



**Town of Kitty Hawk, NC**  
 101 Veterans Memorial Drive  
 Kitty Hawk, NC 27949  
 Phone: (252) 261-3552

**PERMIT**

Permit NO. **17755**  
 Permit Type: Residential  
 Work Classification: [Permit Type]  
 Permit Status: Pending

Issue Date: 8/1/2018

Expires: 1/28/2019  
 Main Permit: Main Permit

**Project Address**  
 307 Woodard Road  
 Lot

**Zoning**  
 BR-1  
**Block**

**Subdivision**  
 WOODARD ACRES  
**PIN**  
 987507682108

**Flood Zone**  
 X

**Constuction Type**  
 Pool

**Building Code**  
 BLDG2012

**Owner Information**  
 JONATHAN ST LEGER

**Address**  
 307 WOODARD RD  
 KITTY HAWK NC 27949

**Phone**

**Applicant Information**  
 Jonathan St. Leger

**Address**  
 307 Woodard Road  
 Kitty Hawk, NC 27949

**Phone**  
 252-202-6918

<b>Contractor(s)</b>	<b>Phone</b>	<b>Contractor Type</b>	<b>License Number</b>	<b>Construction Cost:</b>	<u>20000.00</u>
Owner	000-000-0000	General	00000	<b>Unheated Sq. Feet</b>	<u>0.00</u>
TBD	000-000-0000	Electrical	00000	<b>Total Sq. Feet:</b>	<u>0.00</u>

**Building Comments:**

**Description of Work: Install 14 x 33 in-ground pool**

Permit Cost - \$230.00

**Planning Conditions:**

Flood Zone-Shaded X; Map#-3720987500J; Effective-09/20/2006; An As-Built Survey is required prior to final inspection. See Zoning Permit for additional requirements

The work authorized by this permit is to be performed in accordance with the applicable Kitty Hawk Zoning Restrictions and with the Laws Governing Building Construction in the State of North Carolina and ordinances adopted by the Town of Kitty Hawk.  
 Any change in the work as specified is subject to prior approval of the Building Inspector.

\_\_\_\_\_  
**Owner / Applicant / Contractor / Agent** **Date**

\_\_\_\_\_  
**Building Official** **Date**



**Town of Kitty Hawk, NC**  
 101 Veterans Memorial Drive  
 Kitty Hawk, NC 27949  
 Phone: (252) 261-3552

**PERMIT**

Permit NO. **17876**  
 Permit Type: Commercial  
 Work Classification: [Permit Type]  
 Permit Status: Pending

Issue Date: 8/1/2018

Expires: 1/28/2019  
 Main Permit: Main Permit

**Project Address**

5300 N Croatan Highway  
 Lot

**Zoning**

BC-3  
 Block

**Subdivision**

SUBDIVISION - NONE  
 PIN  
 986720905634

**Flood Zone**

AE

**Constuction Type**

Repair/Replace

**Building Code**

BLDG2012

**Owner Information**

Mildred Hill Roughton C/O Home Depot USA

**Address**

P O Box 105842 Tax Department  
 #3650  
 Atlanta GA 30348

**Phone**

252-261-4115

**Applicant Information**

North American Roofing Services, Inc.

**Address**

14025 Riveredge Drive #600  
 Tampa, Florida 33637

**Phone**

813-773-1418

Contractor(s)	Phone	Contractor Type	License Number	Construction Cost:	Unheated Sq. Feet	Total Sq. Feet:
North American Roofing Service, Inc.	828-687-7767	General	37574	357669.99	0.00	0.00

**Building Comments:**

**Description of Work: Replace roof system membrane per manufacturers specifications**

Permit Cost - \$1835.00

**Planning Conditions:**

Flood Zone-AE, Elevation-8.3'+1'=9.3; Map#-3720986700J; Effective-09/20/2006

The work authorized by this permit is to be performed in accordance with the applicable Kitty Hawk Zoning Restrictions and with the Laws Governing Building Construction in the State of North Carolina and ordinances adopted by the Town of Kitty Hawk. Any change in the work as specified is subject to prior approval of the Building Inspector.

