



Town of Kill Devil Hills

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

PAID

JUL - 2 2018

TOWN OF
KILL DEVIL HILLS

Planning and Inspection Department

| | |
|--|----------------------------|
| BP2018-117 | BUILDING |
| PROJECT NAME: HOWE STAIR & DECK REPAIRS | ISSUED: 07/02/2018 |
| SITE ADDRESS: 1705 APACHE ST KILL DEVIL HILLS | EXPIRES: 12/29/2018 |

APPLICANT: HOWE, SUSAN MARIE
5805 Rowenberry DR
Elkridge, MD 21075

OWNER: HOWE, SUSAN MARIE
5805 Rowenberry DR
Elkridge, MD 21075

GENERAL-LIMITED: ALBANESE CONSTRUCTION CO.
1811 Sea Swept Road
Kill Devil Hills, NC 27948
252-619-1618

License: 64199
Expires: 03/13/2019

PARCEL:

PIN: 988409260097

Parcel Number: 002707000

Address: 1705 APACHE ST KILL DEVIL HILLS

Zoning:

Addition: HIGH VIEW - HEDRICKS ADD

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

Legal Description:

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

PROJECT DESCRIPTION: REPLACE STAIRS & DECK RAILINGS.

BP2018-117

PROJECT NAME: HOWE STAIR & DECK REPAIRS
SITE ADDRESS: 1705 APACHE ST KILL DEVIL HILLS

BUILDING

ISSUED: 07/02/2018

EXPIRES: 12/29/2018

DETAILS

Permit

| Name | Value |
|--------------------------------|-------------------------------|
| CAMA PERMIT | N |
| CAMA EXEMPTION | N |
| PURPOSE | Residential Repair/Remodel |
| FLOOD ZONE | X |
| FINAL ELEVATION CERTIFICATE | N |
| CONSTRUCTION COST | 5000.00 |
| 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.

* ALL CONSTRUCTION MUST MEET CURRENT BUILDING CODE REQUIREMENTS.

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: _____

7/2/18



Town of Kill Devil Hills

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PAID

JUL - 3 2018

Planning and Inspection Department

TOWN OF
KILL DEVIL HILLS

BP2018-116
PROJECT NAME:
SITE ADDRESS: 2039 Highview St Kill Devil Hills

BUILDING
ISSUED: 06/27/2018
EXPIRES: 12/24/2018

APPLICANT: Jonathan Hardin
12720 Hitchcock Ct.
RESTON, VA 20191
703-801-5440

OWNER: Jonathan Hardin
12720 Hitchcock Ct.
RESTON, VA 20191
703-801-5440

RESIDENTIAL, LIMITED: Emanuelson and Dad
6705 CROATAN HWY SOUTH
6705 S. Croatan Hwy.
nags head, nc 27959
252-261-2215

License: 79801
Expires: 06/14/2019

PARCEL:

PIN: 988405096388

Parcel Number: 001508000

Address: 2039 Highview St Kill Devil Hills

Zoning:

Addition: AVALON BEACH ANNEX 2 & 3

Block: 0 **Lot(s):** 1384

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: Sister 7 piles, Eng. H. Goodman 20446

BP2018-116

PROJECT NAME:

SITE ADDRESS: 2039 Highview St Kill Devil Hills

BUILDING

ISSUED: 06/27/2018

EXPIRES: 12/24/2018

DETAILS**Permit**

| Name | Value |
|--------------------------------|-------------------------------|
| CAMA PERMIT | N |
| CAMA EXEMPTION | N |
| ZONING DISTRICT | RL |
| PURPOSE | Residential Repair/Remodel |
| FRONT YARD SETBACK | 15 |
| SIDE YARD SETBACK | 6 |
| REAR YARD SETBACK | 20% Depth >30 |
| HEALTH DEPARTMENT PERMIT # | 27917 |
| FLOOD ZONE | AE |
| BASE FLOOD ELEVATION | 8.3 |
| FINAL ELEVATION CERTIFICATE | N |
| CONSTRUCTION COST | 8000.00 |
| CONSTRUCTION TYPE | V |
| SURVEYOR NAME AND NUMBER | M. D. Styons L-3227 |
| OCCUPANCY TYPE | One & Two Family Dwelling |

REQUIRED INSPECTIONS

Zoning Final

Final

CONDITIONS

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

BP2018-116

PROJECT NAME:

SITE ADDRESS: 2039 Highview St Kill Devil Hills

BUILDING

ISSUED: 06/27/2018

EXPIRES: 12/24/2018

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
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Planning and Inspection Department

BP2018-120

PROJECT NAME: SKENES RENOVATIONS
SITE ADDRESS: 1735 CROATAN HWY N KILL DEVIL HILLS

BUILDING

ISSUED: 07/06/2018

EXPIRES: 01/02/2019

APPLICANT: Willie Skenes
1157 Sunlight Dr.
CHESAPEAKE, VA 23320
757-332-0604

OWNER: Willie Skenes
1157 Sunlight Dr.
CHESAPEAKE, VA 23320
757-332-0604

GENERAL: Self
UNKNOWN
UNKNOWN, XX 00000

License: Unlicensed
Expires: 12/31/2020

PARCEL:

PIN: 988406378510

Parcel Number: 002947000

Address: 1735 CROATAN HWY N KILL DEVIL HILLS

Addition: LONG LAKE

Zoning:
Block: 0 **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: ADD 12'x21.90' REAR DECK; DRYWALL & PLASTER FRONT ROOM; REPLACE FASCIA BOARDS.

PAID
JUL - 6 2018
TOWN OF
KILL DEVIL HILLS

BP2018-120

PROJECT NAME: SKENES RENOVATIONS
SITE ADDRESS: 1735 CROATAN HWY N KILL DEVIL HILLS

BUILDING**ISSUED:** 07/06/2018**EXPIRES:** 01/02/2019

DETAILS**Permit**

| Name | Value |
|--------------------------------|-------------------------------|
| CAMA PERMIT | N |
| CAMA EXEMPTION | N |
| ZONING DISTRICT | RL |
| PURPOSE | Residential Repair/Remodel |
| FRONT YARD SETBACK | 30 |
| SIDE YARD SETBACK | 8 |
| REAR YARD SETBACK | 20% Depth >30 |
| FLOOD ZONE | AE |
| BASE FLOOD ELEVATION | 8 |
| FINAL ELEVATION CERTIFICATE | N |
| CONSTRUCTION COST | 3680.00 |
| LOT COVERAGE | 35.43 |
| OPEN DECK (SQFT) | 263 |
| 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.

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

BP2018-120

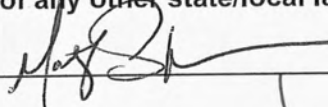
PROJECT NAME: SKENES RENOVATIONS
SITE ADDRESS: 1735 CROATAN HWY N KILL DEVIL HILLS

BUILDING

ISSUED: 07/06/2018

EXPIRES: 01/02/2019

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Issued By:  _____

Contractor or Authorized Agent:  _____

Date: 7/6/18



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PAID

JUL - 6 2018

Planning and Inspection Department

TOWN OF
KILL DEVIL HILLS

| | |
|--|----------------------------|
| BP2018-118 | BUILDING |
| PROJECT NAME: SCHMIDT PILING REPLACEMENT | ISSUED: 07/03/2018 |
| SITE ADDRESS: 110 OCEAN BAY BLVD KILL DEVIL HILLS | EXPIRES: 12/30/2018 |

| | |
|---|---|
| APPLICANT: SCHMIDT, RAYMOND 13441 CARTER'S CREEK PL CHESTERFIELD, VA 23838 804-995-9021 | OWNER: SCHMIDT, RAYMOND 13441 CARTER'S CREEK PL CHESTERFIELD, VA 23838 804-995-9021 |
|---|---|

| | | |
|------------------------------|---|---|
| RESIDENTIAL, LIMITED: | Emanuelson and Dad 6705 CROATAN HWY SOUTH 6705 S. Croatan Hwy. nags head, nc 27959 252-261-2215 | License: 79801 Expires: 06/14/2019 |
|------------------------------|---|---|

PARCEL:

| | |
|---|-----------------------------------|
| PIN: 988420706665 | Parcel Number: 003870000 |
| Address: 110 OCEAN BAY BLVD KILL DEVIL HILLS | Zoning: |
| Addition: KITTY HAWK SHORES - REVISED | Block: 37 Lot(s): 7 |
| Legal Description: | |

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

PROJECT DESCRIPTION: REPLACE 24 PILINGS

BP2018-118PROJECT NAME: SCHMIDT PILING REPLACEMENT
SITE ADDRESS: 110 OCEAN BAY BLVD KILL DEVIL HILLS**BUILDING**

ISSUED: 07/03/2018

EXPIRES: 12/30/2018

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 | 21600.00 |
| CONSTRUCTION TYPE | V |
| OCCUPANCY TYPE | One & Two Family Dwelling |

REQUIRED INSPECTIONS

Final

Piling

CONDITIONS

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Contractor or Authorized Agent: _____

Date: _____



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Planning and Inspection Department

| | |
|--|----------------------------|
| BP2018-124 | BUILDING |
| PROJECT NAME: ALLEN DECK REPAIR | ISSUED: 07/10/2018 |
| SITE ADDRESS: 1601 WRIGHTSVILLE BLVD KILL DEVIL HILLS | EXPIRES: 01/06/2019 |

APPLICANT: ALLEN, JOHN L SR
P O BOX 1010
KILL DEVIL HILLS, NC 27948

OWNER: ALLEN, JOHN L SR
P O BOX 1010
KILL DEVIL HILLS, NC 27948

UNLICENSED - REMODELING:

BRINDLEY BEACH CONSTRUCTION
1213 C DUCK RD
DUCK, nc 27949

License: 555
Expires:

PARCEL:

PIN: 989309056204

Parcel Number: 008257000

Address: 1601 WRIGHTSVILLE BLVD KILL DEVIL HILLS

Zoning:

Addition: OCEAN ACRES INC

Block: 0 **Lot(s):** 71-73

Legal Description:

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

PROJECT DESCRIPTION: REDUCE DECK DEPTH TO REMOVE ENCROACHMENT ONTO ADJACENT PROPERTY.

JUL 11 2018

BP2018-124

PROJECT NAME: ALLEN DECK REPAIR
SITE ADDRESS: 1601 WRIGHTSVILLE BLVD KILL DEVIL HILLS

BUILDING

ISSUED: 07/10/2018

EXPIRES: 01/06/2019

DETAILS**Permit**

| Name | Value |
|--------------------------------|-------------------------------|
| CAMA PERMIT | N |
| CAMA EXEMPTION | N |
| ZONING DISTRICT | C |
| PURPOSE | Residential Repair/Remodel |
| FRONT YARD SETBACK | 30 |
| SIDE YARD SETBACK | 10 |
| REAR YARD SETBACK | 20% Depth >30 |
| STREET SIDE SETBACK | 15 |
| FINAL ELEVATION CERTIFICATE | N |
| CONSTRUCTION COST | 2000.00 |
| 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.

* GIRDER SPAN OF 12' AS SHOWN ON PLANS DO NOT MEET CODE. PER PHONE CONVERSATION WITH JESSE LITTLE, ADD 1 ADDITIONAL PILING ALONG 12' GIRDER TO MEET CODE -OR- PROVIDE ENGINEERED DRAWINGS.

BP2018-124

PROJECT NAME: ALLEN DECK REPAIR

SITE ADDRESS: 1601 WRIGHTSVILLE BLVD KILL DEVIL HILLS

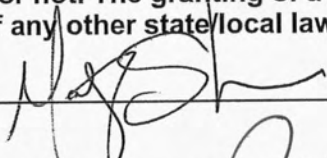
BUILDING

ISSUED: 07/10/2018

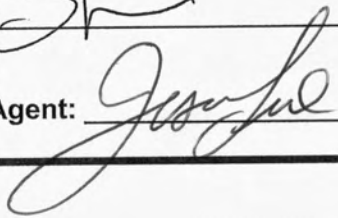
EXPIRES: 01/06/2019

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Issued By: _____



Contractor or Authorized Agent: _____



Date: _____

7-11-18



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

| | |
|--|----------------------------|
| BP2018-122 | BUILDING |
| PROJECT NAME: Short Deck | ISSUED: 07/10/2018 |
| SITE ADDRESS: 3308 RAYMOND AVE KILL DEVIL HILLS | EXPIRES: 01/06/2019 |

APPLICANT: NOBLE, RICHARD SCOTT
3121 MARY HILL COURT
KILL DEVIL HILLS, NC 27948
252-202-2453

OWNER: Short, Gary
615 Stockley Garden Rd
NORFOLK, VA 23507
757-328-1824

GENERAL: NOBLE, SCOTT
3121 Mary Hill Court
Kill Devil Hills, NC 27948
252-202-2453

License: 52132
Expires: 02/13/2019

PARCEL:

PIN: 988513041946

Parcel Number: 000004000

Address: 3308 RAYMOND AVE KILL DEVIL HILLS

Addition: ORVILLE BEACH AMENDED BLK 3

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

Legal Description:

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

PROJECT DESCRIPTION: Construct a 17'x24' deck

PAID
JUL 12 2018
TOWN OF
KILL DEVIL HILLS

BP2018-122

PROJECT NAME: Short Deck

SITE ADDRESS: 3308 RAYMOND AVE KILL DEVIL HILLS

BUILDING

ISSUED: 07/10/2018

EXPIRES: 01/06/2019

DETAILS**Permit**

| Name | Value |
|--------------------------------|----------------------|
| CAMA PERMIT | N |
| CAMA EXEMPTION | N |
| ZONING DISTRICT | RH |
| PURPOSE | Residential Addition |
| FRONT YARD SETBACK | 30 |
| SIDE YARD SETBACK | 10 |
| REAR YARD SETBACK | 20% Depth >30 |
| STREET SIDE SETBACK | 15 |
| FLOOD ZONE | AE |
| BASE FLOOD ELEVATION | 9 |
| FINAL ELEVATION CERTIFICATE | N |
| CONSTRUCTION COST | 15000.00 |
| OPEN DECK (SQFT) | 408 |

REQUIRED INSPECTIONS

Zoning Final

Final

CONDITIONS

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

BP2018-122

PROJECT NAME: Short Deck

SITE ADDRESS: 3308 RAYMOND AVE KILL DEVIL HILLS

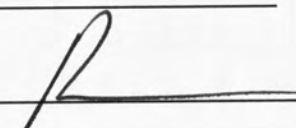
BUILDING

ISSUED: 07/10/2018

EXPIRES: 01/06/2019

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Issued By:  _____

Contractor or Authorized Agent:  _____

Date: 7/12/18



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

| | |
|---|----------------------------|
| BP2018-121 | BUILDING |
| PROJECT NAME: | ISSUED: 07/09/2018 |
| SITE ADDRESS: 3211 Bay Dr Kill Devil Hills | EXPIRES: 01/05/2019 |

APPLICANT: RICHARD LEWANDOWSKI
3211 Bay Dr.
K D H, NC 27948

OWNER: RICHARD LEWANDOWSKI
3211 Bay Dr.
K D H, NC 27948

BUILDING, REMODELING: William Cobb
4218 Cobbs Way
nags head, nc 27959
207-9899

License: 1236
Expires:

PARCEL:

PIN: 987516832549

Parcel Number: 000239000

Address: 3211 Bay Dr Kill Devil Hills

Zoning:

Addition: ORVILLE BEACH WEST

Block: 0 **Lot(s):** 142

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 decking, railings, & joist; replace 1 window on 1st floorwest side.

PAID

JUL 12 2018

TOWN OF
KILL DEVIL HILLS

BP2018-121

PROJECT NAME:

SITE ADDRESS: 3211 Bay Dr Kill Devil Hills

BUILDING

ISSUED: 07/09/2018

EXPIRES: 01/05/2019

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 | X |
| FINAL ELEVATION CERTIFICATE | N |
| CONSTRUCTION COST | 6500.00 |
| CONSTRUCTION TYPE | V |
| SURVEYOR NAME AND NUMBER | D. Styons L-3227 |
| OCCUPANCY TYPE | One & Two Family Dwelling |

REQUIRED INSPECTIONS

Zoning Final

Final

CONDITIONS

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

BP2018-121

PROJECT NAME:

SITE ADDRESS: 3211 Bay Dr Kill Devil Hills

BUILDING

ISSUED: 07/09/2018

EXPIRES: 01/05/2019

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: _____

William Cabel

Date: _____

7/12/18



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

BP2018-125

PROJECT NAME: Poole steps
SITE ADDRESS: 105 SUTTON AVE KILL DEVIL HILLS

BUILDING

ISSUED: 07/13/2018

EXPIRES: 01/09/2019

APPLICANT: KJ CONSTRUCTION & REMODELING
PO BOX 242
kitty hawk, nc 27949
252-207-6589

OWNER: POOLE, HAZEL
7448 SPRING VILLAGE DRIVE
APT 507
SPRINGFIELD, VA 22150

UNLIMITED BUILDING: KJ CONSTRUCTION & REMODELING
PO BOX 242
kitty hawk, nc 27949
252-207-6589

License: 59936
Expires: 12/31/2018

PARCEL:

PIN: 988419711336

Parcel Number: 003924000

Address: 105 SUTTON AVE KILL DEVIL HILLS

Addition: KITTY HAWK SHORES - REVISED

Zoning:
Block: 40 **Lot(s):** 15

Legal Description:

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

PROJECT DESCRIPTION: Replace back step and landing "AS IS WHERE IS"

3757

JUL 13 2018

TOWN OF
KILL DEVIL HILLS

BP2018-125

PROJECT NAME: Poole steps

SITE ADDRESS: 105 SUTTON AVE KILL DEVIL HILLS

BUILDING

ISSUED: 07/13/2018

EXPIRES: 01/09/2019

DETAILS**Permit**

| Name | Value |
|--------------------------------|-------------------------------|
| CAMA PERMIT | N |
| CAMA EXEMPTION | N |
| ZONING DISTRICT | RL |
| PURPOSE | Residential Repair/Remodel |
| FRONT YARD SETBACK | 30 |
| SIDE YARD SETBACK | 8 |
| REAR YARD SETBACK | 20% Depth >30 |
| FLOOD ZONE | AE |
| BASE FLOOD ELEVATION | 8 |
| FINAL ELEVATION CERTIFICATE | N |
| CONSTRUCTION COST | 2800.00 |

REQUIRED INSPECTIONS

Zoning Final

Final

CONDITIONS

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Issued By: _____

Contractor or Authorized Agent: _____ Date: 7.13.18



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Planning and Inspection Department

| | |
|---|----------------------------|
| BP2018-123 | BUILDING |
| PROJECT NAME: MINTER STAIR REPLACEMENT | ISSUED: 07/10/2018 |
| SITE ADDRESS: 200 PALMETTO ST E KILL DEVIL HILLS | EXPIRES: 01/06/2019 |

APPLICANT: MINTER, GEOFFREY W
200 EAST PALMETTO ST
KILL DEVIL HILLS, NC 27948

OWNER: MINTER, GEOFFREY W
200 EAST PALMETTO ST
KILL DEVIL HILLS, NC 27948

UNLICENSED BUILDER: Surfside Construction
9506 S Old Oregon Inlet Rd.
nags head, nc 27959
252-548-9253

License: Unlicensed
Expires: 01/26/2029

PARCEL:

| | |
|--|--------------------------------------|
| PIN: 988517210438 | Parcel Number: 000768000 |
| Address: 200 PALMETTO ST E KILL DEVIL HILLS | |
| Addition: VIRGINIA DARE SHORES AMD BLK 2 | Zoning: |
| Legal Description: | Block: 2 Lot(s): 19-20 |

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

PROJECT DESCRIPTION: REPLACE EXISTING STAIRS INCREASING WIDTH FROM 36" TO 40"

PAID

JUL 16 2018

TOWN OF
KILL DEVIL HILLS

BP2018-123

PROJECT NAME: MINTER STAIR REPLACEMENT
SITE ADDRESS: 200 PALMETTO ST E KILL DEVIL HILLS

BUILDING

ISSUED: 07/10/2018

EXPIRES: 01/06/2019

DETAILS

Permit

| Name | Value |
|--------------------------------|-------------------------------|
| CAMA PERMIT | N |
| CAMA EXEMPTION | N |
| ZONING DISTRICT | C |
| PURPOSE | Residential Repair/Remodel |
| FRONT YARD SETBACK | 15 |
| SIDE YARD SETBACK | 6 |
| REAR YARD SETBACK | 20% Depth >30 |
| FLOOD ZONE | AE |
| BASE FLOOD ELEVATION | 9 |
| FINAL ELEVATION CERTIFICATE | N |
| CONSTRUCTION COST | 2575.00 |
| CONSTRUCTION TYPE | V |
| OCCUPANCY TYPE | One & Two Family Dwelling |

REQUIRED INSPECTIONS

Final

Piling

CONDITIONS

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

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

Issued By: _____

Contractor or Authorized Agent: _____

Date: 7-16-18



Town of Kill Devil Hills

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

PAID

JUL 18 2018

Planning and Inspection Department

TOWN OF
KILL DEVIL HILLS

BP2018-127

PROJECT NAME:

SITE ADDRESS: 3116 Bay Dr Kill Devil Hills

BUILDING

ISSUED: 07/18/2018

EXPIRES: 01/14/2019

APPLICANT: Reese, William
10408 Laurel Ridge Way
Fredericksburg, VA 22408

OWNER: Reese, William
10408 Laurel Ridge Way
Fredericksburg, VA 22408

GENERAL-INTERMEDIATE: SEA COUNTRY HOMES, INC.
1508 Captains Lane
Kill Devil Hills, NC 27948
207-8338

License: 41322
Expires: 12/30/2018

PARCEL:

PIN: 987520822037

Parcel Number: 001075000

Address: 3116 Bay Dr Kill Devil Hills

Zoning:

Addition: MOOR SHORES

Block: 0 **Lot(s):** 140

Legal Description:

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

PROJECT DESCRIPTION: Replace 2 Sliders.

BP2018-127

PROJECT NAME:

SITE ADDRESS: 3116 Bay Dr Kill Devil Hills

BUILDING

ISSUED: 07/18/2018

EXPIRES: 01/14/2019

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 | 6000.00 |
| CONSTRUCTION TYPE | V |
| OCCUPANCY TYPE | One & Two Family Dwelling |

REQUIRED INSPECTIONS

Zoning Final

Final

CONDITIONS

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

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

Issued By: _____

Contractor or Authorized Agent: _____

Date: 7/18/18



Town of Kill Devil Hills

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

JUL 17 2018

Planning and Inspection Department

TOWN OF
KILL DEVIL HILLS

BP2018-126

PROJECT NAME: Van Beelen steps
SITE ADDRESS: 518 PARKWOOD DR KILL DEVIL HILLS

BUILDING

ISSUED: 07/17/2018

EXPIRES: 01/13/2019

APPLICANT: Puppy Drum Properties Marian Van Beelen
1408 W. 1st St.
Kill Devil Hills, NC 27948
489-0534

OWNER: Puppy Drum Properties
1408 W First St
Kill Devil Hills, NC 27948

GENERAL: Self
UNKNOWN
UNKNOWN, XX 00000

License: Unlicensed
Expires: 12/31/2020

PARCEL:

PIN: 988414228563

Parcel Number: 004046010

Address: 518 PARKWOOD DR KILL DEVIL HILLS

Zoning:

Addition: WRIGHT WOODS

Block: 0 **Lot(s):** 10

Legal Description:

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

PROJECT DESCRIPTION: Repair and replace side and front steps and as needed.

BP2018-126

PROJECT NAME: Van Beelen steps

SITE ADDRESS: 518 PARKWOOD DR KILL DEVIL HILLS

BUILDING

ISSUED: 07/17/2018

EXPIRES: 01/13/2019

DETAILS**Permit**

| Name | Value |
|--------------------------------|-------------------------------|
| CAMA PERMIT | N |
| CAMA EXEMPTION | N |
| ZONING DISTRICT | RL |
| PURPOSE | Residential Repair/Remodel |
| FRONT YARD SETBACK | 30 |
| SIDE YARD SETBACK | 10 |
| REAR YARD SETBACK | 20% Depth >30 |
| FLOOD ZONE | AE |
| BASE FLOOD ELEVATION | 8 |
| FINAL ELEVATION CERTIFICATE | N |
| CONSTRUCTION COST | 5000.00 |

REQUIRED INSPECTIONS


Zoning Final

Final

CONDITIONS

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

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

Issued By: Contractor or Authorized Agent: 

Date: 7/17/18



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

JUL 19 2018

BP2018-128

PROJECT NAME:

SITE ADDRESS: 401 FOURTH ST W KILL DEVIL HILLS

BUILDING

ISSUED: 07/18/2018

EXPIRES: 01/14/2019

APPLICANT: Kathy & Gregg Weber
325 Sussex Ct.
NORFOLK, VA 23434
757-642-5418

OWNER: Kathy & Gregg Weber
325 Sussex Ct.
NORFOLK, VA 23434
757-642-5418

RESIDENTIAL, LIMITED: Emanuelson and Dad
6705 CROATAN HWY SOUTH
6705 S. Croatan Hwy.
nags head, nc 27959
252-261-2215

License: 79801
Expires: 06/14/2019

PARCEL:

PIN: 988405273957

Parcel Number: 002217000

Address: 401 FOURTH ST W KILL DEVIL HILLS

Addition: WRIGHT'S SHORES SEC 2

Zoning:

Block: 0 **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 back deck decking and front stairs and landing.

