



Town of Kill Devil Hills

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

MAY 17 2018

Planning and Inspection Department

ZONING PERMIT

ISSUED: 05/14/2018

EXPIRES: 11/10/2018

ZP2018-034

PROJECT NAME: Lambodera Holdings LLC
SITE ADDRESS: 1111 VA DARE TRL N KILL DEVIL HILLS

APPLICANT: OCEAN ATLANTIC RENTALS
2001 South Croatan Highway
Kill Devil Hills, NC 27948
252-441-7272

OWNER: Lambodera Holdings LLC
4005 River Park Drive
Suffolk, VA 23435
252-333-4102

CONTRACTOR: OCEAN ATLANTIC RENTALS
2001 South Croatan Highway
Kill Devil Hills, NC 27948
252-441-7272

License: LEGACY UNKNOWN
Expires: 12/31/2018

PARCEL:

PIN: 988415649035

Parcel Number: 003711000

Address: 1111 VA DARE TRL N KILL DEVIL HILLS

Addition: KITTY HAWK SHORES - REVISED

Zoning:

Block: 2A

Lot(s): 6 & N PT 5

Legal Description:

FEES:	Paid	Due
Tent Permit Fee	\$0.00	\$0.00
Totals :	\$0.00	\$0.00

PROJECT DESCRIPTION: Tent

DETAILS

Permit

Name	Value
ZONING DISTRICT	OIR
CAMA PERMIT	N
CAMA EXEMPTION	N
FLOOD ZONE	VE
CULVERT	N
DRIVEWAY INVERT 2	N

ZP2018-034

PROJECT NAME: Lambodera Holdings LLC
SITE ADDRESS: 1111 VA DARE TRL N KILL DEVIL HILLS

ZONING PERMIT

ISSUED: 05/14/2018

EXPIRES: 11/10/2018

REQUIRED INSPECTIONS

Final

Zoning Final

CONDITIONS

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

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

Issued By: Donna Elliott

Contractor or Authorized Agent: Rochelle Dixon

Date: 05/17/18



Town of Kill Devil Hills

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

PAD

MAY 16 2018

Planning and Inspection Department

TOWN OF
KILL DEVIL HILLS

ZP2018-036

PROJECT NAME: Scott Meiller
SITE ADDRESS: 1818 BAY DR KILL DEVIL HILLS

ZONING PERMIT

ISSUED: 05/16/2018

EXPIRES: 11/12/2018

APPLICANT: RICHARD MEILLER
1818 Bay Dr.
KDH, NC 27948
548-7172

OWNER: RICHARD MEILLER
1818 Bay Dr.
KDH, NC 27948
548-7172

GENERAL BUILDING - LIMITED: B&B Contractors
P. O. Box 2998
Kitty Hawk, NC 27949
252-489-9551

License: 60944
Expires:

PARCEL:

PIN: 988409060471

Parcel Number: 002540000

Address: 1818 BAY DR KILL DEVIL HILLS

Addition: CROATAN SHORES INC SEC 1

Zoning:
Block: 21 **Lot(s):** 5-6

Legal Description:

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

PROJECT DESCRIPTION: Fence

ZP2018-036

PROJECT NAME: Scott Meiller
SITE ADDRESS: 1818 BAY DR KILL DEVIL HILLS

ZONING PERMIT

ISSUED: 05/16/2018

EXPIRES: 11/12/2018

DETAILS

Permit

Name	Value
ZONING DISTRICT	RL
CAMA PERMIT	N
CAMA EXEMPTION	N
FLOOD ZONE	AE
CONSTRUCTION COST	5000.00
CULVERT	N
DRIVEWAY INVERT 2	N

REQUIRED INSPECTIONS

Final

Zoning Final

CONDITIONS

- * This permit becomes null and void if work or construction authorized is not commenced within 6 months or if construction or work is suspended for a period of 12 months at any time after work has started.
- * Call for a string line inspection before installing the fence.

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

Issued By: Donna Elliott

Contractor or Authorized Agent: _____

Date: 5/16/18



Town of Kill Devil Hills

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PAID

MAY 17 2018

Planning and Inspection Department

TOWN OF
Printed: 05-15-2018

Page 1 of 2

CERTIFICATE OF OCCUPANCY

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

Occupancy Permit Number : OP2018-031

Applicant Ocean Views LLC
337S Sea Oats Trail
kitty hawk, nc 27949
207-8710

Approval Date: 5/14/18

Parcel:

PIN: Parcel Number: 988416735079
Address: 907 N VA DARE TRL KILL DEVIL HILLS
Section/Town/Range: Zoning
Addition: Block: Lot(s):
Legal Description: 988416735079
Kitty Hawk Shores - Revised
Lot: 4 Blk: 9 Sec:

Owners

Name: Ocean Views LLC **Phone:** 207-8710
Address: 337S Sea Oats Trail
kitty hawk, nc 27949

Contractors

Name: SAUNDERS, RM / R M SAUNDERS **Phone:** 252-207-8710
GENERAL CONTRACTORS INC

Fees and Receipts

Number	Description	Paid	Due
CERTIFICATE OF OCCUPANCY	Certificate of Occupancy Fee	\$50.00	\$0.00
Totals :		\$50.00	\$0.00

Additional Information

Building Permit Number:
Conditions :



Town of Kill Devil Hills

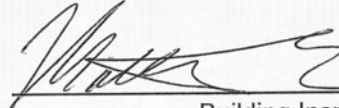
PO BOX 1719
Kill Devil Hills, NC 27948
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Planning and Inspection Department

Printed : 05-15-2018

Page 2 of 2

5/14/18
Date


Building Inspector Signature



Town of Kill Devil Hills

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

Planning and Inspection Department

ZP2018-035

PROJECT NAME: Worrell Fence
SITE ADDRESS: 407 THIRD ST W KILL DEVIL HILLS

ZONING PERMIT

ISSUED: 05/16/2018

EXPIRES: 11/12/2018

APPLICANT: Worrell, James
PO Box 7144
Suffolk, Va 23437
757-642-0017

OWNER: Worrell, James
PO Box 7144
Suffolk, Va 23437
757-642-0017

GENERAL: Self
UNKNOWN
UNKNOWN, XX 00000

License: Unlicensed
Expires: 12/31/2020

PARCEL:

PIN: 988410275017

Parcel Number: 002488004

Address: 407 THIRD ST W KILL DEVIL HILLS

Addition: CROATAN SHORES INC SEC 1

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

Legal Description:

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

PROJECT DESCRIPTION: Construct vinyl fence around back yard

PAID
MAY 16 2018
TOWN OF
KILL DEVIL HILLS

ZP2018-035

PROJECT NAME: Worrell Fence

SITE ADDRESS: 407 THIRD ST W KILL DEVIL HILLS

ZONING PERMIT

ISSUED: 05/16/2018

EXPIRES: 11/12/2018

DETAILS

Permit

Name	Value
ZONING DISTRICT	RL
FRONT YARD SETBACK	30
REAR YARD SETBACK	20% Depth >30
SIDE YARD SETBACK	8
STREET SIDE SETBACK	15
CAMA PERMIT	N
CAMA EXEMPTION	N
FLOOD ZONE	X
CONSTRUCTION COST	1000.00
CULVERT	N
DRIVEWAY INVERT 2	N

REQUIRED INSPECTIONS

Stringline

Zoning Final

Final

CONDITIONS

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

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

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

Issued By: 

Contractor or Authorized Agent: Patricia P Worrell Date: 5-16-18



Town of Kill Devil Hills

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

PAID

MAY 14 2018

Planning and Inspection Department

TOWN OF
KILL DEVIL HILLS

OP2018-030

PROJECT NAME: Sandy Bottom Homes
SITE ADDRESS: 2039 YORKTOWN KILL DEVIL HILLS

OCCUPANCY

ISSUED: 05/14/2018

EXPIRES:

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

OWNER: SOLES, FRANK
527 Chowan St
Kill Devil Hills, NC 27948
757-448-8162

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

License: 67524
Expires: 12/30/2018

PARCEL:

PIN: 988405099500

Parcel Number: 001476000

Address: 2039 YORKTOWN KILL DEVIL HILLS

Addition: AVALON BEACH ANNEX 2 & 3

Zoning:

Block: 0 **Lot(s):** 1348

Legal Description:

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

PROJECT DESCRIPTION: Proposed 3 Bedroom SFD

DETAILS

Permit

Name	Value
# OF TRASH CANS	1
PURPOSE	Residential New

CONDITIONS

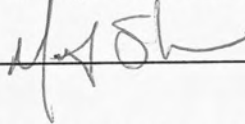
OP2018-030


PROJECT NAME: Sandy Bottom Homes
SITE ADDRESS: 2039 YORKTOWN KILL DEVIL HILLS

OCCUPANCY
ISSUED: 05/14/2018

EXPIRES:

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

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Contractor or Authorized Agent:  Date: 5-14-18



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Phone: 252-449-5318 Fax: 252-441-4102

BWD

MAY 15 2018

Planning and Inspection Department

BP2018-088

PROJECT NAME: LEWIS DECK REBUILD
SITE ADDRESS: 214 CHOWAN ST W. KILL DEVIL HILLS

BUILDING

ISSUED: 05/15/2018

EXPIRES: 11/11/2018

APPLICANT: LEWIS, LISA
11915 FIELD STONE BLVD
CULPEPER, VA 22701
703-994-8784

OWNER: LEWIS, LISA
11915 FIELD STONE BLVD
CULPEPER, VA 22701
703-994-8784

GENERAL: Self
UNKNOWN
UNKNOWN, XX 00000

License: Unlicensed
Expires: 12/31/2020

PARCEL:

PIN: 988513023689

Parcel Number: 000531026

Address: 214 CHOWAN ST W. KILL DEVIL HILLS

Addition: VIRGINIA DARE SHORES

Zoning:

Block: 33 **Lot(s):** 26-28

Legal Description:

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

PROJECT DESCRIPTION: REPAIR/REBUILD UPPER & MID LEVEL DECK AND STAIRS.

BP2018-088

PROJECT NAME: LEWIS DECK REBUILD

SITE ADDRESS: 214 CHOWAN ST W. KILL DEVIL HILLS

BUILDING

ISSUED: 05/15/2018

EXPIRES: 11/11/2018

DETAILS

Permit

Name	Value
CAMA PERMIT	N
CAMA EXEMPTION	N
ZONING DISTRICT	RL
PURPOSE	Residential Repair/Remodel
FLOOD ZONE	AE
BASE FLOOD ELEVATION	8
FINAL ELEVATION CERTIFICATE	N
CONSTRUCTION COST	1500.00
CONSTRUCTION TYPE	V
OCCUPANCY TYPE	One & Two Family Dwelling

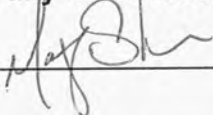
REQUIRED INSPECTIONS

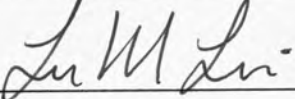
Final

CONDITIONS

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

Issued By: 

Contractor or Authorized Agent:  Date: 5/15/2018



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Phone: 252-449-5318 Fax: 252-441-4102

PAID

MAY 14 2018

TOWN OF
KILL DEVIL HILLS

Planning and Inspection Department

ZP2018-033

PROJECT NAME: Hannah Stoup
SITE ADDRESS: 3204 RAYMOND AVE KILL DEVIL HILLS

ZONING PERMIT

ISSUED: 05/14/2018

EXPIRES: 11/10/2018

APPLICANT: Stoup, Hannah
3204 Raymond Ave
Kill Devil Hills, NC 27948
757-897-1921

OWNER: Stoup, Hannah
3204 Raymond Ave
Kill Devil Hills, NC 27948
757-897-1921

CONTRACTOR: SAME AS APPLICANT
0000000
00000000, nc 00000

License: 123456
Expires: 04/30/2020

PARCEL:

PIN: 988513044444

Parcel Number: 000017000

Address: 3204 RAYMOND AVE KILL DEVIL HILLS

Addition: ORVILLE BEACH AMENDED BLK 4

Zoning:

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

Legal Description:

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

PROJECT DESCRIPTION: Fence

ZP2018-033

PROJECT NAME: Hannah Stoup
SITE ADDRESS: 3204 RAYMOND AVE KILL DEVIL HILLS

ZONING PERMIT

ISSUED: 05/14/2018

EXPIRES: 11/10/2018

DETAILS

Permit

Name	Value
ZONING DISTRICT	C
FRONT YARD SETBACK	30
REAR YARD SETBACK	20% Depth >30
SIDE YARD SETBACK	10
CAMA PERMIT	N
CAMA EXEMPTION	N
FLOOD ZONE	AE
BASE FLOOD ELEVATION	9
PURPOSE	Residential Accessory
CONSTRUCTION COST	600.00
CULVERT	N
DRIVEWAY INVERT 2	N

REQUIRED INSPECTIONS

Final

Zoning Final

CONDITIONS

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

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

Issued By: _____

Contractor or Authorized Agent: _____ Date: 5/14/18



Town of Kill Devil Hills

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

PAID

MAY 18 2018

PAID
WITH
CASH

Planning and Inspection Department

TOWN OF
KILL DEVIL HILLS

SG2018-017	SIGN
PROJECT NAME: Rite Aid	ISSUED: 05/18/2018
SITE ADDRESS: 2012 CROATAN HWY S KILL DEVIL HILLS	EXPIRES: 11/14/2018

APPLICANT: INLAND WESTERN KILL DEVIL HILLS
2901 BUTTERFIELD ROAD
OAK BROOK, IL 60523

OWNER: INLAND WESTERN KILL DEVIL HILLS
2901 BUTTERFIELD ROAD
OAK BROOK, IL 60523

CONTRACTOR: SAME AS OWNER
UNKNOWN
UNKNOWN, XX 00000

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

PARCEL:

PIN: 989313039007

Parcel Number: 028829001

Address: 2012 CROATAN HWY S KILL DEVIL HILLS

Addition: Fresh Pond Beaches

Zoning:

Block: 3

Lot(s): Tract A

Legal Description:

FEES:	Paid	Due
Banner Fee	\$200.00	\$0.00
Totals :	\$200.00	\$0.00

PROJECT DESCRIPTION: 4 Banners on the building

SG2018-017

PROJECT NAME: Rite Aid

SITE ADDRESS: 2012 CROATAN HWY S KILL DEVIL HILLS

SIGN

ISSUED: 05/18/2018

EXPIRES: 11/14/2018

DETAILS

Permit

Name	Value
# OF BANNERS	4
SIGN - WALL PERMITTED (SQFT)	100.00
SIGN- WALL PROPOSED (SQ FT)	80.00
ZONING DISTRICT	C
CONSTRUCTION COST	200.00
FLOOD ZONE	AE

REQUIRED INSPECTIONS

Final

CONDITIONS

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

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

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

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

* Banner may be displayed for a period not to exceed 90 days.

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

Issued By: Donna Elliott

Contractor or Authorized Agent: [Signature] Date: 5-18-18



Town of Kill Devil Hills

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

MAY 18 2018

Planning and Inspection Department

PAID
WITH
CASH

RECEIVED
MAY 18 2018

SG2018-018	SIGN
PROJECT NAME: Walgreens	ISSUED: 05/18/2018
SITE ADDRESS: 1200 Croatan Hwy. Hwy. S KILL DEVIL HILLS	EXPIRES: 11/14/2018

APPLICANT: Walgreens 106 Wilmot Rd Deerfield, IL 60015	OWNER: Walgreens 106 Wilmot Rd Deerfield, IL 60015
CONTRACTOR:	SAME AS OWNER UNKNOWN UNKNOWN, XX 00000
	License: Same as Owner Expires: 12/30/2019

PARCEL:

PIN: 988312960843	Parcel Number: 004330000
Address: 1200 Croatan Hwy. Hwy. S KILL DEVIL HILLS	
Addition: KILL DEVIL HILLS REALTY CORP	Zoning:
	Block: 7 Lot(s): 13-16 & PT 1-4
Legal Description:	

FEES:	Paid	Due
Banner Fee	\$100.00	\$0.00
Totals :	\$100.00	\$0.00

PROJECT DESCRIPTION: 2 Banners on the building

SG2018-018

PROJECT NAME: Walgreens

SITE ADDRESS: 1200 Croatan Hwy. Hwy. S KILL DEVIL HILLS

SIGN

ISSUED: 05/18/2018

EXPIRES: 11/14/2018

DETAILS

Permit

Name	Value
# OF BANNERS	2
SIGN - WALL PERMITTED (SQFT)	100.00
SIGN- WALL PROPOSED (SQ FT)	40.00
ZONING DISTRICT	C
PURPOSE	Commercial Accessory
CONSTRUCTION COST	100.00
FLOOD ZONE	AE

REQUIRED INSPECTIONS

Final

CONDITIONS

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

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

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

* Banner may be displayed for a period not to exceed 90 days.

