MEMORIAL AVE  
NAGS HEAD NC 27959

PHONE #:

CELL #:

**BUSINESS NAME:** KJ Construction and Remodeling Co.  
**CONTRACTOR'S NAME:** Keith Dobie  
**ADDRESS:** PO Box 242  
**CITY, STATE, ZIP:** Kitty Hawk, NC 27949  
**OFFICE#:**  
**CELL#:** 252-207-6589  
**FAX#:**  
**EMAIL:** [kjconstructionco@yahoo.com](mailto:kjconstructionco@yahoo.com)

**NC G.C. LICENSED CONTRACTOR:**  X  YES  NO  
**NC G.C. LICENSE NUMBER:** 59936  
**LIMITATION:** Unlimited  
**CLASSIFICATION:** Building  
**QUALIFIER:** William Keith Dobie, Jr.

**LIEN AGENT:** n/a

**DESCRIPTION OF WORK – (Any deviation from the Building Plan or Site Plan requires prior approval):** Modification to existing decks = New first floor deck total 138sf and new second floor screened porch total 221sf – total increase in square footage is 86sf

**SPECIAL CONDITIONS -**

|  |                            |  |
|--|----------------------------|--|
| <b>TYPE OF CONSTRUCTION:</b> Addition (deck) | <b>TYPE OF FOUNDATION:</b> | <b>PERMIT TYPE:</b> Residential                        |
|  | HEAT:                      | <b>RESIDENCE/2<sup>nd</sup> HOME/RENTAL:</b> Residence |
| <b>TOTAL HEATED/LIVING AREAS (SF):</b>       | A/C:                       | <b>PROPERTY USE:</b> Single Family Dwelling            |
| <b>TOTAL NON-HEATED AREAS (SF):</b> 86       | <b>INTERIOR WALLS:</b>     | <b>ZONING DISTRICT:</b> RS-1                           |
|  | <b>EXTERIOR WALLS:</b>     | <b>ZONING PERMIT #:</b> 2018-58                        |
| <b>NUMBER OF STORIES:</b>                    | <b>FIREPLACE:</b>          | <b>DATE ISSUED:</b> 5/24/2018                          |
| <b>BEDROOMS:</b>                             | <b>ROOF:</b>               |  |
| <b>SEPTIC CAPACITY # OF PERSONS:</b>         | <b>INSULATION:</b>         | <b>CAMA PERMIT #:</b>                                  |
| <b>BATHS:</b> ½ <b>BATHS:</b>                | <b>ELEVATOR (SF):</b>      | <b>DATE ISSUED:</b>                                    |
| <b>GARAGE:</b> <b>STORAGE BLDG:</b>          | <b>DECKS (SF):</b> 86      | <b>SEPTIC PERMIT #:</b> 27826                          |
| <b>STORAGE ENCLOSURE:</b> <b>POOL:</b>       | <b>PORCHES (SF):</b>       | <b>DATE ISSUED:</b> 5/16/2018                          |
| <b>FLOOD ZONE:</b> Shaded X                  | <b>WINDOWS MAKE:</b>       |  |
| <b>BASE FLOOD ELEVATION:</b> PLUS 2FT=       | <b>TYPE:</b>               |  |

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

|  |          |                                  |                 |
|--|----------|----------------------------------|-----------------|
| <b>TOTAL CONSTRUCTION COST</b>                                     | \$24,500 |                                  |                 |
| <b>HEATED/LIVING AREA (sf)</b><br>(new square footage)             |          | X .60/sf (single family) =       | \$              |
|  |          | X .75/sf (all others) =          |                 |
| <b>NON-HEATED AREA (sf)</b><br>(new square footage)                | 86       | X .30/sf (single family) =       | \$n/a           |
|  |          | X .35/sf (all others) =          |                 |
| <b>REMODEL/REPAIR/ALTERATION</b><br>(no additional square footage) | \$       | X \$10 per \$1,000 of cost =     | \$              |
|  |          | Pool = \$125                     | \$              |
|  |          | Zoning Permit Fee = \$50         | \$50.00         |
|  |          | Plan Review Fee = \$150 or \$100 | \$              |
|  |          | Minimum Permit Fee = \$100       | \$100.00        |
|  |          | Homeowner's Recovery Fund\$10    | \$10.00         |
|  |          | <b>TOTAL FEE</b>                 | <b>\$160.00</b> |

Applicant - Owner/Contractor (Please print and sign name)

Buddy Shelton

Building/Code/Zoning Official

DJ DVS

Date Issued

5/24-18

Date Approved

5/20/18



**TOWN OF SOUTHERN SHORES  
PLANNING AND CODE ENFORCEMENT**  
5375 N Virginia Dare Trail, Southern Shores, NC 27949  
(252) 261-2394 Ext 4 - Office (252) 255-0876 - Fax  
www.southernshores-nc.gov

**RESIDENTIAL  
BUILDING/FLOODPLAIN DEVELOPMENT PERMIT  
BUILDING PERMIT #10123**

**Location:** 187 Happy Indian Lane  
**Parcel:** 005060000 PIN: 986716835133  
**District:** 20- SOUTHERN SHORES  
**Subdivision:** CHICHAUK  
**LotBlkSect:** LOT: 272 BLK: SEC:

**MOYNAHAN, ANDREW T EUX  
MOYNAHAN, MARY T EUX  
189 HIGH DUNE LOOP  
SOUTHERN SHORES NC 27949**  
**PHONE #:**  **CELL #: 919-207-0835**