BP2018-128

PROJECT NAME:

SITE ADDRESS: 401 FOURTH ST W KILL DEVIL HILLS

BUILDING

ISSUED: 07/18/2018

EXPIRES: 01/14/2019

DETAILS

Permit

| Name | Value |
|--------------------------------|-------------------------------|
| CAMA PERMIT | N |
| CAMA EXEMPTION | N |
| ZONING DISTRICT | RL |
| PURPOSE | Residential Repair/Remodel |
| FLOOD ZONE | AE |
| BASE FLOOD ELEVATION | 8.3 |
| FINAL ELEVATION CERTIFICATE | N |
| CONSTRUCTION COST | 4660.00 |
| 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: _____

7-18-18



Town of Kill Devil Hills

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

PAID

JUL 20 2018

Planning and Inspection Department

TOWN OF
KILL DEVIL HILLS

BP2018-129
PROJECT NAME:
SITE ADDRESS: 1102 Suffolk St Kill Devil Hills

BUILDING
ISSUED: 07/20/2018
EXPIRES: 01/16/2019

APPLICANT: CISHEK, JEAN H
1907 HELEN LANE
KILL DEVIL HILLS, NC 27948

OWNER: CISHEK, JEAN H
1907 HELEN LANE
KILL DEVIL HILLS, NC 27948

GENERAL, UNLICENSED: Wyldeman Decks
1731 Bay Dr.
Kill Devil Hills, NC 27948

License: 12356
Expires:

PARCEL:

PIN: 987408997156

Parcel Number: 001975000

Address: 1102 Suffolk St Kill Devil Hills

Addition: AVALON BEACH ANNEX 2 & 3

Zoning:

Block: 0 Lot(s): 975

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 exterior stairs.

BP2018-129

PROJECT NAME:

SITE ADDRESS: 1102 Suffolk St Kill Devil Hills

BUILDING

ISSUED: 07/20/2018

EXPIRES: 01/16/2019

DETAILS**Permit**

| Name | Value |
|--------------------------------|-------------------------------|
| CAMA PERMIT | N |
| CAMA EXEMPTION | N |
| ZONING DISTRICT | RL |
| PURPOSE | Residential Repair/Remodel |
| FRONT YARD SETBACK | 15 |
| SIDE YARD SETBACK | 6 |
| REAR YARD SETBACK | 20% Depth >30 |
| HEALTH DEPARTMENT PERMIT # | 27966 |
| FLOOD ZONE | AE |
| BASE FLOOD ELEVATION | 8.3 |
| FINAL ELEVATION CERTIFICATE | N |
| CONSTRUCTION COST | 1000.00 |
| CONSTRUCTION TYPE | V |
| SURVEYOR NAME AND NUMBER | Styons L-3227 |
| OCCUPANCY TYPE | One & Two Family Dwelling |

REQUIRED INSPECTIONS

Zoning Final

Final

CONDITIONS

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

BP2018-129

PROJECT NAME:

SITE ADDRESS: 1102 Suffolk St Kill Devil Hills

BUILDING

ISSUED: 07/20/2018

EXPIRES: 01/16/2019

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: _____

7-20-18



Town of Kill Devil Hills

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

PAID

JUL 30 2018

Planning and Inspection Department

TOWN OF
KILL DEVIL HILLS

BP2018-130

PROJECT NAME: FERNANDEZ SIDING REPLACEMENT
SITE ADDRESS: 306 FIRST ST W KILL DEVIL HILLS

BUILDING

ISSUED: 07/30/2018

EXPIRES: 01/26/2019

APPLICANT: FERNANDEZ, CARLOS ANGEL
2109 BAY DR.
KILL DEVIL HILLS, NC 27948
252-207-2975

OWNER: FERNANDEZ, CARLOS ANGEL
2109 BAY DR.
KILL DEVIL HILLS, NC 27948
252-207-2975

GENERAL: Self
UNKNOWN
UNKNOWN, XX 00000

License: Unlicensed
Expires: 12/31/2020

PARCEL:

PIN: 988410354394

Parcel Number: 003198000

Address: 306 FIRST ST W KILL DEVIL HILLS

Addition: FIRST FLIGHT VILLAGE SEC 2

Zoning:
Block: 0 **Lot(s):** 197

Legal Description:

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

PROJECT DESCRIPTION: REPLACE T-111 SIDING & POSSIBLY SOME WINDOWS

BP2018-130PROJECT NAME: FERNANDEZ SIDING REPLACEMENT
SITE ADDRESS: 306 FIRST ST W KILL DEVIL HILLS**BUILDING**

ISSUED: 07/30/2018

EXPIRES: 01/26/2019

DETAILS**Permit**

| Name | Value |
|--------------------------------|------------------------------|
| CAMA PERMIT | N |
| CAMA EXEMPTION | N |
| FLOOD ZONE | AE |
| BASE FLOOD ELEVATION | 9 |
| FINAL ELEVATION CERTIFICATE | N |
| CONSTRUCTION COST | 15000.00 |
| CONSTRUCTION TYPE | V |
| OCCUPANCY TYPE | One & Two Family Dwelling |

REQUIRED INSPECTIONS

Sheathing

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

JUL 30 2018

Planning and Inspection Department

BP2018-131

PROJECT NAME: Lee steps
SITE ADDRESS: 407 FIFTH ST W KILL DEVIL HILLS

BUILDING

ISSUED: 07/30/2018

EXPIRES: 01/26/2019

APPLICANT: ROBERT LEE
PO Box 446
Gatesville, NC 27938
252-339-0023

OWNER: ROBERT LEE
PO Box 446
Gatesville, NC 27938
252-339-0023

UNLICENSED - REMODELING: Yoder, Doug
4104 Poor Ridge RD
kitty hawk, nc 27949

License: 00000000
Expires:

PARCEL:

PIN: 988405188679

Parcel Number: 002067000

Address: 407 FIFTH ST W KILL DEVIL HILLS

Addition: WRIGHT'S SHORES

Zoning:
Block: 0 **Lot(s):** 13

Legal Description:

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

PROJECT DESCRIPTION: Replace steps add rear deck and landing, move rear steps out of set back

BP2018-131

PROJECT NAME: Lee steps

SITE ADDRESS: 407 FIFTH ST W KILL DEVIL HILLS

BUILDING

ISSUED: 07/30/2018

EXPIRES: 01/26/2019

DETAILS**Permit**

| Name | Value |
|--------------------------------|-------------------------------|
| CAMA PERMIT | N |
| CAMA EXEMPTION | N |
| ZONING DISTRICT | RL |
| PURPOSE | Residential Repair/Remodel |
| FRONT YARD SETBACK | 30 |
| SIDE YARD SETBACK | 8 |
| REAR YARD SETBACK | 20% Depth >30 |
| FLOOD ZONE | AE |
| BASE FLOOD ELEVATION | 8 |
| FINAL ELEVATION CERTIFICATE | N |
| CONSTRUCTION COST | 1800.00 |

REQUIRED INSPECTIONS

Zoning Final

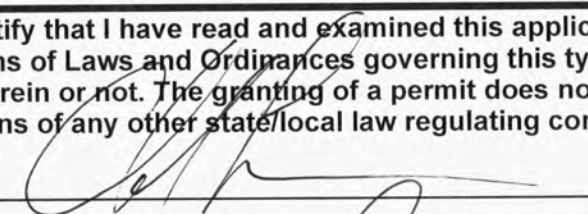
Final

CONDITIONS

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

* 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: 7-30-18



Town of Kill Devil Hills

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

PAID

JUL 24 2018

PAID
WITH
CASH

Planning and Inspection Department

TOWN OF
KILL DEVIL HILLS

ZP2018-052

PROJECT NAME: Fowler Fence & Shed
SITE ADDRESS: 510 FIRST FLIGHT LN KILL DEVIL HILLS

ZONING PERMIT

ISSUED: 07/24/2018

EXPIRES: 01/20/2019

APPLICANT: CAHOON, FOWLER M JR
1500 VILLAGE LANE
KILL DEVIL HILLS, NC 27948

OWNER: CAHOON, FOWLER M JR
1500 VILLAGE LANE
KILL DEVIL HILLS, NC 27948

GENERAL: Self
UNKNOWN
UNKNOWN, XX 00000

License: Unlicensed
Expires: 12/31/2020

PARCEL:

PIN: 988414247457

Parcel Number: 003353000

Address: 510 FIRST FLIGHT LN KILL DEVIL HILLS

Addition: FIRST FLIGHT VILLAGE SEC 1

Zoning:
Block: 0 **Lot(s):** 73

Legal Description:

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

PROJECT DESCRIPTION: Install fence around backyard and 12x12 storage shed

ZP2018-052

PROJECT NAME: Fowler Fence & Shed
SITE ADDRESS: 510 FIRST FLIGHT LN KILL DEVIL HILLS

ZONING PERMIT

ISSUED: 07/24/2018

EXPIRES: 01/20/2019

DETAILS

Permit

| Name | Value |
|---------------------|-----------------------|
| ZONING DISTRICT | RL |
| FRONT YARD SETBACK | 30 |
| REAR YARD SETBACK | 20% Depth >30 |
| SIDE YARD SETBACK | 10 |
| STREET SIDE SETBACK | 15 |
| CAMA PERMIT | N |
| CAMA EXEMPTION | N |
| PURPOSE | Residential Accessory |
| CONSTRUCTION COST | 5000.00 |
| CULVERT | N |
| DRIVEWAY INVERT 2 | N |

AE Flood Zone

REQUIRED INSPECTIONS

Stringline

Zoning Final

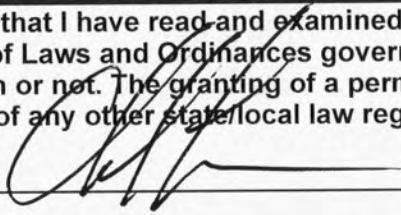
Final

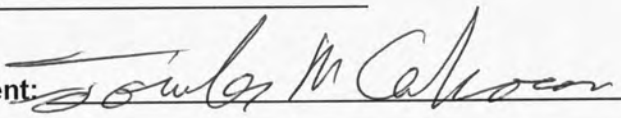
CONDITIONS

* 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:  Date: 7-24-18



Town of Kill Devil Hills

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

PAID

JUL 20 2018

Planning and Inspection Department

TOWN OF
KILL DEVIL HILLS

PAID
WITH
CASH

ZP2018-051

PROJECT NAME: Roger Whitehurst
SITE ADDRESS: 508 FIFTH ST W KILL DEVIL HILLS

ZONING PERMIT

ISSUED: 07/20/2018

EXPIRES: 01/16/2019

APPLICANT: WHITEHURST, ROGER C JR
4405 TOCCOA TERRACE
SANDSTON, VA 23150

OWNER: WHITEHURST, ROGER C JR
4405 TOCCOA TERRACE
SANDSTON, VA 23150

CONTRACTOR: Albemarle Fence Co.
PO Box 2023
ELIZABETH CITY, NC 27909

GENERAL, UNLICENSED: Albemarle Fence co.
200 Barnhill RD
Elizabeth City, NC 27909
252-334-9671

License: 123
Expires:

PARCEL:

PIN: 988405185540

Parcel Number: 002074000

Address: 508 FIFTH ST W KILL DEVIL HILLS

Addition: WRIGHT'S SHORES

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

Legal Description:

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

PROJECT DESCRIPTION: Fence



Town of Kill Devil Hills

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

PAID

JUL - 2 2018

TOWN OF
KILL DEVIL HILLS

Planning and Inspection Department

BP2018-117

PROJECT NAME: HOWE STAIR & DECK REPAIRS
SITE ADDRESS: 1705 APACHE ST KILL DEVIL HILLS

BUILDING

ISSUED: 07/02/2018

EXPIRES: 12/29/2018

APPLICANT: HOWE, SUSAN MARIE
5805 Rowenberry DR
Elkridge, MD 21075

OWNER: HOWE, SUSAN MARIE
5805 Rowenberry DR
Elkridge, MD 21075

GENERAL-LIMITED: ALBANESE CONSTRUCTION CO.
1811 Sea Swept Road
Kill Devil Hills, NC 27948
252-619-1618

License: 64199
Expires: 03/13/2019

PARCEL:

PIN: 988409260097

Parcel Number: 002707000

Address: 1705 APACHE ST KILL DEVIL HILLS

Addition: HIGH VIEW - HEDRICKS ADD

Zoning:

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

Legal Description:

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

PROJECT DESCRIPTION: REPLACE STAIRS & DECK RAILINGS.

BP2018-117

PROJECT NAME: HOWE STAIR & DECK REPAIRS
SITE ADDRESS: 1705 APACHE ST KILL DEVIL HILLS

BUILDING

ISSUED: 07/02/2018

EXPIRES: 12/29/2018

DETAILS

Permit

| Name | Value |
|--------------------------------|-------------------------------|
| CAMA PERMIT | N |
| CAMA EXEMPTION | N |
| PURPOSE | Residential Repair/Remodel |
| FLOOD ZONE | X |
| FINAL ELEVATION CERTIFICATE | N |
| CONSTRUCTION COST | 5000.00 |
| 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.

* ALL CONSTRUCTION MUST MEET CURRENT BUILDING CODE REQUIREMENTS.

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: _____

7/2/18



Town of Kill Devil Hills

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

PAID

JUL - 3 2018

Planning and Inspection Department

TOWN OF
KILL DEVIL HILLS

BP2018-116
PROJECT NAME:
SITE ADDRESS: 2039 Highview St Kill Devil Hills

BUILDING
ISSUED: 06/27/2018
EXPIRES: 12/24/2018

APPLICANT: Jonathan Hardin
12720 Hitchcock Ct.
RESTON, VA 20191
703-801-5440

OWNER: Jonathan Hardin
12720 Hitchcock Ct.
RESTON, VA 20191
703-801-5440

RESIDENTIAL, LIMITED: Emanuelson and Dad
6705 CROATAN HWY SOUTH
6705 S. Croatan Hwy.
nags head, nc 27959
252-261-2215

License: 79801
Expires: 06/14/2019

PARCEL:

PIN: 988405096388

Parcel Number: 001508000

Address: 2039 Highview St Kill Devil Hills

Zoning:

Addition: AVALON BEACH ANNEX 2 & 3

Block: 0 **Lot(s):** 1384

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: Sister 7 piles, Eng. H. Goodman 20446

BP2018-116

PROJECT NAME:

SITE ADDRESS: 2039 Highview St Kill Devil Hills

BUILDING

ISSUED: 06/27/2018

EXPIRES: 12/24/2018

DETAILS**Permit**

| Name | Value |
|--------------------------------|-------------------------------|
| CAMA PERMIT | N |
| CAMA EXEMPTION | N |
| ZONING DISTRICT | RL |
| PURPOSE | Residential Repair/Remodel |
| FRONT YARD SETBACK | 15 |
| SIDE YARD SETBACK | 6 |
| REAR YARD SETBACK | 20% Depth >30 |
| HEALTH DEPARTMENT PERMIT # | 27917 |
| FLOOD ZONE | AE |
| BASE FLOOD ELEVATION | 8.3 |
| FINAL ELEVATION CERTIFICATE | N |
| CONSTRUCTION COST | 8000.00 |
| CONSTRUCTION TYPE | V |
| SURVEYOR NAME AND NUMBER | M. D. Styons L-3227 |
| OCCUPANCY TYPE | One & Two Family Dwelling |

REQUIRED INSPECTIONS

Zoning Final

Final

CONDITIONS

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

BP2018-116

PROJECT NAME:

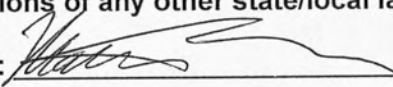
SITE ADDRESS: 2039 Highview St Kill Devil Hills


BUILDING

ISSUED: 06/27/2018

EXPIRES: 12/24/2018

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: 7-3-18



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

BP2018-120

PROJECT NAME: SKENES RENOVATIONS
SITE ADDRESS: 1735 CROATAN HWY N KILL DEVIL HILLS

BUILDING

ISSUED: 07/06/2018

EXPIRES: 01/02/2019

APPLICANT: Willie Skenes
1157 Sunlight Dr.
CHESAPEAKE, VA 23320
757-332-0604

OWNER: Willie Skenes
1157 Sunlight Dr.
CHESAPEAKE, VA 23320
757-332-0604

GENERAL: Self
UNKNOWN
UNKNOWN, XX 00000

License: Unlicensed
Expires: 12/31/2020

PARCEL:

PIN: 988406378510

Parcel Number: 002947000

Address: 1735 CROATAN HWY N KILL DEVIL HILLS

Addition: LONG LAKE

Zoning:

Block: 0 **Lot(s):** PT 16

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 12'x21.90' REAR DECK; DRYWALL & PLASTER FRONT ROOM; REPLACE FASCIA BOARDS.

PAID
JUL - 6 2018

TOWN OF
KILL DEVIL HILLS

BP2018-120

PROJECT NAME: SKENES RENOVATIONS

SITE ADDRESS: 1735 CROATAN HWY N KILL DEVIL HILLS

BUILDING

ISSUED: 07/06/2018

EXPIRES: 01/02/2019

DETAILS**Permit**

| Name | Value |
|--------------------------------|-------------------------------|
| CAMA PERMIT | N |
| CAMA EXEMPTION | N |
| ZONING DISTRICT | RL |
| PURPOSE | Residential Repair/Remodel |
| FRONT YARD SETBACK | 30 |
| SIDE YARD SETBACK | 8 |
| REAR YARD SETBACK | 20% Depth >30 |
| FLOOD ZONE | AE |
| BASE FLOOD ELEVATION | 8 |
| FINAL ELEVATION CERTIFICATE | N |
| CONSTRUCTION COST | 3680.00 |
| LOT COVERAGE | 35.43 |
| OPEN DECK (SQFT) | 263 |
| 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.

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

BP2018-120

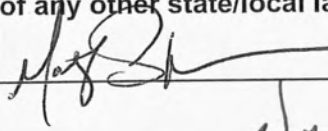
PROJECT NAME: SKENES RENOVATIONS
SITE ADDRESS: 1735 CROATAN HWY N KILL DEVIL HILLS

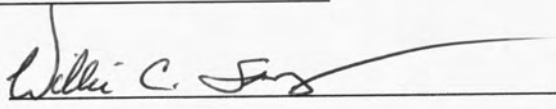
BUILDING

ISSUED: 07/06/2018

EXPIRES: 01/02/2019

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: 7/6/18



Town of Kill Devil Hills

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

PAID

JUL - 6 2018

Planning and Inspection Department

TOWN OF
KILL DEVIL HILLS

| | |
|--|----------------------------|
| BP2018-118 | BUILDING |
| PROJECT NAME: SCHMIDT PILING REPLACEMENT | ISSUED: 07/03/2018 |
| SITE ADDRESS: 110 OCEAN BAY BLVD KILL DEVIL HILLS | EXPIRES: 12/30/2018 |

| | |
|---|---|
| APPLICANT: SCHMIDT, RAYMOND 13441 CARTER'S CREEK PL CHESTERFIELD, VA 23838 804-995-9021 | OWNER: SCHMIDT, RAYMOND 13441 CARTER'S CREEK PL CHESTERFIELD, VA 23838 804-995-9021 |
|---|---|

| | | |
|------------------------------|---|---|
| RESIDENTIAL, LIMITED: | Emanuelson and Dad 6705 CROATAN HWY SOUTH 6705 S. Croatan Hwy. nags head, nc 27959 252-261-2215 | License: 79801 Expires: 06/14/2019 |
|------------------------------|---|---|

PARCEL:

| | |
|---|-----------------------------------|
| PIN: 988420706665 | Parcel Number: 003870000 |
| Address: 110 OCEAN BAY BLVD KILL DEVIL HILLS | Zoning: |
| Addition: KITTY HAWK SHORES - REVISED | Block: 37 Lot(s): 7 |
| Legal Description: | |

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

PROJECT DESCRIPTION: REPLACE 24 PILINGS

BP2018-118PROJECT NAME: SCHMIDT PILING REPLACEMENT
SITE ADDRESS: 110 OCEAN BAY BLVD KILL DEVIL HILLS**BUILDING**

ISSUED: 07/03/2018

EXPIRES: 12/30/2018

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 | 21600.00 |
| CONSTRUCTION TYPE | V |
| OCCUPANCY TYPE | One & Two Family Dwelling |

REQUIRED INSPECTIONS

Final

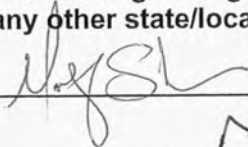
Piling

CONDITIONS

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

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

Issued By: _____



Contractor or Authorized Agent: _____



Date: _____

7-6-18



Town of Kill Devil Hills

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

Planning and Inspection Department

| | |
|--|----------------------------|
| BP2018-124 | BUILDING |
| PROJECT NAME: ALLEN DECK REPAIR | ISSUED: 07/10/2018 |
| SITE ADDRESS: 1601 WRIGHTSVILLE BLVD KILL DEVIL HILLS | EXPIRES: 01/06/2019 |

APPLICANT: ALLEN, JOHN L SR
P O BOX 1010
KILL DEVIL HILLS, NC 27948

OWNER: ALLEN, JOHN L SR
P O BOX 1010
KILL DEVIL HILLS, NC 27948

UNLICENSED - REMODELING:

BRINDLEY BEACH CONSTRUCTION
1213 C DUCK RD
DUCK, nc 27949

License: 555
Expires:

PARCEL:

PIN: 989309056204

Parcel Number: 008257000

Address: 1601 WRIGHTSVILLE BLVD KILL DEVIL HILLS

Zoning:

Addition: OCEAN ACRES INC

Block: 0 **Lot(s):** 71-73

Legal Description:

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

PROJECT DESCRIPTION: REDUCE DECK DEPTH TO REMOVE ENCROACHMENT ONTO ADJACENT PROPERTY.

JUL 11 2018

BP2018-124

PROJECT NAME: ALLEN DECK REPAIR
SITE ADDRESS: 1601 WRIGHTSVILLE BLVD KILL DEVIL HILLS

BUILDING

ISSUED: 07/10/2018

EXPIRES: 01/06/2019

DETAILS

Permit

| Name | Value |
|--------------------------------|-------------------------------|
| CAMA PERMIT | N |
| CAMA EXEMPTION | N |
| ZONING DISTRICT | C |
| PURPOSE | Residential Repair/Remodel |
| FRONT YARD SETBACK | 30 |
| SIDE YARD SETBACK | 10 |
| REAR YARD SETBACK | 20% Depth >30 |
| STREET SIDE SETBACK | 15 |
| FINAL ELEVATION CERTIFICATE | N |
| CONSTRUCTION COST | 2000.00 |
| 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.

* GIRDER SPAN OF 12' AS SHOWN ON PLANS DO NOT MEET CODE. PER PHONE CONVERSATION WITH JESSE LITTLE, ADD 1 ADDITIONAL PILING ALONG 12' GIRDER TO MEET CODE -OR- PROVIDE ENGINEERED DRAWINGS.

BP2018-124

PROJECT NAME: ALLEN DECK REPAIR

SITE ADDRESS: 1601 WRIGHTSVILLE BLVD KILL DEVIL HILLS

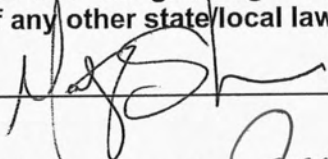
BUILDING

ISSUED: 07/10/2018

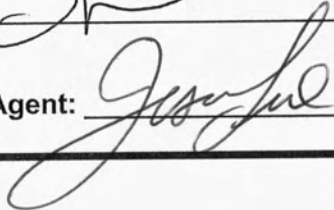
EXPIRES: 01/06/2019

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: _____

7-11-18



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

| | |
|---|---------------------|
| BP2018-122 | BUILDING |
| PROJECT NAME: Short Deck | ISSUED: 07/10/2018 |
| SITE ADDRESS: 3308 RAYMOND AVE KILL DEVIL HILLS | EXPIRES: 01/06/2019 |

APPLICANT: NOBLE, RICHARD SCOTT
3121 MARY HILL COURT
KILL DEVIL HILLS, NC 27948
252-202-2453

OWNER: Short, Gary
615 Stockley Garden Rd
NORFOLK, VA 23507
757-328-1824

GENERAL: NOBLE, SCOTT
3121 Mary Hill Court
Kill Devil Hills, NC 27948
252-202-2453

License: 52132
Expires: 02/13/2019

PARCEL:

PIN: 988513041946

Parcel Number: 000004000

Address: 3308 RAYMOND AVE KILL DEVIL HILLS

Addition: ORVILLE BEACH AMENDED BLK 3

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

Legal Description:

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

PROJECT DESCRIPTION: Construct a 17'x24' deck

PAID
JUL 12 2018
TOWN OF
KILL DEVIL HILLS

BP2018-122

PROJECT NAME: Short Deck

SITE ADDRESS: 3308 RAYMOND AVE KILL DEVIL HILLS

BUILDING

ISSUED: 07/10/2018

EXPIRES: 01/06/2019

DETAILS**Permit**

| Name | Value |
|--------------------------------|----------------------|
| CAMA PERMIT | N |
| CAMA EXEMPTION | N |
| ZONING DISTRICT | RH |
| PURPOSE | Residential Addition |
| FRONT YARD SETBACK | 30 |
| SIDE YARD SETBACK | 10 |
| REAR YARD SETBACK | 20% Depth >30 |
| STREET SIDE SETBACK | 15 |
| FLOOD ZONE | AE |
| BASE FLOOD ELEVATION | 9 |
| FINAL ELEVATION CERTIFICATE | N |
| CONSTRUCTION COST | 15000.00 |
| OPEN DECK (SQFT) | 408 |

REQUIRED INSPECTIONS

Zoning Final

Final

CONDITIONS

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

BP2018-122

PROJECT NAME: Short Deck

SITE ADDRESS: 3308 RAYMOND AVE KILL DEVIL HILLS

BUILDING

ISSUED: 07/10/2018

EXPIRES: 01/06/2019

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: 7/12/18



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

BP2018-121
PROJECT NAME:
SITE ADDRESS: 3211 Bay Dr Kill Devil Hills

BUILDING
ISSUED: 07/09/2018
EXPIRES: 01/05/2019

APPLICANT: RICHARD LEWANDOWSKI
3211 Bay Dr.
K D H, NC 27948

OWNER: RICHARD LEWANDOWSKI
3211 Bay Dr.
K D H, NC 27948

BUILDING, REMODELING: William Cobb
4218 Cobbs Way
nags head, nc 27959
207-9899

License: 1236
Expires:

PARCEL:

PIN: 987516832549

Parcel Number: 000239000

Address: 3211 Bay Dr Kill Devil Hills

Zoning:

Addition: ORVILLE BEACH WEST

Block: 0 **Lot(s):** 142

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 decking, railings, & joist; replace 1 window on 1st floor west side.