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Issued By: Donna Elliott

Contractor or Authorized Agent: [Signature]

Date: 5-18-18



Town of Kill Devil Hills

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

Planning and Inspection Department

BP2018-083

PROJECT NAME:

SITE ADDRESS: 205 CLARK ST E KILL DEVIL HILLS

BUILDING

ISSUED: 05/09/2018

EXPIRES: 11/05/2018

APPLICANT: Timothy Lass
404 Meadow Ln.
FRANKLIN, VA 23851
757-569-4849

OWNER: Timothy Lass
404 Meadow Ln.
FRANKLIN, VA 23851
757-569-4849

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

License: Unlicensed
Expires: 06/14/2018

PARCEL:

PIN: 988308981109

Parcel Number: 004223000

Address: 205 CLARK ST E KILL DEVIL HILLS

Addition: KILL DEVIL HILLS SEC 1

Zoning:

Block: 14 Lot(s): 3

Legal Description:

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

PAID

PROJECT DESCRIPTION: Replace 5 rotten pilings.

MAY 16 2018

TOWN OF
KILL DEVIL HILLS

BP2018-083

PROJECT NAME:

SITE ADDRESS: 205 CLARK ST E KILL DEVIL HILLS

BUILDING

ISSUED: 05/09/2018

EXPIRES: 11/05/2018

DETAILS

Permit

Name	Value
CAMA PERMIT	N
CAMA EXEMPTION	N
ZONING DISTRICT	C
PURPOSE	Residential Repair/Remodel
FLOOD ZONE	AE
BASE FLOOD ELEVATION	9
FINAL ELEVATION CERTIFICATE	N
CONSTRUCTION COST	4800.00
CONSTRUCTION TYPE	V
OCCUPANCY TYPE	One & Two Family Dwelling

REQUIRED INSPECTIONS

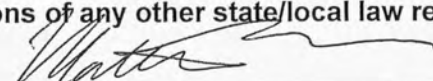
Zoning Final

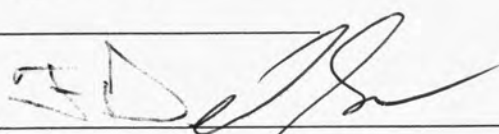
Final

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Issued By: 

Contractor or Authorized Agent: 

Date: 5-16-18



Town of Kill Devil Hills

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

Planning and Inspection Department

MC2018-135

PROJECT NAME: MIKOS HVAC
SITE ADDRESS: 2801 CROATAN HWY N KILL DEVIL HILLS

MECHANICAL

ISSUED: 05/16/2018

EXPIRES: 11/12/2018

APPLICANT: MIKOS, PAUL L
904 CLIPPER CT
P O BOX 2981
KILL DEVIL HILLS, NC 27948

OWNER: MIKOS, PAUL L
904 CLIPPER CT
P O BOX 2981
KILL DEVIL HILLS, NC 27948

MECHANICAL: ALL IN ONE MECHANICAL
PO BOX 3392
KITTY HAWK, NC 27949
491-5334

License: 27675
Expires: 12/31/2018

PARCEL:

PIN: 988517120469

Parcel Number: 000435000

Address: 2801 CROATAN HWY N KILL DEVIL HILLS

Addition: VIRGINIA DARE SHORES

Zoning:
Block: 18 **Lot(s):** 25-31

Legal Description:

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

PROJECT DESCRIPTION: HVAC REPLACEMENT

PAID

MAY 16 2018

TOWN OF
KILL DEVIL HILLS

MC2018-135

PROJECT NAME: MIKOS HVAC

SITE ADDRESS: 2801 CROATAN HWY N KILL DEVIL HILLS

MECHANICAL

ISSUED: 05/16/2018

EXPIRES: 11/12/2018

DETAILS

Permit

Name	Value
PURPOSE	Commercial Repair/Remodel
CONSTRUCTION COST	5500.00
CONSTRUCTION TYPE	V
FLOOD ZONE	AE
BASE FLOOD ELEVATION	9
NATURAL GAS SIGNOFF	N
OCCUPANCY TYPE	Business

REQUIRED INSPECTIONS

Final

CONDITIONS

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

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

Issued By: 

Contractor or Authorized Agent: H. W. Francis Date: 5-16-18



Town of Kill Devil Hills

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

PAID

MAY 17 2018

Planning and Inspection Department

TOWN OF
KILL DEVIL HILLS

MC2018-136

PROJECT NAME: BROWDER HVAC
SITE ADDRESS: 1606 SIR WALTER RD KILL DEVIL HILLS

MECHANICAL

ISSUED: 05/17/2018

EXPIRES: 11/13/2018

APPLICANT: BROWDER, CONNIE
1601 HODGES FERRY RD
PORTSMOUTH, VA 23701
757-488-7982

OWNER: BROWDER, CONNIE
1601 HODGES FERRY RD
PORTSMOUTH, VA 23701
757-488-7982

MECHANICAL: DELTA T
162 Yaupon Tr.
Kitty Hawk, NC 27949
256-2436

License: 23299
Expires: 12/31/2018

PARCEL:

PIN: 988410469233

Parcel Number: 003097000

Address: 1606 SIR WALTER RD KILL DEVIL HILLS

Zoning:

Addition: W R DEATON - DELRAY BEACH

Block: 1 **Lot(s):** 10

Legal Description:

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

PROJECT DESCRIPTION: HVAC REPLACEMENT

MC2018-136

PROJECT NAME: BROWDER HVAC
SITE ADDRESS: 1606 SIR WALTER RD KILL DEVIL HILLS

MECHANICAL

ISSUED: 05/17/2018

EXPIRES: 11/13/2018

DETAILS

Permit

Name	Value
PURPOSE	Residential Repair/Remodel
CONSTRUCTION COST	5200.00
CONSTRUCTION TYPE	V
FLOOD ZONE	AE
BASE FLOOD ELEVATION	8
NATURAL GAS SIGNOFF	N
OCCUPANCY TYPE	One & Two Family Dwelling

REQUIRED INSPECTIONS

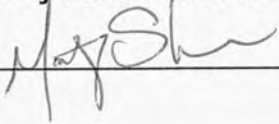
Final

CONDITIONS

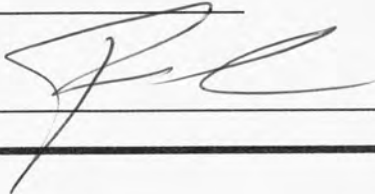
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Issued By: _____



Contractor or Authorized Agent: _____



Date: _____

5/17/18



Town of Kill Devil Hills

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

Planning and Inspection Department

MC2018-116

PROJECT NAME: ELLIS HVAC
SITE ADDRESS: 1308 MEMORIAL BLVD S KILL DEVIL HILLS

MECHANICAL

ISSUED: 05/04/2018

EXPIRES: 10/31/2018

APPLICANT: DAVID ELLIS
913 Chesapeake Ave
Hampton, VA 00000
252-489-0063

OWNER: DAVID ELLIS
913 Chesapeake Ave
Hampton, VA 00000
252-489-0063

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

License: 13056
Expires: 12/31/2018

PARCEL:

PIN: 989309062207

Parcel Number: 004735000

Address: 1308 MEMORIAL BLVD S KILL DEVIL HILLS

Addition: KILL DEVIL BEACH SEC 1 REVISED

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

Legal Description:

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

PROJECT DESCRIPTION: HVAC REPLACEMENT

MAY - 4 2018

MC2018-116

PROJECT NAME: ELLIS HVAC

SITE ADDRESS: 1308 MEMORIAL BLVD S KILL DEVIL HILLS

MECHANICAL

ISSUED: 05/04/2018

EXPIRES: 10/31/2018

DETAILS

Permit

Name	Value
PURPOSE	Residential Repair/Remodel
CONSTRUCTION COST	6467.00
CONSTRUCTION TYPE	V
FLOOD ZONE	AE
BASE FLOOD ELEVATION	9
NATURAL GAS SIGNOFF	N
OCCUPANCY TYPE	One & Two Family Dwelling

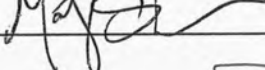
REQUIRED INSPECTIONS

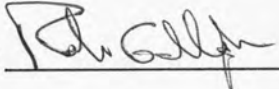
Final

CONDITIONS

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Issued By: 

Contractor or Authorized Agent:  Date: 5/4/18



Town of Kill Devil Hills

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

Planning and Inspection Department

MC2018-117

PROJECT NAME: Replace HVAC
SITE ADDRESS: 903 VA DARE TRL S KILL DEVIL HILLS

MECHANICAL

ISSUED: 05/04/2018

EXPIRES: 10/31/2018

APPLICANT: Sanjay Khanna
629 Potomac River rd.
MC LEAN, VA 22102

OWNER: Sanjay Khanna
629 Potomac River rd.
MC LEAN, VA 22102

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

License: 13056
Expires: 12/31/2018

PARCEL:

PIN: 988308984879

Parcel Number: 004250000

Address: 903 VA DARE TRL S KILL DEVIL HILLS

Addition: KILL DEVIL HILLS SEC 1-

Zoning:

Block: 2

Lot(s): 1-2 & ADJ PAR.

Legal Description:

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

PROJECT DESCRIPTION:

MAY - 4 2018

MC2018-117

PROJECT NAME: Replace HVAC
SITE ADDRESS: 903 VA DARE TRL S KILL DEVIL HILLS

MECHANICAL

ISSUED: 05/04/2018

EXPIRES: 10/31/2018

DETAILS

Permit

Name	Value
PURPOSE	Residential Repair/Remodel
CONSTRUCTION COST	24500.00
CONSTRUCTION TYPE	V
FLOOD ZONE	VE
BASE FLOOD ELEVATION	11
NATURAL GAS SIGNOFF	N
OCCUPANCY TYPE	One & Two Family Dwelling

REQUIRED INSPECTIONS

Final

CONDITIONS

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Issued By: _____

Contractor or Authorized Agent: _____

Date: _____

5/4/18



Town of Kill Devil Hills

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

Planning and Inspection Department

MC2018-118	MECHANICAL
PROJECT NAME: Replace HVAC	ISSUED: 05/04/2018
SITE ADDRESS: 904 AVALON DR W KILL DEVIL HILLS	EXPIRES: 10/31/2018

APPLICANT: Chris Behling
904 W. Avalon Dr.
Kill Devil Hills, NC 27948
757-636-6170

OWNER: Chris Behling
904 W. Avalon Dr.
Kill Devil Hills, NC 27948
757-636-6170

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

License: 13056
Expires: 12/31/2018

PARCEL:

PIN: 988405090620

Parcel Number: 001603000

Address: 904 AVALON DR W KILL DEVIL HILLS

Zoning:

Addition: AVALON BEACH

Block: 0 **Lot(s):** 247

Legal Description:

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

PROJECT DESCRIPTION:

MAY - 4 2018

TOWN OF
KILL DEVIL HILLS

MC2018-118

PROJECT NAME: Replace HVAC
SITE ADDRESS: 904 AVALON DR W KILL DEVIL HILLS

MECHANICAL

ISSUED: 05/04/2018

EXPIRES: 10/31/2018

DETAILS

Permit

Name	Value
PURPOSE	Residential Repair/Remodel
CONSTRUCTION COST	12588.00
CONSTRUCTION TYPE	V
FLOOD ZONE	AE
BASE FLOOD ELEVATION	8.3
NATURAL GAS SIGNOFF	N
OCCUPANCY TYPE	One & Two Family Dwelling

REQUIRED INSPECTIONS

Final

CONDITIONS

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Issued By: _____

Contractor or Authorized Agent: _____

Date: _____

5/4/18



Town of Kill Devil Hills

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

PAID

MAY - 3 2018

TOWN OF
KILL DEVIL HILLS

Planning and Inspection Department

ZP2018-003

PROJECT NAME: Andrew Kupfer/Boy Scouts
SITE ADDRESS: 1801 VA DARE TRL N KILL DEVIL HILLS

ZONING PERMIT

ISSUED: 01/11/2018

EXPIRES: 07/10/2018

APPLICANT: METRO RENTAL
UNKNOWN
Kill Devil Hills, NC 27948

OWNER: C AND S REALTY CORP
P O BOX 3323
DANVILLE, VA 24543

CONTRACTOR: METRO RENTAL
UNKNOWN
Kill Devil Hills, NC 27948

License: LEGACY UNKNOWN
Expires: 12/31/2018

PARCEL:

PIN: 988406486187

Parcel Number: 002803000

Address: 1801 VA DARE TRL N KILL DEVIL HILLS

Addition: Croatan Shores Amended

Zoning:

Block: D **Lot(s):** 17-19

Legal Description:

FEES:	Paid	Due
Tent Permit Fee	\$0.00	\$0.00
Totals :	\$0.00	\$0.00

PROJECT DESCRIPTION: Tent

DETAILS

Permit

Name	Value
ZONING DISTRICT	OIR
CAMA PERMIT	N
CAMA EXEMPTION	N
CULVERT	N
DRIVEWAY INVERT 2	N

ZP2018-003

PROJECT NAME: Andrew Kupfer/Boy Scouts
SITE ADDRESS: 1801 VA DARE TRL N KILL DEVIL HILLS

ZONING PERMIT

ISSUED: 01/11/2018

EXPIRES: 07/10/2018

REQUIRED INSPECTIONS

Final

Zoning Final

CONDITIONS

- * This permit becomes null and void if work or construction authorized is not commenced within 6 months or if construction or work is suspended for a period of 12 months at any time after work has started.
- * Call John Risoldi/Fire Department for an inspection once the tent is up - 480-4060

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

Issued By: Donna Elliott

Contractor or Authorized Agent: Robert Dixon

Date: 05/03/18



Town of Kill Devil Hills

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

Planning and Inspection Department

BJ2018-090	BUILDING JOINT
PROJECT NAME: Verizon antenea on water tower	ISSUED: 04/25/2018
SITE ADDRESS: 1634 CROATAN HWY N KILL DEVIL HILLS	EXPIRES: 10/22/2018

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

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

ELECTRICAL - UNLIMITED: Design Electric Inc.
1123 East Market St.
CHARLOTTESVILLE, VA 22905
540-878-3570

License: 16336-U
Expires:

PARCEL:

PIN: 988410369451

Parcel Number: 008129000

Address: 1634 CROATAN HWY N KILL DEVIL HILLS

Zoning:

Addition: SUBDIVISION - NONE

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

Legal Description:

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

PROJECT DESCRIPTION:

PAID
MAY - 2 2018
TOWN OF KILL DEVIL HILLS
PAID WITH CASH

BJ2018-090

PROJECT NAME: Verizon antenea on water tower
SITE ADDRESS: 1634 CROATAN HWY N KILL DEVIL HILLS

BUILDING JOINT

ISSUED: 04/25/2018

EXPIRES: 10/22/2018

DETAILS**Permit**

Name	Value
ZONING DISTRICT	G&I Public
CAMA PERMIT	N
CAMA EXEMPTION	N
FLOOD ZONE	AE
BASE FLOOD ELEVATION	9
PURPOSE	Commercial Repair/Remodel
CONSTRUCTION COST	12000.00
ENGINEER AND LICENSE NUMBER	E. Martella 024288
CULVERT	N
DRIVEWAY INVERT 2	N

REQUIRED INSPECTIONS

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

CONDITIONS

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

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

BJ2018-090

PROJECT NAME: Verizon antenea on water tower
SITE ADDRESS: 1634 CROATAN HWY N KILL DEVIL HILLS

BUILDING JOINT

ISSUED: 04/25/2018

EXPIRES: 10/22/2018

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

Issued By: _____

Contractor or Authorized Agent: _____

Date: 5/2/2018



Town of Kill Devil Hills

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

PAID

MAY - 4 2018

Planning and Inspection Department

TOWN OF
KILL DEVIL HILLS

BP2018-078	BUILDING
PROJECT NAME: MECKLEY DECK REBUILD	ISSUED: 05/03/2018
SITE ADDRESS: 1515 PRINCESS ANNE DR KILL DEVIL HILLS	EXPIRES: 10/30/2018

APPLICANT: MECKLEY, JOHN S
17 EVERETT DRIVE
NEWPORT NEWS, VA 23602

OWNER: MECKLEY, JOHN S
17 EVERETT DRIVE
NEWPORT NEWS, VA 23602

GENERAL: JAMES DALESSIO
308 COLINGTON DR
Kill Devil Hills, NC 27948
252-619-8356

License: 999444999
Expires:

PARCEL:

PIN: 988411550715

Parcel Number: 003127000

Address: 1515 PRINCESS ANNE DR KILL DEVIL HILLS

Addition: W R DEATON - DELRAY BEACH

Zoning:
Block: 2 **Lot(s):** 12

Legal Description:

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

PROJECT DESCRIPTION: REBUILD EXISTING DECK WITH NEW STAIRCASE.