**BUSINESS NAME:** Evans Homes, LLC  
**CONTRACTOR'S NAME:** David Evans  
**ADDRESS:** 5121 Winsor Place  
**CITY, STATE, ZIP:** Kitty Hawk, NC 27949  
**OFFICE#:** 252-255-5552  
**CELL#:** 252-207-8127  
**FAX#:**  
**EMAIL:** dwevansb2@gmail.com

**NC G.C. LICENSED CONTRACTOR:**  YES  NO  
**NC G.C. LICENSE NUMBER:** 49040  
**LIMITATION:** Intermediate  
**CLASSIFICATION:** Residential  
**QUALIFIER:**

**LIEN AGENT:** n/a

**DESCRIPTION OF WORK – (Any deviation from the Building Plan or Site Plan requires prior approval):** Remodel – reinforce existing deck for installation of a new hot tub

**SPECIAL CONDITIONS -**

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

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

|  |                   |                                  |                 |
|--|-------------------|----------------------------------|-----------------|
| <b>TOTAL CONSTRUCTION COST</b>                                     | <b>\$3,800.00</b> |                                  |                 |
| <b>HEATED/LIVING AREA (sf)</b><br>(new square footage)             |                   | X .60/sf (single family) =       | \$              |
|  |                   | X .75/sf (all others) =          |                 |
| <b>NON-HEATED AREA (sf)</b><br>(new square footage)                |                   | X .30/sf (single family) =       | \$              |
|  |                   | X .35/sf (all others) =          |                 |
| <b>REMODEL/REPAIR/ALTERATION</b><br>(no additional square footage) | <b>\$3,800.00</b> | X \$10 per \$1,000 of cost =     | \$n/a           |
|  |                   | Pool = \$125                     | \$              |
|  |                   | Zoning Permit Fee = \$50         | \$              |
|  |                   | Plan Review Fee = \$150 or \$100 | \$              |
|  |                   | Minimum Permit Fee = \$100       | \$100.00        |
|  |                   | Homeowner's Recovery Fund \$10   | \$10.00         |
|  |                   | <b>TOTAL FEE</b>                 | <b>\$110.00</b> |

*[Signature]* **DAVID EVANS** *5.25.18*  
Applicant - Owner/Contractor (Please print and sign name) Date Issued  
*[Signature]* **Building/Code/Zoning Official** *5-8-18*  
*[Signature]* Date Approved

TOWN OF SOUTHERN SHORES  
PLANNING AND CODE  
ENFORCEMENT  
5375 N Virginia Dare Trl  
Southern Shores NC 27949  
(252) 261-2394 ext 4 tel  
(252) 255-0876 fax  
www.southernshores-nc.gov



**SUB-CONTRACTOR SIGN OFF AND/OR PERMIT**

Date 5-29-18  
PROJECT ADDRESS 270 Wax Myrtle Tr.  
Owner Julia Ray  
Mailing Address 270 Wax Myrtle Tr.  
City, State, Zip Kitty Hawk, NC 27949  
Phone 252-564-4734

Permit Number 10151  
Fee \$ 100

EXISTING Building Permit Number \_\_\_\_\_ NO FEE (if work is associated with a Building Permit) \_\_\_\_\_

**ELECTRICAL** = Licensee Name N.W. Francis NC License/Classification 7784-L  
Company Name N.W. Francis  
Address 4238 Poor Ridge Rd Phone 252-202-5350  
City State & zip Kitty Hawk NC Estimated Project Cost 300  
Description of Work: I inspect electrical install of heat pump system

**PLUMBING** = Licensee Name \_\_\_\_\_ NC License/Classification \_\_\_\_\_  
Company Name \_\_\_\_\_  
Address \_\_\_\_\_ Phone \_\_\_\_\_  
City State & zip \_\_\_\_\_ Estimated Project Cost \_\_\_\_\_  
Description of Work: \_\_\_\_\_

**GAS** = Licensee Name \_\_\_\_\_ NC License/Classification \_\_\_\_\_  
Company Name \_\_\_\_\_  
Address \_\_\_\_\_ Phone \_\_\_\_\_  
City State & zip \_\_\_\_\_ Estimated Project Cost \_\_\_\_\_  
Description of Work: \_\_\_\_\_

**MECHANICAL** = Licensee Name Ray Etheredge NC License/Classification 27675 H3F  
Company Name All-in-one-mech.  
Address P.O. Box 3392 Phone 252-619-0049  
City State & zip Kitty Hawk NC 27949 Estimated Project Cost 5200  
Description of Work: install new Fujitsu mini-split system for apartment over garage

**FIRE SPRINKLER** = Licensee Name \_\_\_\_\_ NC License/Classification \_\_\_\_\_  
Company Name \_\_\_\_\_  
Address \_\_\_\_\_ Phone \_\_\_\_\_  
City State & zip \_\_\_\_\_ Estimated Project Cost \_\_\_\_\_  
Description of Work: \_\_\_\_\_

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

N.W. Francis 5-29-18  
Signature of Licensee Date

Buddy Shelton 529-18  
Signature of Permit Official Date  
JUL 15



**TOWN OF SOUTHERN SHORES**  
**PLANNING AND CODE ENFORCEMENT**  
 5375 N Virginia Dare Trall, Southern Shores, NC 27949  
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**RESIDENTIAL**  
**BUILDING/FLOODPLAIN DEVELOPMENT PERMIT**  
**BUILDING PERMIT #10145**