PAID

JUL 12 2018

TOWN OF
KILL DEVIL HILLS

BP2018-121

PROJECT NAME:

SITE ADDRESS: 3211 Bay Dr Kill Devil Hills

BUILDING

ISSUED: 07/09/2018

EXPIRES: 01/05/2019

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 | X |
| FINAL ELEVATION CERTIFICATE | N |
| CONSTRUCTION COST | 6500.00 |
| CONSTRUCTION TYPE | V |
| SURVEYOR NAME AND NUMBER | D. Styons L-3227 |
| OCCUPANCY TYPE | One & Two Family Dwelling |

REQUIRED INSPECTIONS

Zoning Final

Final

CONDITIONS

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

BP2018-121

PROJECT NAME:

SITE ADDRESS: 3211 Bay Dr Kill Devil Hills

BUILDING

ISSUED: 07/09/2018

EXPIRES: 01/05/2019

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: _____

William Cabel

Date: _____

7/12/18



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

BP2018-125

PROJECT NAME: Poole steps
SITE ADDRESS: 105 SUTTON AVE KILL DEVIL HILLS

BUILDING

ISSUED: 07/13/2018

EXPIRES: 01/09/2019

APPLICANT: KJ CONSTRUCTION & REMODELING
PO BOX 242
kitty hawk, nc 27949
252-207-6589

OWNER: POOLE, HAZEL
7448 SPRING VILLAGE DRIVE
APT 507
SPRINGFIELD, VA 22150

UNLIMITED BUILDING: KJ CONSTRUCTION & REMODELING
PO BOX 242
kitty hawk, nc 27949
252-207-6589

License: 59936
Expires: 12/31/2018

PARCEL:

PIN: 988419711336

Parcel Number: 003924000

Address: 105 SUTTON AVE KILL DEVIL HILLS

Addition: KITTY HAWK SHORES - REVISED

Zoning:
Block: 40 **Lot(s):** 15

Legal Description:

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

PROJECT DESCRIPTION: Replace back step and landing "AS IS WHERE IS"

JUL 13 2018

TOWN OF
KILL DEVIL HILLS

BP2018-125

PROJECT NAME: Poole steps

SITE ADDRESS: 105 SUTTON AVE KILL DEVIL HILLS

BUILDING

ISSUED: 07/13/2018

EXPIRES: 01/09/2019

DETAILS**Permit**

| Name | Value |
|--------------------------------|-------------------------------|
| CAMA PERMIT | N |
| CAMA EXEMPTION | N |
| ZONING DISTRICT | RL |
| PURPOSE | Residential Repair/Remodel |
| FRONT YARD SETBACK | 30 |
| SIDE YARD SETBACK | 8 |
| REAR YARD SETBACK | 20% Depth >30 |
| FLOOD ZONE | AE |
| BASE FLOOD ELEVATION | 8 |
| FINAL ELEVATION CERTIFICATE | N |
| CONSTRUCTION COST | 2800.00 |

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: 7.13.18



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

| | |
|---|----------------------------|
| BP2018-123 | BUILDING |
| PROJECT NAME: MINTER STAIR REPLACEMENT | ISSUED: 07/10/2018 |
| SITE ADDRESS: 200 PALMETTO ST E KILL DEVIL HILLS | EXPIRES: 01/06/2019 |

APPLICANT: MINTER, GEOFFREY W
200 EAST PALMETTO ST
KILL DEVIL HILLS, NC 27948

OWNER: MINTER, GEOFFREY W
200 EAST PALMETTO ST
KILL DEVIL HILLS, NC 27948

UNLICENSED BUILDER: Surfside Construction
9506 S Old Oregon Inlet Rd.
nags head, nc 27959
252-548-9253

License: Unlicensed
Expires: 01/26/2029

PARCEL:

| | |
|--|--------------------------------------|
| PIN: 988517210438 | Parcel Number: 000768000 |
| Address: 200 PALMETTO ST E KILL DEVIL HILLS | |
| Addition: VIRGINIA DARE SHORES AMD BLK 2 | Zoning: |
| Legal Description: | Block: 2 Lot(s): 19-20 |

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

PROJECT DESCRIPTION: REPLACE EXISTING STAIRS INCREASING WIDTH FROM 36" TO 40"

PAID

JUL 16 2018

TOWN OF
KILL DEVIL HILLS

BP2018-123

PROJECT NAME: MINTER STAIR REPLACEMENT
SITE ADDRESS: 200 PALMETTO ST E KILL DEVIL HILLS

BUILDING

ISSUED: 07/10/2018

EXPIRES: 01/06/2019

DETAILS

Permit

| Name | Value |
|--------------------------------|-------------------------------|
| CAMA PERMIT | N |
| CAMA EXEMPTION | N |
| ZONING DISTRICT | C |
| PURPOSE | Residential Repair/Remodel |
| FRONT YARD SETBACK | 15 |
| SIDE YARD SETBACK | 6 |
| REAR YARD SETBACK | 20% Depth >30 |
| FLOOD ZONE | AE |
| BASE FLOOD ELEVATION | 9 |
| FINAL ELEVATION CERTIFICATE | N |
| CONSTRUCTION COST | 2575.00 |
| CONSTRUCTION TYPE | V |
| OCCUPANCY TYPE | One & Two Family Dwelling |

REQUIRED INSPECTIONS

Final

Piling

CONDITIONS

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

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

Issued By: _____

Contractor or Authorized Agent: _____

Date: 7-16-18



Town of Kill Devil Hills

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

PAID

JUL 18 2018

Planning and Inspection Department

TOWN OF
KILL DEVIL HILLS

BP2018-127

PROJECT NAME:

SITE ADDRESS: 3116 Bay Dr Kill Devil Hills

BUILDING

ISSUED: 07/18/2018

EXPIRES: 01/14/2019

APPLICANT: Reese, William
10408 Laurel Ridge Way
Fredericksburg, VA 22408

OWNER: Reese, William
10408 Laurel Ridge Way
Fredericksburg, VA 22408

GENERAL-INTERMEDIATE: SEA COUNTRY HOMES, INC.
1508 Captains Lane
Kill Devil Hills, NC 27948
207-8338

License: 41322
Expires: 12/30/2018

PARCEL:

PIN: 987520822037

Parcel Number: 001075000

Address: 3116 Bay Dr Kill Devil Hills

Zoning:

Addition: MOOR SHORES

Block: 0 **Lot(s):** 140

Legal Description:

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

PROJECT DESCRIPTION: Replace 2 Sliders.

BP2018-127

PROJECT NAME:

SITE ADDRESS: 3116 Bay Dr Kill Devil Hills

BUILDING

ISSUED: 07/18/2018

EXPIRES: 01/14/2019

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 | 6000.00 |
| CONSTRUCTION TYPE | V |
| OCCUPANCY TYPE | One & Two Family Dwelling |

REQUIRED INSPECTIONS

Zoning Final

Final

CONDITIONS

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

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

Issued By: _____

Contractor or Authorized Agent: _____

Date: 7/18/18



Town of Kill Devil Hills

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

JUL 17 2018

Planning and Inspection Department

TOWN OF
KILL DEVIL HILLS

BP2018-126

PROJECT NAME: Van Beelen steps
SITE ADDRESS: 518 PARKWOOD DR KILL DEVIL HILLS

BUILDING

ISSUED: 07/17/2018

EXPIRES: 01/13/2019

APPLICANT: Puppy Drum Properties Marian Van Beelen
1408 W. 1st St.
Kill Devil Hills, NC 27948
489-0534

OWNER: Puppy Drum Properties
1408 W First St
Kill Devil Hills, NC 27948

GENERAL: Self
UNKNOWN
UNKNOWN, XX 00000

License: Unlicensed
Expires: 12/31/2020

PARCEL:

PIN: 988414228563

Parcel Number: 004046010

Address: 518 PARKWOOD DR KILL DEVIL HILLS

Zoning:

Addition: WRIGHT WOODS

Block: 0 **Lot(s):** 10

Legal Description:

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

Totals : \$150.00 \$0.00

PROJECT DESCRIPTION: Repair and replace side and front steps and as needed.

BP2018-126

PROJECT NAME: Van Beelen steps

SITE ADDRESS: 518 PARKWOOD DR KILL DEVIL HILLS

BUILDING

ISSUED: 07/17/2018

EXPIRES: 01/13/2019

DETAILS**Permit**

| Name | Value |
|--------------------------------|-------------------------------|
| CAMA PERMIT | N |
| CAMA EXEMPTION | N |
| ZONING DISTRICT | RL |
| PURPOSE | Residential Repair/Remodel |
| FRONT YARD SETBACK | 30 |
| SIDE YARD SETBACK | 10 |
| REAR YARD SETBACK | 20% Depth >30 |
| FLOOD ZONE | AE |
| BASE FLOOD ELEVATION | 8 |
| FINAL ELEVATION CERTIFICATE | N |
| CONSTRUCTION COST | 5000.00 |

REQUIRED INSPECTIONS

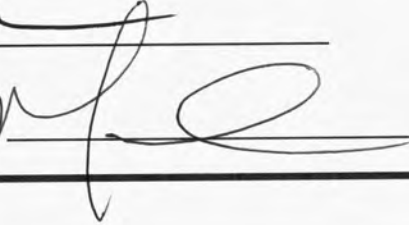
Zoning Final

Final

CONDITIONS

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

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

Issued By: Contractor or Authorized Agent: 

Date: 7/17/18



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

JUL 19 2018

BP2018-128

PROJECT NAME:

SITE ADDRESS: 401 FOURTH ST W KILL DEVIL HILLS

BUILDING

ISSUED: 07/18/2018

EXPIRES: 01/14/2019

APPLICANT: Kathy & Gregg Weber
325 Sussex Ct.
NORFOLK, VA 23434
757-642-5418

OWNER: Kathy & Gregg Weber
325 Sussex Ct.
NORFOLK, VA 23434
757-642-5418

RESIDENTIAL, LIMITED: Emanuelson and Dad
6705 CROATAN HWY SOUTH
6705 S. Croatan Hwy.
nags head, nc 27959
252-261-2215

License: 79801
Expires: 06/14/2019

PARCEL:

PIN: 988405273957

Parcel Number: 002217000

Address: 401 FOURTH ST W KILL DEVIL HILLS

Zoning:

Addition: WRIGHT'S SHORES SEC 2

Block: 0 **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 back deck decking and front stairs and landing.

BP2018-128

PROJECT NAME:

SITE ADDRESS: 401 FOURTH ST W KILL DEVIL HILLS

BUILDING

ISSUED: 07/18/2018

EXPIRES: 01/14/2019

DETAILS

Permit

| Name | Value |
|--------------------------------|-------------------------------|
| CAMA PERMIT | N |
| CAMA EXEMPTION | N |
| ZONING DISTRICT | RL |
| PURPOSE | Residential Repair/Remodel |
| FLOOD ZONE | AE |
| BASE FLOOD ELEVATION | 8.3 |
| FINAL ELEVATION CERTIFICATE | N |
| CONSTRUCTION COST | 4660.00 |
| CONSTRUCTION TYPE | V |
| OCCUPANCY TYPE | One & Two Family Dwelling |

REQUIRED INSPECTIONS

Zoning Final

Final

CONDITIONS

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

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

Issued By: _____

Contractor or Authorized Agent: _____

Date: _____

7-18-18



Town of Kill Devil Hills

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

PAID

JUL 20 2018

Planning and Inspection Department

TOWN OF
KILL DEVIL HILLS

BP2018-129
PROJECT NAME:
SITE ADDRESS: 1102 Suffolk St Kill Devil Hills

BUILDING
ISSUED: 07/20/2018
EXPIRES: 01/16/2019

APPLICANT: CISHEK, JEAN H
1907 HELEN LANE
KILL DEVIL HILLS, NC 27948

OWNER: CISHEK, JEAN H
1907 HELEN LANE
KILL DEVIL HILLS, NC 27948

GENERAL, UNLICENSED: Wyldeman Decks
1731 Bay Dr.
Kill Devil Hills, NC 27948

License: 12356
Expires:

PARCEL:

PIN: 987408997156

Parcel Number: 001975000

Address: 1102 Suffolk St Kill Devil Hills

Addition: AVALON BEACH ANNEX 2 & 3

Zoning:
Block: 0 Lot(s): 975

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 exterior stairs.

BP2018-129

PROJECT NAME:

SITE ADDRESS: 1102 Suffolk St Kill Devil Hills

BUILDING

ISSUED: 07/20/2018

EXPIRES: 01/16/2019

DETAILS**Permit**

| Name | Value |
|--------------------------------|-------------------------------|
| CAMA PERMIT | N |
| CAMA EXEMPTION | N |
| ZONING DISTRICT | RL |
| PURPOSE | Residential Repair/Remodel |
| FRONT YARD SETBACK | 15 |
| SIDE YARD SETBACK | 6 |
| REAR YARD SETBACK | 20% Depth >30 |
| HEALTH DEPARTMENT PERMIT # | 27966 |
| FLOOD ZONE | AE |
| BASE FLOOD ELEVATION | 8.3 |
| FINAL ELEVATION CERTIFICATE | N |
| CONSTRUCTION COST | 1000.00 |
| CONSTRUCTION TYPE | V |
| SURVEYOR NAME AND NUMBER | Styons L-3227 |
| OCCUPANCY TYPE | One & Two Family Dwelling |

REQUIRED INSPECTIONS

Zoning Final

Final

CONDITIONS

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

BP2018-129

PROJECT NAME:

SITE ADDRESS: 1102 Suffolk St Kill Devil Hills

BUILDING

ISSUED: 07/20/2018

EXPIRES: 01/16/2019

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: _____

7-20-18



Town of Kill Devil Hills

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

PAID

JUL 30 2018

Planning and Inspection Department

TOWN OF
KILL DEVIL HILLS

BP2018-130

PROJECT NAME: FERNANDEZ SIDING REPLACEMENT
SITE ADDRESS: 306 FIRST ST W KILL DEVIL HILLS

BUILDING

ISSUED: 07/30/2018

EXPIRES: 01/26/2019

APPLICANT: FERNANDEZ, CARLOS ANGEL
2109 BAY DR.
KILL DEVIL HILLS, NC 27948
252-207-2975

OWNER: FERNANDEZ, CARLOS ANGEL
2109 BAY DR.
KILL DEVIL HILLS, NC 27948
252-207-2975

GENERAL: Self
UNKNOWN
UNKNOWN, XX 00000

License: Unlicensed
Expires: 12/31/2020

PARCEL:

PIN: 988410354394

Parcel Number: 003198000

Address: 306 FIRST ST W KILL DEVIL HILLS

Addition: FIRST FLIGHT VILLAGE SEC 2

Zoning:
Block: 0 **Lot(s):** 197

Legal Description:

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

PROJECT DESCRIPTION: REPLACE T-111 SIDING & POSSIBLY SOME WINDOWS

BP2018-130PROJECT NAME: FERNANDEZ SIDING REPLACEMENT
SITE ADDRESS: 306 FIRST ST W KILL DEVIL HILLS**BUILDING**

ISSUED: 07/30/2018

EXPIRES: 01/26/2019

DETAILS**Permit**

| Name | Value |
|--------------------------------|------------------------------|
| CAMA PERMIT | N |
| CAMA EXEMPTION | N |
| FLOOD ZONE | AE |
| BASE FLOOD ELEVATION | 9 |
| FINAL ELEVATION CERTIFICATE | N |
| CONSTRUCTION COST | 15000.00 |
| CONSTRUCTION TYPE | V |
| OCCUPANCY TYPE | One & Two Family Dwelling |

REQUIRED INSPECTIONS

Sheathing

Final

CONDITIONS

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

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

Issued By: _____

Contractor or Authorized Agent: _____

Date: _____



Town of Kill Devil Hills

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

JUL 30 2018

Planning and Inspection Department

BP2018-131

PROJECT NAME: Lee steps
SITE ADDRESS: 407 FIFTH ST W KILL DEVIL HILLS

BUILDING

ISSUED: 07/30/2018

EXPIRES: 01/26/2019

APPLICANT: ROBERT LEE
PO Box 446
Gatesville, NC 27938
252-339-0023

OWNER: ROBERT LEE
PO Box 446
Gatesville, NC 27938
252-339-0023

UNLICENSED - REMODELING: Yoder, Doug
4104 Poor Ridge RD
kitty hawk, nc 27949

License: 00000000
Expires:

PARCEL:

PIN: 988405188679

Parcel Number: 002067000

Address: 407 FIFTH ST W KILL DEVIL HILLS

Addition: WRIGHT'S SHORES

Zoning:
Block: 0 **Lot(s):** 13

Legal Description:

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

PROJECT DESCRIPTION: Replace steps add rear deck and landing, move rear steps out of set back

BP2018-131

PROJECT NAME: Lee steps

SITE ADDRESS: 407 FIFTH ST W KILL DEVIL HILLS

BUILDING

ISSUED: 07/30/2018

EXPIRES: 01/26/2019

DETAILS**Permit**

| Name | Value |
|--------------------------------|-------------------------------|
| CAMA PERMIT | N |
| CAMA EXEMPTION | N |
| ZONING DISTRICT | RL |
| PURPOSE | Residential Repair/Remodel |
| FRONT YARD SETBACK | 30 |
| SIDE YARD SETBACK | 8 |
| REAR YARD SETBACK | 20% Depth >30 |
| FLOOD ZONE | AE |
| BASE FLOOD ELEVATION | 8 |
| FINAL ELEVATION CERTIFICATE | N |
| CONSTRUCTION COST | 1800.00 |

REQUIRED INSPECTIONS

Zoning Final

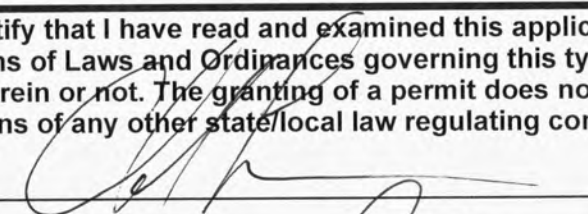
Final

CONDITIONS

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

* 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: 7-30-18



Town of Kill Devil Hills

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

PAID

JUL 24 2018

PAID
WITH
CASH

Planning and Inspection Department

TOWN OF
KILL DEVIL HILLS

ZP2018-052

PROJECT NAME: Fowler Fence & Shed
SITE ADDRESS: 510 FIRST FLIGHT LN KILL DEVIL HILLS

ZONING PERMIT

ISSUED: 07/24/2018

EXPIRES: 01/20/2019

APPLICANT: CAHOON, FOWLER M JR
1500 VILLAGE LANE
KILL DEVIL HILLS, NC 27948

OWNER: CAHOON, FOWLER M JR
1500 VILLAGE LANE
KILL DEVIL HILLS, NC 27948

GENERAL: Self
UNKNOWN
UNKNOWN, XX 00000

License: Unlicensed
Expires: 12/31/2020

PARCEL:

PIN: 988414247457

Parcel Number: 003353000

Address: 510 FIRST FLIGHT LN KILL DEVIL HILLS

Addition: FIRST FLIGHT VILLAGE SEC 1

Zoning:
Block: 0 **Lot(s):** 73

Legal Description:

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

PROJECT DESCRIPTION: Install fence around backyard and 12x12 storage shed



Town of Kill Devil Hills

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

PAID

JUL 20 2018

Planning and Inspection Department

TOWN OF
KILL DEVIL HILLS

PAID
WITH
CASH

ZP2018-051

PROJECT NAME: Roger Whitehurst
SITE ADDRESS: 508 FIFTH ST W KILL DEVIL HILLS

ZONING PERMIT

ISSUED: 07/20/2018

EXPIRES: 01/16/2019

APPLICANT: WHITEHURST, ROGER C JR
4405 TOCCOA TERRACE
SANDSTON, VA 23150

OWNER: WHITEHURST, ROGER C JR
4405 TOCCOA TERRACE
SANDSTON, VA 23150

CONTRACTOR: Albemarle Fence Co.
PO Box 2023
ELIZABETH CITY, NC 27909

GENERAL, UNLICENSED: Albemarle Fence co.
200 Barnhill RD
Elizabeth City, NC 27909
252-334-9671

License: 123
Expires:

PARCEL:

PIN: 988405185540

Parcel Number: 002074000

Address: 508 FIFTH ST W KILL DEVIL HILLS

Addition: WRIGHT'S SHORES

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

Legal Description:

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

PROJECT DESCRIPTION: Fence

ZP2018-051

PROJECT NAME: Roger Whitehurst
SITE ADDRESS: 508 FIFTH ST W KILL DEVIL HILLS

ZONING PERMIT

ISSUED: 07/20/2018

EXPIRES: 01/16/2019

DETAILS

Permit

| Name | Value |
|--------------------------|----------------------|
| ZONING DISTRICT | RL |
| CAMA PERMIT | N |
| CAMA EXEMPTION | N |
| FLOOD ZONE | AE |
| CONSTRUCTION COST | 3040.00 |
| SURVEYOR NAME AND NUMBER | Boundaries Surveying |
| 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 Building Inspector 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: Roger Whitehurst

Date: 7/20/18



Town of Kill Devil Hills

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

Planning and Inspection Department

| | |
|--|----------------------------|
| ZP2018-049 | ZONING PERMIT |
| PROJECT NAME: FURLOUGH SHED | ISSUED: 07/11/2018 |
| SITE ADDRESS: 1208 Virginia Dare Tr. S. MARLBOROUGH | EXPIRES: 01/07/2019 |

APPLICANT: Furlough, SUSAN
104 ALBANIA ST.
Edenton, NC 27932
252-333-8124

OWNER: Furlough, SUSAN
104 ALBANIA ST.
Edenton, NC 27932
252-333-8124

CONTRACTOR: STATELINE BUILDERS
UNKNOWN
UNKNOWN, XX 00000

License: LEGACY UNKNOWN
Expires: 12/31/2018

PARCEL:

PIN: PARC2006-25

Parcel Number:

Address: 1208 Virginia Dare Tr. S. MARLBOROUGH

Zoning:

Addition:

Block:

Lot(s):

Legal Description:

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

PROJECT DESCRIPTION: 8X10 SHED IN REAR YARD

AE
Flood Zone

JUL 12 2018

ZP2018-049

PROJECT NAME: FURLOUGH SHED
SITE ADDRESS: 1208 Virginia Dare Tr. S. MARLBOROUGH

ZONING PERMIT

ISSUED: 07/11/2018

EXPIRES: 01/07/2019

DETAILS

Permit

| Name | Value |
|-------------------|-----------------------|
| ZONING DISTRICT | C |
| CAMA PERMIT | N |
| CAMA EXEMPTION | N |
| PURPOSE | Residential Accessory |
| CONSTRUCTION COST | 2340.00 |
| CULVERT | N |
| DRIVEWAY INVERT 2 | N |

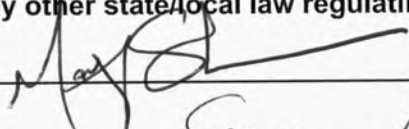
REQUIRED INSPECTIONS

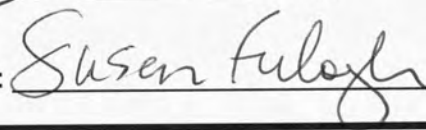
Final

CONDITIONS

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

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

Issued By: 

Contractor or Authorized Agent:  Date: 7/12/18



Town of Kill Devil Hills

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

Planning and Inspection Department

ZP2018-050

PROJECT NAME: Alex Wolcott
SITE ADDRESS: 3208 VA DARE TRL N KILL DEVIL HILLS

ZONING PERMIT

ISSUED: 07/11/2018

EXPIRES: 01/07/2019

APPLICANT: Coastal NC Holdings, LLC
PO Box 1446
kitty hawk, nc 27949
252-573-9547

OWNER: WOLCOTT, LANA HOBBS
929 DITCHLEY ROAD
VIRGINIA BEACH, VA 23451

CONTRACTOR: SAME AS APPLICANT
0000000
00000000, nc 00000

License: 123456
Expires: 04/30/2020

PARCEL:

PIN: 988513047617

Parcel Number: 000081000

Address: 3208 VA DARE TRL N KILL DEVIL HILLS

Addition: ORVILLE BEACH BLK 5

Zoning:
Block: 5 **Lot(s):** 4

Legal Description:

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

PROJECT DESCRIPTION: Fence

PAID

JUL 11 2018

TOWN OF
KILL DEVIL HILLS

ZP2018-050

PROJECT NAME: Alex Wolcott

SITE ADDRESS: 3208 VA DARE TRL N KILL DEVIL HILLS

ZONING PERMIT

ISSUED: 07/11/2018

EXPIRES: 01/07/2019

DETAILS

Permit

| Name | Value |
|--------------------------|-----------------------|
| CAMA PERMIT | N |
| CAMA EXEMPTION | N |
| FLOOD ZONE | VE |
| PURPOSE | Residential Accessory |
| CONSTRUCTION COST | 1000.00 |
| SURVEYOR NAME AND NUMBER | Seaboard Surveying |
| 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.
- * Must call building inspector 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: 6-11-18



Town of Kill Devil Hills

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

Planning and Inspection Department

| | |
|--|----------------------------|
| ZP2018-048 | ZONING PERMIT |
| PROJECT NAME: Birch Fence | ISSUED: 07/09/2018 |
| SITE ADDRESS: 501 West Aycock Street Kill Devil Hills | EXPIRES: 01/05/2019 |

APPLICANT: PENDLETON, SHAWN
805 Eighth Avenue
KILL DEVIL HILLS, NC 27948
252-256-1775

OWNER: Birch, Julia
5229 Woodleaf Ct.
centreville, va 20120

UNLICENSED - REMODELING: PENDLETON, SHAWN
805 Eighth Avenue
KILL DEVIL HILLS, NC 27948
252-256-1775

License: 000000000
Expires:

PARCEL:

PIN: 987520907673

Parcel Number:

Address: 501 West Aycock Street Kill Devil Hills

Zoning:

Addition:

Block:

Lot(s):

Legal Description: Lots 19 & 20, Block 73, Virginia Dare Shores S/D

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

PROJECT DESCRIPTION: Install fence around rear of property

PAID
JUL 10 2018
 TOWN OF
 KILL DEVIL HILLS

ZP2018-048

PROJECT NAME: Birch Fence
SITE ADDRESS: 501 West Aycocock Street Kill Devil Hills

ZONING PERMIT

ISSUED: 07/09/2018

EXPIRES: 01/05/2019

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 | AE |
| BASE FLOOD ELEVATION | 8 |
| PURPOSE | Residential Accessory |
| CONSTRUCTION COST | 4500.00 |
| CULVERT | N |
| DRIVEWAY INVERT 2 | N |