BP2018-078**PROJECT NAME:** MECKLEY DECK REBUILD**SITE ADDRESS:** 1515 PRINCESS ANNE DR KILL DEVIL HILLS**BUILDING****ISSUED:** 05/03/2018**EXPIRES:** 10/30/2018

DETAILS**Permit**

Name	Value
CAMA PERMIT	N
CAMA EXEMPTION	N
ZONING DISTRICT	RL
PURPOSE	Residential Repair/Remodel
FRONT YARD SETBACK	30
SIDE YARD SETBACK	10
REAR YARD SETBACK	30
FLOOD ZONE	AE
BASE FLOOD ELEVATION	8
FINAL ELEVATION CERTIFICATE	N
CONSTRUCTION COST	10600.00
CONSTRUCTION TYPE	V
OCCUPANCY TYPE	One & Two Family Dwelling

REQUIRED INSPECTIONS

Zoning Final

Piling

Final

CONDITIONS

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

* MAX. PILING SPACING OF 8'-0" ALONG LOAD BEARING GIRDERS.

BP2018-078

PROJECT NAME: MECKLEY DECK REBUILD

SITE ADDRESS: 1515 PRINCESS ANNE DR KILL DEVIL HILLS

BUILDING

ISSUED: 05/03/2018

EXPIRES: 10/30/2018

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

Issued By: Marty Shaw

Contractor or Authorized Agent: James P. Alessi Date: 5/4/18



Town of Kill Devil Hills

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

PAID

Planning and Inspection Department

MAY - 4 2018

BJ2018-096

PROJECT NAME:

SITE ADDRESS: 209 WALKER ST E KILL DEVIL HILLS

BUILDING JOINT

ISSUED: 05/02/2018

EXPIRES: 10/29/2018

APPLICANT: TOOMBS, JANIS F
21701 ROWANTY ROAD
CARSON, VA 23830

OWNER: TOOMBS, JANIS F
21701 ROWANTY ROAD
CARSON, VA 23830

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

License: 13497
Expires:

PARCEL:

PIN: 988517128140

Parcel Number: 000374000

Address: 209 WALKER ST E KILL DEVIL HILLS

Addition: VIRGINIA DARE SHORES

Zoning:

Block: 4 **Lot(s):** 11-12

Legal Description:

FEES:

Open Deck Fee

Paid
\$150.00

Due
\$0.00

BUILDING AREA:

Open Decks

1 EA

Totals : **\$150.00** **\$0.00**

PROJECT DESCRIPTION: Remove old deck and replace with new deck, must comply with setbacks and lot coverage.

BJ2018-096

PROJECT NAME:

SITE ADDRESS: 209 WALKER ST E KILL DEVIL HILLS

BUILDING JOINT

ISSUED: 05/02/2018

EXPIRES: 10/29/2018

DETAILS**Permit**

Name	Value
ZONING DISTRICT	C
FRONT YARD SETBACK	15
REAR YARD SETBACK	20% Depth >30
SIDE YARD SETBACK	6
HEALTH DEPARTMENT PERMIT #	970008955
# PARKING SPACES/BEDROOM	3
CAMA PERMIT	N
CAMA EXEMPTION	N
FLOOD ZONE	AE
BASE FLOOD ELEVATION	9
PURPOSE	Residential Repair/Remodel
CONSTRUCTION TYPE	V
CONSTRUCTION COST	15000.00
# OF UNITS	1
LOT COVERAGE	43.56
OPEN DECK (SQFT)	252
TOTAL SQUARE FOOTAGE	252
SURVEYOR NAME AND NUMBER	W. Jones L-2532
CULVERT	N
DRIVEWAY INVERT 2	N
OCCUPANCY TYPE	One & Two Family Dwelling

REQUIRED INSPECTIONS

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

BJ2018-096

PROJECT NAME:

SITE ADDRESS: 209 WALKER ST E KILL DEVIL HILLS

BUILDING JOINT

ISSUED: 05/02/2018

EXPIRES: 10/29/2018

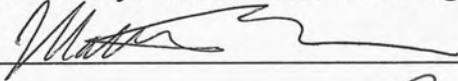
CONDITIONS

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

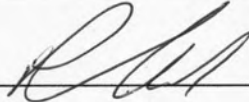
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Issued By: _____



Contractor or Authorized Agent: _____



Date: _____

5.9.18



Town of Kill Devil Hills

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

PAID

MAY - 7 2018

Planning and Inspection Department

TOWN OF
KILL DEVIL HILLS

MC2018-113

PROJECT NAME: Replace HVAC
SITE ADDRESS: 1008 CLAM SHELL DR KILL DEVIL HILLS

MECHANICAL

ISSUED: 05/04/2018

EXPIRES: 10/31/2018

APPLICANT: PAYNE, ELIZABETH B
113 SIR HART COURT
KILL DEVIL HILLS, NC 27948

OWNER: PAYNE, ELIZABETH B
113 SIR HART COURT
KILL DEVIL HILLS, NC 27948

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

License: 29031
Expires: 12/31/2018

PARCEL:

PIN: 988409065970

Parcel Number: 002559000

Address: 1008 CLAM SHELL DR KILL DEVIL HILLS

Zoning:

Addition: CROATAN SHORES INC SEC 1

Block: 23 **Lot(s):** 8

Legal Description:

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

PROJECT DESCRIPTION:



Town of Kill Devil Hills

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

MAY 17 2018

Planning and Inspection Department

ZONING PERMIT

ISSUED: 05/14/2018

EXPIRES: 11/10/2018

ZP2018-034

PROJECT NAME: Lambodera Holdings LLC
SITE ADDRESS: 1111 VA DARE TRL N KILL DEVIL HILLS

APPLICANT: OCEAN ATLANTIC RENTALS
2001 South Croatan Highway
Kill Devil Hills, NC 27948
252-441-7272

OWNER: Lambodera Holdings LLC
4005 River Park Drive
Suffolk, VA 23435
252-333-4102

CONTRACTOR: OCEAN ATLANTIC RENTALS
2001 South Croatan Highway
Kill Devil Hills, NC 27948
252-441-7272

License: LEGACY UNKNOWN
Expires: 12/31/2018

PARCEL:

PIN: 988415649035

Parcel Number: 003711000

Address: 1111 VA DARE TRL N KILL DEVIL HILLS

Addition: KITTY HAWK SHORES - REVISED

Zoning:

Block: 2A

Lot(s): 6 & N PT 5

Legal Description:

FEES:	Paid	Due
Tent Permit Fee	\$0.00	\$0.00
Totals :	\$0.00	\$0.00

PROJECT DESCRIPTION: Tent

DETAILS

Permit

Name	Value
ZONING DISTRICT	OIR
CAMA PERMIT	N
CAMA EXEMPTION	N
FLOOD ZONE	VE
CULVERT	N
DRIVEWAY INVERT 2	N

ZP2018-034

PROJECT NAME: Lambodera Holdings LLC
SITE ADDRESS: 1111 VA DARE TRL N KILL DEVIL HILLS

ZONING PERMIT

ISSUED: 05/14/2018

EXPIRES: 11/10/2018

REQUIRED INSPECTIONS

Final

Zoning Final

CONDITIONS

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

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

Issued By: Donna Elliott

Contractor or Authorized Agent: Rachael Dixon Date: 05/17/18



Town of Kill Devil Hills

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

PAD

MAY 16 2018

Planning and Inspection Department

TOWN OF
KILL DEVIL HILLS

ZP2018-036

PROJECT NAME: Scott Meiller
SITE ADDRESS: 1818 BAY DR KILL DEVIL HILLS

ZONING PERMIT

ISSUED: 05/16/2018

EXPIRES: 11/12/2018

APPLICANT: RICHARD MEILLER
1818 Bay Dr.
KDH, NC 27948
548-7172

OWNER: RICHARD MEILLER
1818 Bay Dr.
KDH, NC 27948
548-7172

GENERAL BUILDING - LIMITED: B&B Contractors
P. O. Box 2998
Kitty Hawk, NC 27949
252-489-9551

License: 60944
Expires:

PARCEL:

PIN: 988409060471

Parcel Number: 002540000

Address: 1818 BAY DR KILL DEVIL HILLS

Addition: CROATAN SHORES INC SEC 1

Zoning:

Block: 21 **Lot(s):** 5-6

Legal Description:

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

PROJECT DESCRIPTION: Fence

ZP2018-036

PROJECT NAME: Scott Meiller
SITE ADDRESS: 1818 BAY DR KILL DEVIL HILLS

ZONING PERMIT

ISSUED: 05/16/2018

EXPIRES: 11/12/2018

DETAILS

Permit

Name	Value
ZONING DISTRICT	RL
CAMA PERMIT	N
CAMA EXEMPTION	N
FLOOD ZONE	AE
CONSTRUCTION COST	5000.00
CULVERT	N
DRIVEWAY INVERT 2	N

REQUIRED INSPECTIONS

Final

Zoning Final

CONDITIONS

- * This permit becomes null and void if work or construction authorized is not commenced within 6 months or if construction or work is suspended for a period of 12 months at any time after work has started.
- * Call for a string line inspection before installing the fence.

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

Issued By: Donna Elliott

Contractor or Authorized Agent: [Signature]

Date: 5/16/18



Town of Kill Devil Hills

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

PAID

MAY 17 2018

Planning and Inspection Department

TOWN OF
Printed: 05-15-2018

Page 1 of 2

CERTIFICATE OF OCCUPANCY

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

Occupancy Permit Number : OP2018-031

Applicant Ocean Views LLC
337S Sea Oats Trail
kitty hawk, nc 27949
207-8710

Approval Date: 5/14/18

Parcel:

PIN: Parcel Number: 988416735079
Address: 907 N VA DARE TRL KILL DEVIL HILLS
Section/Town/Range: Zoning
Addition: Block: Lot(s):
Legal Description: 988416735079
Kitty Hawk Shores - Revised
Lot: 4 Blk: 9 Sec:

Owners

Name: Ocean Views LLC **Phone:** 207-8710
Address: 337S Sea Oats Trail
kitty hawk, nc 27949

Contractors

Name: SAUNDERS, RM / R M SAUNDERS **Phone:** 252-207-8710
GENERAL CONTRACTORS INC

Fees and Receipts

Number	Description	Paid	Due
CERTIFICATE OF OCCUPANCY	Certificate of Occupancy Fee	\$50.00	\$0.00
Totals :		\$50.00	\$0.00

Additional Information

Building Permit Number:
Conditions :



Town of Kill Devil Hills

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

Planning and Inspection Department

Printed : 05-15-2018

Page 2 of 2

5/14/18

Date

Building Inspector Signature



Town of Kill Devil Hills

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

Planning and Inspection Department

ZP2018-035

PROJECT NAME: Worrell Fence
SITE ADDRESS: 407 THIRD ST W KILL DEVIL HILLS

ZONING PERMIT

ISSUED: 05/16/2018

EXPIRES: 11/12/2018

APPLICANT: Worrell, James
PO Box 7144
Suffolk, Va 23437
757-642-0017

OWNER: Worrell, James
PO Box 7144
Suffolk, Va 23437
757-642-0017

GENERAL: Self
UNKNOWN
UNKNOWN, XX 00000

License: Unlicensed
Expires: 12/31/2020

PARCEL:

PIN: 988410275017

Parcel Number: 002488004

Address: 407 THIRD ST W KILL DEVIL HILLS

Addition: CROATAN SHORES INC SEC 1

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

Legal Description:

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

PROJECT DESCRIPTION: Construct vinyl fence around back yard

PAID
MAY 16 2018
TOWN OF
KILL DEVIL HILLS

ZP2018-035

PROJECT NAME: Worrell Fence
SITE ADDRESS: 407 THIRD ST W KILL DEVIL HILLS

ZONING PERMIT

ISSUED: 05/16/2018

EXPIRES: 11/12/2018

DETAILS

Permit

Name	Value
ZONING DISTRICT	RL
FRONT YARD SETBACK	30
REAR YARD SETBACK	20% Depth >30
SIDE YARD SETBACK	8
STREET SIDE SETBACK	15
CAMA PERMIT	N
CAMA EXEMPTION	N
FLOOD ZONE	X
CONSTRUCTION COST	1000.00
CULVERT	N
DRIVEWAY INVERT 2	N

REQUIRED INSPECTIONS

Stringline
Final

Zoning Final

CONDITIONS

- * This permit becomes null and void if work or construction authorized is not commenced within 6 months or if construction or work is suspended for a period of 12 months at any time after work has started.
- * NOTICE: Call Public Services Department (252) 480-4080 before pouring driveway!

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

Issued By: 

Contractor or Authorized Agent: Patricia P Worrell Date: 5-16-18



Town of Kill Devil Hills

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

PAID

MAY 14 2018

Planning and Inspection Department

TOWN OF
KILL DEVIL HILLS

OP2018-030

PROJECT NAME: Sandy Bottom Homes
SITE ADDRESS: 2039 YORKTOWN KILL DEVIL HILLS

OCCUPANCY

ISSUED: 05/14/2018

EXPIRES:

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

OWNER: SOLES, FRANK
527 Chowan St
Kill Devil Hills, NC 27948
757-448-8162

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

License: 67524
Expires: 12/30/2018

PARCEL:

PIN: 988405099500

Parcel Number: 001476000

Address: 2039 YORKTOWN KILL DEVIL HILLS

Addition: AVALON BEACH ANNEX 2 & 3

Zoning:

Block: 0 **Lot(s):** 1348

Legal Description:

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

PROJECT DESCRIPTION: Proposed 3 Bedroom SFD

DETAILS

Permit

Name	Value
# OF TRASH CANS	1
PURPOSE	Residential New

CONDITIONS

OP2018-030

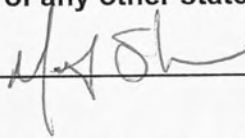
PROJECT NAME: Sandy Bottom Homes
SITE ADDRESS: 2039 YORKTOWN KILL DEVIL HILLS

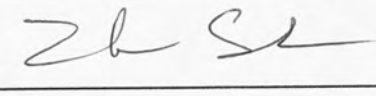
OCCUPANCY

ISSUED: 05/14/2018

EXPIRES:

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

Issued By: 

Contractor or Authorized Agent:  Date: 5-14-18



Town of Kill Devil Hills

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

RWD

MAY 15 2018

Planning and Inspection Department

BP2018-088

PROJECT NAME: LEWIS DECK REBUILD
SITE ADDRESS: 214 CHOWAN ST W. KILL DEVIL HILLS

BUILDING

ISSUED: 05/15/2018

EXPIRES: 11/11/2018

APPLICANT: LEWIS, LISA
11915 FIELD STONE BLVD
CULPEPER, VA 22701
703-994-8784

OWNER: LEWIS, LISA
11915 FIELD STONE BLVD
CULPEPER, VA 22701
703-994-8784

GENERAL: Self
UNKNOWN
UNKNOWN, XX 00000

License: Unlicensed
Expires: 12/31/2020

PARCEL:

PIN: 988513023689

Parcel Number: 000531026

Address: 214 CHOWAN ST W. KILL DEVIL HILLS

Zoning:

Addition: VIRGINIA DARE SHORES

Block: 33 **Lot(s):** 26-28

Legal Description:

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

PROJECT DESCRIPTION: REPAIR/REBUILD UPPER & MID LEVEL DECK AND STAIRS.