Location: 92 Ocean Blvd  
 Parcel: 022642000  
 PIN: 986712869457  
 District: 20- SOUTHERN SHORES  
 Subdivision: SO/SH AMENDED SECTION 1  
 LotBlkSect: LOT: LOT 7-R BLK: 8 SEC: 1

WILLIAMS, KEVIN F EUX  
 WHITEHORSE, ELIZABETH J EUX  
 92 OCEAN BLVD  
 SOUTHERN SHORES NC 27949

PHONE #: 301-487-2404

CELL #:

BUSINESS NAME: The Artisan Group, Ltd  
 CONTRACTOR'S NAME: Andy Duck  
 ADDRESS: PO Box 598  
 CITY, STATE, ZIP: Kitty Hawk, NC 27949  
 OFFICE#:  
 CELL#: 252-202-1333  
 FAX#:  
 EMAIL: [artisanandy66@gmail.com](mailto:artisanandy66@gmail.com)

NC G.C. LICENSED CONTRACTOR:  X YES  NO  
 NC G.C. LICENSE NUMBER: 79743  
 LIMITATION: Limited  
 CLASSIFICATION: Building  
 QUALIFIER: Thomas A Duck

LIEN AGENT: Fidelity National Title Company, LLC Entry #853982  
 19 W. Hargett Street, Suite 507, Raleigh, NC 27601



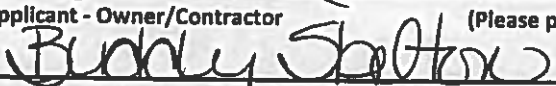

DESCRIPTION OF WORK – (Any deviation from the Building Plan or Site Plan requires prior approval): Construction of a pool, pool deck and fence – total area 30'x46' = 1,380sf

SPECIAL CONDITIONS -

|   |                     |  |
|---|---------------------|--|
| TYPE OF CONSTRUCTION: Accessory Pool      | TYPE OF FOUNDATION: | PERMIT TYPE: Residential                         |
|   | HEAT:               | RESIDENCE/2 <sup>nd</sup> HOME/RENTAL: Residence |
| TOTAL HEATED/LIVING AREAS (SF):           | A/C:                | PROPERTY USE: Single Family Dwelling             |
| TOTAL NON-HEATED AREAS (SF):              | INTERIOR WALLS:     | ZONING DISTRICT: RS-1                            |
|   | EXTERIOR WALLS:     | ZONING PERMIT #: 2018-57                         |
| NUMBER OF STORIES:                        | FIREPLACE:          | DATE ISSUED: 5/25/2018                           |
| BEDROOMS:                                 | ROOF:               |  |
| SEPTIC CAPACITY # OF PERSONS:             | INSULATION:         | CAMA PERMIT #: Minor 2018-14                     |
| BATHS: ½ BATHS:                           | ELEVATOR (SF):      | DATE ISSUED: 5//14/2018                          |
| GARAGE: STORAGE BLDG:                     | DECKS (SF):         | SEPTIC PERMIT #: 27833                           |
| POOL: 1,380sf total area                  | PORCHES (SF):       | DATE ISSUED: 5/18/2018                           |
| FLOOD ZONE: VE                            | WINDOWS MAKE:       |  |
| BASE FLOOD ELEVATION: 12FT PLUS 2FT= 14FT | TYPE:               |  |

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|   |          |                                  |                 |
|---|----------|----------------------------------|-----------------|
| TOTAL CONSTRUCTION COST                                     | \$75,000 |                                  |                 |
| HEATED/LIVING AREA (sf)<br>(new square footage)             |          | X .60/sf (single family) =       | \$              |
|   |          | X .75/sf (all others) =          | \$              |
| NON-HEATED AREA (sf)<br>(new square footage)                |          | X .30/sf (single family) =       | \$              |
|   |          | X .35/sf (all others) =          | \$              |
| REMODEL/REPAIR/ALTERATION<br>(no additional square footage) | \$       | X \$10 per \$1,000 of cost =     | \$              |
|   |          | Pool = \$125                     | \$125.00        |
|   |          | Zoning Permit Fee = \$50         | \$50.00         |
|   |          | Plan Review Fee = \$150 or \$100 | \$              |
|   |          | Minimum Permit Fee = \$100       | \$              |
|   |          | Homeowner's Recovery Fund \$10   | \$              |
|   |          | <b>TOTAL FEE</b>                 | <b>\$175.00</b> |

  
 Applicant - Owner/Contractor  
  
 (Please print and sign name)  
 Date Issued: 5-29-18  
  
 Building/Code/Zoning Official  
  
 Date Approved: 5-25-18



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



**SUBCONTRACTOR SIGN OFF AND/OR PERMIT**

Date 05/30/2018  
PROJECT ADDRESS 3 TENTH AVENUE  
Owner NANCY SYKES  
Mailing Address 3 TENTH AVENUE  
City, State, Zip KITTY HAWK, N.C. 27949  
Phone 252-261-2353