REQUIRED INSPECTIONS

Stringline
Final

Zoning Final

CONDITIONS

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

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

Issued By: [Signature]

Contractor or Authorized Agent: [Signature] Date: 7-10-18

ZP2018-048

PROJECT NAME: Birch Fence

SITE ADDRESS: 501 West Aycock Street Kill Devil Hills

ZONING PERMIT

ISSUED: 07/09/2018

EXPIRES: 01/05/2019



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

ZONING PERMIT

ISSUED: 06/26/2018

EXPIRES: 12/23/2018

ZP2018-045

PROJECT NAME: Zane Gillespie
SITE ADDRESS: 551 PARKWOOD DR KILL DEVIL HILLS

APPLICANT: Gillespie, Zane
551 Parkwood Dr.
Kill Devil Hills, NC 27948
252-489-3637

OWNER: Gillespie, Zane
551 Parkwood Dr.
Kill Devil Hills, NC 27948
252-489-3637

CONTRACTOR: SAME AS OWNER
UNKNOWN
UNKNOWN, XX 00000

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

PARCEL:

PIN: 988417211996

Parcel Number: 004046038

Address: 551 PARKWOOD DR KILL DEVIL HILLS

Zoning:
Block: 0 **Lot(s):** 38

Addition: WRIGHT WOODS

Legal Description:

| FEES: | Paid | Due |
|-----------------------------|-----------------|---------------|
| Fence | \$100.00 | \$0.00 |
| Accessory Residential (MIN) | \$100.00 | \$0.00 |
| Totals : | \$200.00 | \$0.00 |

PROJECT DESCRIPTION: 10 X 10 Shed and fence

JUL - 6 2018



Town of Kill Devil Hills

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

PAID

JUL - 5 2018

Planning and Inspection Department

| | |
|--|---------------------------------|
| ZP2018-047 | TOWN OF KILL DEVIL HILLS |
| PROJECT NAME: Stephen Brewer | ZONING PERMIT |
| SITE ADDRESS: 315 TRUXTON ST KILL DEVIL HILLS | ISSUED: 07/05/2018 |
| | EXPIRES: 01/01/2019 |

APPLICANT: Brewer, Stephen
315 Truxton St.
Kill Devil Hills, NC 27948
757-275-4118

OWNER: Brewer, Stephen
315 Truxton St.
Kill Devil Hills, NC 27948
757-275-4118

CONTRACTOR: SAME AS OWNER
UNKNOWN
UNKNOWN, XX 00000

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

PARCEL:

PIN: 987516933153

Parcel Number: 028722000

Address: 315 TRUXTON ST KILL DEVIL HILLS

Addition: MOOR SHORES TWO

Zoning:

Block: 0 **Lot(s):** 150

Legal Description:

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

PROJECT DESCRIPTION: Fence

ZP2018-047

PROJECT NAME: Stephen Brewer
SITE ADDRESS: 315 TRUXTON ST KILL DEVIL HILLS

ZONING PERMIT**ISSUED:** 07/05/2018**EXPIRES:** 01/01/2019

DETAILS**Permit**

| Name | Value |
|--------------------------|-------------------------|
| ZONING DISTRICT | RL |
| FRONT YARD SETBACK | 30 |
| REAR YARD SETBACK | 20% Depth >30 |
| SIDE YARD SETBACK | 10 |
| CAMA PERMIT | N |
| CAMA EXEMPTION | N |
| FLOOD ZONE | X |
| PURPOSE | Residential Accessory |
| CONSTRUCTION COST | 4800.00 |
| LOT COVERAGE | 25.50 |
| SURVEYOR NAME AND NUMBER | W.L. Norris, Jr. L-4554 |
| CULVERT | N |
| DRIVEWAY INVERT 2 | N |

REQUIRED INSPECTIONS

Final

Zoning Final

CONDITIONS

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

ZP2018-047

PROJECT NAME: Stephen Brewer

SITE ADDRESS: 315 TRUXTON ST KILL DEVIL HILLS

ZONING PERMIT

ISSUED: 07/05/2018

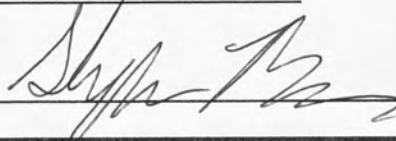
EXPIRES: 01/01/2019

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: _____

7/5/18



Town of Kill Devil Hills

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

Planning and Inspection Department

OP2018-044

PROJECT NAME: Frank Soles
SITE ADDRESS: 606 W. Aycock Street KILL DEVIL HILLS

OCCUPANCY

ISSUED: 07/31/2018

EXPIRES:

PARENT PERMIT #: BJ2018-046

APPLICANT: FRANK SOLES
400 Da Vinci Lane
kitty hawk, nc 27949
757-448-8162

OWNER: H & K Lots LLC
400 Da Vinci Lane
kitty hawk, nc 27949
757-448-8162

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

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

License: 67524
Expires: 12/30/2018

PARCEL:

PIN: 987520901425

Parcel Number: 001945000

Address: 606 W. Aycock Street KILL DEVIL HILLS

Zoning:

Addition: VIRGINIA DARE SHORES

Block: 79 **Lot(s):** 18R

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 single family dwelling

JUL 31 2018

OP2018-044

PROJECT NAME: Frank Soles
SITE ADDRESS: 606 W. Aycock Street KILL DEVIL HILLS

OCCUPANCY

ISSUED: 07/31/2018

EXPIRES:

DETAILS

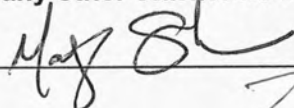
Permit

| Name | Value |
|----------------------|---------------------------|
| # OF TRASH CANS | 1 |
| PURPOSE | Residential New |
| ZONING DISTRICT | RL |
| FLOOD ZONE | AE |
| BASE FLOOD ELEVATION | 8 |
| OCCUPANCY TYPE | One & Two Family Dwelling |

CONDITIONS

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: 7-31-18



Town of Kill Devil Hills

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

PAID

JUL 19 2018

Planning and Inspection Department

TOWN OF
KILL DEVIL HILLS

OP2018-041

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

OCCUPANCY

ISSUED: 07/18/2018

EXPIRES:

PARENT PERMIT #: BJ2018-034

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

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

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

License: 55566
Expires: 01/05/2019

PARCEL:

PIN: 988316749087

Parcel Number: 004890302

Address: 1424 SHAY ST KILL DEVIL HILLS

Addition: WHISPERING PINES SEC 2 & 3

Zoning:

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

Legal Description:

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

PROJECT DESCRIPTION: Proposed 4 Bedroom SFD

OP2018-041

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

OCCUPANCY

ISSUED: 07/18/2018

EXPIRES:

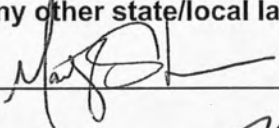
DETAILS

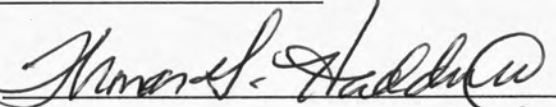
Permit

| Name | Value |
|-----------------|---------------------------|
| # OF TRASH CANS | 1 |
| PURPOSE | Residential New |
| ZONING DISTRICT | RL |
| FLOOD ZONE | X |
| OCCUPANCY TYPE | One & Two Family Dwelling |

CONDITIONS

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: 7/19/2018



Town of Kill Devil Hills

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

PAID

JUL 19 2018

Planning and Inspection Department

TOWN OF
KILL DEVIL HILLS

OP2018-043

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

OCCUPANCY
ISSUED: 07/19/2018

EXPIRES:

PARENT PERMIT #: BJ2018-026

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

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

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

License: 57214
Expires: 01/01/2019

PARCEL:

PIN: 988316935835

Parcel Number: 008480000

Address: 300 GUNAS DR KILL DEVIL HILLS

Addition: OCEAN ACRES TRACT 3 SEC 1

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

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 single family dwelling

OP2018-043

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

OCCUPANCY

ISSUED: 07/19/2018

EXPIRES:

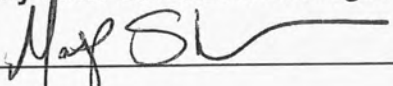
DETAILS

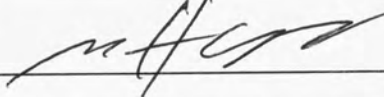
Permit

| Name | Value |
|-----------------|---------------------------|
| # OF TRASH CANS | 1 |
| PURPOSE | Residential New |
| ZONING DISTRICT | RL |
| FLOOD ZONE | X |
| OCCUPANCY TYPE | One & Two Family Dwelling |

CONDITIONS

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: 7-19-18



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

| | |
|--|----------------------------|
| MC2018-268 | MECHANICAL |
| PROJECT NAME: | ISSUED: 07/26/2018 |
| SITE ADDRESS: 1201 N Virginia Dare Trl Kill Devil Hills | EXPIRES: 01/22/2019 |

APPLICANT: GARD, ALBERT W III
11 PILLING PLACE
DURHAM, NC 27707

OWNER: GARD, ALBERT W III
11 PILLING PLACE
DURHAM, NC 27707

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

License: 13056
Expires: 12/31/2018

PARCEL:

PIN: 988415648212

Parcel Number: 004057000

Address: 1201 N Virginia Dare Trl Kill Devil Hills

Zoning:

Addition: SUBDIVISION - NONE

Block: Lot(s): 2

Legal Description:

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

PROJECT DESCRIPTION: Replace HVAC

PAID
JUL 26 2018
TOWN OF
KILL DEVIL HILLS

MC2018-268

PROJECT NAME:

SITE ADDRESS: 1201 N Virginia Dare Trl Kill Devil Hills

MECHANICAL

ISSUED: 07/26/2018

EXPIRES: 01/22/2019

DETAILS

Permit

| Name | Value |
|----------------------|-------------------------------|
| PURPOSE | Residential Repair/Remodel |
| CONSTRUCTION COST | 9800.00 |
| CONSTRUCTION TYPE | V |
| FLOOD ZONE | VE |
| BASE FLOOD ELEVATION | 11 |
| NATURAL GAS SIGNOFF | N |
| OCCUPANCY TYPE | One & Two Family Dwelling |

REQUIRED INSPECTIONS

Final

CONDITIONS

* 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: _____

7-26-18



Town of Kill Devil Hills

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

Planning and Inspection Department

MC2018-270

PROJECT NAME: NIXON HVAC
SITE ADDRESS: 609 DURHAM ST W KILL DEVIL HILLS

MECHANICAL

ISSUED: 07/27/2018

EXPIRES: 01/23/2019

APPLICANT: NIXON, LLOYD & LAROYCE
106 COVE PT.
SUFFOLK, VA 23434
757-803-3952

OWNER: NIXON, LLOYD & LAROYCE
106 COVE PT.
SUFFOLK, VA 23434
757-803-3952

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

License: 11100
Expires: 12/31/2018

PARCEL:

PIN: 988405183562

Parcel Number: 001367000

Address: 609 DURHAM ST W KILL DEVIL HILLS

Zoning:

Addition: AVALON BEACH ANNEX 2 & 3

Block: 0 **Lot(s):** 656

Legal Description:

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

PROJECT DESCRIPTION: HVAC REPLACEMENT

PAID

JUL 27 2018

TOWN OF
KILL DEVIL HILLS

MC2018-270

PROJECT NAME: NIXON HVAC

SITE ADDRESS: 609 DURHAM ST W KILL DEVIL HILLS

MECHANICAL

ISSUED: 07/27/2018

EXPIRES: 01/23/2019

DETAILS

Permit

| Name | Value |
|---------------------|-------------------------------|
| PURPOSE | Residential Repair/Remodel |
| CONSTRUCTION COST | 7350.00 |
| 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: 7-27-18



Town of Kill Devil Hills

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

Planning and Inspection Department

MC2018-269

PROJECT NAME: EURE HVAC
SITE ADDRESS: 1109 VA DARE TRL N KILL DEVIL HILLS

MECHANICAL

ISSUED: 07/27/2018

EXPIRES: 01/23/2019

APPLICANT: Eure Family LLC
c/o 7701 Forsythe Blg, Ste 1100
SAINT LOUIS, MO 63105
252-255-0717

OWNER: Eure Family LLC
c/o 7701 Forsythe Blg, Ste 1100
SAINT LOUIS, MO 63105
252-255-0717

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

License: 29031
Expires: 12/31/2018

PARCEL:

PIN: 988415638961

Parcel Number: 003710000

Address: 1109 VA DARE TRL N KILL DEVIL HILLS

Zoning:

Addition: KITTY HAWK SHORES - REVISED

Block: 2A **Lot(s):** S PT 5

Legal Description:

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

PROJECT DESCRIPTION: HVAC REPLACEMENT

PAID

JUL 27 2018

TOWN OF
KILL DEVIL HILLS

MC2018-269

PROJECT NAME: EURE HVAC

SITE ADDRESS: 1109 VA DARE TRL N KILL DEVIL HILLS

MECHANICAL

ISSUED: 07/27/2018

EXPIRES: 01/23/2019

DETAILS

Permit

| Name | Value |
|----------------------|-------------------------------|
| PURPOSE | Residential Repair/Remodel |
| CONSTRUCTION COST | 6000.00 |
| CONSTRUCTION TYPE | V |
| FLOOD ZONE | VE |
| BASE FLOOD ELEVATION | 11 |
| NATURAL GAS SIGNOFF | N |
| OCCUPANCY TYPE | One & Two Family Dwelling |

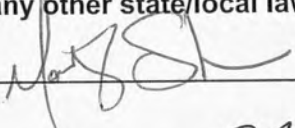
REQUIRED INSPECTIONS

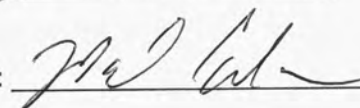
Final

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: 7/27/18



Town of Kill Devil Hills

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

Planning and Inspection Department

| | |
|---|--|
| MC2018-267 PROJECT NAME: SITE ADDRESS: 2802 Raymond Ave Kill Devil Hills | MECHANICAL ISSUED: 07/26/2018 EXPIRES: 01/22/2019 |
|---|--|

APPLICANT: BRANCHE, B E
121 VERNA STREET
FRANKLIN, VA 23851

OWNER: BRANCHE, B E
121 VERNA STREET
FRANKLIN, VA 23851

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

License: 13056
Expires: 12/31/2018

PARCEL:

PIN: 988513122536

Parcel Number: 000433023

Address: 2802 Raymond Ave Kill Devil Hills

Zoning:

Addition: VIRGINIA DARE SHORES

Block: 18 **Lot(s):** 23-24

Legal Description:

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

PROJECT DESCRIPTION: Replace HVAC

JUL 26 2018

MC2018-267

PROJECT NAME:

SITE ADDRESS: 2802 Raymond Ave Kill Devil Hills

MECHANICAL

ISSUED: 07/26/2018

EXPIRES: 01/22/2019

DETAILS

Permit

| Name | Value |
|----------------------|-------------------------------|
| PURPOSE | Residential Repair/Remodel |
| CONSTRUCTION COST | 6000.00 |
| CONSTRUCTION TYPE | V |
| FLOOD ZONE | AE |
| BASE FLOOD ELEVATION | 9 |
| NATURAL GAS SIGNOFF | N |
| OCCUPANCY TYPE | One & Two Family Dwelling |

REQUIRED INSPECTIONS

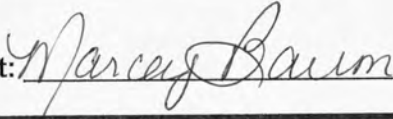
Final

CONDITIONS

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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: 7-26-18



Town of Kill Devil Hills

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

Planning and Inspection Department

MC2018-266

PROJECT NAME:

SITE ADDRESS: 501 W 4th St Kill Devil Hills

MECHANICAL

ISSUED: 07/26/2018

EXPIRES: 01/22/2019

APPLICANT: SANDERS, THOMAS B
434 SUMMER DRIVE
NEWPORT NEWS, VA 23606

OWNER: SANDERS, THOMAS B
434 SUMMER DRIVE
NEWPORT NEWS, VA 23606

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

License: 13056
Expires: 12/31/2018

PARCEL:

PIN: 988405271815

Parcel Number: 002217013

Address: 501 W 4th St Kill Devil Hills

Zoning:

Addition: WRIGHT'S SHORES SEC 2

Block: 0 Lot(s): 13

Legal Description:

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

PROJECT DESCRIPTION: Replace HVAC

JUL 26 2018

MC2018-266

PROJECT NAME:

SITE ADDRESS: 501 W 4th St Kill Devil Hills

MECHANICAL

ISSUED: 07/26/2018

EXPIRES: 01/22/2019

DETAILS

Permit

| Name | Value |
|----------------------|-------------------------------|
| PURPOSE | Residential Repair/Remodel |
| CONSTRUCTION COST | 5923.00 |
| 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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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

JUL 19 2018

TOWN OF
KILL DEVIL HILLS

Planning and Inspection Department

MC2018-262

PROJECT NAME:

SITE ADDRESS: 700 W First St Kill Devil Hills

MECHANICAL

ISSUED: 07/18/2018

EXPIRES: 01/14/2019

APPLICANT: Condit McGeown
1009 Creek Rd.
kitty hawk, nc 27949
252-722-3401

OWNER: Condit McGeown
1009 Creek Rd.
kitty hawk, nc 27949
252-722-3401

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: 988413140426AP

**Parcel
Number:** 008075081

Address: 700 W First St Kill Devil Hills

Zoning:

Addition:

Block: 0 **Lot(s):** UT 5 BLDG I

Legal Description:

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

PROJECT DESCRIPTION: Replace HVAC

MC2018-262

PROJECT NAME:

SITE ADDRESS: 700 W First St Kill Devil Hills

MECHANICAL

ISSUED: 07/18/2018

EXPIRES: 01/14/2019

DETAILS

Permit

| Name | Value |
|----------------------|-------------------------------|
| PURPOSE | Residential Repair/Remodel |
| CONSTRUCTION COST | 5229.00 |
| CONSTRUCTION TYPE | V |
| FLOOD ZONE | AE |
| BASE FLOOD ELEVATION | 9 |
| NATURAL GAS SIGNOFF | N |
| OCCUPANCY TYPE | Residential |

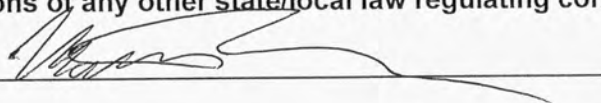
REQUIRED INSPECTIONS

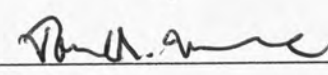
Final

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: 7-19-18



Town of Kill Devil Hills

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

PAID

JUL 20 2018

Planning and Inspection Department

TOWN OF
KILL DEVIL HILLS

MC2018-263

PROJECT NAME: Wheeler HVAC
SITE ADDRESS: 1006 SPORTSMAN DR W KILL DEVIL HILLS

MECHANICAL

ISSUED: 07/20/2018

EXPIRES: 01/16/2019

APPLICANT: Land and Sea Mech Michael Brynteson
128 Oberlin Rd
Wanchese, NC 27981
252-473-7585

OWNER: DAWN WHEELER
4539 Lauderdale Ave.
VIRGINIA BEACH, VA 23455

MECHANICAL H-3, CLASS 1: Land and Sea Mech Michael Brynteson
128 Oberlin Rd
Wanchese, NC 27981
252-473-7585

License: 33550
Expires: 12/31/2018

PARCEL:

PIN: 987408996657

Parcel Number: 001656000

Address: 1006 SPORTSMAN DR W KILL DEVIL HILLS

Addition: AVALON BEACH

Zoning:

Block: 0 **Lot(s):** 303

Legal Description:

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

PROJECT DESCRIPTION: C/O 2 ton HVAC system

DETAILS

Permit

| Name | Value |
|----------------------|----------------------------|
| PURPOSE | Residential Repair/Remodel |
| CONSTRUCTION COST | 6000.00 |
| FLOOD ZONE | AE |
| BASE FLOOD ELEVATION | 8 |
| NATURAL GAS SIGNOFF | N |

MC2018-263

PROJECT NAME: Wheeler HVAC

SITE ADDRESS: 1006 SPORTSMAN DR W KILL DEVIL HILLS

MECHANICAL

ISSUED: 07/20/2018

EXPIRES: 01/16/2019

REQUIRED INSPECTIONS

Final

CONDITIONS

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Issued By: 

Contractor or Authorized Agent: 

Date: 7-20-18



Town of Kill Devil Hills

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

PAID

JUL 24 2018

TOWN OF
KILL DEVIL HILLS

Planning and Inspection Department

MC2018-265

PROJECT NAME:

SITE ADDRESS: 2107 Bay Dr Kill Devil Hills

MECHANICAL

ISSUED: 07/24/2018

EXPIRES: 01/20/2019

APPLICANT: Sherin Fleschner
262 Francis Way
LEWISBURG, WV 24901
304-667-4253

OWNER: Sherin Fleschner
262 Francis Way
LEWISBURG, WV 24901
304-667-4253

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

License: 29031
Expires: 12/31/2018

PARCEL:

PIN: 987408993336

Parcel Number: 001665000

Address: 2107 Bay Dr Kill Devil Hills

Zoning:

Addition: AVALON BEACH

Block: 0 **Lot(s):** 312A

Legal Description:

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

PROJECT DESCRIPTION: Replace Air Handler and fix duct work.

MC2018-265

PROJECT NAME:

SITE ADDRESS: 2107 Bay Dr Kill Devil Hills

MECHANICAL

ISSUED: 07/24/2018

EXPIRES: 01/20/2019

DETAILS

Permit

| Name | Value |
|----------------------|-------------------------------|
| PURPOSE | Residential Repair/Remodel |
| CONSTRUCTION COST | 3800.00 |
| CONSTRUCTION TYPE | V |
| FLOOD ZONE | AE |
| BASE FLOOD ELEVATION | 8.3 |
| NATURAL GAS SIGNOFF | N |
| OCCUPANCY TYPE | One & Two Family Dwelling |

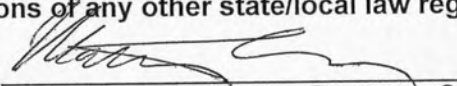
REQUIRED INSPECTIONS

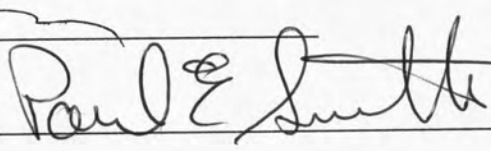
Final

CONDITIONS

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Issued By: 

Contractor or Authorized Agent: 

Date: 3-24-18



Town of Kill Devil Hills

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

PAID

JUL 26 2018

Planning and Inspection Department

TOWN OF
KILL DEVIL HILLS

MC2018-264

PROJECT NAME:

SITE ADDRESS: 1502 Virginia Dare Tr. S. KILL DEVIL HILLS

MECHANICAL

ISSUED: 07/23/2018

EXPIRES: 01/19/2019

APPLICANT: Sumrada, John
138 Linter Ave
JOHNSTOWN, PA 15902

OWNER: Sumrada, John
138 Linter Ave
JOHNSTOWN, PA 15902

MECHANICAL H2 AND H3:

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

License: 29480
Expires: 12/31/2018

PARCEL:

PIN: 989309058806

Parcel Number: 004711001

Address: 1502 Virginia Dare Tr. S. KILL DEVIL HILLS

Addition: KILL DEVIL BEACH SEC 1 REVISED

Zoning:

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

Legal Description:

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

PROJECT DESCRIPTION: Replace HVAC

MC2018-264

PROJECT NAME:

SITE ADDRESS: 1502 Virginia Dare Tr. S. KILL DEVIL HILLS

MECHANICAL

ISSUED: 07/23/2018

EXPIRES: 01/19/2019

DETAILS

Permit

| Name | Value |
|----------------------|-------------------------------|
| PURPOSE | Residential Repair/Remodel |
| CONSTRUCTION COST | 6147.00 |
| 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: _____

7/26/18



Town of Kill Devil Hills

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

PAID

JUL 17 2018

Planning and Inspection Department

TOWN OF
KILL DEVIL HILLS

| | |
|---|----------------------------|
| MC2018-260 | MECHANICAL |
| PROJECT NAME: DONELAN HVAC | ISSUED: 07/16/2018 |
| SITE ADDRESS: 419 Archdale St. W. Kill Devil Hills | EXPIRES: 01/12/2019 |

APPLICANT: DONELAN, KEVIN & DONNA
5380 SAVANNAH BRANCH RD
BEALETON, VA 22712
540-219-1155

OWNER: DONELAN, KEVIN & DONNA
5380 SAVANNAH BRANCH RD
BEALETON, VA 22712
540-219-1155

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: 987520918236

Parcel Number: 000657009

Address: 419 Archdale St. W. Kill Devil Hills

Addition: VIRGINIA DARE SHORES

Zoning:

Block: 54 **Lot(s):** 11 & 12

Legal Description:

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

PROJECT DESCRIPTION: HVAC REPLACEMENT

MC2018-260

PROJECT NAME: DONELAN HVAC
SITE ADDRESS: 419 Archdale St. W. Kill Devil Hills

MECHANICAL

ISSUED: 07/16/2018

EXPIRES: 01/12/2019

DETAILS

Permit

| Name | Value |
|----------------------|-------------------------------|
| PURPOSE | Residential Repair/Remodel |
| CONSTRUCTION COST | 5550.84 |
| CONSTRUCTION TYPE | V |
| FLOOD ZONE | AE |
| BASE FLOOD ELEVATION | 8 |
| NATURAL GAS SIGNOFF | N |
| OCCUPANCY TYPE | One & Two Family Dwelling |

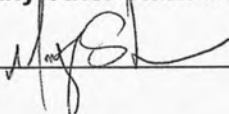
REQUIRED INSPECTIONS

Final

CONDITIONS

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Issued By: 

Contractor or Authorized Agent:  Date: 7-17-18



Town of Kill Devil Hills

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

JUL 17 2018

Planning and Inspection Department

DM2018-006

PROJECT NAME: ITAC 409 LLC
SITE ADDRESS: 806 AIRSTRIP RD W KILL DEVIL HILLS

DEMOLITION

ISSUED: 07/16/2018

EXPIRES: 01/12/2019

APPLICANT: ITAC 409 LLC
353 SANDVIEW DR
Kill Devil Hills, NC 27948
252-202-1292

OWNER: ITAC 409 LLC
353 SANDVIEW DR
Kill Devil Hills, NC 27948
252-202-1292

GENERAL, UNLIMITED: COASTAL CONSTRUCTION of NC
7013 Martins Pt. Rd.
kitty hawk, nc 27949
480-5556