BP2018-088

PROJECT NAME: LEWIS DECK REBUILD

SITE ADDRESS: 214 CHOWAN ST W. KILL DEVIL HILLS

BUILDING

ISSUED: 05/15/2018

EXPIRES: 11/11/2018

DETAILS

Permit

Name	Value
CAMA PERMIT	N
CAMA EXEMPTION	N
ZONING DISTRICT	RL
PURPOSE	Residential Repair/Remodel
FLOOD ZONE	AE
BASE FLOOD ELEVATION	8
FINAL ELEVATION CERTIFICATE	N
CONSTRUCTION COST	1500.00
CONSTRUCTION TYPE	V
OCCUPANCY TYPE	One & Two Family Dwelling

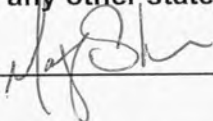
REQUIRED INSPECTIONS

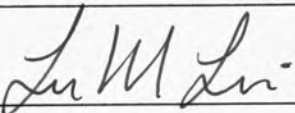
Final

CONDITIONS

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

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

Issued By: 

Contractor or Authorized Agent:  Date: 5/15/2018



Town of Kill Devil Hills

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

PAID

MAY 14 2018

TOWN OF
KILL DEVIL HILLS

Planning and Inspection Department

ZP2018-033

PROJECT NAME: Hannah Stoup
SITE ADDRESS: 3204 RAYMOND AVE KILL DEVIL HILLS

ZONING PERMIT

ISSUED: 05/14/2018

EXPIRES: 11/10/2018

APPLICANT: Stoup, Hannah
3204 Raymond Ave
Kill Devil Hills, NC 27948
757-897-1921

OWNER: Stoup, Hannah
3204 Raymond Ave
Kill Devil Hills, NC 27948
757-897-1921

CONTRACTOR: SAME AS APPLICANT
0000000
00000000, nc 00000

License: 123456
Expires: 04/30/2020

PARCEL:

PIN: 988513044444

Parcel Number: 000017000

Address: 3204 RAYMOND AVE KILL DEVIL HILLS

Addition: ORVILLE BEACH AMENDED BLK 4

Zoning:

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

Legal Description:

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

PROJECT DESCRIPTION: Fence

ZP2018-033

PROJECT NAME: Hannah Stoup
SITE ADDRESS: 3204 RAYMOND AVE KILL DEVIL HILLS

ZONING PERMIT

ISSUED: 05/14/2018

EXPIRES: 11/10/2018

DETAILS

Permit

Name	Value
ZONING DISTRICT	C
FRONT YARD SETBACK	30
REAR YARD SETBACK	20% Depth >30
SIDE YARD SETBACK	10
CAMA PERMIT	N
CAMA EXEMPTION	N
FLOOD ZONE	AE
BASE FLOOD ELEVATION	9
PURPOSE	Residential Accessory
CONSTRUCTION COST	600.00
CULVERT	N
DRIVEWAY INVERT 2	N

REQUIRED INSPECTIONS

Final

Zoning Final

CONDITIONS

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

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

Issued By: _____

Contractor or Authorized Agent: _____ Date: 5/14/18



Town of Kill Devil Hills

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

PAID

MAY 18 2018

PAID
WITH
CASH

Planning and Inspection Department

TOWN OF
KILL DEVIL HILLS

SG2018-017	SIGN
PROJECT NAME: Rite Aid	ISSUED: 05/18/2018
SITE ADDRESS: 2012 CROATAN HWY S KILL DEVIL HILLS	EXPIRES: 11/14/2018

APPLICANT: INLAND WESTERN KILL DEVIL HILLS
2901 BUTTERFIELD ROAD
OAK BROOK, IL 60523

OWNER: INLAND WESTERN KILL DEVIL HILLS
2901 BUTTERFIELD ROAD
OAK BROOK, IL 60523

CONTRACTOR: SAME AS OWNER
UNKNOWN
UNKNOWN, XX 00000

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

PARCEL:

PIN: 989313039007

Parcel Number: 028829001

Address: 2012 CROATAN HWY S KILL DEVIL HILLS

Addition: Fresh Pond Beaches

Zoning:

Block: 3

Lot(s): Tract A

Legal Description:

FEES:	Paid	Due
Banner Fee	\$200.00	\$0.00
Totals :	\$200.00	\$0.00

PROJECT DESCRIPTION: 4 Banners on the building

SG2018-017

PROJECT NAME: Rite Aid

SITE ADDRESS: 2012 CROATAN HWY S KILL DEVIL HILLS

SIGN

ISSUED: 05/18/2018

EXPIRES: 11/14/2018

DETAILS

Permit

Name	Value
# OF BANNERS	4
SIGN - WALL PERMITTED (SQFT)	100.00
SIGN- WALL PROPOSED (SQ FT)	80.00
ZONING DISTRICT	C
CONSTRUCTION COST	200.00
FLOOD ZONE	AE

REQUIRED INSPECTIONS

Final

CONDITIONS

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

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

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

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

* Banner may be displayed for a period not to exceed 90 days.

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

Issued By: Donna Elliott

Contractor or Authorized Agent: [Signature] Date: 5-18-18



Town of Kill Devil Hills

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

MAY 18 2018

Planning and Inspection Department

PAID
WITH
CASH

RECEIVED
MAY 18 2018

SG2018-018	SIGN
PROJECT NAME: Walgreens	ISSUED: 05/18/2018
SITE ADDRESS: 1200 Croatan Hwy. Hwy. S KILL DEVIL HILLS	EXPIRES: 11/14/2018

APPLICANT: Walgreens 106 Wilmot Rd Deerfield, IL 60015	OWNER: Walgreens 106 Wilmot Rd Deerfield, IL 60015
CONTRACTOR:	SAME AS OWNER UNKNOWN UNKNOWN, XX 00000
	License: Same as Owner Expires: 12/30/2019

PARCEL:

PIN: 988312960843	Parcel Number: 004330000
Address: 1200 Croatan Hwy. Hwy. S KILL DEVIL HILLS	
Addition: KILL DEVIL HILLS REALTY CORP	Zoning:
	Block: 7 Lot(s): 13-16 & PT 1-4
Legal Description:	

FEES:	Paid	Due
Banner Fee	\$100.00	\$0.00
Totals :	\$100.00	\$0.00

PROJECT DESCRIPTION: 2 Banners on the building

SG2018-018

PROJECT NAME: Walgreens

SITE ADDRESS: 1200 Croatan Hwy. Hwy. S KILL DEVIL HILLS

SIGN

ISSUED: 05/18/2018

EXPIRES: 11/14/2018

DETAILS

Permit

Name	Value
# OF BANNERS	2
SIGN - WALL PERMITTED (SQFT)	100.00
SIGN- WALL PROPOSED (SQ FT)	40.00
ZONING DISTRICT	C
PURPOSE	Commercial Accessory
CONSTRUCTION COST	100.00
FLOOD ZONE	AE

REQUIRED INSPECTIONS

Final

CONDITIONS

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

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

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

* Banner may be displayed for a period not to exceed 90 days.

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

Issued By: Donna Elliott

Contractor or Authorized Agent: [Signature]

Date: 5-18-18



Town of Kill Devil Hills

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

Planning and Inspection Department

BP2018-083

PROJECT NAME:

SITE ADDRESS: 205 CLARK ST E KILL DEVIL HILLS

BUILDING

ISSUED: 05/09/2018

EXPIRES: 11/05/2018

APPLICANT: Timothy Lass
404 Meadow Ln.
FRANKLIN, VA 23851
757-569-4849

OWNER: Timothy Lass
404 Meadow Ln.
FRANKLIN, VA 23851
757-569-4849

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

License: Unlicensed
Expires: 06/14/2018

PARCEL:

PIN: 988308981109

Parcel Number: 004223000

Address: 205 CLARK ST E KILL DEVIL HILLS

Addition: KILL DEVIL HILLS SEC 1

Zoning:

Block: 14 **Lot(s):** 3

Legal Description:

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

PAID

PROJECT DESCRIPTION: Replace 5 rotten pilings.

MAY 16 2018

TOWN OF
KILL DEVIL HILLS

BP2018-083

PROJECT NAME:

SITE ADDRESS: 205 CLARK ST E KILL DEVIL HILLS

BUILDING

ISSUED: 05/09/2018

EXPIRES: 11/05/2018

DETAILS

Permit

Name	Value
CAMA PERMIT	N
CAMA EXEMPTION	N
ZONING DISTRICT	C
PURPOSE	Residential Repair/Remodel
FLOOD ZONE	AE
BASE FLOOD ELEVATION	9
FINAL ELEVATION CERTIFICATE	N
CONSTRUCTION COST	4800.00
CONSTRUCTION TYPE	V
OCCUPANCY TYPE	One & Two Family Dwelling

REQUIRED INSPECTIONS

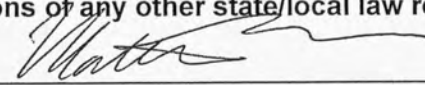
Zoning Final

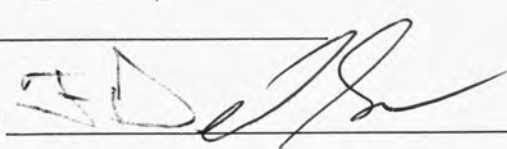
Final

CONDITIONS

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

Issued By: 

Contractor or Authorized Agent: 

Date: 5-16-18



Town of Kill Devil Hills

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

Planning and Inspection Department

MC2018-135

PROJECT NAME: MIKOS HVAC
SITE ADDRESS: 2801 CROATAN HWY N KILL DEVIL HILLS

MECHANICAL

ISSUED: 05/16/2018

EXPIRES: 11/12/2018

APPLICANT: MIKOS, PAUL L
904 CLIPPER CT
P O BOX 2981
KILL DEVIL HILLS, NC 27948

OWNER: MIKOS, PAUL L
904 CLIPPER CT
P O BOX 2981
KILL DEVIL HILLS, NC 27948

MECHANICAL: ALL IN ONE MECHANICAL
PO BOX 3392
KITTY HAWK, NC 27949
491-5334

License: 27675
Expires: 12/31/2018

PARCEL:

PIN: 988517120469

Parcel Number: 000435000

Address: 2801 CROATAN HWY N KILL DEVIL HILLS

Addition: VIRGINIA DARE SHORES

Zoning:
Block: 18 **Lot(s):** 25-31

Legal Description:

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

PROJECT DESCRIPTION: HVAC REPLACEMENT

PAID

MAY 16 2018

TOWN OF
KILL DEVIL HILLS

MC2018-135

PROJECT NAME: MIKOS HVAC
SITE ADDRESS: 2801 CROATAN HWY N KILL DEVIL HILLS

MECHANICAL

ISSUED: 05/16/2018

EXPIRES: 11/12/2018

DETAILS

Permit

Name	Value
PURPOSE	Commercial Repair/Remodel
CONSTRUCTION COST	5500.00
CONSTRUCTION TYPE	V
FLOOD ZONE	AE
BASE FLOOD ELEVATION	9
NATURAL GAS SIGNOFF	N
OCCUPANCY TYPE	Business

REQUIRED INSPECTIONS

Final

CONDITIONS

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Issued By: 

Contractor or Authorized Agent: H. W. Francis Date: 5-16-18



Town of Kill Devil Hills

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

PAID

MAY 17 2018

Planning and Inspection Department

TOWN OF
KILL DEVIL HILLS

MC2018-136

PROJECT NAME: BROWDER HVAC
SITE ADDRESS: 1606 SIR WALTER RD KILL DEVIL HILLS

MECHANICAL

ISSUED: 05/17/2018

EXPIRES: 11/13/2018

APPLICANT: BROWDER, CONNIE
1601 HODGES FERRY RD
PORTSMOUTH, VA 23701
757-488-7982

OWNER: BROWDER, CONNIE
1601 HODGES FERRY RD
PORTSMOUTH, VA 23701
757-488-7982

MECHANICAL: DELTA T
162 Yaupon Tr.
Kitty Hawk, NC 27949
256-2436

License: 23299
Expires: 12/31/2018

PARCEL:

PIN: 988410469233

Parcel Number: 003097000

Address: 1606 SIR WALTER RD KILL DEVIL HILLS

Zoning:

Addition: W R DEATON - DELRAY BEACH

Block: 1 **Lot(s):** 10

Legal Description:

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

PROJECT DESCRIPTION: HVAC REPLACEMENT

MC2018-136

PROJECT NAME: BROWDER HVAC
SITE ADDRESS: 1606 SIR WALTER RD KILL DEVIL HILLS

MECHANICAL

ISSUED: 05/17/2018

EXPIRES: 11/13/2018

DETAILS

Permit

Name	Value
PURPOSE	Residential Repair/Remodel
CONSTRUCTION COST	5200.00
CONSTRUCTION TYPE	V
FLOOD ZONE	AE
BASE FLOOD ELEVATION	8
NATURAL GAS SIGNOFF	N
OCCUPANCY TYPE	One & Two Family Dwelling

REQUIRED INSPECTIONS

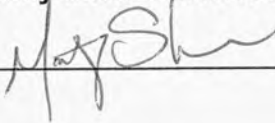
Final

CONDITIONS

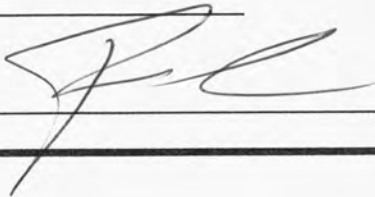
* This permit becomes null and void if work or construction authorized is not commenced within 6 months or if construction or work is suspended for a period of 12 months at any time after work has started.

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

Issued By: _____



Contractor or Authorized Agent: _____



Date: _____

5/17/18



Town of Kill Devil Hills

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

Planning and Inspection Department

MC2018-116

PROJECT NAME: ELLIS HVAC
SITE ADDRESS: 1308 MEMORIAL BLVD S KILL DEVIL HILLS

MECHANICAL

ISSUED: 05/04/2018

EXPIRES: 10/31/2018

APPLICANT: DAVID ELLIS
913 Chesapeake Ave
Hampton, VA 00000
252-489-0063

OWNER: DAVID ELLIS
913 Chesapeake Ave
Hampton, VA 00000
252-489-0063

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

License: 13056
Expires: 12/31/2018

PARCEL:

PIN: 989309062207

Parcel Number: 004735000

Address: 1308 MEMORIAL BLVD S KILL DEVIL HILLS

Addition: KILL DEVIL BEACH SEC 1 REVISED

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

Legal Description:

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

PROJECT DESCRIPTION: HVAC REPLACEMENT

MAY - 4 2018

MC2018-116

PROJECT NAME: ELLIS HVAC

SITE ADDRESS: 1308 MEMORIAL BLVD S KILL DEVIL HILLS

MECHANICAL

ISSUED: 05/04/2018

EXPIRES: 10/31/2018

DETAILS

Permit

Name	Value
PURPOSE	Residential Repair/Remodel
CONSTRUCTION COST	6467.00
CONSTRUCTION TYPE	V
FLOOD ZONE	AE
BASE FLOOD ELEVATION	9
NATURAL GAS SIGNOFF	N
OCCUPANCY TYPE	One & Two Family Dwelling

REQUIRED INSPECTIONS

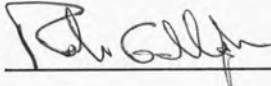
Final

CONDITIONS

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Issued By: 

Contractor or Authorized Agent: 

Date: 5/4/18



Town of Kill Devil Hills

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

Planning and Inspection Department

MC2018-117

PROJECT NAME: Replace HVAC
SITE ADDRESS: 903 VA DARE TRL S KILL DEVIL HILLS

MECHANICAL

ISSUED: 05/04/2018

EXPIRES: 10/31/2018

APPLICANT: Sanjay Khanna
629 Potomac River rd.
MC LEAN, VA 22102

OWNER: Sanjay Khanna
629 Potomac River rd.
MC LEAN, VA 22102

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

License: 13056
Expires: 12/31/2018

PARCEL:

PIN: 988308984879

Parcel Number: 004250000

Address: 903 VA DARE TRL S KILL DEVIL HILLS

Addition: KILL DEVIL HILLS SEC 1-

Zoning:

Block: 2

Lot(s): 1-2 & ADJ PAR.

Legal Description:

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

PROJECT DESCRIPTION:

MAY - 4 2018

MC2018-117

PROJECT NAME: Replace HVAC
SITE ADDRESS: 903 VA DARE TRL S KILL DEVIL HILLS

MECHANICAL

ISSUED: 05/04/2018

EXPIRES: 10/31/2018

DETAILS

Permit

Name	Value
PURPOSE	Residential Repair/Remodel
CONSTRUCTION COST	24500.00
CONSTRUCTION TYPE	V
FLOOD ZONE	VE
BASE FLOOD ELEVATION	11
NATURAL GAS SIGNOFF	N
OCCUPANCY TYPE	One & Two Family Dwelling

REQUIRED INSPECTIONS


Final

CONDITIONS

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

Issued By: 

Contractor or Authorized Agent: 

Date: 5/4/18



Town of Kill Devil Hills

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

Planning and Inspection Department

MC2018-118	MECHANICAL
PROJECT NAME: Replace HVAC	ISSUED: 05/04/2018
SITE ADDRESS: 904 AVALON DR W KILL DEVIL HILLS	EXPIRES: 10/31/2018

APPLICANT: Chris Behling
904 W. Avalon Dr.
Kill Devil Hills, NC 27948
757-636-6170

OWNER: Chris Behling
904 W. Avalon Dr.
Kill Devil Hills, NC 27948
757-636-6170

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

License: 13056
Expires: 12/31/2018

PARCEL:

PIN: 988405090620

Parcel Number: 001603000

Address: 904 AVALON DR W KILL DEVIL HILLS

Addition: AVALON BEACH

Zoning:
Block: 0 **Lot(s):** 247

Legal Description:

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

PROJECT DESCRIPTION:

MAY - 4 2018

TOWN OF
KILL DEVIL HILLS

MC2018-118

PROJECT NAME: Replace HVAC
SITE ADDRESS: 904 AVALON DR W KILL DEVIL HILLS

MECHANICAL

ISSUED: 05/04/2018

EXPIRES: 10/31/2018

DETAILS

Permit

Name	Value
PURPOSE	Residential Repair/Remodel
CONSTRUCTION COST	12588.00
CONSTRUCTION TYPE	V
FLOOD ZONE	AE
BASE FLOOD ELEVATION	8.3
NATURAL GAS SIGNOFF	N
OCCUPANCY TYPE	One & Two Family Dwelling

REQUIRED INSPECTIONS

Final

CONDITIONS

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Issued By: _____

Contractor or Authorized Agent: _____

Date: _____

5/4/18



Town of Kill Devil Hills

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

PAID

MAY - 3 2018

Planning and Inspection Department

TOWN OF
 KILL DEVIL HILLS

ZP2018-003 PROJECT NAME: Andrew Kupfer/Boy Scouts SITE ADDRESS: 1801 VA DARE TRL N KILL DEVIL HILLS	ZONING PERMIT ISSUED: 01/11/2018 EXPIRES: 07/10/2018
--	---