Permit Number 10152  
Fee \$ 100

EXISTING Building Permit Number \_\_\_\_\_ NO FEE \_\_\_\_\_

**ELECTRICAL** = Licensee Name FREDERICK MARKLIN NC License/Classification 22222-L / LTD  
Company Name R A HOY HEATING & A/C INC  
Address P O BOX 179 Phone (252) 261-2008  
City State & zip KITTY HAWK, NC 27949 Estimated Project Cost INCL in MECH  
Description of Work: CONNECTION OF MECH EQUIP BELOW

**PLUMBING** = Licensee Name \_\_\_\_\_ NC License/Classification \_\_\_\_\_  
Company Name \_\_\_\_\_  
Address \_\_\_\_\_ Phone \_\_\_\_\_  
City State & zip \_\_\_\_\_ Estimated Project Cost \_\_\_\_\_  
Description of Work: \_\_\_\_\_

**GAS** = Licensee Name \_\_\_\_\_ NC License/Classification \_\_\_\_\_  
Company Name \_\_\_\_\_  
Address \_\_\_\_\_ Phone \_\_\_\_\_  
City State & zip \_\_\_\_\_ Estimated Project Cost \_\_\_\_\_  
Description of Work: \_\_\_\_\_

**MECHANICAL** = Licensee Name DOUGLAS WAKELEY NC License/Classification 13056 / H 2 & 3 P-1  
Company Name R A HOY HEATING & A/C INC  
Address P O BOX 179 Phone (252) 261-2008  
City State & zip KITTY HAWK, NC 27949 Estimated Project Cost 6245  
Description of Work: C/O 2.5 TON 15 SEER TRANE SYSTEM FIRST LEVEL WITH XL624 TSTAT

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

Douglas Wakeley 05/30/2018  
Signature of Licensee Date  
Douglas Wakeley (ELEC)

Ruddy John Otter 5-31-18  
Signature of Permit Official Date  
J. J. AS

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



**SUBCONTRACTOR SIGN OFF AND/OR PERMIT**

Date 05/30/2018  
PROJECT ADDRESS 238 HILLCREST DRIVE  
Owner MARY-JEAN SOTACK  
Mailing Address 9909 W CORK RD  
City, State, Zip TOANO, V.A. 23168  
Phone \_\_\_\_\_

Permit Number 10153  
Fee \$ 100

EXISTING Building Permit Number \_\_\_\_\_ NO FEE \_\_\_\_\_

**ELECTRICAL** = Licensee Name FREDERICK MARKLIN NC License/Classification 22222-L / LTD  
Company Name R A HOY HEATING & A/C INC  
Address P O BOX 179 Phone (252) 261-2008  
City State & zip KITTY HAWK, NC 27949 Estimated Project Cost INCL in MECH  
Description of Work: CONNECTION OF MECH EQUIP BELOW

**PLUMBING** = Licensee Name \_\_\_\_\_ NC License/Classification \_\_\_\_\_  
Company Name \_\_\_\_\_  
Address \_\_\_\_\_ Phone \_\_\_\_\_  
City State & zip \_\_\_\_\_ Estimated Project Cost \_\_\_\_\_  
Description of Work: \_\_\_\_\_

**GAS** = Licensee Name \_\_\_\_\_ NC License/Classification \_\_\_\_\_  
Company Name \_\_\_\_\_  
Address \_\_\_\_\_ Phone \_\_\_\_\_  
City State & zip \_\_\_\_\_ Estimated Project Cost \_\_\_\_\_  
Description of Work: \_\_\_\_\_

**MECHANICAL** = Licensee Name DOUGLAS WAKELEY NC License/Classification 13056 / H 2 & 3 P-1  
Company Name R A HOY HEATING & A/C INC  
Address P O BOX 179 Phone (252) 261-2008  
City State & zip KITTY HAWK, NC 27949 Estimated Project Cost 5614  
Description of Work: C/O 2 TON 14 SEER TRANE SYSTEM MID LEVEL WITH XL824 TSTAT

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

Douglas Wakeley 05/30/2018  
Signature of Licensee Date  
Frederick Marklin (ELEC)

Burley Sotack 5-31-18  
Signature of Permit Official Date  
JLW

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



**SUBCONTRACTOR SIGN OFF AND/OR PERMIT**

Date 05/30/2018  
PROJECT ADDRESS 3 FERN LANE  
Owner GARY & ELAINE REED  
Mailing Address 3 FERN LANE  
City, State, Zip KITTY HAWK, N.C 27949  
Phone 252-261-9716

Permit Number 10154  
Fee \$ 100

EXISTING Building Permit Number \_\_\_\_\_ NO FEE \_\_\_\_\_

**ELECTRICAL** = Licensee Name FREDERICK MARKLIN NC License/Classification 22222-L / LTD  
Company Name R A HOY HEATING & A/C, INC  
Address P O BOX 179 Phone (252) 261-2008  
City State & zip KITTY HAWK, NC 27949 Estimated Project Cost INCL in MECH  
Description of Work: CONNECTION OF MECH EQUIP BELOW

**PLUMBING** = Licensee Name \_\_\_\_\_ NC License/Classification \_\_\_\_\_  
Company Name \_\_\_\_\_  
Address \_\_\_\_\_ Phone \_\_\_\_\_  
City State & zip \_\_\_\_\_ Estimated Project Cost \_\_\_\_\_  
Description of Work: \_\_\_\_\_

**GAS** = Licensee Name \_\_\_\_\_ NC License/Classification \_\_\_\_\_  
Company Name \_\_\_\_\_  
Address \_\_\_\_\_ Phone \_\_\_\_\_  
City State & zip \_\_\_\_\_ Estimated Project Cost \_\_\_\_\_  
Description of Work: \_\_\_\_\_