License: 25529
Expires: 12/30/2018

PARCEL:

PIN: 988311659670

Parcel Number: 004589000

Address: 806 AIRSTRIP RD W KILL DEVIL HILLS

Zoning:

Addition: KILL DEVIL HILLS REALTY CORP

Block: 51 **Lot(s):** 7

Legal Description:

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

PROJECT DESCRIPTION: DEMO ALL SITE STRUCTURES & TREE REMOVAL

DETAILS

Permit

| Name | Value |
|-------------------|---------|
| ZONING DISTRICT | LI-2 |
| FLOOD ZONE | X |
| CONSTRUCTION COST | 5000.00 |



Town of Kill Devil Hills

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

PAID

JUL 17 2018

TOWN OF
KILL DEVIL HILLS

Planning and Inspection Department

DM2018-005

PROJECT NAME: ITAC 409 LLC
SITE ADDRESS: 804 AIRSTRIP RD W KILL DEVIL HILLS

DEMOLITION

ISSUED: 07/16/2018

EXPIRES: 01/12/2019

APPLICANT: ITAC 409 LLC
353 SANDVIEW DR
Kill Devil Hills, NC 27948
252-202-1292

OWNER: ITAC 409 LLC
353 SANDVIEW DR
Kill Devil Hills, NC 27948
252-202-1292

GENERAL, UNLIMITED: COASTAL CONSTRUCTION of NC
7013 Martins Pt. Rd.
kitty hawk, nc 27949
480-5556

License: 25529
Expires: 12/30/2018

PARCEL:

PIN: 988311750626

Parcel Number: 004588000

Address: 804 AIRSTRIP RD W KILL DEVIL HILLS

Zoning:

Addition: KILL DEVIL HILLS REALTY CORP

Block: 51 **Lot(s):** 6

Legal Description:

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

PROJECT DESCRIPTION: DEMO ALL SITE STRUCTURES & TREE REMOVAL

DETAILS

Permit

| Name | Value |
|-------------------|--------------|
| ZONING DISTRICT | LI-2 |
| FLOOD ZONE | X |
| CONSTRUCTION COST | 5000.00 |

DM2018-005

PROJECT NAME: ITAC 409 LLC

SITE ADDRESS: 804 AIRSTRIP RD W KILL DEVIL HILLS

DEMOLITION

ISSUED: 07/16/2018

EXPIRES: 01/12/2019

REQUIRED INSPECTIONS

Final

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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

JUL 17 2018

Planning and Inspection Department

DM2018-004

PROJECT NAME: ITAC 409 LLC
SITE ADDRESS: 802 AIRSTRIP RD W KILL DEVIL HILLS

DEMOLITION

ISSUED: 07/16/2018

EXPIRES: 01/12/2019

APPLICANT: ITAC 409 LLC
353 SANDVIEW DR
Kill Devil Hills, NC 27948
252-202-1292

OWNER: ITAC 409 LLC
353 SANDVIEW DR
Kill Devil Hills, NC 27948
252-202-1292

GENERAL, UNLIMITED: COASTAL CONSTRUCTION of NC
7013 Martins Pt. Rd.
kitty hawk, nc 27949
480-5556

License: 25529
Expires: 12/30/2018

PARCEL:

PIN: 988311750771

Parcel Number: 004587000

Address: 802 AIRSTRIP RD W KILL DEVIL HILLS

Zoning:

Addition: KILL DEVIL HILLS REALTY CORP

Block: 51 **Lot(s):** 5

Legal Description:

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

PROJECT DESCRIPTION: DEMO ALL SITE STRUCTURES & TREE REMOVAL

DETAILS

Permit

| Name | Value |
|-------------------|---------|
| ZONING DISTRICT | LI-2 |
| FLOOD ZONE | X |
| CONSTRUCTION COST | 5000.00 |

DM2018-004

PROJECT NAME: ITAC 409 LLC

SITE ADDRESS: 802 AIRSTRIP RD W KILL DEVIL HILLS

DEMOLITION

ISSUED: 07/16/2018

EXPIRES: 01/12/2019

REQUIRED INSPECTIONS

Final

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Issued By: _____

Contractor or Authorized Agent: Matt Tsipeno Date: 7/17/18



Town of Kill Devil Hills

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

PAID

JUL 26 2018

Planning and Inspection Department

TOWN OF
KILL DEVIL HILLS

DM2018-007

PROJECT NAME:

SITE ADDRESS: 1410 Hill St Kill Devil Hills

DEMOLITION

ISSUED: 07/23/2018

EXPIRES: 01/19/2019

APPLICANT: Brian Zongoloics
319 W. Palmetto St.
Kill Devil Hills, NC 27948
252-256-3058

OWNER: Brian Zongoloics
319 W. Palmetto St.
Kill Devil Hills, NC 27948
252-256-3058

BUILDING UNLIMITED: Burrus Construction
1170 Burnside Dr.
Manteo, NC 27954
305-1300

License: 49384
Expires:

PARCEL:

PIN: 988315639989

Parcel Number: 004840000

Address: 1410 Hill St Kill Devil Hills

Zoning:

Addition: KILL DEVIL BEACH EXTENDED

Block: 14 **Lot(s):** 6

Legal Description:

| FEES: | <u>Paid</u> | <u>Due</u> |
|-----------------|-----------------|---------------|
| Demolition | \$100.00 | \$0.00 |
| Totals : | \$100.00 | \$0.00 |

PROJECT DESCRIPTION: Remove old structure from lot. All asbestos must be removed in compliance with State and Federal Guidelines. Owner is going to remove asbestos material.

DETAILS

Permit

| Name | Value |
|-------------------|---------|
| ZONING DISTRICT | RL |
| FLOOD ZONE | X |
| CONSTRUCTION COST | 8000.00 |

DM2018-007

PROJECT NAME:

SITE ADDRESS: 1410 Hill St Kill Devil Hills

DEMOLITION

ISSUED: 07/23/2018

EXPIRES: 01/19/2019

REQUIRED INSPECTIONS

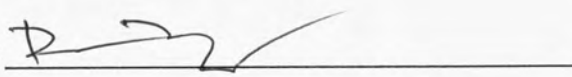
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CONDITIONS

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Issued By: 

Contractor or Authorized Agent:  Date: 7/26/18



Town of Kill Devil Hills

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

Planning and Inspection Department

PL2018-006

PROJECT NAME:

SITE ADDRESS: 1511 Princess Ann Dr Kill Devil Hills

PLUMBING

ISSUED: 07/10/2018

EXPIRES: 01/06/2019

APPLICANT: BLUM, ROBERT V
219 EAST LAKE AVENUE
BALTIMORE, MD 21212-2539

OWNER: BLUM, ROBERT V
219 EAST LAKE AVENUE
BALTIMORE, MD 21212-2539

PLUMBING CLASS I: GRIMSLEY PLUMBING
UNKNOWN
UNKNOWN, XX 00000

License: 28543
Expires: 12/31/2019

PARCEL:

PIN: 988411550691

Parcel Number: 003130000

Address: 1511 Princess Ann Dr Kill Devil Hills

Addition: W R DEATON - DELRAY BEACH

Zoning:

Block: 2 **Lot(s):** 14

Legal Description:

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

PROJECT DESCRIPTION: Re-Plumb water piping and main drains.

PAID

JUL 10 2018

TOWN OF
KILL DEVIL HILLS

PL2018-006

PROJECT NAME:

SITE ADDRESS: 1511 Princess Ann Dr Kill Devil Hills

PLUMBING

ISSUED: 07/10/2018

EXPIRES: 01/06/2019

DETAILS

Permit

| Name | Value |
|----------------------|-------------------------------|
| PURPOSE | Residential Repair/Remodel |
| CONSTRUCTION COST | 6400.00 |
| 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: 7.10.18



Town of Kill Devil Hills

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

Planning and Inspection Department

EL2018-049

PROJECT NAME:

SITE ADDRESS: 502 AIRSTRIP RD W KILL DEVIL HILLS

ELECTRICAL

ISSUED: 07/23/2018

EXPIRES: 01/19/2019

APPLICANT: MCKEE INVESTMENTS
502 West Airstrip
KDH, NC 27948
757-754-4951

OWNER: MCKEE INVESTMENTS
502 West Airstrip
KDH, NC 27948
757-754-4951

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

License: 24451
Expires:

PARCEL:

PIN: 988312767489

Parcel Number: 004481000

Address: 502 AIRSTRIP RD W KILL DEVIL HILLS

Addition: KILL DEVIL HILLS REALTY CORP

Zoning:

Block: 34 **Lot(s):** 5

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.

JUL 23 2018

TOWN OF
KILL DEVIL HILLS

EL2018-049

PROJECT NAME:

SITE ADDRESS: 502 AIRSTRIP RD W KILL DEVIL HILLS

ELECTRICAL

ISSUED: 07/23/2018

EXPIRES: 01/19/2019

DETAILS

Permit

| Name | Value |
|-------------------|-------------------------------|
| ZONING DISTRICT | RL |
| PURPOSE | Residential Repair/Remodel |
| CONSTRUCTION COST | 1500.00 |
| CONSTRUCTION TYPE | V |
| FLOOD ZONE | X |
| OCCUPANCY TYPE | One & Two Family Dwelling |

REQUIRED INSPECTIONS

Final

CONDITIONS

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Issued By: _____

Contractor or Authorized Agent: _____

Date: _____

July 23, 2018



Town of Kill Devil Hills

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

PAID

JUL 19 2018

Planning and Inspection Department

TOWN OF
KILL DEVIL HILLS

EL2018-048
PROJECT NAME:
SITE ADDRESS: 1001 W 3rd St Kill Devil Hills

ELECTRICAL
ISSUED: 07/19/2018
EXPIRES: 01/15/2019

APPLICANT: BRADLEY, JAMES E
1308 POWHATAN AVENUE
PORTSMOUTH, VA 23707

OWNER: BRADLEY, JAMES E
1308 POWHATAN AVENUE
PORTSMOUTH, VA 23707

ELECTRICAL, LIMITED: M. CLARY
UNKNOWN
UNKNOWN, XX 00000

License: 22993
Expires: 12/30/2019

PARCEL:

PIN: 988409161333

Parcel Number: 002574000

Address: 1001 W 3rd St Kill Devil Hills

Addition: CROATAN SHORES SUBDIV

Zoning:
Block: 16 Lot(s): 1

Legal Description:

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

PROJECT DESCRIPTION: Re-install meter after leak issue.

EL2018-048

PROJECT NAME:

SITE ADDRESS: 1001 W 3rd St Kill Devil Hills

ELECTRICAL

ISSUED: 07/19/2018

EXPIRES: 01/15/2019

DETAILS

Permit

| Name | Value |
|----------------------|-------------------------------|
| ZONING DISTRICT | RL |
| PURPOSE | Residential Repair/Remodel |
| CONSTRUCTION COST | 500.00 |
| CONSTRUCTION TYPE | V |
| FLOOD ZONE | AE |
| BASE FLOOD ELEVATION | 8.3 |
| OCCUPANCY TYPE | One & Two Family Dwelling |

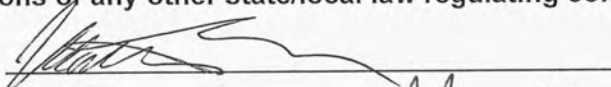
REQUIRED INSPECTIONS

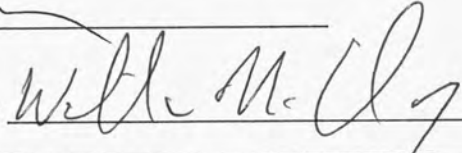
Final

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: 6/19/2018



Town of Kill Devil Hills

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

Planning and Inspection Department

| | |
|---|----------------------------|
| EL2018-047 | ELECTRICAL |
| PROJECT NAME: Brock Electric | ISSUED: 07/11/2018 |
| SITE ADDRESS: 113 GREENVILLE ST KILL DEVIL HILLS | EXPIRES: 01/07/2019 |

| | |
|--|--|
| APPLICANT: Bryan Orosen Electric 203 Eagle Dr. Kill Devil Hills, NC 27948 256-1560 | OWNER: BROCK, ROSSIE EDWARD 7100 Rhodes Drive WINDSOR, VA 23487 |
|--|--|

| | | |
|----------------------|--|---|
| ELECTRICAL-I: | Bryan Orosen Electric 203 Eagle Dr. Kill Devil Hills, NC 27948 256-1560 | License: 24814 Expires: 06/24/2019 |
|----------------------|--|---|

PARCEL:

| | |
|--|------------------------------------|
| PIN: 988518207102 | Parcel Number: 001861000 |
| Address: 113 GREENVILLE ST KILL DEVIL HILLS | Zoning: |
| Addition: AVALON BEACH ANNEX 1 | Block: 0 Lot(s): 415 |
| Legal Description: | |

| FEES: | Paid | Due |
|---|-----------------|---------------|
| Electrical Permit Fee | \$150.00 | \$0.00 |
| Temporary Electric Service Fee (PreFinal) | \$0.00 | \$0.00 |
| Totals : | \$150.00 | \$0.00 |

PROJECT DESCRIPTION: Change meterbase, service drop and feeders

PAID

JUL 11 2018

TOWN OF KILL DEVIL HILLS

EL2018-047

PROJECT NAME: Brock Electric
SITE ADDRESS: 113 GREENVILLE ST KILL DEVIL HILLS

ELECTRICAL
ISSUED: 07/11/2018
EXPIRES: 01/07/2019

DETAILS

Permit

| Name | Value |
|----------------------|-------------------------------|
| ZONING DISTRICT | C |
| PURPOSE | Residential Repair/Remodel |
| CONSTRUCTION COST | 1000.00 |
| FLOOD ZONE | AE |
| BASE FLOOD ELEVATION | 9 |

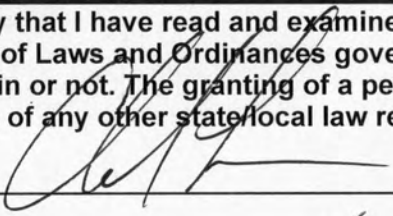
REQUIRED INSPECTIONS

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.

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Issued By: 

Contractor or Authorized Agent:  Date: 7-11-18



Town of Kill Devil Hills

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

PAID

JUL - 2 2018

Planning and Inspection Department

TOWN OF
KILL DEVIL HILLS

EL2018-045

PROJECT NAME: DOSHKOV ELECTRICAL
SITE ADDRESS: 2014 CROATAN HWY N KILL DEVIL HILLS

ELECTRICAL

ISSUED: 07/02/2018

EXPIRES: 12/29/2018

APPLICANT: PAVEL DOSHKOV
2014 Croatan Hwy N
Kill Devil Hills, NC 27948
517-937-8270

OWNER: PAVEL DOSHKOV
2014 Croatan Hwy N
Kill Devil Hills, NC 27948
517-937-8270

ELECTRICAL - UNLIMITED: KREISER ELECTRIC INC
3847 IVY LN
kitty hawk, nc 27949
252-564-2367

License: 31684
Expires:

PARCEL:

PIN: 988405294533

Parcel Number: 001302000

Address: 2014 CROATAN HWY N KILL DEVIL HILLS

Addition: AVALON BEACH ANNEX 2 & 3

Zoning:
Block: 0 **Lot(s):** 536

Legal Description:

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

PROJECT DESCRIPTION: METER BASE CHANGEOUT

EL2018-045

PROJECT NAME: DOSHKOV ELECTRICAL
SITE ADDRESS: 2014 CROATAN HWY N KILL DEVIL HILLS

ELECTRICAL

ISSUED: 07/02/2018

EXPIRES: 12/29/2018

DETAILS

Permit

| Name | Value |
|----------------------|-------------------------------|
| PURPOSE | Residential Repair/Remodel |
| CONSTRUCTION COST | 2000.00 |
| CONSTRUCTION TYPE | V |
| FLOOD ZONE | AE |
| BASE FLOOD ELEVATION | 9 |
| OCCUPANCY TYPE | One & Two Family Dwelling |

REQUIRED INSPECTIONS

Final

CONDITIONS

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

Issued By: 

Contractor or Authorized Agent:  **Date:** 7-2-18



Town of Kill Devil Hills

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

PAID

JUL - 5 2018

Planning and Inspection Department

TOWN OF
KILL DEVIL HILLS

BJ2018-134

PROJECT NAME: Dream Builders
SITE ADDRESS: 527 W. Palmetto St. Kill Devil Hills

BUILDING JOINT

ISSUED: 07/05/2018

EXPIRES: 01/01/2019

APPLICANT: Dream Builders
PO Box 33
Kill Devil Hills, NC 27948
252-573-8910

OWNER: Dream Builders
PO Box 33
Kill Devil Hills, NC 27948
252-573-8910

GENERAL BUILDING: Dream Builders
PO Box 33
Kill Devil Hills, NC 27948
252-573-8910

License: 775296
Expires: 04/30/2019

PARCEL:

PIN: 98750907052

Parcel Number:

Address: 527 W. Palmetto St. Kill Devil Hills

Zoning:

Addition:

Block:

Lot(s):

Legal Description: Lot 3R, Block 75, Virginia Dare Shores S/D

| FEES: | Paid | Due | BUILDING AREA: | |
|---------------------------|-------------------|---------------|--------------------------|--------------|
| Res. Building Permit Fee | \$1,228.50 | \$0.00 | Covered Porches/Decks | 98 SQFT |
| Covered Porch Residential | \$73.50 | \$0.00 | # of Temporary Poles | 1 EA |
| T-Pole | \$50.00 | \$0.00 | Residential Heated Space | 1638 sq. Ft. |
| Totals : | \$1,352.00 | \$0.00 | (.75) | |

PROJECT DESCRIPTION: Proposed 3 bedroom single family dwelling

BJ2018-134

PROJECT NAME: Dream Builders
SITE ADDRESS: 527 W. Palmetto St. Kill Devil Hills

BUILDING JOINT

ISSUED: 07/05/2018

EXPIRES: 01/01/2019

DETAILS**Permit**

| Name | Value |
|--------------------------------|---------------------------|
| ZONING DISTRICT | RL |
| FRONT YARD SETBACK | 15 |
| REAR YARD SETBACK | 20% Depth >30 |
| SIDE YARD SETBACK | 6 |
| HEALTH DEPARTMENT PERMIT # | 27914 |
| # PARKING SPACES/BEDROOM | 3 |
| CAMA PERMIT | N |
| CAMA EXEMPTION | N |
| FLOOD ZONE | AE |
| BASE FLOOD ELEVATION | 8.3 |
| Proposed First Floor Elevation | 10.30 |
| CONSTRUCTION TYPE | V |
| CONSTRUCTION COST | 195000.00 |
| LOT COVERAGE | 37.30 |
| LIVING SPACE (SQFT) | 1638 |
| COVERED PORCHES/DECKS (SQFT) | 98 |
| TOTAL SQUARE FOOTAGE | 1736 |
| SURVEYOR NAME AND NUMBER | Michael W. Robinson |
| ENGINEER AND LICENSE NUMBER | MIKE OSTEEN 092628 |
| CULVERT | N |
| ROLL OUT CAN | 1 |
| DRIVEWAY INVERT 2 | Y |
| OCCUPANCY TYPE | One & Two Family Dwelling |

BJ2018-134

PROJECT NAME: Dream Builders
SITE ADDRESS: 527 W. Palmetto St. Kill Devil Hills

BUILDING JOINT

ISSUED: 07/05/2018

EXPIRES: 01/01/2019

REQUIRED INSPECTIONS

| | |
|------------------|---------------|
| T-Pole | Rough In |
| Piling | Vapor Barrier |
| Floor box | Insulation |
| In-Slab Plumbing | Pre-final |
| 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.
- * Elevation Certificate will be required 21 days after establishment of the reference level in accordance with 151.41(C).
- * As-built survey will be required prior to Certificate of Occupancy or Certificate of Compliance.
- * The developer shall be responsible for maintaining erosion and sediment control at the disturbed area.
- * A final elevation certificate will be required prior to issuance of a Certificate of Occupancy or a Certificate of Compliance in accordance with 151.41(C).
- * Development must meet all aspects of Chapter 151 Flood Damage Prevention Ordinance including use and elevation.
- * Per §153.082(B)(1)(c) Mechanical equipment, including HVAC equipment and LP Gas equipment shall not project into a minimum yard setback more than four (4) feet.
- * Must comply with Wind Borne Debris requirements as defined in NCBC R301.2.1.2 and NCBC 1609.2.
- * Construction must meet all aspect of Chapter 153 Zoning including lot coverage and setbacks.
- * Zoning Final Inspection is required.

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

Issued By:  _____

Contractor or Authorized Agent:  _____ Date: 7/5/2018



Town of Kill Devil Hills

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

Planning and Inspection Department

BJ2018-139

PROJECT NAME: OBX Cottages LLC
SITE ADDRESS: 538 W. Palmetto St. Kill Devil Hills

BUILDING JOINT

ISSUED: 07/17/2018

EXPIRES: 01/13/2019

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

OWNER: OBX Cottages, LLC
200 E. Blackman Street
Kill Devil Hills, NC 27948
252-207-5475

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

License: 67524
Expires: 12/30/2018

PARCEL:

PIN: 987520905160

Parcel Number:

Address: 538 W. Palmetto St. Kill Devil Hills

Zoning:

Addition:

Block:

Lot(s):

Legal Description: Lot 39R, Block 74, Virginia Dare Shores S/D

| FEES: | Paid | Due | BUILDING AREA: | |
|---------------------------|-------------------|---------------|----------------------------|--------------|
| Covered Porch Residential | \$65.25 | \$0.00 | Open Decks | 1 EA |
| Res. Building Permit Fee | \$1,378.35 | \$0.00 | Residential Heated Space | 1793 sq. Ft. |
| Open Deck Fee | \$150.00 | \$0.00 | (.75) | |
| T-Pole | \$50.00 | \$0.00 | # of Temporary Poles | 1 EA |
| Totals : | \$1,643.60 | \$0.00 | Covered Porches/Decks | 87 SQFT |
| | | | Residential Unheated (.40) | 84 Sq. Ft |

PROJECT DESCRIPTION: Proposed 3 bedroom single family dwelling

Town of Kill Devil Hills

Water Charges

PAID

BJ2018-139

PROJECT NAME: OBX Cottages LLC
SITE ADDRESS: 538 W. Palmetto St. Kill Devil Hills

BUILDING JOINT

ISSUED: 07/17/2018

EXPIRES: 01/13/2019

DETAILS**Permit**

| Name | Value |
|---------------------------------|------------------------------|
| ZONING DISTRICT | RL |
| FRONT YARD SETBACK | 15 |
| REAR YARD SETBACK | 20% Depth >30 |
| SIDE YARD SETBACK | 6 |
| STREET SIDE SETBACK | 7.5 |
| HEALTH DEPARTMENT PERMIT # | 27944 |
| # PARKING SPACES/BEDROOM | 3 |
| CAMA PERMIT | N |
| CAMA EXEMPTION | N |
| FLOOD ZONE | AE |
| BASE FLOOD ELEVATION | 8.3 |
| Proposed First Floor Elevation | 10.50 |
| PURPOSE | Residential New |
| CONSTRUCTION TYPE | V |
| CONSTRUCTION COST | 175000.00 |
| # OF UNITS | 1 |
| LOT COVERAGE | 39.58 |
| LIVING SPACE (SQFT) | 1793 |
| COVERED PORCHES/DECKS (SQFT) | 87 |
| STORAGE (SQFT) | 84 |
| OPEN DECK (SQFT) | 112 |
| TOTAL SQUARE FOOTAGE | 2076 |
| SURVEYOR NAME AND NUMBER | William S. Jones, Jr. |
| ENGINEER AND LICENSE NUMBER | M. Osteen 032628 |
| CULVERT | N |
| ROLL OUT CAN | 1 |
| DRIVEWAY INVERT 2 | Y |
| OCCUPANCY TYPE | One & Two Family Dwelling |

BJ2018-139

PROJECT NAME: OBX Cottages LLC
SITE ADDRESS: 538 W. Palmetto St. Kill Devil Hills

BUILDING JOINT

ISSUED: 07/17/2018

EXPIRES: 01/13/2019

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.
- * Elevation Certificate will be required 21 days after establishment of the reference level in accordance with 151.41(C).
- * As-built survey will be required prior to Certificate of Occupancy or Certificate of Compliance.
- * The developer shall be responsible for maintaining erosion and sediment control at the disturbed area.
- * A final elevation certificate will be required prior to issuance of a Certificate of Occupancy or a Certificate of Compliance in accordance with 151.41(C).
- * Development must meet all aspects of Chapter 151 Flood Damage Prevention Ordinance including use and elevation.
- * Must comply with Wind Borne Debris requirements as defined in NCBC R301.2.1.2 and NCBC 1609.2.
- * Per §153.082(B)(1)(c) Mechanical equipment, including HVAC equipment and LP Gas equipment shall not project into a minimum yard setback more than four (4) feet.
- * Construction must meet all aspect of Chapter 153 Zoning including lot coverage and setbacks.
- * Zoning Final Inspection is required.