APPLICANT: METRO RENTAL
 UNKNOWN
 Kill Devil Hills, NC 27948

OWNER: C AND S REALTY CORP
 P O BOX 3323
 DANVILLE, VA 24543

CONTRACTOR: METRO RENTAL
 UNKNOWN
 Kill Devil Hills, NC 27948

License: LEGACY UNKNOWN
Expires: 12/31/2018

PARCEL:

PIN: 988406486187

Parcel Number: 002803000

Address: 1801 VA DARE TRL N KILL DEVIL HILLS

Addition: Croatan Shores Amended

Zoning:
Block: D **Lot(s):** 17-19

Legal Description:

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

PROJECT DESCRIPTION: Tent

DETAILS

Permit

<u>Name</u>	<u>Value</u>
ZONING DISTRICT	OIR
CAMA PERMIT	N
CAMA EXEMPTION	N
CULVERT	N
DRIVEWAY INVERT 2	N

ZP2018-003

PROJECT NAME: Andrew Kupfer/Boy Scouts
SITE ADDRESS: 1801 VA DARE TRL N KILL DEVIL HILLS

ZONING PERMIT

ISSUED: 01/11/2018

EXPIRES: 07/10/2018

REQUIRED INSPECTIONS

Final

Zoning Final

CONDITIONS

- * This permit becomes null and void if work or construction authorized is not commenced within 6 months or if construction or work is suspended for a period of 12 months at any time after work has started.
- * Call John Risoldi/Fire Department for an inspection once the tent is up - 480-4060

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

Issued By: Donna Elliott

Contractor or Authorized Agent: Renee Dixon Date: 05/03/18



Town of Kill Devil Hills

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

Planning and Inspection Department

BJ2018-090

PROJECT NAME: Verizon antenea on water tower
SITE ADDRESS: 1634 CROATAN HWY N KILL DEVIL HILLS

BUILDING JOINT

ISSUED: 04/25/2018

EXPIRES: 10/22/2018

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

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

ELECTRICAL - UNLIMITED: Design Electric Inc.
1123 East Market St.
CHARLOTTESVILLE, VA 22905
540-878-3570

License: 16336-U
Expires:

PARCEL:

PIN: 988410369451

Parcel Number: 008129000

Address: 1634 CROATAN HWY N KILL DEVIL HILLS

Addition: SUBDIVISION - NONE

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

Legal Description:

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

PROJECT DESCRIPTION:

PAID

PAID WITH CASH
MAY - 2 2018
TOWN OF KILL DEVIL HILLS

BJ2018-090

PROJECT NAME: Verizon antenea on water tower
SITE ADDRESS: 1634 CROATAN HWY N KILL DEVIL HILLS

BUILDING JOINT

ISSUED: 04/25/2018

EXPIRES: 10/22/2018

DETAILS**Permit**

Name	Value
ZONING DISTRICT	G&I Public
CAMA PERMIT	N
CAMA EXEMPTION	N
FLOOD ZONE	AE
BASE FLOOD ELEVATION	9
PURPOSE	Commercial Repair/Remodel
CONSTRUCTION COST	12000.00
ENGINEER AND LICENSE NUMBER	E. Martella 024288
CULVERT	N
DRIVEWAY INVERT 2	N

REQUIRED INSPECTIONS

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

CONDITIONS

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

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

BJ2018-090

PROJECT NAME: Verizon antenea on water tower
SITE ADDRESS: 1634 CROATAN HWY N KILL DEVIL HILLS

BUILDING JOINT

ISSUED: 04/25/2018

EXPIRES: 10/22/2018

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Issued By: _____

Contractor or Authorized Agent: _____

Date: 5/2/2018



Town of Kill Devil Hills

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

PAID

MAY - 4 2018

Planning and Inspection Department

TOWN OF
KILL DEVIL HILLS

BP2018-078	BUILDING
PROJECT NAME: MECKLEY DECK REBUILD	ISSUED: 05/03/2018
SITE ADDRESS: 1515 PRINCESS ANNE DR KILL DEVIL HILLS	EXPIRES: 10/30/2018

APPLICANT: MECKLEY, JOHN S
17 EVERETT DRIVE
NEWPORT NEWS, VA 23602

OWNER: MECKLEY, JOHN S
17 EVERETT DRIVE
NEWPORT NEWS, VA 23602

GENERAL: JAMES DALESSIO
308 COLINGTON DR
Kill Devil Hills, NC 27948
252-619-8356

License: 999444999
Expires:

PARCEL:

PIN: 988411550715

Parcel Number: 003127000

Address: 1515 PRINCESS ANNE DR KILL DEVIL HILLS

Addition: W R DEATON - DELRAY BEACH

Zoning:

Block: 2 **Lot(s):** 12

Legal Description:

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

PROJECT DESCRIPTION: REBUILD EXISTING DECK WITH NEW STAIRCASE.

BP2018-078

PROJECT NAME: MECKLEY DECK REBUILD

SITE ADDRESS: 1515 PRINCESS ANNE DR KILL DEVIL HILLS

BUILDING

ISSUED: 05/03/2018

EXPIRES: 10/30/2018

DETAILS

Permit

Name	Value
CAMA PERMIT	N
CAMA EXEMPTION	N
ZONING DISTRICT	RL
PURPOSE	Residential Repair/Remodel
FRONT YARD SETBACK	30
SIDE YARD SETBACK	10
REAR YARD SETBACK	30
FLOOD ZONE	AE
BASE FLOOD ELEVATION	8
FINAL ELEVATION CERTIFICATE	N
CONSTRUCTION COST	10600.00
CONSTRUCTION TYPE	V
OCCUPANCY TYPE	One & Two Family Dwelling

REQUIRED INSPECTIONS

Zoning Final
Final

Piling

CONDITIONS

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

* MAX. PILING SPACING OF 8'-0" ALONG LOAD BEARING GIRDERS.

BP2018-078

PROJECT NAME: MECKLEY DECK REBUILD
SITE ADDRESS: 1515 PRINCESS ANNE DR KILL DEVIL HILLS

BUILDING

ISSUED: 05/03/2018

EXPIRES: 10/30/2018

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

Issued By: Marty Shaw

Contractor or Authorized Agent: James P. Allen Date: 5/4/18



Town of Kill Devil Hills

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

PAID

Planning and Inspection Department

MAY - 4 2018

BJ2018-096
PROJECT NAME:
SITE ADDRESS: 209 WALKER ST E KILL DEVIL HILLS

BUILDING JOINT
ISSUED: 05/02/2018
EXPIRES: 10/29/2018

APPLICANT: TOOMBS, JANIS F
21701 ROWANTY ROAD
CARSON, VA 23830

OWNER: TOOMBS, JANIS F
21701 ROWANTY ROAD
CARSON, VA 23830

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

License: 13497
Expires:

PARCEL:

PIN: 988517128140

Parcel Number: 000374000

Address: 209 WALKER ST E KILL DEVIL HILLS

Addition: VIRGINIA DARE SHORES

Zoning:

Block: 4 **Lot(s):** 11-12

Legal Description:

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

PROJECT DESCRIPTION: Remove old deck and replace with new deck, must comply with setbacks and lot coverage.

BJ2018-096

PROJECT NAME:

SITE ADDRESS: 209 WALKER ST E KILL DEVIL HILLS

BUILDING JOINT

ISSUED: 05/02/2018

EXPIRES: 10/29/2018

DETAILS**Permit**

Name	Value
ZONING DISTRICT	C
FRONT YARD SETBACK	15
REAR YARD SETBACK	20% Depth >30
SIDE YARD SETBACK	6
HEALTH DEPARTMENT PERMIT #	970008955
# PARKING SPACES/BEDROOM	3
CAMA PERMIT	N
CAMA EXEMPTION	N
FLOOD ZONE	AE
BASE FLOOD ELEVATION	9
PURPOSE	Residential Repair/Remodel
CONSTRUCTION TYPE	V
CONSTRUCTION COST	15000.00
# OF UNITS	1
LOT COVERAGE	43.56
OPEN DECK (SQFT)	252
TOTAL SQUARE FOOTAGE	252
SURVEYOR NAME AND NUMBER	W. Jones L-2532
CULVERT	N
DRIVEWAY INVERT 2	N
OCCUPANCY TYPE	One & Two Family Dwelling

REQUIRED INSPECTIONS

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

BJ2018-096

PROJECT NAME:

SITE ADDRESS: 209 WALKER ST E KILL DEVIL HILLS

BUILDING JOINT

ISSUED: 05/02/2018

EXPIRES: 10/29/2018

CONDITIONS

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

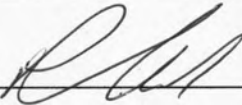
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Issued By: _____



Contractor or Authorized Agent: _____



Date: _____

5/4/18



Town of Kill Devil Hills

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

PAID

MAY - 7 2018

Planning and Inspection Department

TOWN OF
KILL DEVIL HILLS

MC2018-113	MECHANICAL
PROJECT NAME: Replace HVAC	ISSUED: 05/04/2018
SITE ADDRESS: 1008 CLAM SHELL DR KILL DEVIL HILLS	EXPIRES: 10/31/2018

APPLICANT: PAYNE, ELIZABETH B
113 SIR HART COURT
KILL DEVIL HILLS, NC 27948

OWNER: PAYNE, ELIZABETH B
113 SIR HART COURT
KILL DEVIL HILLS, NC 27948

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

License: 29031
Expires: 12/31/2018

PARCEL:

PIN: 988409065970

Parcel Number: 002559000

Address: 1008 CLAM SHELL DR KILL DEVIL HILLS

Addition: CROATAN SHORES INC SEC 1

Zoning:
Block: 23 **Lot(s):** 8

Legal Description:

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

PROJECT DESCRIPTION:

MC2018-113

PROJECT NAME: Replace HVAC
SITE ADDRESS: 1008 CLAM SHELL DR KILL DEVIL HILLS

MECHANICAL

ISSUED: 05/04/2018

EXPIRES: 10/31/2018

DETAILS

Permit

Name	Value
PURPOSE	Residential Repair/Remodel
CONSTRUCTION COST	4700.00
CONSTRUCTION TYPE	V
FLOOD ZONE	AE
BASE FLOOD ELEVATION	8.3
NATURAL GAS SIGNOFF	N
OCCUPANCY TYPE	One & Two Family Dwelling

REQUIRED INSPECTIONS

Final

CONDITIONS

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Issued By: _____

Contractor or Authorized Agent: _____

Date: _____

MC2018-113

PROJECT NAME: Replace HVAC
SITE ADDRESS: 1008 CLAM SHELL DR KILL DEVIL HILLS

MECHANICAL

ISSUED: 05/04/2018

EXPIRES: 10/31/2018

DETAILS

Permit

Name	Value
PURPOSE	Residential Repair/Remodel
CONSTRUCTION COST	4700.00
CONSTRUCTION TYPE	V
FLOOD ZONE	AE
BASE FLOOD ELEVATION	8.3
NATURAL GAS SIGNOFF	N
OCCUPANCY TYPE	One & Two Family Dwelling

REQUIRED INSPECTIONS

Final

CONDITIONS

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Issued By: _____

Contractor or Authorized Agent: _____

Date: _____



Town of Kill Devil Hills

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

PAID

MAY - 7 2018

Planning and Inspection Department

TOWN OF
 KILL DEVIL HILLS

EL2018-027

PROJECT NAME: Slocum hot tub electrical
SITE ADDRESS: 1500 Bailey's Bay Road Kill Devil Hills

ELECTRICAL

ISSUED: 05/07/2018

EXPIRES: 11/03/2018

APPLICANT: RICHARD & MARY, SLOCUM
 194 BELLS ISLAND RD
 currituck, nc 27929

OWNER: RICHARD & MARY, SLOCUM
 194 BELLS ISLAND RD
 currituck, nc 27929

PARCEL:

PIN: 98830627976401

**Parcel
 Number:**

Address: 1500 Bailey's Bay Road Kill Devil Hills

Zoning:

Addition:

Block:

Lot(s):

Legal Description: Unit 1, Devonshire Place Condominium

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

PROJECT DESCRIPTION: Add required electrical for addition of a new hot tub.

DETAILS

Permit

Name	Value
ZONING DISTRICT	G&I Public
PURPOSE	Residential Repair/Remodel
CONSTRUCTION COST	500.00
CONSTRUCTION TYPE	V
FLOOD ZONE	AE
BASE FLOOD ELEVATION	8
OCCUPANCY TYPE	Residential

EL2018-027

PROJECT NAME: Slocum hot tub electrical
SITE ADDRESS: 1500 Bailey's Bay Road Kill Devil Hills

ELECTRICAL
ISSUED: 05/07/2018
EXPIRES: 11/03/2018

REQUIRED INSPECTIONS

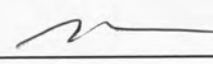
Final

CONDITIONS

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Issued By: 

Contractor or Authorized Agent:  Date: 5-7-2018



Town of Kill Devil Hills

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

PAID

MAY - 7 2018

Planning and Inspection Department

MC2018-112	TOWN OF KILL DEVIL HILLS
PROJECT NAME: replace HVAC	MECHANICAL
SITE ADDRESS: 1710 APACHE ST KILL DEVIL HILLS	ISSUED: 05/04/2018
	EXPIRES: 10/31/2018

APPLICANT: FARLEY, RONALD L
P O BOX 172
KITTY HAWK, NC 27949

OWNER: FARLEY, RONALD L
P O BOX 172
KITTY HAWK, NC 27949

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

License: 29031
Expires: 12/31/2018

PARCEL:

PIN: 988409168062

Parcel Number: 002360009

Address: 1710 APACHE ST KILL DEVIL HILLS

Zoning:

Addition: APACHE STREET

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

Legal Description:

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

PROJECT DESCRIPTION:

MC2018-112

PROJECT NAME: replace HVAC

SITE ADDRESS: 1710 APACHE ST KILL DEVIL HILLS

MECHANICAL

ISSUED: 05/04/2018

EXPIRES: 10/31/2018

DETAILS

Permit

Name	Value
PURPOSE	Residential Repair/Remodel
CONSTRUCTION COST	5500.00
CONSTRUCTION TYPE	V
FLOOD ZONE	X
NATURAL GAS SIGNOFF	N
OCCUPANCY TYPE	One & Two Family Dwelling

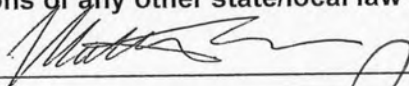
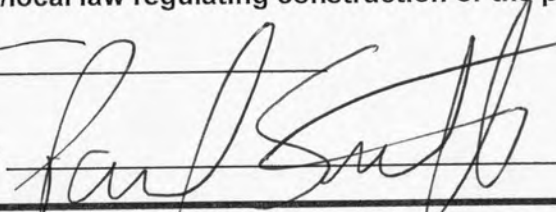
REQUIRED INSPECTIONS

Final

CONDITIONS

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

Issued By: 
Contractor or Authorized Agent:  Date: 5-7-18



Town of Kill Devil Hills

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

PAID

MAY - 7 2018

Planning and Inspection Department

TOWN OF
KILL DEVIL HILLS

BP2018-077

PROJECT NAME:

SITE ADDRESS: 800 VA DARE TRL S. KILL DEVIL HILLS

BUILDING

ISSUED: 05/03/2018

EXPIRES: 10/30/2018

APPLICANT: BJM
252 Woodland Dr.
Kitty Hawk, NC 00000

OWNER: BJM
252 Woodland Dr.
Kitty Hawk, NC 00000

GENERAL: CAROLINA BEACH BUILDERS
2300 North Croatan Highway
Kill Devil Hills, NC 27948
256-1521

License: 27951
Expires:

PARCEL:

PIN: 988308898018

Parcel Number: 008132000

Address: 800 VA DARE TRL S. KILL DEVIL HILLS

Addition: SUBDIVISION - NONE

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

Legal Description:

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

PROJECT DESCRIPTION: Add shed roof off west end of building.