**MECHANICAL** = Licensee Name DOUGLAS WAKELEY NC License/Classification 13056 / H 2 & 3 P-1  
Company Name R A HOY HEATING & A/C, INC  
Address P O BOX 179 Phone (252) 261-2008  
City State & zip KITTY HAWK, NC 27949 Estimated Project Cost 9424  
Description of Work: C/O 2 TON 18 SEER TRANE SYSTEM GREAT ROOM WITH XL850 TSTAT

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

Douglas Wakeley 05/30/2018  
Signature of Licensee Date  
Douglas Wakeley (ELEC)

Burley Steiner 5-31-18  
Signature of Permit Official Date  
JULI DAVIS

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



**SUBCONTRACTOR SIGN OFF AND/OR PERMIT**

Date 05/30/2018  
PROJECT ADDRESS 47 W 11TH STREET  
Owner CRESENCE SCHULTZ  
Mailing Address 6 MAPLE LAKE RD  
City, State, Zip BLOOMINGDALE, N.J. 07403-1908  
Phone 973-492-0383

Permit Number 10155  
Fee \$ 100

EXISTING Building Permit Number \_\_\_\_\_ NO FEE \_\_\_\_\_

**ELECTRICAL** = Licensee Name FREDERICK MARKLIN NC License/Classification 22222-L / LTD  
Company Name R A HOY HEATING & A/C INC  
Address P O BOX 179 Phone (252) 261-2008  
City State & zip KITTY HAWK, NC 27949 Estimated Project Cost INCL in MECH  
Description of Work: CONNECTION OF MECH EQUIP BELOW

**PLUMBING** = Licensee Name \_\_\_\_\_ NC License/Classification \_\_\_\_\_  
Company Name \_\_\_\_\_  
Address \_\_\_\_\_ Phone \_\_\_\_\_  
City State & zip \_\_\_\_\_ Estimated Project Cost \_\_\_\_\_  
Description of Work: \_\_\_\_\_

**GAS** = Licensee Name \_\_\_\_\_ NC License/Classification \_\_\_\_\_  
Company Name \_\_\_\_\_  
Address \_\_\_\_\_ Phone \_\_\_\_\_  
City State & zip \_\_\_\_\_ Estimated Project Cost \_\_\_\_\_  
Description of Work: \_\_\_\_\_

**MECHANICAL** = Licensee Name DOUGLAS WAKELEY NC License/Classification 13056 / H 2 & 3 P-1  
Company Name R A HOY HEATING & A/C INC  
Address P O BOX 179 Phone (252) 261-2008  
City State & zip KITTY HAWK, NC 27949 Estimated Project Cost 10,856  
Description of Work: C/O 1.5 TON & 2 TON 16 SEER TRANE SYSTEM WITH XL624 TSTATS

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

Douglas Wakeley 5/30/2018  
Signature of Licensee Date  
Douglas Wakeley (ELEC)

Bundy J. Oter 5-31-18  
Signature of Permit Official Date  
J. D. S.



**TOWN OF SOUTHERN SHORES  
PLANNING AND CODE ENFORCEMENT**  
5375 N Virginia Dare Trail, Southern Shores, NC 27949  
(252) 261-2394 Ext 4 - Office (252) 255-0876 - Fax  
www.southernshores-nc.gov

**RESIDENTIAL  
BUILDING/FLOODPLAIN DEVELOPMENT PERMIT  
BUILDING PERMIT #10156**

Location: 122 High Dune Loop  
Parcel: 022429000 PIN: 986716842158  
District: 20- SOUTHERN SHORES  
Subdivision: CHICHAUK  
LotBlkSect: LOT: 258 BLK: SEC:

LOWMAN, CHARLES K EUX  
LOWMAN, RHONDA C EUX  
PO BOX 990  
KITTY HAWK NC 27949

PHONE #: 252-255-1040

CELL #:

BUSINESS NAME: R. Lawson Construction Company, Inc  
CONTRACTOR'S NAME: Rob Lawson  
ADDRESS: 8443 Caratoke Hwy, Suite J  
CITY, STATE, ZIP: Powells Point, NC 27966  
OFFICE#: 252-491-9993  
CELL#: 252-202-3428  
FAX#: 252-491-9993  
EMAIL: rob@rlcc.com

NC G.C. LICENSED CONTRACTOR:  YES  NO  
NC G.C. LICENSE NUMBER: 35765  
LIMITATION: Unlimited  
CLASSIFICATION: Building  
QUALIFIER: Robert R. Lawson

LIEN AGENT: Investors Title Insurance Company Entry# 852947  
19 W. Hargett Street, Suite 507, Raleigh, NC 27601

DESCRIPTION OF WORK – (Any deviation from the Building Plan or Site Plan requires prior approval): Construction of a new single family dwelling with attached garage