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

Issued By: 

Contractor or Authorized Agent: 

Date: 7-24-18



Town of Kill Devil Hills

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

PAID

JUL 20 2018

Planning and Inspection Department

TOWN OF
KILL DEVIL HILLS

BJ2018-140

PROJECT NAME: Mike Kirk/OBX Cottages
SITE ADDRESS: 523 Aycok Street Kill Devil Hills

BUILDING JOINT

ISSUED: 07/18/2018

EXPIRES: 01/14/2019

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

OWNER: MIKE KIRK
200 E. Blackman Street
Nags Head, NC 27959

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

License: 67524
Expires: 12/30/2018

PARCEL:

PIN: 987520905560

Parcel Number:

Address: 523 Aycok Street Kill Devil Hills

Zoning:

Addition:

Block:

Lot(s):

Legal Description: Lots 9 and 10, Block 73, Virginia Dare Shores S/D

| FEES: | Paid | Due | BUILDING AREA: | |
|---------------------------|-------------------|---------------|--------------------------------|--------------|
| Covered Porch Residential | \$63.00 | \$0.00 | Covered Porches/Decks | 84 SQFT |
| Res. Building Permit Fee | \$1,501.15 | \$0.00 | Residential Unheated (.40) | 391 Sq. Ft |
| T-Pole | \$50.00 | \$0.00 | Residential Heated Space (.75) | 1793 sq. Ft. |
| Totals : | \$1,614.15 | \$0.00 | # of Temporary Poles | 1 EA |

PROJECT DESCRIPTION: Proposed 3 bedroom single family dwelling

Town of Kill Devil Hills
Water Charges

PAID

Water Tap #: T23204

BJ2018-140

PROJECT NAME: Mike Kirk/OBX Cottages
SITE ADDRESS: 523 Aycock Street Kill Devil Hills

BUILDING JOINT**ISSUED:** 07/18/2018**EXPIRES:** 01/14/2019

DETAILS**Permit**

| Name | Value |
|--------------------------------|---------------------|
| ZONING DISTRICT | RL |
| FRONT YARD SETBACK | 15 |
| REAR YARD SETBACK | 20% Depth >30 |
| SIDE YARD SETBACK | 6 |
| HEALTH DEPARTMENT PERMIT # | 27943 |
| # PARKING SPACES/BEDROOM | 3 |
| CAMA PERMIT | N |
| CAMA EXEMPTION | N |
| FLOOD ZONE | AE |
| BASE FLOOD ELEVATION | 8.3 |
| Proposed First Floor Elevation | 9.50 |
| PURPOSE | Residential New |
| CONSTRUCTION TYPE | V |
| CONSTRUCTION COST | 175000.00 |
| LOT COVERAGE | 39.70 |
| LIVING SPACE (SQFT) | 1793 |
| COVERED PORCHES/DECKS (SQFT) | 84 |
| GARAGE (SQFT) | 391 |
| TOTAL SQUARE FOOTAGE | 2268 |
| SURVEYOR NAME AND NUMBER | Coastal Engineering |
| CULVERT | Y |
| ROLL OUT CAN | 1 |
| DRIVEWAY INVERT 2 | N |



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

BJ2018-137

PROJECT NAME: Dream Builders C&D, LLC
SITE ADDRESS: 513 W. Palmetto Street Kill Devil Hills

BUILDING JOINT

ISSUED: 07/10/2018

EXPIRES: 01/06/2019

APPLICANT: Dream Builders
 PO Box 33
 Kill Devil Hills, NC 27948
 252-573-8910

OWNER: N.C. Coastal Development, LLC
 PO Box 33
 Kill Devil Hills, NC 27948
 252-573-8910

GENERAL BUILDING: Dream Builders
 PO Box 33
 Kill Devil Hills, NC 27948
 252-573-8910

License: 775296
Expires: 04/30/2019

PARCEL:

PIN: 987520909110

Parcel Number:

Address: 513 W. Palmetto Street Kill Devil Hills

Zoning:

Addition:

Block:

Lot(s):

Legal Description: Lot 6R, Block 75, Virginia Dare Shores S/D

| FEES: | <u>Paid</u> | <u>Due</u> | BUILDING AREA: | |
|---------------------------|-------------------|---------------|----------------------------|--------------|
| Res. Building Permit Fee | \$1,228.00 | \$0.00 | # of Temporary Poles | 1 EA |
| T-Pole | \$50.00 | \$0.00 | Residential Heated Space | 1616 sq. Ft. |
| Covered Porch Residential | \$72.75 | \$0.00 | (.75) | |
| | | | Residential Unheated (.40) | 40 Sq. Ft |
| Totals : | \$1,350.75 | \$0.00 | Covered Porches/Decks | 97 SQFT |

PROJECT DESCRIPTION: Proposed 3 bedroom single family dwelling

Town of Kill Devil Hills
 Water Charges

PAID

JUL 12 2018

Water Tap #: T23203

BJ2018-137

PROJECT NAME: Dream Builders C&D, LLC
SITE ADDRESS: 513 W. Palmetto Street Kill Devil Hills

BUILDING JOINT

ISSUED: 07/10/2018

EXPIRES: 01/06/2019

DETAILS**Permit**

| Name | Value |
|--------------------------------|---------------------------|
| ZONING DISTRICT | RL |
| FRONT YARD SETBACK | 15 |
| REAR YARD SETBACK | 20% Depth >30 |
| SIDE YARD SETBACK | 6 |
| HEALTH DEPARTMENT PERMIT # | 27920 |
| # PARKING SPACES/BEDROOM | 3 |
| CAMA PERMIT | N |
| CAMA EXEMPTION | N |
| FLOOD ZONE | AE |
| BASE FLOOD ELEVATION | 8.3 |
| Proposed First Floor Elevation | 10.30 |
| PURPOSE | Residential New |
| CONSTRUCTION TYPE | V |
| CONSTRUCTION COST | 195000.00 |
| # OF UNITS | 1 |
| LOT COVERAGE | 37.10 |
| LIVING SPACE (SQFT) | 1616 |
| COVERED PORCHES/DECKS (SQFT) | 97 |
| STORAGE (SQFT) | 40 |
| TOTAL SQUARE FOOTAGE | 1753 |
| SURVEYOR NAME AND NUMBER | Michael W. Robinson |
| ENGINEER AND LICENSE NUMBER | M. O'Steen 032628 |
| CULVERT | N |
| ROLL OUT CAN | 1 |
| DRIVEWAY INVERT 2 | Y |
| OCCUPANCY TYPE | One & Two Family Dwelling |

BJ2018-137

PROJECT NAME: Dream Builders C&D, LLC
SITE ADDRESS: 513 W. Palmetto Street Kill Devil Hills

BUILDING JOINT

ISSUED: 07/10/2018

EXPIRES: 01/06/2019

REQUIRED INSPECTIONS

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

CONDITIONS

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

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

Issued By: _____

Contractor or Authorized Agent: _____

Date: _____

7/12/2018



Town of Kill Devil Hills

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

PAID

JUL 23 2018

Planning and Inspection Department

TOWN OF
KILL DEVIL HILLS

BJ2018-147
PROJECT NAME:
SITE ADDRESS: 2024 Smithfield St Kill Devil Hills

BUILDING JOINT
ISSUED: 07/19/2018
EXPIRES: 01/15/2019

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

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

RESIDENTIAL-LIMITED: OLDS, HOWARD
3617 Windgrass Circle
Kitty Hawk, NC 27949

License: 30676
Expires: 12/30/2019

PARCEL:

PIN: 988405193386

Parcel Number: 001431000

Address: 2024 Smithfield St Kill Devil Hills

Zoning:

Addition: AVALON BEACH ANNEX 2 & 3

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

Legal Description:

| FEE: | <u>Paid</u> | <u>Due</u> | BUILDING AREA: | |
|-----------------------------|-----------------|---------------|--------------------|----------|
| Renovation/Remodel/Relocate | \$302.40 | \$0.00 | Remodel/Renovation | 672 SQFT |
| Totals : | \$302.40 | \$0.00 | | |

PROJECT DESCRIPTION: Remodel storage into 1 bedroom, 1 bath, and game room living space no duplex approved. House must remain SFD. Asbuilt survey required, must have (3) off street parking spaces.

BJ2018-147

PROJECT NAME:

SITE ADDRESS: 2024 Smithfield St Kill Devil Hills

BUILDING JOINT

ISSUED: 07/19/2018

EXPIRES: 01/15/2019

DETAILS**Permit**

| Name | Value |
|----------------------------|-------------------------------|
| ZONING DISTRICT | RL |
| FRONT YARD SETBACK | 15 |
| REAR YARD SETBACK | 20% Depth >30 |
| SIDE YARD SETBACK | 6 |
| HEALTH DEPARTMENT PERMIT # | 27952 |
| # PARKING SPACES/BEDROOM | 3 |
| CAMA PERMIT | N |
| CAMA EXEMPTION | N |
| FLOOD ZONE | X |
| PURPOSE | Residential Repair/Remodel |
| CONSTRUCTION TYPE | V |
| CONSTRUCTION COST | 10000.00 |
| # OF UNITS | 1 |
| LOT COVERAGE | 39.20 |
| LIVING SPACE (SQFT) | 672 |
| TOTAL SQUARE FOOTAGE | 672 |
| SURVEYOR NAME AND NUMBER | L-3227 |
| CULVERT | N |
| DRIVEWAY INVERT 2 | N |
| OCCUPANCY TYPE | One & Two Family Dwelling |

REQUIRED INSPECTIONS

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

CONDITIONS

BJ2018-147

PROJECT NAME:

SITE ADDRESS: 2024 Smithfield St Kill Devil Hills

BUILDING JOINT

ISSUED: 07/19/2018

EXPIRES: 01/15/2019

- * 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.
- * 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: _____

7/23/18



Town of Kill Devil Hills

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

PAID

JUL 17 2018

Planning and Inspection Department

TOWN OF
 KILL DEVIL HILLS

| | |
|---|----------------------------|
| BJ2018-141 | BUILDING JOINT |
| PROJECT NAME: Burkhimer | ISSUED: 07/16/2018 |
| SITE ADDRESS: 302 ST LOUIS ST KILL DEVIL HILLS | EXPIRES: 01/12/2019 |

| | |
|---|---|
| APPLICANT: Burkhimer, Walton P 302 St. Louis Street Kill Devil Hills, NC 27948 757-418-5970 | OWNER: Burkhimer, Walton P 302 St. Louis Street Kill Devil Hills, NC 27948 757-418-5970 |
|---|---|

| | | |
|--------------------|---|---|
| CONTRACTOR: | SAME AS OWNER UNKNOWN UNKNOWN, XX 00000 | License: Same as Owner Expires: 12/30/2019 |
|--------------------|---|---|

PARCEL:

| | |
|--|-----------------------------------|
| PIN: 987516941543 | Parcel Number: 000184000 |
| Address: 302 ST LOUIS ST KILL DEVIL HILLS | Zoning: |
| Addition: ORVILLE BEACH WEST | Block: 0 Lot(s): 77 |
| Legal Description: | |

| FEES: | Paid | Due | BUILDING AREA: | |
|--------------------------|-----------------|---------------|--------------------------------|-------------|
| Res. Building Permit Fee | \$282.00 | \$0.00 | Residential Unheated (.40) | 180 Sq. Ft |
| Pool/Hot Tub | \$200.00 | \$0.00 | Residential Heated Space (.75) | 280 sq. Ft. |
| Totals : | \$482.00 | \$0.00 | | |

PROJECT DESCRIPTION: 28'x10' rear addition, pool, and associated site modifications.

BJ2018-141

PROJECT NAME: Burkhimer

SITE ADDRESS: 302 ST LOUIS ST KILL DEVIL HILLS

BUILDING JOINT

ISSUED: 07/16/2018

EXPIRES: 01/12/2019

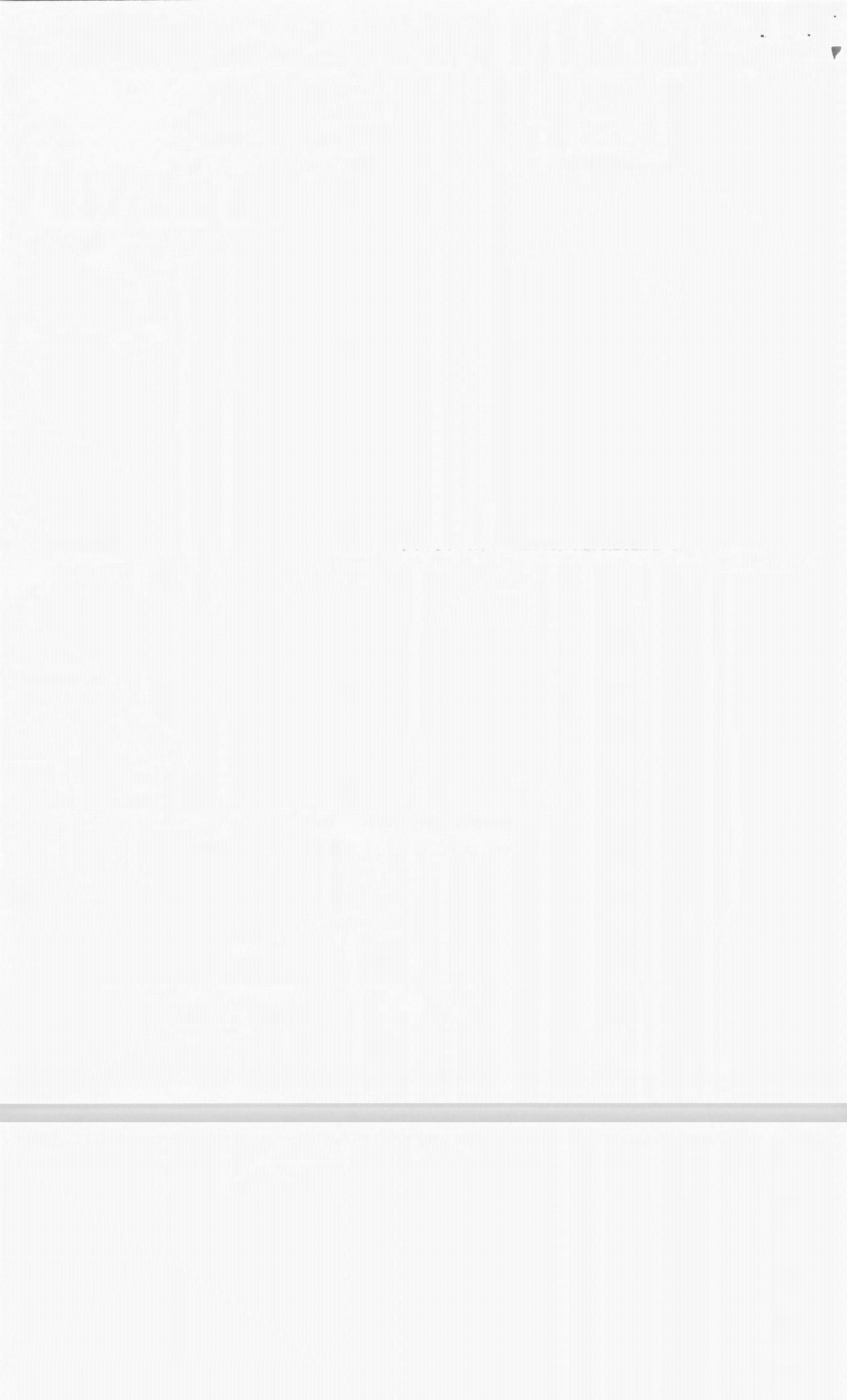
DETAILS**Permit**

| Name | Value |
|-----------------------------|-----------------------------|
| ZONING DISTRICT | RL |
| FRONT YARD SETBACK | 30 |
| REAR YARD SETBACK | 20% Depth >30 |
| SIDE YARD SETBACK | 10 |
| # PARKING SPACES/BEDROOM | 4 |
| CAMA PERMIT | N |
| CAMA EXEMPTION | N |
| FLOOD ZONE | X |
| PURPOSE | Residential Addition |
| CONSTRUCTION TYPE | V |
| CONSTRUCTION COST | 50000.00 |
| LOT COVERAGE | 39.98 |
| LIVING SPACE (SQFT) | 280 |
| STORAGE (SQFT) | 180 |
| TOTAL SQUARE FOOTAGE | 460 |
| SURVEYOR NAME AND NUMBER | William S. Jones Jr. L-2532 |
| ENGINEER AND LICENSE NUMBER | MIKE OSTEEN 092628 |
| CULVERT | N |
| DRIVEWAY INVERT 2 | N |
| OCCUPANCY TYPE | One & Two Family Dwelling |

REQUIRED INSPECTIONS

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

CONDITIONS



BJ2018-141

PROJECT NAME: Burkheimer

SITE ADDRESS: 302 ST LOUIS ST KILL DEVIL HILLS

BUILDING JOINT

ISSUED: 07/16/2018

EXPIRES: 01/12/2019

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

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: _____

SET 17.CP1
Town of Kill Devil Hills 4400
PLANNING
Date / Time : 07/17/18 10:03
Payment : \$ 482.00
Receipt # : 543716
Check/Credit Card #: 6009
Clerk : 981msnyd
Paid By : WALTON BURKHIMER



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

BJ2018-146
PROJECT NAME:
SITE ADDRESS: 607 Kelly Ct Kill Devil Hills

BUILDING JOINT
ISSUED: 07/19/2018
EXPIRES: 01/15/2019

APPLICANT: Leonard Admusko
353 S. Lincoln Ave
NEWTOWN, PA 18940
215-932-7584

OWNER: Leonard Admusko
353 S. Lincoln Ave
NEWTOWN, PA 18940
215-932-7584

BUILDING LIMITED: Cutting Edge Craftsmen
934 W Kitty Hawk Rd
Kitty Hawk, NC 27949
252-261-2656

License: 72054
Expires: 01/03/2019

PARCEL:

PIN: 988405185198

Parcel Number: 002093000

Address: 607 Kelly Ct Kill Devil Hills

Zoning:

Addition: WRIGHT'S SHORES

Block: 0 **Lot(s):** 131

Legal Description:

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

PROJECT DESCRIPTION: Remove existing storage room and replace with 12 x 16 storage room.

PAID
JUL 26 2018



BJ2018-146

PROJECT NAME:

SITE ADDRESS: 607 Kelly Ct Kill Devil Hills

BUILDING JOINT

ISSUED: 07/19/2018

EXPIRES: 01/15/2019

DETAILS**Permit**

| Name | Value |
|----------------------------|-------------------------------|
| ZONING DISTRICT | RL |
| FRONT YARD SETBACK | 30 |
| REAR YARD SETBACK | 20% Depth >30 |
| SIDE YARD SETBACK | 8 |
| HEALTH DEPARTMENT PERMIT # | 27957 |
| CAMA PERMIT | N |
| CAMA EXEMPTION | N |
| FLOOD ZONE | X |
| PURPOSE | Residential Repair/Remodel |
| CONSTRUCTION TYPE | V |
| CONSTRUCTION COST | 32950.00 |
| # OF UNITS | 1 |
| STORAGE (SQFT) | 192 |
| TOTAL SQUARE FOOTAGE | 192 |
| SURVEYOR NAME AND NUMBER | G. Rogers L-3531 |
| CULVERT | N |
| DRIVEWAY INVERT 2 | N |
| OCCUPANCY TYPE | One & Two Family Dwelling |

REQUIRED INSPECTIONS

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

CONDITIONS

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

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



BJ2018-146

PROJECT NAME:

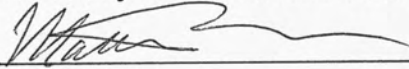
SITE ADDRESS: 607 Kelly Ct Kill Devil Hills

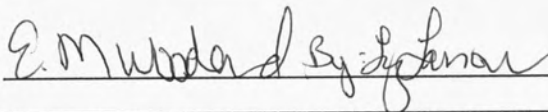
BUILDING JOINT

ISSUED: 07/19/2018

EXPIRES: 01/15/2019

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: 7/26/18

SET 17 CPI
Town of Kill Devil Hills 4400
PLANNING
Date / Time : 07/26/18 09:21
Payment : \$ 150.00
Receipt # : 544580
Check/Credit Card #: 6054
Clerk : 981msnyd
Paid By : CUTTING EDGE CRAFTS



Town of Kill Devil Hills

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

PAID

JUL - 5 2018

Planning and Inspection Department

TOP OF

| | |
|--|-----------------------|
| BJ2018-133 | BUILDING JOINT |
| PROJECT NAME: Dream Builders C&D, LLC | ISSUED: 07/05/2018 |
| SITE ADDRESS: 505 W. Palmetto St. Kill Devil Hills | EXPIRES: 01/01/2019 |

| | |
|---|---|
| APPLICANT: Dream Builders PO Box 33 Kill Devil Hills, NC 27948 252-573-8910 | OWNER: Dream Builders PO Box 33 Kill Devil Hills, NC 27948 252-573-8910 |
|---|---|

| | |
|--|--|
| GENERAL BUILDING: Dream Builders PO Box 33 Kill Devil Hills, NC 27948 252-573-8910 | License: 775296 Expires: 04/30/2019 |
|--|--|

PARCEL:

| | |
|--|------------------------------|
| PIN: 987520909174 | Parcel Number: |
| Address: 505 W. Palmetto St. Kill Devil Hills | Zoning: |
| Addition: | Block: Lot(s): |
| Legal Description: Lot 7r, Block 75 | |

| FEES: | Paid | Due | BUILDING AREA: | |
|---------------------------|-------------------|---------------|--------------------------|--------------|
| Covered Porch Residential | \$73.50 | \$0.00 | Covered Porches/Decks | 98 SQFT |
| Res. Building Permit Fee | \$1,228.50 | \$0.00 | Residential Heated Space | 1638 sq. Ft. |
| T-Pole | \$50.00 | \$0.00 | (.75) | |
| | | | # of Temporary Poles | 1 EA |
| Totals : | \$1,352.00 | \$0.00 | | |

PROJECT DESCRIPTION: Proposed 3 Bedroom SFD

BJ2018-133

PROJECT NAME: Dream Builders C&D, LLC
SITE ADDRESS: 505 W. Palmetto St. Kill Devil Hills

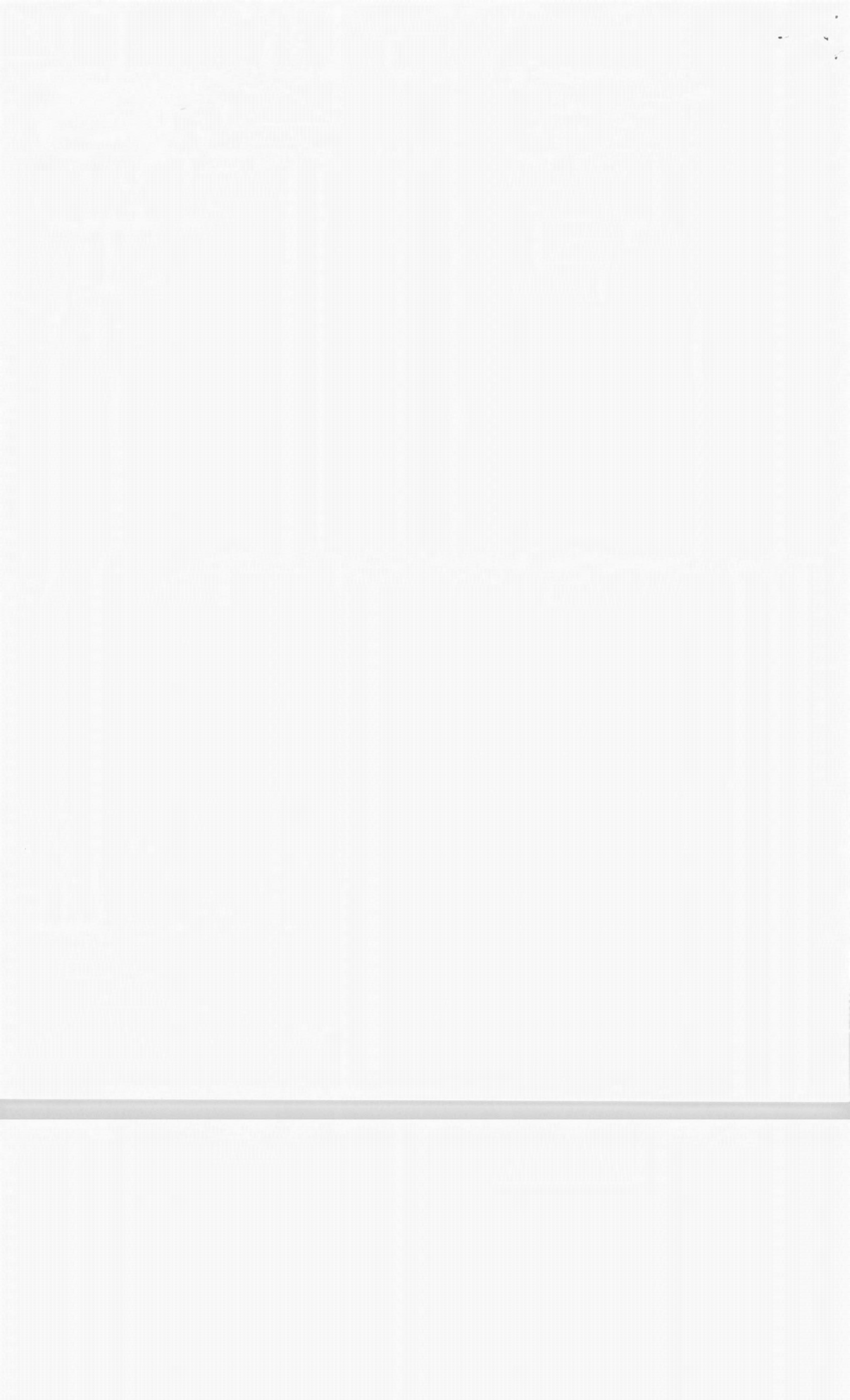
BUILDING JOINT

ISSUED: 07/05/2018

EXPIRES: 01/01/2019

DETAILS**Permit**

| Name | Value |
|--------------------------------|------------------------------------|
| ZONING DISTRICT | RL |
| FRONT YARD SETBACK | 15 |
| REAR YARD SETBACK | 20% Depth >30 |
| SIDE YARD SETBACK | 6 |
| HEALTH DEPARTMENT PERMIT # | 27915 |
| # PARKING SPACES/BEDROOM | 3 |
| CAMA PERMIT | N |
| CAMA EXEMPTION | N |
| FLOOD ZONE | AE |
| BASE FLOOD ELEVATION | 8.3 |
| Proposed First Floor Elevation | 10.30 |
| PURPOSE | Residential New |
| CONSTRUCTION TYPE | V |
| CONSTRUCTION COST | 195000.00 |
| LOT COVERAGE | 37.30 |
| LIVING SPACE (SQFT) | 1638 |
| COVERED PORCHES/DECKS (SQFT) | 98 |
| TOTAL SQUARE FOOTAGE | 1736 |
| SURVEYOR NAME AND NUMBER | Engineer Michael W. Robinson 18994 |
| ENGINEER AND LICENSE NUMBER | MIKE OSTEEN 092628 |
| CULVERT | N |
| ROLL OUT CAN | 1 |
| DRIVEWAY INVERT 2 | Y |
| OCCUPANCY TYPE | One & Two Family Dwelling |



BJ2018-133

PROJECT NAME: Dream Builders C&D, LLC
SITE ADDRESS: 505 W. Palmetto St. Kill Devil Hills

BUILDING JOINT

ISSUED: 07/05/2018

EXPIRES: 01/01/2019

REQUIRED INSPECTIONS

| | |
|------------------|---------------|
| T-Pole | Rough In |
| Piling | Vapor Barrier |
| Floor box | Insulation |
| In-Slab Plumbing | Pre-final |
| 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.
- * The developer shall be responsible for maintaining erosion and sediment control at the disturbed area.
- * Development must meet all aspects of Chapter 151 Flood Damage Prevention Ordinance including use and elevation.
- * A final elevation certificate will be required prior to issuance of a Certificate of Occupancy or a Certificate of Compliance in accordance with 151.41(C).
- * Per §153.082(B)(1)(c) Mechanical equipment, including HVAC equipment and LP Gas equipment shall not project into a minimum yard setback more than four (4) feet.
- * Zoning Final Inspection is required.
- * 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.
- * X-BRACING REQUIRED AS PER CODE R4603.6 AND AS NOTED ON STRUCTURAL DRAWINGS.