BP2018-077

PROJECT NAME:

SITE ADDRESS: 800 VA DARE TRL S. KILL DEVIL HILLS

BUILDING

ISSUED: 05/03/2018

EXPIRES: 10/30/2018

DETAILS**Permit**

Name	Value
CAMA PERMIT	N
CAMA EXEMPTION	N
ZONING DISTRICT	C
PURPOSE	Institutional Addition
FLOOD ZONE	AE
BASE FLOOD ELEVATION	9
FINAL ELEVATION CERTIFICATE	N
CONSTRUCTION COST	6000.00
CONSTRUCTION TYPE	V
OCCUPANCY TYPE	Assembly

REQUIRED INSPECTIONS

Zoning Final

Final

CONDITIONS

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Contractor or Authorized Agent: _____

Date: _____



Town of Kill Devil Hills

PO BOX 1719
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Planning and Inspection Department

BJ2018-084

PROJECT NAME: Trading Post Dormer
SITE ADDRESS: 305 VA DARE TRL S KILL DEVIL HILLS

BUILDING JOINT

ISSUED: 04/23/2018

EXPIRES: 10/20/2018

APPLICANT: L&H Enterprises, Inc
305 S. Va Dare Trail
Kill Devil Hills, NC 27948
252-457-7102

OWNER: L&H Enterprises, Inc
305 S. Va Dare Trail
Kill Devil Hills, NC 27948
252-457-7102

GENERAL REMODELING-UNLICENSED: B.R. Neier Construction Co.
208 Barco RD
Barco, NC 27917
207-7956

License: aaa
Expires:

PARCEL:

PIN: 988420806295

Parcel Number: 008112000

Address: 305 VA DARE TRL S KILL DEVIL HILLS

Addition: SUBDIVISION - NONE

Zoning:

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

Legal Description:

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

PROJECT DESCRIPTION: Add Dormer to north side of structure.

PAID

MAY - 7 2018

TOWN OF
KILL DEVIL HILLS

BJ2018-084PROJECT NAME: Trading Post Dormer
SITE ADDRESS: 305 VA DARE TRL S KILL DEVIL HILLS**BUILDING JOINT**

ISSUED: 04/23/2018

EXPIRES: 10/20/2018

DETAILS**Permit**

Name	Value
ZONING DISTRICT	OIR
FRONT YARD SETBACK	30
REAR YARD SETBACK	20% Depth >30
SIDE YARD SETBACK	12
CAMA PERMIT	N
CAMA EXEMPTION	N
FLOOD ZONE	VE
BASE FLOOD ELEVATION	11
PURPOSE	Commercial Addition
CONSTRUCTION TYPE	V
CONSTRUCTION COST	25900.00
ENGINEER AND LICENSE NUMBER	B. Crook 027540
CULVERT	N
DRIVEWAY INVERT 2	N
OCCUPANCY TYPE	Merchantile

REQUIRED INSPECTIONS

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

CONDITIONS

- * NOTICE: Call Public Services Department (252) 480-4080 before pouring driveway!
- * This permit becomes null and void if work or construction authorized is not commenced within 6 months or if construction or work is suspended for a period of 12 months at any time after work has started.
- * Must comply with Wind Borne Debris requirements as defined in NCBC R301.2.1.2 and NCBC 1609.2.
- * Construction must meet all aspect of Chapter 153 Zoning including lot coverage and setbacks.

BJ2018-084

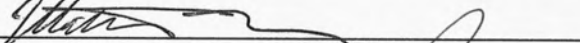
PROJECT NAME: Trading Post Dormer
SITE ADDRESS: 305 VA DARE TRL S KILL DEVIL HILLS

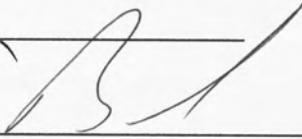
BUILDING JOINT

ISSUED: 04/23/2018

EXPIRES: 10/20/2018

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

Issued By: 

Contractor or Authorized Agent:  Date: 5-7-18



Town of Kill Devil Hills

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

PAID

MAY - 7 2018

Planning and Inspection Department

TOWN OF
KILL DEVIL HILLS

MC2018-121

PROJECT NAME:

SITE ADDRESS: 1704 UPPER DUNE RD KILL DEVIL HILLS

MECHANICAL

ISSUED: 05/07/2018

EXPIRES: 11/03/2018

APPLICANT: Mike Thomas
1704 Upper Dune Dr.
Kill Devil Hills, NC 27948
757-287-1542

OWNER: ROBERT E JR ROLLASON
PO Box 326
KILL DEVIL HILLS, NC 27948

MECHANICAL: MAC'S HEATING AND AC
2025 CARATOKE HWY
Moyock, NC 27958
252-232-3177

License: 16448
Expires: 12/31/2018

PARCEL:

PIN: 988409156895

Parcel Number: 027163000

Address: 1704 UPPER DUNE RD KILL DEVIL HILLS

Addition: CROATAN SHORES SUBDIV

Zoning:
Block: 14 **Lot(s):** 25

Legal Description:

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

PROJECT DESCRIPTION: Replace HVAC

MC2018-121

PROJECT NAME:

SITE ADDRESS: 1704 UPPER DUNE RD KILL DEVIL HILLS

MECHANICAL

ISSUED: 05/07/2018

EXPIRES: 11/03/2018

DETAILS

Permit

Name	Value
PURPOSE	Residential Repair/Remodel
CONSTRUCTION COST	4450.00
CONSTRUCTION TYPE	V
FLOOD ZONE	X
NATURAL GAS SIGNOFF	N
OCCUPANCY TYPE	One & Two Family Dwelling

REQUIRED INSPECTIONS

Final

CONDITIONS

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Issued By: _____

Contractor or Authorized Agent: _____

Date: _____

5/7/2018



Town of Kill Devil Hills

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

Planning and Inspection Department

MC2018-122	MECHANICAL
PROJECT NAME: Replace HVAC	ISSUED: 05/09/2018
SITE ADDRESS: 902 INDIAN DR KILL DEVIL HILLS	EXPIRES: 11/05/2018

APPLICANT: RICHARD SISKIND
902 Indian Drive
Kill Devil Hills, NC 21234

OWNER: RICHARD SISKIND
902 Indian Drive
Kill Devil Hills, NC 21234

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

License: 29031
Expires: 12/31/2018

PARCEL:

PIN: 988409157706

Parcel Number: 002573000

Address: 902 INDIAN DR KILL DEVIL HILLS

Zoning:

Addition: CROATAN SHORES SUBDIV

Block: 14 **Lot(s):** 29

Legal Description:

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

PROJECT DESCRIPTION:

PAID

MAY - 9 2018

TOWN OF
KILL DEVIL HILLS

MC2018-122

PROJECT NAME: Replace HVAC
SITE ADDRESS: 902 INDIAN DR KILL DEVIL HILLS

MECHANICAL

ISSUED: 05/09/2018

EXPIRES: 11/05/2018

DETAILS

Permit

Name	Value
PURPOSE	Residential Repair/Remodel
CONSTRUCTION COST	10600.00
CONSTRUCTION TYPE	V
FLOOD ZONE	AE
BASE FLOOD ELEVATION	8.3
NATURAL GAS SIGNOFF	N
OCCUPANCY TYPE	One & Two Family Dwelling


REQUIRED INSPECTIONS

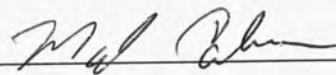
Final

CONDITIONS

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Issued By: 

Contractor or Authorized Agent:  Date: 5/9/18



Town of Kill Devil Hills

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

Planning and Inspection Department

BJ2018-101	BUILDING JOINT
PROJECT NAME: Pigmans	ISSUED: 05/07/2018
SITE ADDRESS: 1612 CROATAN HWY S KILL DEVIL HILLS	EXPIRES: 11/03/2018

APPLICANT: PIGMANS
UNKNOWN
UNKNOWN, XX 00000

OWNER: PIGMANS
UNKNOWN
UNKNOWN, XX 00000

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

License: 23077
Expires: 07/31/2018

PARCEL:

PIN:	989313041744	Parcel Number:	008386000
Address:	1612 CROATAN HWY S KILL DEVIL HILLS		
Addition:	OCEAN ACRES TRACT 3 SEC 1	Zoning:	
Legal Description:		Block:	A Lot(s): 29

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

PROJECT DESCRIPTION: Install walk in cooler (10x10)

MAY - 7 2018

BJ2018-101

PROJECT NAME: Pigmans

SITE ADDRESS: 1612 CROATAN HWY S KILL DEVIL HILLS

BUILDING JOINT

ISSUED: 05/07/2018

EXPIRES: 11/03/2018

DETAILS**Permit**

Name	Value
ZONING DISTRICT	C
FRONT YARD SETBACK	30
REAR YARD SETBACK	30
SIDE YARD SETBACK	10
STREET SIDE SETBACK	15
CAMA PERMIT	N
CAMA EXEMPTION	N
FLOOD ZONE	AE
BASE FLOOD ELEVATION	9
PURPOSE	Commercial Accessory
CONSTRUCTION COST	7538.84
LOT COVERAGE	52.66
TOTAL SQUARE FOOTAGE	100
SURVEYOR NAME AND NUMBER	William S. Jones, Jr. L-2532
ENGINEER AND LICENSE NUMBER	M. O'Steen 032628
CULVERT	N
DRIVEWAY INVERT 2	N
OCCUPANCY TYPE	Business

REQUIRED INSPECTIONS

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

CONDITIONS

- * NOTICE: Call Public Services Department (252) 480-4080 before pouring driveway!
- * This permit becomes null and void if work or construction authorized is not commenced within 6 months or if construction or work is suspended for a period of 12 months at any time after work has started.
- * As-built survey will be required prior to Certificate of Occupancy or Certificate of Compliance.

BJ2018-101

PROJECT NAME: Pigmans

SITE ADDRESS: 1612 CROATAN HWY S KILL DEVIL HILLS

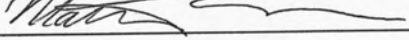
BUILDING JOINT

ISSUED: 05/07/2018

EXPIRES: 11/03/2018

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

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Issued By: 

Contractor or Authorized Agent: Thora O. Palmer IV Date: 5/7/18



Town of Kill Devil Hills

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

PAID

Planning and Inspection Department

MAY - 7 2018

MC2018-120

PROJECT NAME: MOORING HVAC
SITE ADDRESS: 1004 AVALON DR W KILL DEVIL HILLS

KILL DEVIL HILLS
MECHANICAL
ISSUED: 05/07/2018
EXPIRES: 11/03/2018

APPLICANT: MOORING, DAVID & CHRISTINE
1350 POSSUM QUARTER RD
ELIZABETH CITY, NC 27909

OWNER: MOORING, DAVID & CHRISTINE
1350 POSSUM QUARTER RD
ELIZABETH CITY, NC 27909

H-3, CLASS I:

HERITAGE HTG. & CLG.
UNKNOWN
UNKNOWN, XX 00000

License: 22994
Expires: 12/31/2018

PARCEL:

PIN: 987408998418

Parcel Number: 001635000

Address: 1004 AVALON DR W KILL DEVIL HILLS

Addition: AVALON BEACH

Zoning:
Block: 0 Lot(s): 282

Legal Description:

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

PROJECT DESCRIPTION: HVAC REPLACEMENT

MC2018-120

PROJECT NAME: MOORING HVAC

SITE ADDRESS: 1004 AVALON DR W KILL DEVIL HILLS

MECHANICAL

ISSUED: 05/07/2018

EXPIRES: 11/03/2018

DETAILS

Permit

Name	Value
PURPOSE	Residential Repair/Remodel
CONSTRUCTION COST	10000.00
CONSTRUCTION TYPE	V
FLOOD ZONE	AE
BASE FLOOD ELEVATION	8
NATURAL GAS SIGNOFF	N
OCCUPANCY TYPE	One & Two Family Dwelling

REQUIRED INSPECTIONS

Final

CONDITIONS

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Contractor or Authorized Agent: _____

Date: 5-7-18



Town of Kill Devil Hills

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

PAID

MAY - 9 2018

Planning and Inspection Department

TOWN OF
KILL DEVIL HILLS

BP2018-081

PROJECT NAME:

SITE ADDRESS: 1002 CARDINAL ST KILL DEVIL HILLS

BUILDING

ISSUED: 05/09/2018

EXPIRES: 11/05/2018

APPLICANT: Chad Juhl
7331 Millbum Ct.
Crozet, Va 22932
434-305-2533

OWNER: Chad Juhl
7331 Millbum Ct.
Crozet, Va 22932
434-305-2533

BUILDER: Jesse Ballance
800 Swan St.
Kill Devil Hills, NC 27948
252-489-3800

License: unlic
Expires:

PARCEL:

PIN: 988312769967

Parcel Number: 004449002

Address: 1002 CARDINAL ST KILL DEVIL HILLS

Addition: KILL DEVIL HILLS REALTY CORP

Zoning:
Block: 28 **Lot(s):** 2

Legal Description:

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

PROJECT DESCRIPTION: Repair rot damage girders and beams per engineering.

BP2018-081

PROJECT NAME:

SITE ADDRESS: 1002 CARDINAL ST KILL DEVIL HILLS

BUILDING

ISSUED: 05/09/2018

EXPIRES: 11/05/2018

DETAILS

Permit

Name	Value
CAMA PERMIT	N
CAMA EXEMPTION	N
ZONING DISTRICT	RL
PURPOSE	Residential Repair/Remodel
FLOOD ZONE	X
FINAL ELEVATION CERTIFICATE	N
CONSTRUCTION COST	11500.00
CONSTRUCTION TYPE	V
OCCUPANCY TYPE	One & Two Family Dwelling

REQUIRED INSPECTIONS

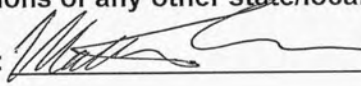
Zoning Final


Final

CONDITIONS

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Issued By: 

Contractor or Authorized Agent: 

Date: 5/9/18



Town of Kill Devil Hills

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

Planning and Inspection Department

MC2018-114

PROJECT NAME: SEATRE HVAC
SITE ADDRESS: 804 MEMORIAL BLVD S KILL DEVIL HILLS

MECHANICAL

ISSUED: 05/04/2018

EXPIRES: 10/31/2018

APPLICANT: SEATRE, DAMON
9 GLENMOORE RD
POQUOSON, VA 23662
757-289-6468

OWNER: SEATRE, DAMON
9 GLENMOORE RD
POQUOSON, VA 23662
757-289-6468

H3, CLASS 1:

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

License: 12643
Expires: 12/31/2018

PARCEL:

PIN: 98830899011007

Parcel Number: 008147107

Address: 804 MEMORIAL BLVD S KILL DEVIL HILLS

Zoning:

Addition:

Block: 0 **Lot(s):** UNIT 1-G

Legal Description:

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

PROJECT DESCRIPTION: HVAC REPLACEMENT

PAID

MAY - 9 2018

TOWN OF
KILL DEVIL HILLS

MC2018-114

PROJECT NAME: SEATRE HVAC
SITE ADDRESS: 804 MEMORIAL BLVD S KILL DEVIL HILLS

MECHANICAL

ISSUED: 05/04/2018

EXPIRES: 10/31/2018

DETAILS

Permit

Name	Value
PURPOSE	Residential Repair/Remodel
CONSTRUCTION COST	5155.74
CONSTRUCTION TYPE	V
FLOOD ZONE	AE
BASE FLOOD ELEVATION	8
NATURAL GAS SIGNOFF	N
OCCUPANCY TYPE	Residential

REQUIRED INSPECTIONS

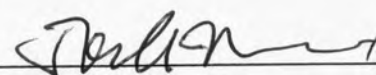
Final

CONDITIONS

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Issued By: 

Contractor or Authorized Agent:  Date: 5-9-18



Town of Kill Devil Hills

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

Planning and Inspection Department

MC2018-115

PROJECT NAME: ROOSTERS HVAC
SITE ADDRESS: 804 CROATAN HWY S KILL DEVIL HILLS

MECHANICAL

ISSUED: 05/04/2018

EXPIRES: 10/31/2018

APPLICANT: WP804, LLC
P.O. Box 1636
Kill Devil Hills, NC 27948

OWNER: WP804, LLC
P.O. Box 1636
Kill Devil Hills, NC 27948

H3, CLASS 1:

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

License: 12643
Expires: 12/31/2018

PARCEL:

PIN: 988308881477

Parcel Number: 028225000

Address: 804 CROATAN HWY S KILL DEVIL HILLS

Zoning:

Addition: KILL DEVIL HILLS REALTY CORP

Block: 11 Lot(s): 9-10, PTS 8
1 2 3

Legal Description:

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

PROJECT DESCRIPTION: HVAC REPLACEMENT

PAID

MAY - 9 2018

TOWN OF
KILL DEVIL HILLS

MC2018-115

PROJECT NAME: ROOSTERS HVAC
SITE ADDRESS: 804 CROATAN HWY S KILL DEVIL HILLS

MECHANICAL

ISSUED: 05/04/2018

EXPIRES: 10/31/2018

DETAILS

Permit

Name	Value
PURPOSE	Commercial Repair/Remodel
CONSTRUCTION COST	32000.00
CONSTRUCTION TYPE	IV
FLOOD ZONE	AE
BASE FLOOD ELEVATION	9
NATURAL GAS SIGNOFF	N
OCCUPANCY TYPE	Assembly

REQUIRED INSPECTIONS

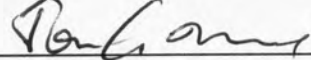
Final

CONDITIONS

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

Issued By: 