SPECIAL CONDITIONS -

|                                       |                                 |  |
|---------------------------------------|---------------------------------|--|
| TYPE OF CONSTRUCTION: New SFD         | TYPE OF FOUNDATION: Slab/Piling | PERMIT TYPE: Residential                         |
|                                       | HEAT: Heat Pump                 | RESIDENCE/2 <sup>nd</sup> HOME/RENTAL: Residence |
| TOTAL HEATED/LIVING AREAS (SF): 1,868 | A/C: Heat Pump                  | PROPERTY USE: Single Family Dwelling             |
| TOTAL NON-HEATED AREAS (SF): 1,988    | INTERIOR WALLS: Drywall         | ZONING DISTRICT: RS-1                            |
|                                       | EXTERIOR WALLS: Hardi-Plank     | ZONING PERMIT #: 2018-62                         |
| NUMBER OF STORIES: 2                  | FIREPLACE: Gas                  | DATE ISSUED: 5/31/2018                           |
| BEDROOMS: 3                           | ROOF: Asphalt                   |  |
| SEPTIC CAPACITY # OF PERSONS: 8       | INSULATION: Batt                | CAMA PERMIT #: n/a                               |
| BATHS: 2 ½ BATHS: 1                   | ELEVATOR (SF): n/a              | DATE ISSUED:                                     |
| ATTACHED GARAGE: 1,216                | DECKS (SF): 426                 | SEPTIC PERMIT #: 27806                           |
| STORAGE ENCLOSURE: N/A POOL: N/A      | PORCHES (SF): 346               | DATE ISSUED: 5/9/2018                            |
| FLOOD ZONE: Shaded X                  | WINDOWS MAKE: Pella 250         |  |
| BASE FLOOD ELEVATION: PLUS 2FT=       | TYPE: Double Hung               |  |

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

|   |           |                                  |                   |
|---|-----------|----------------------------------|-------------------|
| TOTAL CONSTRUCTION COST                                     | \$354,156 |                                  |                   |
| HEATED/LIVING AREA (sf)<br>(new square footage)             | 1,868     | X .60/sf (single family) =       | \$1,120.80        |
|   |           | X .75/sf (all others) =          |                   |
| NON-HEATED AREA (sf)<br>(new square footage)                | 1,988     | X .30/sf (single family) =       | \$596.40          |
|   |           | X .35/sf (all others) =          |                   |
| REMODEL/REPAIR/ALTERATION<br>(no additional square footage) | \$        | X \$10 per \$1,000 of cost =     | \$                |
|   |           | Pool = \$125                     | \$                |
|   |           | Zoning Permit Fee = \$50         | \$50.00           |
|   |           | Plan Review Fee = \$150 or \$100 | \$pd              |
|   |           | Minimum Permit Fee = \$100       | \$                |
|   |           | Homeowner's Recovery Fund \$10   | \$10.00           |
|   |           | <b>TOTAL FEE</b>                 | <b>\$1,777.20</b> |

Applicant - Owner/Contractor

(Please print and sign name)

Date Issued

*Buddy Shelton*  
Building/Code/Zoning Official

5-31-18

Date Approved



ELECTRICAL PERMIT

PERMIT NUMBER: 4536

DATE: 4-19-18

OWNER: Mantoloking Water Dept  
ADDRESS: 101 General Elizabeth St  
CITY: Mantoloking STATE: NE ZIP: 20954  
PHONE: 252-261-1200

CONTRACTOR: Stanko, CSS  
ADDRESS: 1503 Tenthredonville #101  
CITY: Chesapeake STATE: VA ZIP: 22030  
PHONE: 757-549-2200

LOCATION: \_\_\_\_\_ PARCEL NUMBER: \_\_\_\_\_

BUILDER: \_\_\_\_\_

RESIDENTIAL:  NEW  ALTERATION  
COMMERCIAL:  NEW  ALTERATION

NC POWER WORK REQUEST NUMBER OR POWER METER NUMBER (IF APPLICABLE) \_\_\_\_\_

SERVICE AMPS: \_\_\_\_\_ INCREASED TO: \_\_\_\_\_

LICENSE NUMBER: 23471 WORK ORDER NUMBER: 8170922

COST: 3981 Permit Cost: 450

If repairing or altering, please describe work: replace existing 5300  
panel + key pad due to water damage.  
tie in all existing devices & test

Barbara Adams - 4-25-18

\*\*\*CALL BUILDING INSPECTOR 24 HOURS IN ADVANCE FOR ALL INSPECTIONS\*\*\*

DATE OF ISSUANCE: 5/1/18 SEALS: \_\_\_\_\_  
(Applicant)

[Signature]  
(Inspector)



BUILDING PERMIT

PERMIT NUMBER: 4537

DATE: 5/7/18

OWNER: Randolph + Ellen Zettmann  
ADDRESS: 809 Lindsey Lane  
CITY: Manteo STATE: NC ZIP: 22964

BUILDER: Central Construction of NC Inc  
CONTRACTOR LICENSE #: 25529  
ADDRESS: 7013 Martins Point Rd  
CITY: Kitty Hawk STATE: NC ZIP: 27949  
PHONE: 252-480-5556

LOCATION OF BUILDING SITE: 807 Lindsey Lane ZONING DISTRICT: \_\_\_\_\_

PARCEL NUMBER: ~~10-975906-39-4163~~ FLOOD ZONE: AE 9.2 BFE: 9.2 FFE: 9.2

NC POWER WORK REQUEST NUMBER OR POWER METER NUMBER (IF APPLICABLE) \_\_\_\_\_

→ 025536038 ERECT: \_\_\_\_\_ ALTER: \_\_\_\_\_ REPAIR: \_\_\_\_\_

SQUARE FOOTAGE OF HEATED SPACE: 1592 UNHEATED SPACE: 240  
NUMBER OF STORIES: 2 ROOMS: 3 BATHS: 2.5 FIREPLACES: 0

FINISHES:

EXTERIOR WALLS: Smart lap INTERIOR WALLS: Drywall ROOF TYPE AND MATERIAL: Asphalt  
HEAT TYPE: Heat Pump INSULATION & R VALUE: Code FLOORING: Carpet-wood, tile  
FOOTING: Pile FOUNDATION: Pile

ADDITIONAL NOTES: \_\_\_\_\_

EACH APPLICATION MUST BE ACCOMPANIED BY:

- SITE PLAN SHOWING ACTUAL DIMENSIONS OF THE LOT, ALL STRUCTURES, DRIVEWAYS AND PARKING
- TWO SETS OF WORKING DRAWINGS
- ELEVATION OF THE SITE
- RESTAURANTS: HEALTH DEPARTMENT APPROVALS
- CAMA PERMIT IF REQUIRED
- NC LIEN AGENT FORM

\*\*\* CALL BUILDING INSPECTOR 24 HOURS IN ADVANCE FOR ALL INSPECTIONS\*\*\*

This building is to be erected or altered in accordance with the latest edition of the General Building Laws of North Carolina and all amendments as adopted by the Town of Manteo. This permit is valid for six (6) months. Compliance with Building Regulations is the responsibility of the undersigned applicant. Any change in construction or site plans will be subject to prior notification of the Planning and Zoning Department and the Building Inspector.

Estimated or Contract Cost: 203,000 Permit Cost: \$1,601

Date of Issuance: 5/8/18

Seals: Rett Tappano  
Applicant

[Signature]  
Inspector

[Signature]  
Zoning Official

Conditions of Permit: \_\_\_\_\_



MECHANICAL PERMIT

PERMIT NUMBER: 4541

DATE: 05/14/18

OWNER: James and Joanne Melton  
ADDRESS: 304 N Bay Club Drive  
CITY: Manteo STATE: NC ZIP: 27954  
PHONE: 757-450-1990

CONTRACTOR: Beach Air Heating and Cooling  
ADDRESS: 551 NC 345  
CITY: Manteo STATE: NC ZIP: 27954  
PHONE: 252-473-1995

LOCATION: 304 N Bay Club Drive Manteo NC 27954 PARCEL NUMBER: \_\_\_\_\_  
BUILDER: \_\_\_\_\_

NUMBER OF HEATING UNITS: 1  
NUMBER OF REGISTERS: \_\_\_\_\_  
LICENSE NUMBER: 29768  
COST: 6,181.00

NUMBER OF AIR HANDLERS: 1  
TONNAGE: 2.5  
WORK ORDER NUMBER: \_\_\_\_\_  
Permit Cost: \$150.00

If repairing or altering, please describe work: removing 2.5 ton 14 seer Air Handler and Heat pump  
Installing 2.5 ton 14 seer Air Handler and Heat Pump

\*\*\*CALL BUILDING INSPECTOR 24 HOURS IN ADVANCE FOR ALL INSPECTIONS\*\*\*

DATE OF ISSUANCE: 5/14/18 SEALS: Cato John  
(Applicant)

eelelll for Fred Featherstone  
(Inspector)

(UPDATED 7/2017)





MECHANICAL PERMIT

PERMIT NUMBER: 4542

DATE: 5-8-18

OWNER: Charles Allen  
ADDRESS: 3503 Wamick Dr.  
CITY: Greenville STATE: NC ZIP: 27858  
PHONE: 252-916-7230

CONTRACTOR: Armstrong; Son  
ADDRESS: 3978 Azemarle Church Rd.  
CITY: Criswell STATE: NC ZIP: 27925  
PHONE: 252-797-4100

LOCATION: 1422 Ballast Point Dr. PARCEL NUMBER: 025694151  
BUILDER: \_\_\_\_\_

NUMBER OF HEATING UNITS: 1  
NUMBER OF B.T.U.'S: 30,000  
LICENSE NUMBER: 22516  
COST: \$61800

NUMBER OF REGISTERS: \_\_\_\_\_  
TONNAGE: 2.5 ton  
WORK ORDER NUMBER: \_\_\_\_\_  
Permit Cost: \$150.00

If repairing or altering, please describe work: Changeout. Installing a 2.5 ton 15 seer Trane heat pump & 2.5 ton Trane air handler, use existing ductwork

\*\*\*CALL BUILDING INSPECTOR 24 HOURS IN ADVANCE FOR ALL INSPECTIONS\*\*\*

DATE OF ISSUANCE: 5-8-18 SEALS: Melanie ne  
(Applicant)

[Signature]  
(Inspector)



MECHANICAL PERMIT

PERMIT NUMBER: 4543

DATE: 5-9-18

OWNER: Dan Pfister  
ADDRESS: 46 N. Hammock Ct  
CITY: Manteo STATE: NC ZIP: 27954  
PHONE: \_\_\_\_\_

CONTRACTOR: All Seasons Heating & Cooling  
ADDRESS: PO Box 244  
CITY: Point Harbor STATE: NC ZIP: 27964  
PHONE: 491-9232

LOCATION: 46 N. Hammock Ct PARCEL NUMBER: 025694246  
BUILDER: \_\_\_\_\_

NUMBER OF HEATING UNITS: 2  
NUMBER OF REGISTERS: 0  
LICENSE NUMBER: 19091  
COST: 10750

NUMBER OF AIR HANDLERS: 2  
TONNAGE: 1-2.5 ton + 1-3 ton  
WORK ORDER NUMBER: \_\_\_\_\_  
Permit Cost: 300.00

If repairing or altering, please describe work: Replace downstairs system w/ a 2.5 ton split system heat pump & air handler. Replace upstairs system w/ a 3 ton split system heat pump & air handler.