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: 7/5/2018

SET_17_CPI
Town of Kill Devil Hills 4400
PLANNING
Date / Time : 07/05/18 11:08
Payment : \$ 1,352.00
Receipt # : 542896
Check/Credit Card # :
Clerk : 981msnyd
Paid By :

April



Town of Kill Devil Hills

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

Planning and Inspection Department

| | |
|---|----------------------------|
| EL2018-054 | ELECTRICAL |
| PROJECT NAME: VERIZON ANTENNA | ISSUED: 07/23/2018 |
| SITE ADDRESS: ROW 1001 S CROATAN HWY Kill Devil Hillsl | EXPIRES: 01/19/2019 |

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

| | | |
|-----------------------------|---|---|
| GENERAL, UNLICENSED: | VERIZON WIRELESS 4435 WATERFRONT DR 100 Glenn Allen, VA 23060 804-892-0310 | License: 0000000 Expires: 03/01/2024 |
|-----------------------------|---|---|

PARCEL:

| | |
|--|-----------------------|
| PIN: ROW-7997 | Parcel Number: |
| Address: ROW 1001 S CROATAN HWY Kill Devil Hillsl | Zoning: |
| Addition: | Block: Lot(s): |
| Legal Description: ROW 1001 S CROATAN HWY | |

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

PROJECT DESCRIPTION: INSTALL ANTENNA AND ASSOCIATED EQUIPMENT ON UTILITY POLE

DETAILS

| Permit | |
|-------------------|----------------------|
| Name | Value |
| PURPOSE | Commercial Accessory |
| CONSTRUCTION COST | 5000.00 |
| OCCUPANCY TYPE | Business |

JUL 25 2018



EL2018-054

PROJECT NAME: VERIZON ANTENNA
SITE ADDRESS: ROW 1001 S CROATAN HWY Kill Devil Hills

ELECTRICAL

ISSUED: 07/23/2018

EXPIRES: 01/19/2019

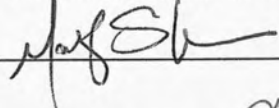
REQUIRED INSPECTIONS

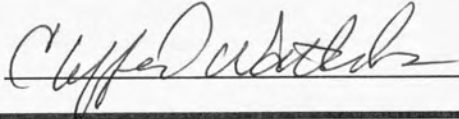
Final

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: 7-25-18

SET 17_CPI
Town of Kill Devil Hills 4400
PLANNING
Date / Time : 07/25/18 10:38
Payment : \$ 150.00
Receipt # : 544502
Check/Credit Card #: :
Clerk : 981msnyd
Paid By :



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

BJ2018-149

PROJECT NAME: Opus LLC
SITE ADDRESS: 100 HELGA ST E KILL DEVIL HILLS

BUILDING JOINT

ISSUED: 07/27/2018

EXPIRES: 01/23/2019

APPLICANT: OPUS LLC
3909 TARKLERIDGE RD
kitty hawk, nc 27949
252-489-0648

OWNER: OPUS LLC
3909 TARKLERIDGE RD
kitty hawk, nc 27949
252-489-0648

UNLIMITED BUILDING: KJ CONSTRUCTION & REMODELING
PO BOX 242
kitty hawk, nc 27949
252-207-6589

License: 59936
Expires: 12/31/2018

PARCEL:

PIN: 988513041146

Parcel Number: 000042000

Address: 100 HELGA ST E KILL DEVIL HILLS

Zoning:

Addition: ORVILLE BEACH AMENDED BLK 12

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

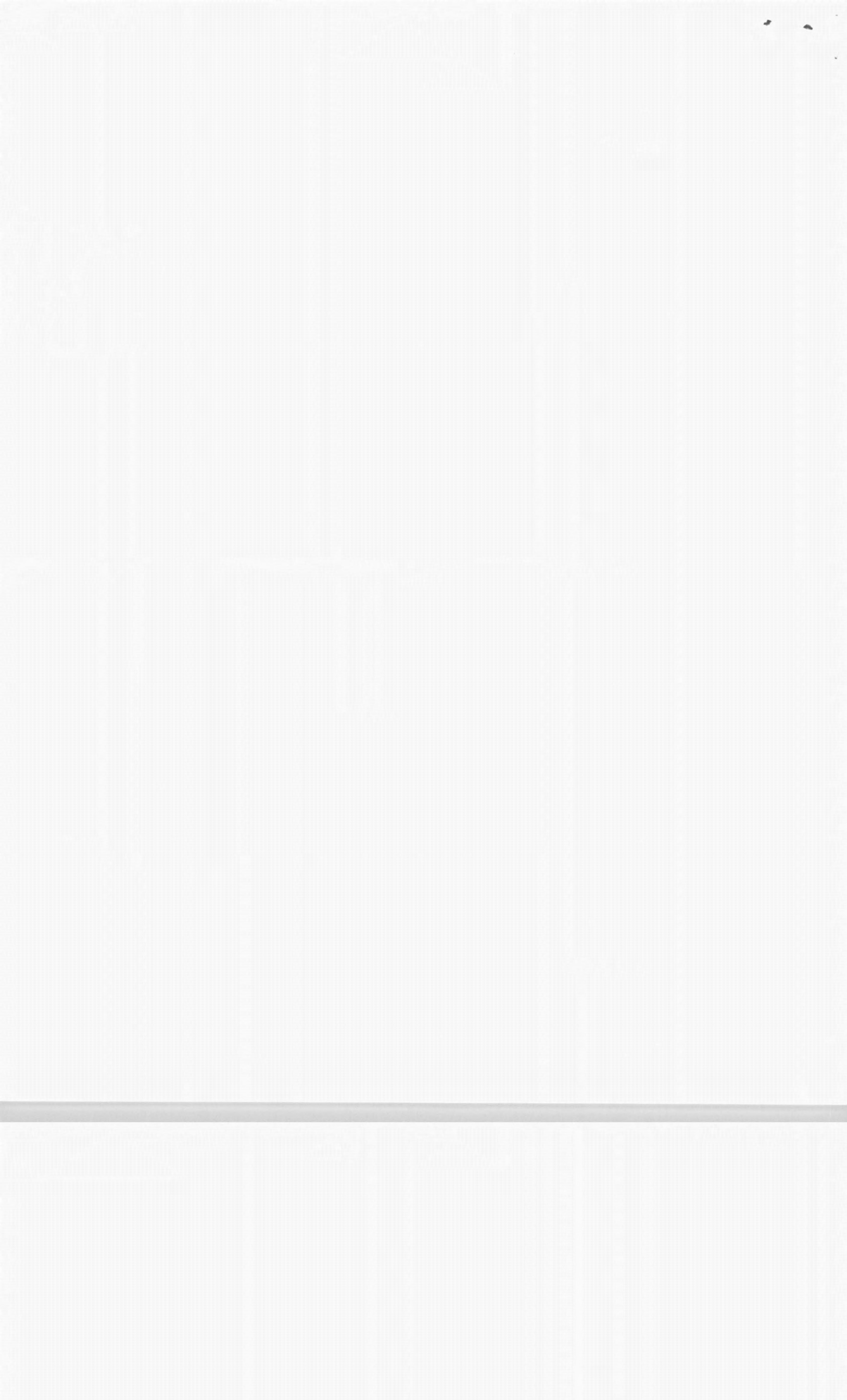
Legal Description:

| FEES: | Paid | Due | BUILDING AREA: | |
|-----------------------------|-------------------|---------------|--------------------------------|------------|
| Renovation/Remodel/Relocate | \$688.50 | \$0.00 | Open Decks | 2 EA |
| Res. Building Permit Fee | \$109.00 | \$0.00 | Remodel/Renovation | 1530 SQFT |
| Open Deck Fee | \$300.00 | \$0.00 | Residential Unheated (.40) | 205 Sq. Ft |
| Totals : | \$1,097.50 | \$0.00 | Residential Heated Space (.75) | 36 sq. Ft. |

PROJECT DESCRIPTION: Interior remodel, Deck repair/replacement, and replace existing flat roof with elevated hip roof. (New roof must meet all setbacks and an as built survey is required before a CO will be issued).

PAID
JUL 27 2018

TOWN OF
KILL DEVIL HILLS



BJ2018-149

PROJECT NAME: Opus LLC

SITE ADDRESS: 100 HELGA ST E KILL DEVIL HILLS

BUILDING JOINT

ISSUED: 07/27/2018

EXPIRES: 01/23/2019

DETAILS**Permit**

| Name | Value |
|--------------------------------|------------------------------|
| ZONING DISTRICT | C |
| FRONT YARD SETBACK | 30 |
| REAR YARD SETBACK | 20% Depth >30 |
| SIDE YARD SETBACK | 10 |
| STREET SIDE SETBACK | 15 |
| HEALTH DEPARTMENT PERMIT # | 27937 |
| # PARKING SPACES/BEDROOM | 8 |
| CAMA PERMIT | N |
| CAMA EXEMPTION | N |
| FLOOD ZONE | AE |
| BASE FLOOD ELEVATION | 9 |
| Proposed First Floor Elevation | 8.52 |
| PURPOSE | Commercial Repair/Remodel |
| CONSTRUCTION COST | 55000.00 |
| CULVERT | N |
| DRIVEWAY INVERT 2 | N |

REQUIRED INSPECTIONS

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

CONDITIONS

- * NOTICE: Call Public Services Department (252) 480-4080 before pouring driveway!
- * This permit becomes null and void if work or construction authorized is not commenced within 6 months or if construction or work is suspended for a period of 12 months at any time after work has started.
- * As-built survey will be required prior to Certificate of Occupancy or Certificate of Compliance.
- * Development must meet all aspects of Chapter 151 Flood Damage Prevention Ordinance including use and elevation.

BJ2018-149

PROJECT NAME: Opus LLC

SITE ADDRESS: 100 HELGA ST E KILL DEVIL HILLS

BUILDING JOINT

ISSUED: 07/27/2018

EXPIRES: 01/23/2019

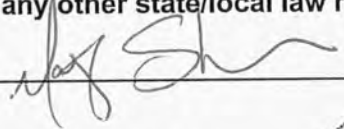
* THIS PROPERTY IS LOCATED IN A SPECIAL FLOOD HAZARD AREA.


1. All Special Flood Hazard Areas limit the use of enclosures below the lowest floor for parking, building access and limited storage only.
2. In the VE Zone, there shall be no alteration of the sand dunes which would increase potential flood damage.
3. In the VE Zone, there shall be no fill used for structural support.
4. Elevation Certificate will be required at time of application, 21 days from the establishment of the lowest floor and at construction completion.

DEVELOPER MUST OBTAIN ALL THE NECESSARY FEDERAL, STATE AND LOCAL PERMITS BEFORE THIS PERMIT CAN BE ISSUED.

- * Must comply with Wind Borne Debris requirements as defined in NCBC R301.2.1.2 and NCBC 1609.2.
- * Construction must meet all aspect of Chapter 153 Zoning including lot coverage and setbacks.
- * Zoning Final Inspection is required.
- * Substantial Improvement: All design aspects of the submitted floodproofing certificate will be required to be verified before a certificate of compliance is issued.
- * Parking shall be brought into compliance with the approved site plan dated 8/16/1988. Contact the planning department prior to striping. Suggest adding a "additional parking in rear" sign at the south east corner of the building.

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: 7/27/18

SET_17_CP1
Town of Kill Devil Hills 4400
PLANNING
Date / Time : 07/30/18 10:43
Payment : \$ 1,097.50
Receipt # : 54970
Check/Credit Card #: 091716
Clerk : 981msnyd
Paid By : KT CONSTRUCTION



Town of Kill Devil Hills

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

PAID
JUL 19 2018

TOWN OF
KILL DEVIL HILLS

Planning and Inspection Department

MC2018-262

PROJECT NAME:

SITE ADDRESS: 700 W First St Kill Devil Hills

MECHANICAL

ISSUED: 07/18/2018

EXPIRES: 01/14/2019

APPLICANT: Condit McGeown
1009 Creek Rd.
kitty hawk, nc 27949
252-722-3401

OWNER: Condit McGeown
1009 Creek Rd.
kitty hawk, nc 27949
252-722-3401

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: 988413140426AP

Parcel Number: 008075081

Address: 700 W First St Kill Devil Hills

Zoning:

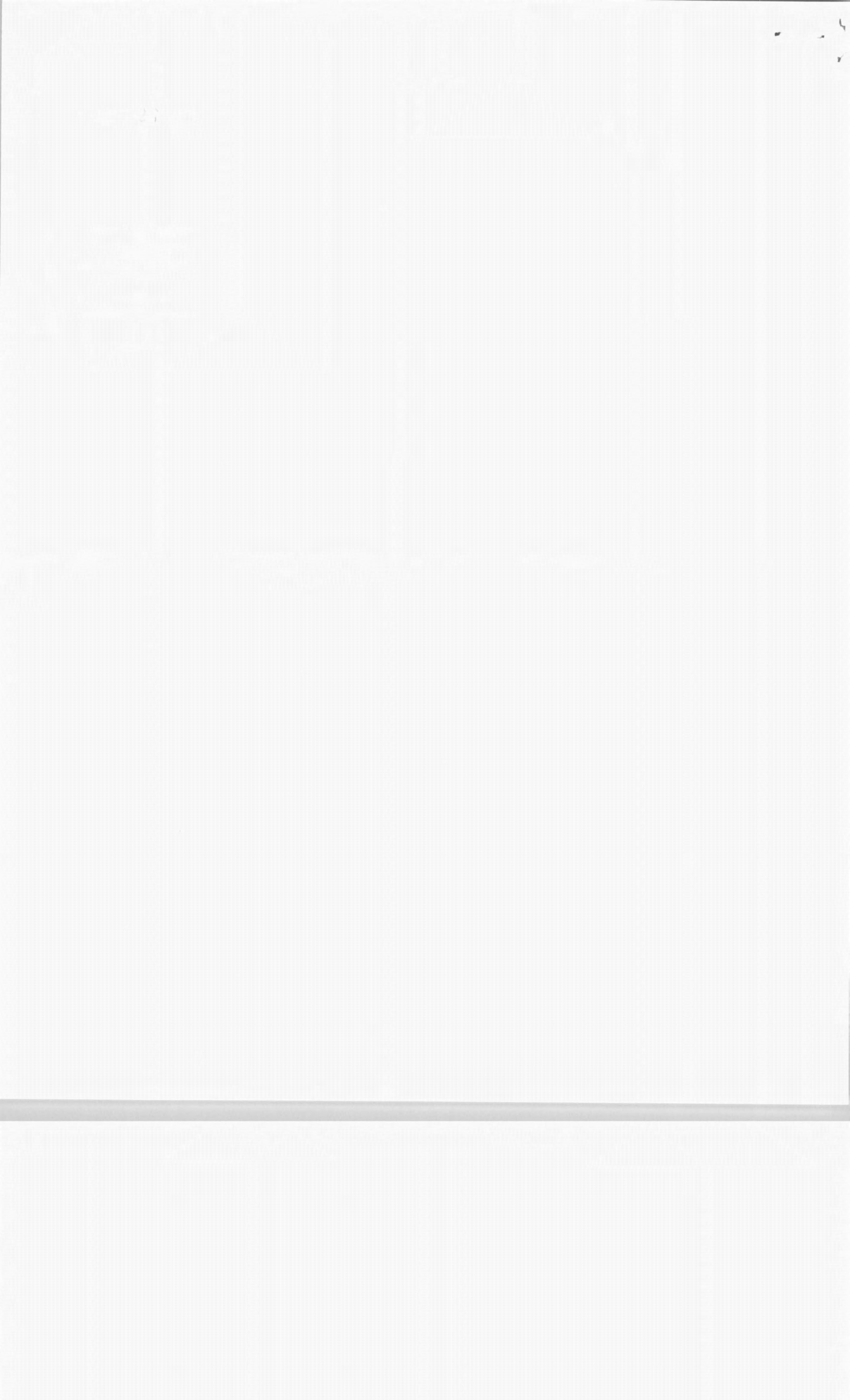
Addition:

Block: 0 **Lot(s):** UT 5 BLDG I

Legal Description:

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

PROJECT DESCRIPTION: Replace HVAC



MC2018-262

PROJECT NAME:

SITE ADDRESS: 700 W First St Kill Devil Hills

MECHANICAL

ISSUED: 07/18/2018

EXPIRES: 01/14/2019

DETAILS

Permit

| Name | Value |
|----------------------|-------------------------------|
| PURPOSE | Residential Repair/Remodel |
| CONSTRUCTION COST | 5229.00 |
| CONSTRUCTION TYPE | V |
| FLOOD ZONE | AE |
| BASE FLOOD ELEVATION | 9 |
| NATURAL GAS SIGNOFF | N |
| OCCUPANCY TYPE | Residential |

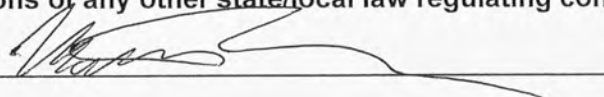
REQUIRED INSPECTIONS

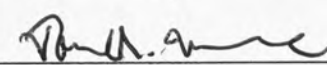
Final

CONDITIONS

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

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

Issued By: 

Contractor or Authorized Agent:  Date: 7-19-18

SET_17_CPI
Town of Kill Devil Hills 4400
PLANNING
Date / Time : 07/19/18 09:28
Payment : \$ 150.00
Receipt # : 544100
Check/Credit Card #: 41554
Clerk : 981msnyd
Paid By : OUTER BANKS HEATING



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

| | |
|---|----------------------------|
| MC2018-244 | MECHANICAL |
| PROJECT NAME: MOONEY HVAC | ISSUED: 07/03/2018 |
| SITE ADDRESS: 804 MEMORIAL BLVD S KILL DEVIL HILLS | EXPIRES: 12/30/2018 |

| | |
|---|---|
| APPLICANT: MOONEY, ERNEST KEITH 1100 DISPATCH RD Quinton, VA 23141 | OWNER: MOONEY, ERNEST KEITH 1100 DISPATCH RD Quinton, VA 23141 |
|---|---|

| | | |
|--------------------|--|---|
| MECHANICAL: | ALL IN ONE MECHANICAL PO BOX 3392 KITTY HAWK, NC 27949 491-5334 | License: 27675 Expires: 12/31/2018 |
|--------------------|--|---|

PARCEL:

| | |
|--|---|
| PIN: 98830899011009 | Parcel Number: 008147201 |
| Address: 804 MEMORIAL BLVD S KILL DEVIL HILLS | Zoning: |
| Addition: | Block: 0 Lot(s): UNIT 2-A |
| Legal Description: | |

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

PROJECT DESCRIPTION: HVAC REPLACEMENT

PAID

JUL - 3 2018

TOWN OF
KILL DEVIL HILLS

MC2018-244

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

MECHANICAL

ISSUED: 07/03/2018

EXPIRES: 12/30/2018

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 | Residential |

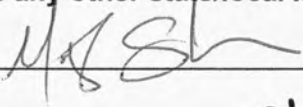
REQUIRED INSPECTIONS

Final

CONDITIONS

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Issued By: 

Contractor or Authorized Agent: J. W. Francis Date: 6-3-18

SET_17_CPI
Town of Kill Devil Hills 4400
PLANNING
Date / Time : 07/03/18 11:08
Payment : \$ 150.00
Receipt # : 542852
Check/Credit Card #: 4769
Clerk : 981msnyd
Paid By : ALL-IN-ONE MECHANIC



Town of Kill Devil Hills

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

Planning and Inspection Department

SG2018-026

PROJECT NAME: Five Guys
SITE ADDRESS: 1203 CROATAN HWY S KILL DEVIL HILLS

SIGN

ISSUED: 07/05/2018

EXPIRES: 01/01/2019

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

OWNER: GEORGE & CATHERINE DROSOS
10910 Watermill
Oakton, VA 22124

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

License: LEGACY UNKNOWN
Expires: 12/31/2018

PARCEL:

PIN: 988312963918

Parcel Number: 004327000

Address: 1203 CROATAN HWY S KILL DEVIL HILLS

Addition: KILL DEVIL HILLS REALTY CORP

Zoning:

Block: 6

Lot(s): PT 4, PT 5,
14,15

Legal Description:

| FEES: | Paid | Due |
|-----------------|-----------------|---------------|
| Sign Permit Fee | \$300.00 | \$0.00 |
| Totals : | \$300.00 | \$0.00 |

PROJECT DESCRIPTION: 3 signs on the building

PAID

JUL 11 2018

TOWN OF
KILL DEVIL HILLS

SG2018-026

PROJECT NAME: Five Guys
SITE ADDRESS: 1203 CROATAN HWY S KILL DEVIL HILLS

SIGN

ISSUED: 07/05/2018

EXPIRES: 01/01/2019

DETAILS

Permit

| Name | Value |
|------------------------------|----------------------|
| # OF SIGNS | 3 |
| SIGN - WALL PERMITTED (SQFT) | 176.00 |
| SIGN- WALL PROPOSED (SQ FT) | 124.00 |
| ZONING DISTRICT | C |
| PURPOSE | Commercial Accessory |
| CONSTRUCTION COST | 6000.00 |
| FLOOD ZONE | AE |

REQUIRED INSPECTIONS

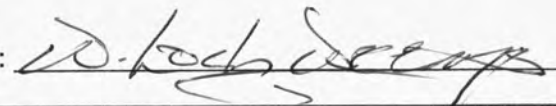
Final

CONDITIONS

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

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: 7-11-18

SET_17_CPI
Town of Kill Devil Hills 4400
PLANNING
Date / Time : 07/12/18 09:16
Payment : \$ 300.00
Receipt # : 543355
Check/Credit Card #: 220250
Clerk : 981rfa1
Paid By : WEEMS, W L



Town of Kill Devil Hills

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

Planning and Inspection Department

SG2018-027

PROJECT NAME: Coastal NC Holdings LLC
SITE ADDRESS: 3210 N. Croatan Hwy, Building 1B Kill Devil Hills

SIGN

ISSUED: 07/19/2018

EXPIRES: 01/15/2019

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

OWNER: Coastal NC Holdings, LLC
PO Box 1446
kitty hawk, nc 27949
252-573-9547

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

License: LEGACY UNKNOWN
Expires: 12/31/2018

PARCEL:

PIN: 987516946195

**Parcel
Number:**

Address: 3210 N. Croatan Hwy, Building 1B Kill Devil Hills

Zoning:

Addition:

Block:

Lot(s):

Legal Description: 3210

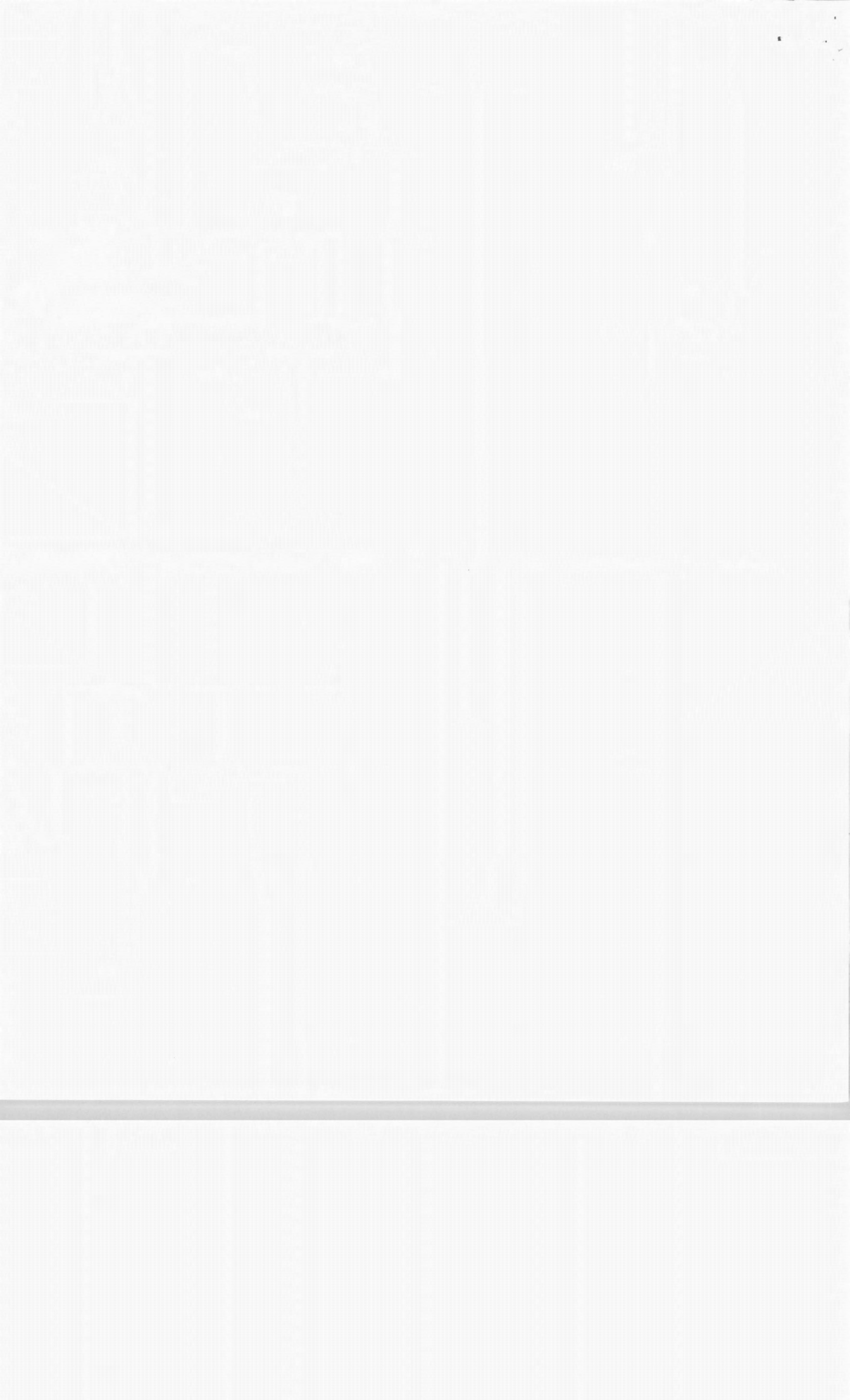
| FEES: | Paid | Due |
|-----------------|-----------------|---------------|
| Sign Permit Fee | \$100.00 | \$0.00 |
| Totals : | \$100.00 | \$0.00 |