Contractor or Authorized Agent:  Date: 5-9-18



Town of Kill Devil Hills

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

Planning and Inspection Department

BJ2018-103

PROJECT NAME:
SITE ADDRESS: 319 GUNAS DR KILL DEVIL HILLS

BUILDING JOINT

ISSUED: 05/08/2018

EXPIRES: 11/04/2018

APPLICANT: GUDAC, REDA H
319 GUNAS DRIVE
KILL DEVIL HILLS, NC 27948

OWNER: GUDAC, REDA H
319 GUNAS DRIVE
KILL DEVIL HILLS, NC 27948

CONTRACTOR: SAME AS OWNER
UNKNOWN
UNKNOWN, XX 00000

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

PARCEL:

PIN: 988316932359

Parcel Number: 008441000

Address: 319 GUNAS DR KILL DEVIL HILLS

Addition: OCEAN ACRES TRACT 3 SEC 1

Zoning:
Block: D **Lot(s):** 21

Legal Description:

FEES:	Paid	Due	BUILDING AREA:
Pool/Hot Tub	\$200.00	\$0.00	Open Decks 1 EA
Open Deck Fee	\$150.00	\$0.00	
Totals :	\$350.00	\$0.00	

PROJECT DESCRIPTION: Add fence, deck, pool and hot tub

PAID

MAY - 9 2018

TOWN OF
KILL DEVIL HILLS

BJ2018-103

PROJECT NAME:

SITE ADDRESS: 319 GUNAS DR KILL DEVIL HILLS

BUILDING JOINT

ISSUED: 05/08/2018

EXPIRES: 11/04/2018

DETAILS**Permit**

Name	Value
ZONING DISTRICT	RL
FRONT YARD SETBACK	30
REAR YARD SETBACK	20% Depth >30
SIDE YARD SETBACK	8
CAMA PERMIT	Y
CAMA EXEMPTION	N
FLOOD ZONE	X
PURPOSE	Residential Accessory
CONSTRUCTION TYPE	V
CONSTRUCTION COST	10000.00
# OF UNITS	1
OPEN DECK (SQFT)	57
TOTAL SQUARE FOOTAGE	57
SURVEYOR NAME AND NUMBER	W. Jones L-2532
CULVERT	N
DRIVEWAY INVERT 2	N
OCCUPANCY TYPE	One & Two Family Dwelling

REQUIRED INSPECTIONS

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

CONDITIONS

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

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

BJ2018-103

PROJECT NAME:

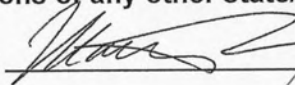
SITE ADDRESS: 319 GUNAS DR KILL DEVIL HILLS

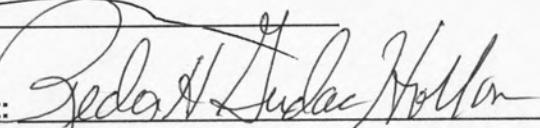
BUILDING JOINT

ISSUED: 05/08/2018

EXPIRES: 11/04/2018

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

Issued By: 

Contractor or Authorized Agent: 

Date: 5/9/18



Town of Kill Devil Hills

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

Planning and Inspection Department

BJ2018-102

PROJECT NAME: VANDERWENDE DUNE DECK
SITE ADDRESS: 1921 VA DARE TRL N KILL DEVIL HILLS

BUILDING JOINT

ISSUED: 05/07/2018

EXPIRES: 11/03/2018

APPLICANT: JAMES VANDERWENDE
22367 White Oak Rd.,
Leonardtown, MD 20650

OWNER: JAMES VANDERWENDE
22367 White Oak Rd.,
Leonardtown, MD 20650

BUILDER: H & W SERVICES GROUP
1053 MARTINS POINT RD.
kitty hawk, nc 27949
252-423-0744

License: 12345
Expires:

PARCEL:

PIN: 988406490414

Parcel Number: 002811000

Address: 1921 VA DARE TRL N KILL DEVIL HILLS

Addition: Croatan Shores Amended

Zoning:
Block: E **Lot(s):** 9

Legal Description:

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

PROJECT DESCRIPTION: REPLACE DUNE DECK & STAIRS IN SAME LOCATION.

PAID

MAY - 8 2018

TOWN OF
KILL DEVIL HILLS

BJ2018-102

PROJECT NAME: VANDERWENDE DUNE DECK
SITE ADDRESS: 1921 VA DARE TRL N KILL DEVIL HILLS

BUILDING JOINT**ISSUED:** 05/07/2018**EXPIRES:** 11/03/2018

DETAILS**Permit**

Name	Value
ZONING DISTRICT	OIR
FRONT YARD SETBACK	30
REAR YARD SETBACK	CAMA
SIDE YARD SETBACK	10
CAMA PERMIT	N
CAMA EXEMPTION	N
FLOOD ZONE	VE
BASE FLOOD ELEVATION	11
PURPOSE	Residential Repair/Remodel
CONSTRUCTION TYPE	V
CONSTRUCTION COST	16845.00
CULVERT	N
DRIVEWAY INVERT 2	N
OCCUPANCY TYPE	One & Two Family Dwelling

REQUIRED INSPECTIONS

Piling	Zoning Final
Final	

CONDITIONS

- * NOTICE: Call Public Services Department (252) 480-4080 before pouring driveway!
- * This permit becomes null and void if work or construction authorized is not commenced within 6 months or if construction or work is suspended for a period of 12 months at any time after work has started.

BJ2018-102

PROJECT NAME: VANDERWENDE DUNE DECK
SITE ADDRESS: 1921 VA DARE TRL N KILL DEVIL HILLS

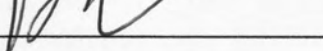
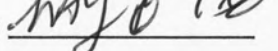
BUILDING JOINT

ISSUED: 05/07/2018

EXPIRES: 11/03/2018

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

Issued By:  _____

Contractor or Authorized Agent:  _____ Date:  _____



Town of Kill Devil Hills

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

PAID

MAY - 9 2018

Planning and Inspection Department

TOWN OF
KILL DEVIL HILLS

BP2018-082	BUILDING
PROJECT NAME: Woodard	ISSUED: 05/09/2018
SITE ADDRESS: 1619 PRINCESS ANNE DR KILL DEVIL HILLS	EXPIRES: 11/05/2018

APPLICANT: WOODARD, GILBERT E
1716 WHALEVILLE BLVD
NORFOLK, VA 23434

OWNER: WOODARD, GILBERT E
1716 WHALEVILLE BLVD
NORFOLK, VA 23434

CONTRACTOR: SAME AS APPLICANT
0000000
00000000, nc 00000

License: 123456
Expires: 04/30/2020

PARCEL:

PIN: 988410465594

Parcel Number: 003103000

Address: 1619 PRINCESS ANNE DR KILL DEVIL HILLS

Addition: W R DEATON - DELRAY BEACH

Zoning:
Block: 1 **Lot(s):** PT 16

Legal Description:

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

PROJECT DESCRIPTION: Repair/replace existing stairs in the same footprint.

BP2018-082

PROJECT NAME: Woodard
SITE ADDRESS: 1619 PRINCESS ANNE DR KILL DEVIL HILLS

BUILDING

ISSUED: 05/09/2018

EXPIRES: 11/05/2018

DETAILS

Permit

Name	Value
CAMA PERMIT	N
CAMA EXEMPTION	N
ZONING DISTRICT	RL
FRONT YARD SETBACK	30
SIDE YARD SETBACK	8
REAR YARD SETBACK	20% Depth >30
FLOOD ZONE	AE
BASE FLOOD ELEVATION	8.3
FINAL ELEVATION CERTIFICATE	Y
CONSTRUCTION COST	2551.00
CONSTRUCTION TYPE	V
OCCUPANCY TYPE	One & Two Family Dwelling

REQUIRED INSPECTIONS

Zoning Final

Final

CONDITIONS

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

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

Issued By: _____

Contractor or Authorized Agent: _____

Date: _____



Town of Kill Devil Hills

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

PAID

MAY 10 2018

Planning and Inspection Department

TOWN OF
KILL DEVIL HILLS

BP2018-084

PROJECT NAME: SULLIVAN STAIR REBUILD
SITE ADDRESS: 1721 SEA SWEPT RD KILL DEVIL HILLS

BUILDING

ISSUED: 05/10/2018

EXPIRES: 11/06/2018

APPLICANT: SULLIVAN, KATHLEEN F
P O BOX 81
KILL DEVIL HILLS, NC 27948

OWNER: SULLIVAN, KATHLEEN F
P O BOX 81
KILL DEVIL HILLS, NC 27948

PARCEL:

PIN: 988409163252

Parcel Number: 028388000

Address: 1721 SEA SWEPT RD KILL DEVIL HILLS

Zoning:

Addition: CROATAN SHORES SUBDIV

Block: 14 **Lot(s):** 10

Legal Description:

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

PROJECT DESCRIPTION: REBUILD ENTRY STAIRS & RESURFACE EXISTING DECK

BP2018-084

PROJECT NAME: SULLIVAN STAIR REBUILD
SITE ADDRESS: 1721 SEA SWEEP RD KILL DEVIL HILLS

BUILDING

ISSUED: 05/10/2018

EXPIRES: 11/06/2018

DETAILS

Permit

Name	Value
CAMA PERMIT	N
CAMA EXEMPTION	N
PURPOSE	Residential Repair/Remodel
FLOOD ZONE	AE
BASE FLOOD ELEVATION	8
FINAL ELEVATION CERTIFICATE	N
CONSTRUCTION COST	2500.00
CONSTRUCTION TYPE	V
OCCUPANCY TYPE	One & Two Family Dwelling

REQUIRED INSPECTIONS

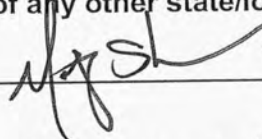
Zoning Final
Final

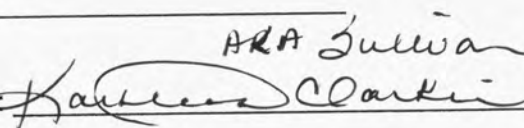
Piling

CONDITIONS

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Issued By: 

Contractor or Authorized Agent:  ARA Sullivan

Date: 5-10-18



Town of Kill Devil Hills

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

MAY 9 2018

Planning and Inspection Department

TOWN OF
KILL DEVIL HILLS

MC2018-124

PROJECT NAME: LAWRENCE HVAC
SITE ADDRESS: 225 EDEN ST ST W KILL DEVIL HILLS

MECHANICAL

ISSUED: 05/09/2018

EXPIRES: 11/05/2018

APPLICANT: LAWRENCE, FRANK A JR
225 EDEN STREET
KILL DEVIL HILLS, NC 27948

OWNER: LAWRENCE, FRANK A JR
225 EDEN STREET
KILL DEVIL HILLS, NC 27948

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

License: 13056
Expires: 12/31/2018

PARCEL:

PIN: 988517111008

Parcel Number: 000460007

Address: 225 EDEN ST ST W KILL DEVIL HILLS

Zoning:

Addition: VIRGINIA DARE SHORES

Block: 26 **Lot(s):** 7-8

Legal Description:

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

PROJECT DESCRIPTION: HVAC REPLACEMENT

MC2018-124

PROJECT NAME: LAWRENCE HVAC
SITE ADDRESS: 225 EDEN ST ST W KILL DEVIL HILLS

MECHANICAL

ISSUED: 05/09/2018

EXPIRES: 11/05/2018

DETAILS

Permit

Name	Value
PURPOSE	Residential Repair/Remodel
CONSTRUCTION COST	5171.00
CONSTRUCTION TYPE	V
FLOOD ZONE	AE
BASE FLOOD ELEVATION	8
NATURAL GAS SIGNOFF	N
OCCUPANCY TYPE	One & Two Family Dwelling

REQUIRED INSPECTIONS

Final

CONDITIONS

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Issued By: _____

Contractor or Authorized Agent: _____ Date: 5/9/18



Town of Kill Devil Hills

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

PAID

MAY 10 2018

Planning and Inspection Department

TOWN OF
KILL DEVIL HILLS

MC2018-096

PROJECT NAME: KDHCO HVAC
SITE ADDRESS: 1007 CROATAN HWY S KILL DEVIL HILLS

MECHANICAL

ISSUED: 04/18/2018

EXPIRES: 10/15/2018

APPLICANT: KDHCO, LLC
508 VIKING DR
VIRGINIA BEACH, VA 23452

OWNER: KDHCO, LLC
508 VIKING DR
VIRGINIA BEACH, VA 23452

MECHANICAL, H-2, H-3:

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

License: 11618
Expires: 12/31/2018

PARCEL:

PIN: 988308879747

Parcel Number: 004324000

Address: 1007 CROATAN HWY S KILL DEVIL HILLS

Addition: KILL DEVIL HILLS REALTY CORP

Zoning:

Block: 4

Lot(s): 4-6 & PT 7 &

Legal Description:

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

PROJECT DESCRIPTION: HVAC REPLACEMENT

MC2018-096

PROJECT NAME: KDHCO HVAC

SITE ADDRESS: 1007 CROATAN HWY S KILL DEVIL HILLS

MECHANICAL

ISSUED: 04/18/2018

EXPIRES: 10/15/2018

DETAILS

Permit

Name	Value
PURPOSE	Commercial Repair/Remodel
CONSTRUCTION COST	7000.00
CONSTRUCTION TYPE	V
FLOOD ZONE	AE
BASE FLOOD ELEVATION	8
NATURAL GAS SIGNOFF	N
OCCUPANCY TYPE	Business

REQUIRED INSPECTIONS

Final

CONDITIONS

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Issued By: _____

Contractor or Authorized Agent: _____

Date: _____



Town of Kill Devil Hills

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

PAID

MAY 9 2018

Planning and Inspection Department

TOWN OF
KILL DEVIL HILLS

MC2018-125

PROJECT NAME: PHILLIPS HVAC
SITE ADDRESS: 500 MONUMENT LN KILL DEVIL HILLS

MECHANICAL

ISSUED: 05/09/2018

EXPIRES: 11/05/2018

APPLICANT: PHILLIPS, WAYNE D
4500 CARRICO DRIVE
ANNANDALE, VA 00000

OWNER: PHILLIPS, WAYNE D
4500 CARRICO DRIVE
ANNANDALE, VA 00000

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

License: 13056
Expires: 12/31/2018

PARCEL:

PIN: 988414345208

Parcel Number: 003392000

Address: 500 MONUMENT LN KILL DEVIL HILLS

Addition: FIRST FLIGHT VILLAGE SEC 1

Zoning:

Block: 0 **Lot(s):** 128

Legal Description:

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

PROJECT DESCRIPTION: HVAC REPLACEMENT

MC2018-125

PROJECT NAME: PHILLIPS HVAC

SITE ADDRESS: 500 MONUMENT LN KILL DEVIL HILLS

MECHANICAL

ISSUED: 05/09/2018

EXPIRES: 11/05/2018

DETAILS

Permit

Name	Value
PURPOSE	Residential Repair/Remodel
CONSTRUCTION COST	6444.00
CONSTRUCTION TYPE	V
FLOOD ZONE	AE
BASE FLOOD ELEVATION	8
NATURAL GAS SIGNOFF	N
OCCUPANCY TYPE	One & Two Family Dwelling

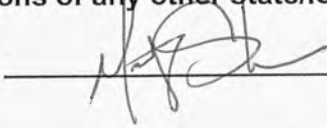
REQUIRED INSPECTIONS

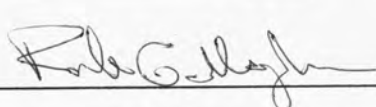
Final

CONDITIONS

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Issued By: 

Contractor or Authorized Agent:  Date: 5/9/18



Town of Kill Devil Hills

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

PAID

MAY 10 2018

Planning and Inspection Department

TOWN OF
KILL DEVIL HILLS

MC2018-126

PROJECT NAME: APT. 3
SITE ADDRESS: 710 VA DARE TRL S KILL DEVIL HILLS

MECHANICAL

ISSUED: 05/09/2018

EXPIRES: 11/05/2018

APPLICANT: RICKARD, STEVEN C
P.O. Box 2534
Kill Devil Hills, NC 27948
252-202-3509

OWNER: RICKARD, STEVEN C
P.O. Box 2534
Kill Devil Hills, NC 27948
252-202-3509

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

License: 29031
Expires: 12/31/2018

PARCEL:

PIN: 988308898385

Parcel Number: 008127000

Address: 710 VA DARE TRL S KILL DEVIL HILLS

Zoning:

Addition: SUBDIVISION - NONE

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

Legal Description:

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

PROJECT DESCRIPTION: HVAC REPLACEMENT

MC2018-126

PROJECT NAME: APT. 3

SITE ADDRESS: 710 VA DARE TRL S KILL DEVIL HILLS

MECHANICAL

ISSUED: 05/09/2018

EXPIRES: 11/05/2018

DETAILS

Permit

Name	Value
PURPOSE	Commercial Repair/Remodel
CONSTRUCTION COST	2800.00
CONSTRUCTION TYPE	III
FLOOD ZONE	AE
BASE FLOOD ELEVATION	8
NATURAL GAS SIGNOFF	N
OCCUPANCY TYPE	Business