\*\*\*CALL BUILDING INSPECTOR 24 HOURS IN ADVANCE FOR ALL INSPECTIONS\*\*\*

DATE OF ISSUANCE: 6/14/18 SEALS: \_\_\_\_\_  
(Applicant)

Walter Fred Featherstone  
(Inspector)

(UPDATED 7/2017)



MECHANICAL PERMIT

PERMIT NUMBER: 4544

DATE: 5-9-18

OWNER: Martha Hamed  
ADDRESS: 105 Ballast Pt Dr.  
CITY: Manteo STATE: NC ZIP: 27954  
PHONE: \_\_\_\_\_

CONTRACTOR: All Seasons Heating & Cooling  
ADDRESS: PO Box 244  
CITY: Point Harbor STATE: NC ZIP: 27964  
PHONE: 491-9232

LOCATION: 105 Ballast Point Dr. PARCEL NUMBER: 025694429  
BUILDER: \_\_\_\_\_

NUMBER OF HEATING UNITS: 1  
NUMBER OF REGISTERS: 0  
LICENSE NUMBER: 19091  
COST: 6640

NUMBER OF AIR HANDLERS: 2  
TONNAGE: 20,000 BTU  
WORK ORDER NUMBER: \_\_\_\_\_  
Permit Cost: 150.00

If repairing or altering, please describe work: Installation of one 20,000 BTU  
21 SEER Mitsubishi mini split heat pump w/  
two wall mounted air handlers

\*\*\*CALL BUILDING INSPECTOR 24 HOURS IN ADVANCE FOR ALL INSPECTIONS\*\*\*

DATE OF ISSUANCE: 5/14/18 SEALS: \_\_\_\_\_  
(Applicant)

Wesley Fred Featherston  
(Inspector)

(UPDATED 7/2017)



MECHANICAL PERMIT

PERMIT NUMBER: 4546

DATE: 5-23-18

OWNER: Hermit Layton (Layton Properties LLC) CONTRACTOR: Armstrong & Son Heating & Air  
ADDRESS: 5015 Broad St. ADDRESS: 3978 Aisemarle Church Rd.  
CITY: Edenton STATE: NC ZIP: 27932 CITY: Columbia STATE: NC ZIP: 27925  
PHONE: 252-333-7298 PHONE: 252-797-4100

LOCATION: 103 Fernando St. Apt B PARCEL NUMBER: 024811002  
BUILDER: \_\_\_\_\_

NUMBER OF HEATING UNITS: (1) NUMBER OF REGISTERS: \_\_\_\_\_  
NUMBER OF B.T.U.'S: 30,000 TONNAGE: 2.5  
LICENSE NUMBER: 22516 WORK ORDER NUMBER: \_\_\_\_\_  
COST: \$4,000 Permit Cost: \$150.00

If repairing or altering, please describe work: Changeout: Installing a 2.5 ton York heat pump and 2.5 ton York air handler, use existing ductwork

\*\*\*CALL BUILDING INSPECTOR 24 HOURS IN ADVANCE FOR ALL INSPECTIONS\*\*\*

DATE OF ISSUANCE: 5/29/18 SEALS: Melinda Nyr  
(Applicant)

[Signature]  
(Inspector)



SIGN PERMIT

PERMIT NUMBER: 4547

DATE: MAY 15, 2018

APPLICANT: JOHN M. ROBBINS III FOR PIRATE'S COVE HOA

ADDRESS: ONE SAILFISH DR  
MANTEO, NC 27954

PHONE: 252.423.0516 (c)

THIS PERMIT IS TO: ERECT \_\_\_\_\_ ALTER:  REPAIR: \_\_\_\_\_ A SIGN. (PLEASE CHECK ONE.)

TYPE OF SIGN: COMMUNITY ENTRANCE SIGN (EXISTING)

LOCATION OF SIGN: THE SIGN IS LOCATED @ THE ENTRANCE TO PIRATE'S COVE. IT IS @ THE EASTERN CORNER OF US HWY 64 AND PIRATE'S WAY.

PARCEL NUMBER: NA - COMMON COMMUNITY PROPERTY / RIGHT-OF-WAY PIRATE'S WAY

ZONING DISTRICT: B-2 SQUARE FOOTAGE OF SIGN: \_\_\_\_\_

THIS PERMIT MUST BE ACCOMPANIED BY:

- DRAWING OF SIGN TO SCALE
- LOCATION OF PROPOSED SIGN AND ANY OTHER SIGNS ON THE SAME LOT
- DRAWING TO SCALE OF FACE OF BUILDING IF THE SIGN IS TO BE MOUNTED ON THE FACE OF A BUILDING

[Signature]  
CONTRACTOR/OWNER SIGNATURE

MAY 15, 2018  
DATE

[Signature]  
BUILDING INSPECTOR

MAY 31, 2018  
DATE

COMMENTS:

SEE ATTACHED

COST OF PERMIT: \$150