PROJECT DESCRIPTION: Add to free-standing sign

PAID

JUL 25 2018

TOWN OF
KILL DEVIL HILLS



SG2018-027

PROJECT NAME: Coastal NC Holdings LLC
SITE ADDRESS: 3210 N. Croatan Hwy, Building 1B Kill Devil Hills

SIGN

ISSUED: 07/19/2018

EXPIRES: 01/15/2019

DETAILS

Permit

| Name | Value |
|---------------------------------------|----------------------|
| # OF SIGNS | 1 |
| SIGN - FREE STANDING PERMITTED (SQFT) | 64.00 |
| SIGN - FREE STANDING PROPOSED (SQ FT) | 24.00 |
| ZONING DISTRICT | C |
| PURPOSE | Commercial Accessory |
| CONSTRUCTION COST | 1050.00 |
| FLOOD ZONE | AE |

REQUIRED INSPECTIONS

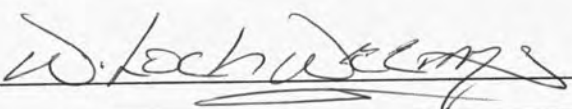
Final

CONDITIONS

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

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

Issued By: 

Contractor or Authorized Agent:  Date: 7-25-18

SET_17_CPI
Town of Kill Devil Hills 4400
PLANNING
Date / Time : 07/25/18 14:19
Payment : \$ 100.00
Receipt # : 544565
Check/Credit Card #: 923966
Clerk : 981msnyd
Paid By : ADLIGTH SIGNS



Town of Kill Devil Hills

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

Planning and Inspection Department

EL2018-055

PROJECT NAME: VERIZON ANTENNA
SITE ADDRESS: ROW 1615 WRIGHTSVILLE BLVD KILL DEVIL HILLS

ELECTRICAL

ISSUED: 07/23/2018

EXPIRES: 01/19/2019

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

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

GENERAL, UNLICENSED:

VERIZON WIRELESS
 4435 WATERFRONT DR 100
 Glenn Allen, VA 23060
 804-892-0310

License: 0000000
Expires: 03/01/2024

PARCEL:

PIN: ROW-6170

Parcel Number:

Address: ROW 1615 WRIGHTSVILLE BLVD KILL DEVIL HILLS

Zoning:

Addition:

Block:

Lot(s):

Legal Description: ROW 1615 WRIGHTSVILLE BLVD

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

PROJECT DESCRIPTION: INSTALL ANTENNA AND ASSOCIATED EQUIPMENT ON UTILITY POLE

DETAILS

Permit

| Name | Value |
|-------------------|----------------------|
| PURPOSE | Commercial Accessory |
| CONSTRUCTION COST | 5000.00 |
| OCCUPANCY TYPE | Business |

JUL 25 2018



EL2018-055

PROJECT NAME: VERIZON ANTENNA
SITE ADDRESS: ROW 1615 WRIGHTSVILLE BLVD KILL DEVIL HILLS

ELECTRICAL

ISSUED: 07/23/2018

EXPIRES: 01/19/2019

REQUIRED INSPECTIONS

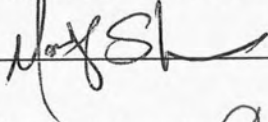
Final

CONDITIONS

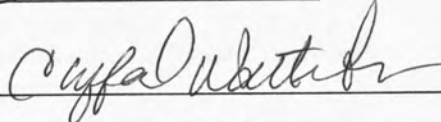
* This permit becomes null and void if work or construction authorized is not commenced within 6 months or if construction or work is suspended for a period of 12 months at any time after work has started.

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Issued By: _____



Contractor or Authorized Agent: _____



Date: _____

7.25-18

SET_17_CPI
Town of Kill Devil Hills 4400
PLANNING
Date / Time : 07/25/18 10:38
Payment : \$ 150.00
Receipt # : 544503
Check/Credit Card # :
Clerk : 981msnyd
Paid By :



Town of Kill Devil Hills

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

Planning and Inspection Department

EL2018-056

PROJECT NAME: VERIZON ANTENNA
SITE ADDRESS: ROW, 302 S CROATAN HWY KILL DEVIL HILLS

ELECTRICAL

ISSUED: 07/23/2018

EXPIRES: 01/19/2019

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

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

GENERAL, UNLICENSED: VERIZON WIRELESS
4435 WATERFRONT DR 100
Glenn Allen, VA 23060
804-892-0310

License: 0000000
Expires: 03/01/2024

PARCEL:

PIN: ROW-5741

**Parcel
Number:**

Address: ROW, 302 S CROATAN HWY KILL DEVIL HILLS

Zoning:

Addition:

Block:

Lot(s):

Legal Description: ROW, 302 S CROATAN HWY

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

PROJECT DESCRIPTION: INSTALL ANTENNA AND ASSOCIATED EQUIPMENT ON UTILITY POLE

DETAILS

Permit

| Name | Value |
|-------------------|----------------------|
| PURPOSE | Commercial Accessory |
| CONSTRUCTION COST | 5000.00 |
| OCCUPANCY TYPE | Business |

JUL 25 2018

EL2018-056

PROJECT NAME: VERIZON ANTENNA

SITE ADDRESS: ROW, 302 S CROATAN HWY KILL DEVIL HILLS

ELECTRICAL

ISSUED: 07/23/2018

EXPIRES: 01/19/2019

REQUIRED INSPECTIONS

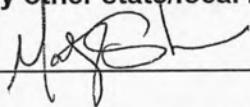
Final

CONDITIONS

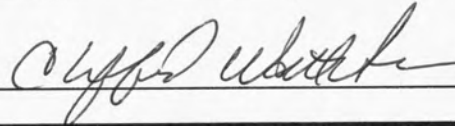
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Issued By: _____



Contractor or Authorized Agent: _____



Date: _____

7-25-18

SET 17 CPI
Town of Kill Devil Hills 4400
PLANNING
Date / Time : 07/25/18 10:39
Payment : \$ 150.00
Receipt # : 544504
Check/Credit Card #: 884751
Clerk : 981msnyd
Paid By : MATTERION, CLIFFORD



Town of Kill Devil Hills

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

Planning and Inspection Department

EL2018-053

PROJECT NAME: VERIZON ANTENNA
SITE ADDRESS: ROW 306 N VA DARE TRL KILL DEVIL HILLS

ELECTRICAL

ISSUED: 07/23/2018

EXPIRES: 01/19/2019

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

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

GENERAL, UNLICENSED: VERIZON WIRELESS
4435 WATERFRONT DR 100
Glenn Allen, VA 23060
804-892-0310

License: 0000000
Expires: 03/01/2024

PARCEL:

PIN: ROW-8447

**Parcel
Number:**

Address: ROW 306 N VA DARE TRL KILL DEVIL HILLS

Zoning:

Addition:

Block:

Lot(s):

Legal Description: ROW 306 N VA DARE TRL

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

PROJECT DESCRIPTION: INSTALL ANTENNA AND ASSOCIATED EQUIPMENT ON UTILITY POLE

DETAILS

Permit

| Name | Value |
|-------------------|----------------------|
| PURPOSE | Commercial Accessory |
| CONSTRUCTION COST | 5000.00 |
| OCCUPANCY TYPE | Business |

JUL 25 2018

EL2018-053

PROJECT NAME: VERIZON ANTENNA

SITE ADDRESS: ROW 306 N VA DARE TRL KILL DEVIL HILLS

ELECTRICAL

ISSUED: 07/23/2018

EXPIRES: 01/19/2019

REQUIRED INSPECTIONS

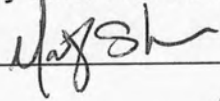
Final

CONDITIONS

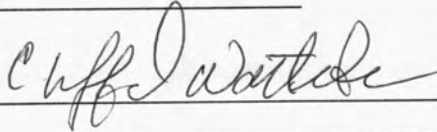
* This permit becomes null and void if work or construction authorized is not commenced within 6 months or if construction or work is suspended for a period of 12 months at any time after work has started.

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Issued By: _____



Contractor or Authorized Agent: _____



Date: _____

7-25-18

SET 17_CPI
Town of Kill Devil Hills 4400
PLANNING
Date / Time : 07/25/18 10:37
Payment : \$ 150.00
Receipt # : 544501
Check/Credit Card # :
Clerk : 981msnyd
Paid By :



Town of Kill Devil Hills

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

Planning and Inspection Department

EL2018-052

PROJECT NAME: VERIZON ANTENNA
SITE ADDRESS: ROW 1300 N VA DARE TRL KILL DEVIL HILLS

ELECTRICAL

ISSUED: 07/23/2018

EXPIRES: 01/19/2019

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

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

GENERAL, UNLICENSED: VERIZON WIRELESS
4435 WATERFRONT DR 100
Glenn Allen, VA 23060
804-892-0310

License: 0000000
Expires: 03/01/2024

PARCEL:

PIN: ROW-3400

Parcel Number:

Address: ROW 1300 N VA DARE TRL KILL DEVIL HILLS

Zoning:

Addition:

Block:

Lot(s):

Legal Description: ROW 1300 N VA DARE TRL

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

PROJECT DESCRIPTION: INSTALL ANTENNA AND ASSOCIATED EQUIPMENT ON UTILITY POLE

DETAILS

Permit

| Name | Value |
|-------------------|----------------------|
| PURPOSE | Commercial Accessory |
| CONSTRUCTION COST | 5000.00 |
| OCCUPANCY TYPE | Business |

JUL 25 2018

EL2018-052

PROJECT NAME: VERIZON ANTENNA

SITE ADDRESS: ROW 1300 N VA DARE TRL KILL DEVIL HILLS

ELECTRICAL

ISSUED: 07/23/2018

EXPIRES: 01/19/2019

REQUIRED INSPECTIONS

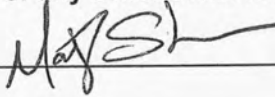
Final

CONDITIONS

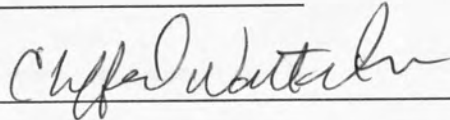
* This permit becomes null and void if work or construction authorized is not commenced within 6 months or if construction or work is suspended for a period of 12 months at any time after work has started.

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Issued By: _____



Contractor or Authorized Agent: _____



Date: _____

7-25-18

SET_17_CPI
Town of Kill Devil Hills 4400
PLANNING
Date / Time : 07/25/18 10:36
Payment : \$ 150.00
Receipt # : 544500
Check/Credit Card # :
Clerk : 981msnyd
Paid By :



Town of Kill Devil Hills

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

Planning and Inspection Department

EL2018-051

PROJECT NAME: VERIZON ANTENNA
SITE ADDRESS: ROW 1708 N VA DARE TRL KILL DEVIL HILLS

ELECTRICAL

ISSUED: 07/23/2018

EXPIRES: 01/19/2019

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

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

GENERAL, UNLICENSED: VERIZON WIRELESS
4435 WATERFRONT DR 100
Glenn Allen, VA 23060
804-892-0310

License: 0000000
Expires: 03/01/2024

PARCEL:

PIN: ROW-7285

Parcel Number:

Address: ROW 1708 N VA DARE TRL KILL DEVIL HILLS

Zoning:

Addition:

Block:

Lot(s):

Legal Description: ROW 1708 N VA DARE TRL

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

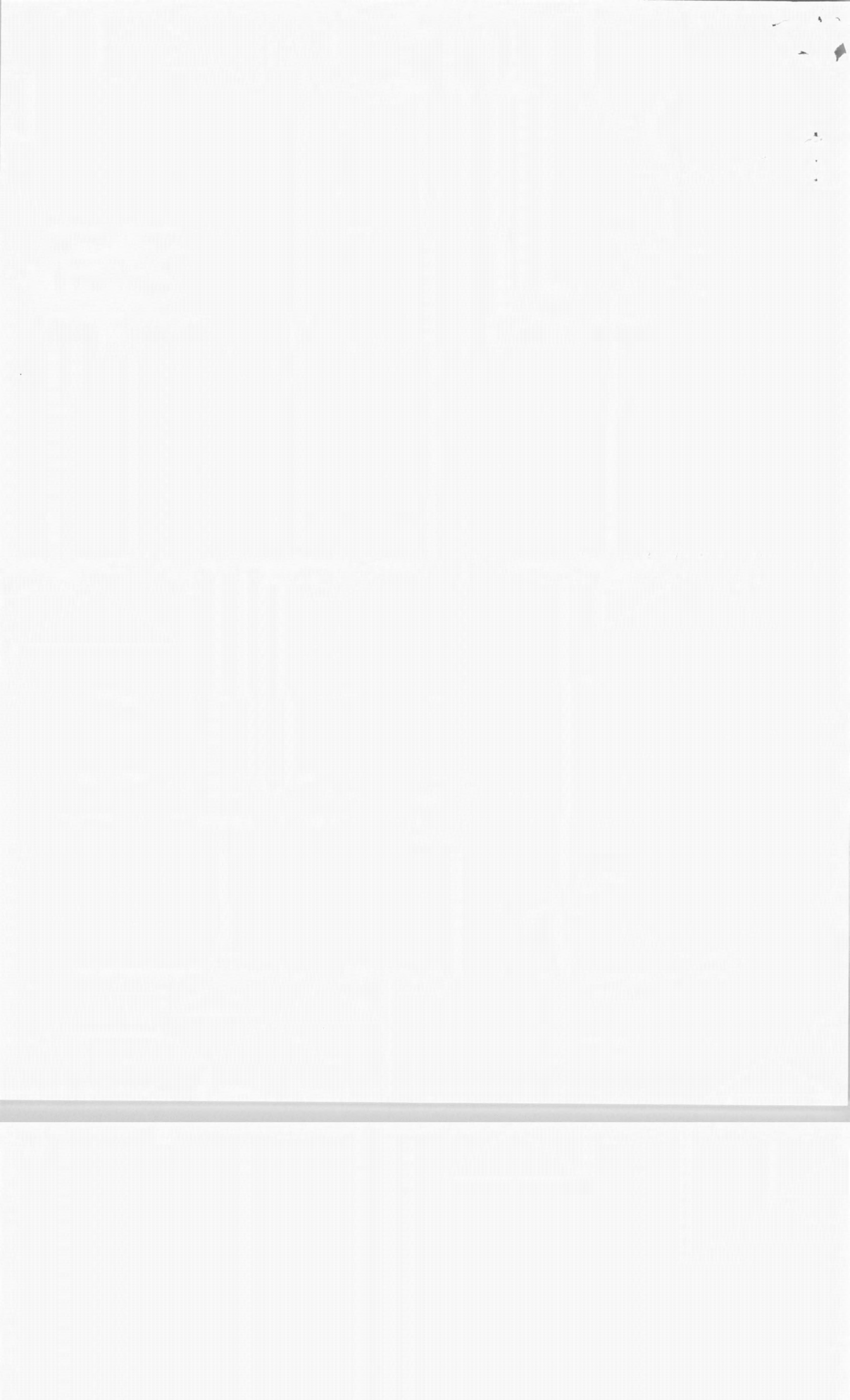
PROJECT DESCRIPTION: INSTALL ANTENNA AND ASSOCIATED EQUIPMENT ON UTILITY POLE

DETAILS

Permit

| Name | Value |
|-------------------|----------------------|
| PURPOSE | Commercial Accessory |
| CONSTRUCTION COST | 5000.00 |
| OCCUPANCY TYPE | Business |

JUL 25 2018



EL2018-051

PROJECT NAME: VERIZON ANTENNA

SITE ADDRESS: ROW 1708 N VA DARE TRL KILL DEVIL HILLS

ELECTRICAL

ISSUED: 07/23/2018

EXPIRES: 01/19/2019

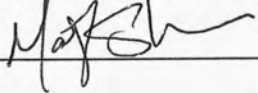
REQUIRED INSPECTIONS

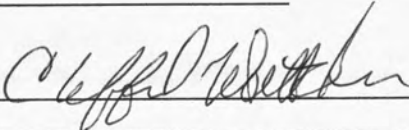
Final

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: 7-25-18

SET 17.CPI
Town of Kill Devil Hills 4400
PLANNING
Date / Time : 07/25/18 10:36
Payment : \$ 150.00
Receipt # : 54499
Check/Credit Card # :
Clerk : 981msnyd
Paid By :



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

ELECTRICAL
ISSUED: 07/23/2018
EXPIRES: 01/19/2019

EL2018-050

PROJECT NAME: VERIZON ANTENNA
SITE ADDRESS: ROW 2407 N CROATAN HWY KILL DEVIL HILLS

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

License: 0000000
Expires: 03/01/2024

GENERAL, UNLICENSED: VERIZON WIRELESS
4435 WATERFRONT DR 100
Glenn Allen, VA 23060
804-892-0310

PARCEL: PIN: ROW-5645 Parcel Number:
Address: ROW 2407 N CROATAN HWY KILL DEVIL HILLS Zoning: Block: Lot(s):
Addition:
Legal Description: ROW 2407 N CROATAN HWY

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

PROJECT DESCRIPTION: INSTALL ANTENNA & ASSOCIATED EQUIPMENT ON UTILITY POLE

DETAILS

| Permit Name | Value |
|-------------------|----------------------|
| PURPOSE | Commercial Accessory |
| CONSTRUCTION COST | 5000.00 |
| OCCUPANCY TYPE | Business |

JUL 2 2018



EL2018-050

PROJECT NAME: VERIZON ANTENNA
SITE ADDRESS: ROW 2407 N CROATAN HWY KILL DEVIL HILLS

ELECTRICAL

ISSUED: 07/23/2018

EXPIRES: 01/19/2019

REQUIRED INSPECTIONS

Final

CONDITIONS

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Issued By: _____

Marty Shaw

Contractor or Authorized Agent: _____

Coffey Watter

Date: _____

7-25-18

SET_17_CPI
Town of Kill Devil Hills 4400
PLANNING
Date / Time : 07/25/18 10:35
Payment : \$ 150.00
Receipt # : 544498
Check/Credit Card # :
Clerk : 981msnyd
Paid By :



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

| | |
|---|----------------------------|
| MC2018-254 | MECHANICAL |
| PROJECT NAME: OUTER BANKS PRESBYTERIAN HVAC | ISSUED: 07/10/2018 |
| SITE ADDRESS: 907 CROATAN HWY S KILL DEVIL HILLS | EXPIRES: 01/06/2019 |

APPLICANT: OUTER BANKS PRESBYTERIAN
PO BOX 2199
KILL DEVIL HILLS, NC 27948

OWNER: OUTER BANKS PRESBYTERIAN
PO BOX 2199
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: 988308886310

Parcel Number: 008529000

Address: 907 CROATAN HWY S KILL DEVIL HILLS

Addition: KILL DEVIL HILLS REALTY CORP

Zoning:

Block: 3

Lot(s): 1-4 & 7-10
PT OF 5

Legal Description:

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

PROJECT DESCRIPTION: HVAC REPLACEMENT

PAID

JUL 10 2018

TOWN OF
KILL DEVIL HILLS

101 10 2013

MC2018-254

PROJECT NAME: OUTER BANKS PRESBYTERIAN HVAC
SITE ADDRESS: 907 CROATAN HWY S KILL DEVIL HILLS

MECHANICAL

ISSUED: 07/10/2018

EXPIRES: 01/06/2019

DETAILS

Permit

| Name | Value |
|----------------------|------------------------------|
| PURPOSE | Commercial Repair/Remodel |
| CONSTRUCTION COST | 2551.80 |
| CONSTRUCTION TYPE | V |
| FLOOD ZONE | AE |
| BASE FLOOD ELEVATION | 8 |
| NATURAL GAS SIGNOFF | N |
| OCCUPANCY TYPE | Assembly |

REQUIRED INSPECTIONS

Final

CONDITIONS

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Issued By: _____

Contractor or Authorized Agent: _____ Date: 7-10-18

SET_17.CPI
Town of Kill Devil Hills 4400
PLANNING
Date / Time : 07/10/18 13:50
Payment : \$ 150.00
Receipt # : 543278
Check/Credit Card #: 41530
Clerk : 981rfa1
Paid By : OUTER BANK HEATING



Town of Kill Devil Hills

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

PAID

JUL - 3 2018

Planning and Inspection Department

TOWN OF
KILL DEVIL HILLS

MC2018-246

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

MECHANICAL

ISSUED: 07/03/2018

EXPIRES: 12/30/2018

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

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

MECHANICAL: Trademark Heating & Cooling
PO Box 2554
Kill Devil Hills, NC 27948

License: 31311
Expires: 12/31/2019

PARCEL:

PIN: 989309154444

Parcel Number: 008235000

Address: 1701 VA DARE TRL S KILL DEVIL HILLS

Addition: OCEAN ACRES INC

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

Legal Description:

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

PROJECT DESCRIPTION: HVAC REPLACEMENT

10-8-

10-8-

MC2018-246

PROJECT NAME: RAMADA HVAC

SITE ADDRESS: 1701 VA DARE TRL S KILL DEVIL HILLS

MECHANICAL

ISSUED: 07/03/2018

EXPIRES: 12/30/2018

DETAILS

Permit

| Name | Value |
|----------------------|------------------------------|
| PURPOSE | Commercial Repair/Remodel |
| CONSTRUCTION COST | 6000.00 |
| CONSTRUCTION TYPE | III |
| FLOOD ZONE | VE |
| BASE FLOOD ELEVATION | 11 |
| NATURAL GAS SIGNOFF | N |
| OCCUPANCY TYPE | Residential |

REQUIRED INSPECTIONS

Final

CONDITIONS

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Issued By: Marty Shaw

Contractor or Authorized Agent: Barbara Keiser Date: 7/3/18

SET_17_CPI
Town of Kill Devil Hills 4400
PLANNING
Date / Time : 07/03/18 11:07
Payment : \$ 150.00
Receipt # : 542851
Check/Credit Card #: 2643
Clerk : 981msnyd
Paid By : TRADEMARK HEATING &



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

MC2018-237

PROJECT NAME:

SITE ADDRESS: 801 S Croatan Hwy Kill Devil Hills

MECHANICAL

ISSUED: 07/02/2018

EXPIRES: 12/29/2018

APPLICANT: QUALITY OIL COMPANY LLC
1540 SILAS CREEK PARKWAY
WINSTON-SALEM, NC 27127

OWNER: QUALITY OIL COMPANY LLC
1540 SILAS CREEK PARKWAY
WINSTON-SALEM, NC 27127

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

License: 13056
Expires: 12/31/2018

PARCEL:

PIN: 988308883768

Parcel Number: 004316000

Address: 801 S Croatan Hwy Kill Devil Hills

Addition: KILL DEVIL HILLS REALTY CORP

Zoning:

Block: 2 **Lot(s):** 1,9,10

Legal Description:

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

PROJECT DESCRIPTION: Replace HVAC

JUL - 2 2018



MC2018-237

PROJECT NAME:

SITE ADDRESS: 801 S Croatan Hwy Kill Devil Hills

MECHANICAL

ISSUED: 07/02/2018

EXPIRES: 12/29/2018

DETAILS

Permit

| Name | Value |
|----------------------|-------------------------------|
| PURPOSE | Residential Repair/Remodel |
| CONSTRUCTION COST | 5000.00 |
| 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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I hereby certify that I have read and examined this application and know the same to be true and correct. All provisions of Laws and Ordinances governing this type of work will be complied with whether specified herein or not. The granting of a permit does not presume to give authority to violate or cancel the provisions of any other state/local law regulating construction or the performance of construction.

Issued By: 

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

SET_17_CPI
Town of Kill Devil Hills 4400
PLANNING
Date / Time : 07/02/18 14:08
Payment : \$ 150.00
Receipt # : 542825
Check/Credit Card # :
Clerk : 981msnyd
Paid By :



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

| | |
|---|----------------------------|
| MC2018-242 | MECHANICAL |
| PROJECT NAME: | ISSUED: 07/02/2018 |
| SITE ADDRESS: 405 S Virginia Dare Trl Kill Devil Hills | EXPIRES: 12/29/2018 |

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

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

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

License: 13056
Expires: 12/31/2018

PARCEL:

PIN: 988420809320L1

Parcel Number: 008118000

Address: 405 S Virginia Dare Trl Kill Devil Hills

Addition: SUBDIVISION - NONE

Zoning:

Block: 0

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

Legal Description:

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

PROJECT DESCRIPTION: Replace HVAC

JUL - 2 2018

MC2018-242

PROJECT NAME:

SITE ADDRESS: 405 S Virginia Dare Trl Kill Devil Hills

MECHANICAL

ISSUED: 07/02/2018

EXPIRES: 12/29/2018

DETAILS

Permit

| Name | Value |
|----------------------|-------------------------------|
| PURPOSE | Residential Repair/Remodel |
| CONSTRUCTION COST | 3445.00 |
| 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: 7/2/18

SET_17_CPI
Town of Kill Devil Hills 4400
PLANNING
Date / Time : 07/02/18 14:12
Payment : \$ 150.00
Receipt # : 542830
Check/Credit Card #: 53345
Clerk : 981msnyd
Paid By : R A HOY HEATING & A