REQUIRED INSPECTIONS

Final

CONDITIONS

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Issued By: _____

Contractor or Authorized Agent: _____

Date: _____



Town of Kill Devil Hills

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

MAY 9 2018

Planning and Inspection Department

MC2018-127

PROJECT NAME:

SITE ADDRESS: 2502 VA DARE TRL N KILL DEVIL HILLS

MECHANICAL

ISSUED: 05/09/2018

EXPIRES: 11/05/2018

APPLICANT: SIMPSON, WILLARD
1047 US HWY 17 SOUTH
ELIZABETH CITY, NC 27909

OWNER: SIMPSON, WILLARD
1047 US HWY 17 SOUTH
ELIZABETH CITY, NC 27909

H-3: GEORGE & CO.
105 Beau Pkwy
Elizabeth City, NC 27909
335-2596

License: 18979-L
Expires: 12/31/2019

PARCEL:

PIN: 988517221116

Parcel Number: 000370000

Address: 2502 VA DARE TRL N KILL DEVIL HILLS

Addition: VIRGINIA DARE SHORES

Zoning:
Block: 4 Lot(s): 3

Legal Description:

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

PROJECT DESCRIPTION: replace HVAC

MC2018-127

PROJECT NAME:

SITE ADDRESS: 2502 VA DARE TRL N KILL DEVIL HILLS

MECHANICAL

ISSUED: 05/09/2018

EXPIRES: 11/05/2018

DETAILS

Permit

Name	Value
PURPOSE	Residential Repair/Remodel
CONSTRUCTION COST	7000.00
CONSTRUCTION TYPE	V
FLOOD ZONE	AE
BASE FLOOD ELEVATION	9
NATURAL GAS SIGNOFF	N
OCCUPANCY TYPE	One & Two Family Dwelling

REQUIRED INSPECTIONS

Final

CONDITIONS

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

Issued By: _____

Contractor or Authorized Agent: _____

Date: _____



Town of Kill Devil Hills

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

PAID

MAY 11 2018

TOWN OF
KILL DEVIL HILLS

Planning and Inspection Department

DW2018-004	DRIVEWAY
PROJECT NAME: SKULTETY RENOVATIONS	ISSUED: 05/11/2018
SITE ADDRESS: 1713 SUNSET AVE KILL DEVIL HILLS	EXPIRES: 11/07/2018

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

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

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

License: 999
Expires:

PARCEL:

PIN: 988409059763

Parcel Number: 002601000

Address: 1713 SUNSET AVE KILL DEVIL HILLS

Zoning:

Addition: CROATAN SHORES SUBDIV

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

Legal Description:

FEES:	Paid	Due
Driveway Permit Fee	\$50.00	\$0.00
Totals :	\$50.00	\$0.00

PROJECT DESCRIPTION: DRIVEWAY

DW2018-004

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

DRIVEWAY

ISSUED: 05/11/2018

EXPIRES: 11/07/2018

DETAILS

Permit

Name	Value
DRIVEWAY INVERT 2	N
CULVERT	N
SURVEYOR NAME AND NUMBER	M. Douglas Styons, Jr. L3227
ZONING DISTRICT	RL
CONSTRUCTION COST	8500.00
FLOOD ZONE	AE
BASE FLOOD ELEVATION	8.3
LOT COVERAGE	33.70

REQUIRED INSPECTIONS

Zoning Final


Final

CONDITIONS

- * This permit becomes null and void if work or construction authorized is not commenced within 6 months or if construction or work is suspended for a period of 12 months at any time after work has started.
- * NOTICE: Call Public Services Department (252) 480-4080 before pouring driveway!
- * They have removed the first 6 feet of the current driveway. They will need to take an elevation shot of the north side of driveway invert at 1711 Sunset and match the south side of their driveway invert with the north side driveway invert at 1711 Sunset and lower the north side of their driveway invert 1/2 to 1 inch. The first 3 feet from edge of pavement will need to be at least 6 inches thick. They also will need to take Please have them to contact the Public Services office for a frame up inspection before they pour.
- * Construction must meet all aspect of Chapter 153 Zoning including lot coverage and setbacks.
- * As-built survey will be required prior to Certificate of Occupancy or Certificate of Compliance.

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

Issued By: 

Contractor or Authorized Agent:  Date: 05/11/2018



Town of Kill Devil Hills

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

MAY 10 2018

TOWN OF
KILL DEVIL HILLS

Planning and Inspection Department

SG2018-016

PROJECT NAME: Pacific
SITE ADDRESS: 1222 CROATAN HWY S KILL DEVIL HILLS

SIGN

ISSUED: 05/10/2018

EXPIRES: 11/06/2018

APPLICANT: WOODCAT, LLC
P.O. Box 1532
Kill Devil Hills, NC 27948

OWNER: WOODCAT, LLC
P.O. Box 1532
Kill Devil Hills, NC 27948

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

License: LEGACY UNKNOWN
Expires: 12/31/2018

PARCEL:

PIN: 988312963344

Parcel Number: 028269000

Address: 1222 CROATAN HWY S KILL DEVIL HILLS

Addition: KILL DEVIL BEACH SEC 1 REVISED

Zoning:

Block: M

Lot(s): 3,4,5,8,9 &
PT 2,6&

Legal Description:

FEES:	Paid	Due
Banner Fee	\$150.00	\$0.00
Totals :	\$150.00	\$0.00

PROJECT DESCRIPTION: 3 Banners on the building

SG2018-016

PROJECT NAME: Pacific

SITE ADDRESS: 1222 CROATAN HWY S KILL DEVIL HILLS

SIGN

ISSUED: 05/10/2018

EXPIRES: 11/06/2018

DETAILS**Permit**

Name	Value
# OF BANNERS	3
SIGN - WALL PERMITTED (SQFT)	100.00
SIGN- WALL PROPOSED (SQ FT)	80.00
ZONING DISTRICT	C
PURPOSE	Commercial Accessory
CONSTRUCTION COST	300.00
FLOOD ZONE	AE

REQUIRED INSPECTIONS

Final

CONDITIONS

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

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

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

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

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

* Banner may be displayed for a period not to exceed 90 days.

* Zoning Final Inspection is required.

SG2018-016

PROJECT NAME: Pacific

SITE ADDRESS: 1222 CROATAN HWY S KILL DEVIL HILLS

SIGN

ISSUED: 05/10/2018

EXPIRES: 11/06/2018

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Issued By: Donna Elliott

Contractor or Authorized Agent: [Signature]

Date: 5/10/18



Town of Kill Devil Hills

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

PAID
MAY 11 2018
PAID WITH CASH
TOWN OF KILL DEVIL HILLS

Planning and Inspection Department

ZP2018-031	ZONING PERMIT
PROJECT NAME: Francis Schenk	ISSUED: 05/11/2018
SITE ADDRESS: 302 FRESH POND DR E KILL DEVIL HILLS	EXPIRES: 11/07/2018

APPLICANT: Schenk, Francis T.
2710 Brockington Drive
LAS VEGAS, NV 89120
702-468-5570

OWNER: Schenk, Francis T.
2710 Brockington Drive
LAS VEGAS, NV 89120
702-468-5570

CONTRACTOR: SAME AS OWNER
UNKNOWN
UNKNOWN, XX 00000

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

PARCEL:

PIN: 989313142365 **Parcel Number:** 004957000

Address: 302 FRESH POND DR E KILL DEVIL HILLS

Addition: LAKE DRIVE DEVELOPMENT SEC 2 **Zoning:**

Legal Description: **Block:** 0 **Lot(s):** 31

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

PROJECT DESCRIPTION: Fence

ZP2018-031

PROJECT NAME: Francis Schenk

SITE ADDRESS: 302 FRESH POND DR E KILL DEVIL HILLS

ZONING PERMIT

ISSUED: 05/11/2018

EXPIRES: 11/07/2018

DETAILS

Permit

Name	Value
ZONING DISTRICT	C
CAMA PERMIT	N
CAMA EXEMPTION	N
FLOOD ZONE	AE
CONSTRUCTION COST	2000.00
SURVEYOR NAME AND NUMBER	Quible and Associates
CULVERT	N
DRIVEWAY INVERT 2	N

REQUIRED INSPECTIONS

Final

Zoning Final

CONDITIONS

- * This permit becomes null and void if work or construction authorized is not commenced within 6 months or if construction or work is suspended for a period of 12 months at any time after work has started.
- * Call for a string line inspection before installing the fence.

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

Issued By: Donna Elliott

Contractor or Authorized Agent: Francis Schenk

Date: 5/11/18



Town of Kill Devil Hills

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

PAID

MAY 11 2018

Planning and Inspection Department

TOWN OF
KILL DEVIL HILLS

EL2018-028	ELECTRICAL
PROJECT NAME:	ISSUED: 05/11/2018
SITE ADDRESS: 2028 CROATAN HWY N KILL DEVIL HILLS	EXPIRES: 11/07/2018

APPLICANT: Deborah Bowen
2704 Via Montezuma
SAN CLEMENTE, CA 92672

OWNER: Deborah Bowen
2704 Via Montezuma
SAN CLEMENTE, CA 92672

ELECTRICAL, UNLIMITED: Outer Banks Electric
1210 Burnside Rd
Manteo, NC 27954

License: 24451
Expires:

PARCEL:

PIN: 988405292863

Parcel Number: 001309000

Address: 2028 CROATAN HWY N KILL DEVIL HILLS

Zoning:

Addition: AVALON BEACH ANNEX 1

Block: 0 **Lot(s):** 543

Legal Description:

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

PROJECT DESCRIPTION: replace meter base

EL2018-028

PROJECT NAME:

SITE ADDRESS: 2028 CROATAN HWY N KILL DEVIL HILLS

ELECTRICAL

ISSUED: 05/11/2018

EXPIRES: 11/07/2018

DETAILS

Permit

Name	Value
ZONING DISTRICT	C
PURPOSE	Residential Repair/Remodel
CONSTRUCTION COST	800.00
CONSTRUCTION TYPE	V
FLOOD ZONE	AE
BASE FLOOD ELEVATION	9
OCCUPANCY TYPE	One & Two Family Dwelling

REQUIRED INSPECTIONS

Final

CONDITIONS

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Issued By: _____

Contractor or Authorized Agent: _____

Date: 5-11-2018



Town of Kill Devil Hills

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

PAID

MAY 11 2018

TOWN OF
KILL DEVIL HILLS

Planning and Inspection Department

MC2018-131

PROJECT NAME: MCREYNOLDS HVAC
SITE ADDRESS: 2024 HAMPTON ST KILL DEVIL HILLS

MECHANICAL

ISSUED: 05/11/2018

EXPIRES: 11/07/2018

APPLICANT: MCREYNOLDS, JESSE & DANIELLE
2024 HAMPTON ST
Kill Devil Hills, NC 27948
703-431-8144

OWNER: MCREYNOLDS, JESSE & DANIELLE
2024 HAMPTON ST
Kill Devil Hills, NC 27948
703-431-8144

MECHANICAL: Comfort First Heating & Cooling
1430 Tramway Rd
Sanford, NC 27332

License: 33486
Expires: 12/31/2018

PARCEL:

PIN: 988405082794

Parcel Number: 000865000

Address: 2024 HAMPTON ST KILL DEVIL HILLS

Zoning:

Addition: AVALON BEACH ANNEX 2 & 3

Block: 0 **Lot(s):** 1121

Legal Description:

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

PROJECT DESCRIPTION: HVAC REPLACEMENT

MC2018-131

PROJECT NAME: MCREYNOLDS HVAC

SITE ADDRESS: 2024 HAMPTON ST KILL DEVIL HILLS

MECHANICAL

ISSUED: 05/11/2018

EXPIRES: 11/07/2018

DETAILS

Permit

Name	Value
PURPOSE	Residential Repair/Remodel
CONSTRUCTION COST	932.00
CONSTRUCTION TYPE	V
FLOOD ZONE	AE
BASE FLOOD ELEVATION	8
NATURAL GAS SIGNOFF	N
OCCUPANCY TYPE	One & Two Family Dwelling

REQUIRED INSPECTIONS

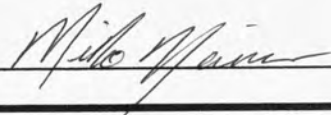
Final

CONDITIONS

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Issued By: 

Contractor or Authorized Agent:  Date: 5/11/18



Town of Kill Devil Hills

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

PAID

MAY 11 2018

Planning and Inspection Department

TOWN OF
KILL DEVIL HILLS

BP2018-085	BUILDING
PROJECT NAME:	ISSUED: 05/11/2018
SITE ADDRESS: 3212 BAY DR KILL DEVIL HILLS	EXPIRES: 11/07/2018

APPLICANT: Trent & Nicole Edwards
5011 Forest Ave.
BEDFORD, PA 15522
814-977-2867

OWNER: Trent & Nicole Edwards
5011 Forest Ave.
BEDFORD, PA 15522
814-977-2867

CONTRACTOR: SAME AS OWNER
UNKNOWN
UNKNOWN, XX 00000

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

PARCEL:

PIN: 987516739583

Parcel Number: 000318000

Address: 3212 BAY DR KILL DEVIL HILLS

Zoning:

Addition: ORVILLE BEACH WEST

Block: 0 **Lot(s):** 240

Legal Description:

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

PROJECT DESCRIPTION: Repair existing deck and stairs as is where is.

BP2018-085

PROJECT NAME:

SITE ADDRESS: 3212 BAY DR KILL DEVIL HILLS

BUILDING

ISSUED: 05/11/2018

EXPIRES: 11/07/2018

DETAILS**Permit**

Name	Value
CAMA PERMIT	N
CAMA EXEMPTION	N
ZONING DISTRICT	RL
PURPOSE	Residential Repair/Remodel
FLOOD ZONE	AE
BASE FLOOD ELEVATION	9
FINAL ELEVATION CERTIFICATE	N
CONSTRUCTION COST	1000.00
CONSTRUCTION TYPE	V
SURVEYOR NAME AND NUMBER	G. Rogers L-3531
OCCUPANCY TYPE	One & Two Family Dwelling

REQUIRED INSPECTIONS

Zoning Final

Final

CONDITIONS

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Issued By: _____

Contractor or Authorized Agent: _____

Date: _____

5/11/2018



Town of Kill Devil Hills

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

PAID

MAY 11 2018

PAID
WITH
CASH

Planning and Inspection Department

TOWN OF
KILL DEVIL HILLS

BJ2018-104

PROJECT NAME: SMITH POOL
SITE ADDRESS: 2306 VA DARE TRL N KILL DEVIL HILLS

BUILDING JOINT

ISSUED: 05/10/2018

EXPIRES: 11/06/2018

APPLICANT: SMITH, EULA S
RT 2 BOX 141
HERTFORD, NC 27944

OWNER: SMITH, EULA S
RT 2 BOX 141
HERTFORD, NC 27944

UNLICENSED BUILDER: THOMAS A GARNER
635 SNUG HARBOR LN
Newport News, VA 23606
757-592-1000

License: 0101
Expires:

PARCEL:

PIN: 988517213719

Parcel Number: 000758000

Address: 2306 VA DARE TRL N KILL DEVIL HILLS

Zoning:

Addition: VIRGINIA DARE SHORES AMD BLK 2

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

Legal Description:

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

PROJECT DESCRIPTION: ADD 14'x30' POOL IN REAR YARD WITH CONCRETE SURROUND AND POOL BARRIER FENCE WITH ASSOCIATED ELECTRICAL AND PLUMBING INCLUDED.

BJ2018-104

PROJECT NAME: SMITH POOL

SITE ADDRESS: 2306 VA DARE TRL N KILL DEVIL HILLS

BUILDING JOINT

ISSUED: 05/10/2018

EXPIRES: 11/06/2018

DETAILS

Permit

Name	Value
ZONING DISTRICT	C
FRONT YARD SETBACK	30
REAR YARD SETBACK	30
SIDE YARD SETBACK	8
STREET SIDE SETBACK	15
CAMA PERMIT	N
CAMA EXEMPTION	N
FLOOD ZONE	VE
BASE FLOOD ELEVATION	11
PURPOSE	Residential Accessory
CONSTRUCTION TYPE	III
CONSTRUCTION COST	15000.00
CULVERT	N
DRIVEWAY INVERT 2	N
OCCUPANCY TYPE	One & Two Family Dwelling

REQUIRED INSPECTIONS

Piling	Final
In-Slab Plumbing	Zoning Final
Slab/Foundation	Pool Bonding
Rough In	

CONDITIONS

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

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

BJ2018-104

PROJECT NAME: SMITH POOL

SITE ADDRESS: 2306 VA DARE TRL N KILL DEVIL HILLS

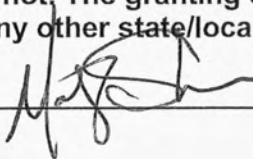
BUILDING JOINT

ISSUED: 05/10/2018

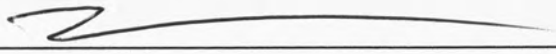
EXPIRES: 11/06/2018

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Issued By: _____



Contractor or Authorized Agent: _____



Date: 5-11-2018