\_\_\_\_\_  
 Owner / Applicant / Contractor / Agent Date

\_\_\_\_\_  
 Building Official Date



**Town of Kitty Hawk, NC**  
 101 Veterans Memorial Drive  
 Kitty Hawk, NC 27949  
 Phone: (252) 261-3552

**PERMIT**

Permit NO. **17879**  
 Permit Type: Residential  
 Work Classification: [Permit Type]  
 Permit Status: Pending

Issue Date: 8/1/2018

Expires: 1/28/2019  
 Main Permit: Main Permit

**Project Address**  
 4019 N Virginia Dare Trail  
 Lot

**Zoning**  
 BR-1  
**Block**

**Subdivision**  
 KITTY HAWK BEACH TERR  
**PIN**  
 987619619610

**Flood Zone**  
 VE

**Constuction Type**  
 Beach Dune Walk Way

**Building Code**  
 BLDG2012

**Owner Information**  
 TOWN OF KITTY HAWK null

**Address**  
 PO BOX 549  
 KITTY HAWK NC 27949

**Phone**

**Applicant Information**  
 James L Williams

**Address**  
 107 N Radford Drive  
 Hopewell, Virginia 23860

**Phone**  
 804-221-7711

Contractor(s)	Phone	Contractor Type	License Number	Construction Cost:	Unheated Sq. Feet	Total Sq. Feet:
James L Williams	804-221-7711	Other	00000	500.00	48.00	0.00

**Description of Work: Construct**  
**3 x 16 dune crossover in**  
**easement**

**Building Comments:**

Permit Cost - \$85.00

**Planning Conditions:**

Flood Zone-VE; Elevation-12'+1'=13'; Map#-3720987600J; Effective-09/20/2006; No solid risers on steps. There shall be no alteration of sand dunes which would increase potential flood damage. There shall be no fill used for structural support

The work authorized by this permit is to be performed in accordance with the applicable Kitty Hawk Zoning Restrictions and with the Laws Governing Building Construction in the State of North Carolina and ordinances adopted by the Town of Kitty Hawk.  
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\_\_\_\_\_  
**Owner / Applicant / Contractor / Agent** **Date**

\_\_\_\_\_  
**Building Official** **Date**



**Town of Kitty Hawk, NC**  
 101 Veterans Memorial Drive  
 Kitty Hawk, NC 27949  
 Phone: (252) 261-3552

**PERMIT**

Permit NO. **17880**  
 Permit Type: Residential  
 Work Classification: [Permit Type]  
 Permit Status: Pending

Issue Date: 8/2/2018

Expires: 1/29/2019  
 Main Permit: Main Permit

**Project Address**  
 3804 Hallett Street

**Lot**  
 15

**Flood Zone**  
 AE

**Owner Information**  
 Linwood B & Cathy H Walton

**Applicant Information**  
 Joseph A Austin

**Zoning**  
 BR-1  
**Block**

**Constuction Type**  
 Elevator

**Address**  
 308 Sherwood Drive  
 Suffolk VA 23434

**Address**  
 301 W Fresh Pond Road  
 Kill Devil Hills, NC 27948

**Subdivision**  
 N E HURDLE ESTATE  
**PIN**  
 987508880264

**Building Code**  
 B-2012/E-2017

**Phone**  
 757-647-9302

**Phone**  
 252-305-4465

<b>Construction Cost:</b>	<u>20500.00</u>
<b>Unheated Sq. Feet</b>	<u>0.00</u>
<b>Total Sq. Feet:</b>	<u>0.00</u>

<b>Contractor(s)</b>	<b>Phone</b>	<b>Contractor Type</b>	<b>License Number</b>
Going Up Elevators Inc. dba Atlantic Elevators	(252)473-1083	Electrical	30188

**Building Comments:**

**Description of Work: Install  
 elevator in an existing hoistway**

Permit Cost - \$265.00

**Planning Conditions:**

Flood Zone-AE; Elevation-10'+1'=11'; Map#-3720987500J; Effective-09/20/2006; Finished Elevation Certificate required prior to final inspection; Elevation of elevator equipment to be at or above 11' NAVD datum. All materials below 11' NAVD must be flood resistant. If elevator cab is designed to provide access to areas below the 11' NAVD, it must be equipped with controls that prevent the cab from descending into floodwaters. If elevator shaft is below 11'NAVD, it must either have flood openings at 1 square inch per square foot of enclosure, or be engineered to resist flood loads (not having flood openings may result in higher insurance premimums).

The work authorized by this permit is to be performed in accordance with the applicable Kitty Hawk Zoning Restrictions and with the Laws Governing Building Construction in the State of North Carolina and ordinances adopted by the Town of Kitty Hawk.  
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\_\_\_\_\_  
**Owner / Applicant / Contractor / Agent** **Date**

\_\_\_\_\_  
**Building Official** **Date**



**Town of Kitty Hawk, NC**  
 101 Veterans Memorial Drive  
 Kitty Hawk, NC 27949  
 Phone: (252) 261-3552

**PERMIT**

Permit NO. **17881**  
 Permit Type: Residential  
 Work Classification: [Permit Type]  
 Permit Status: Pending

Issue Date: 8/2/2018

Expires: 1/29/2019

Main Permit: Main Permit

**Project Address**

307 Apollo Court

**Lot**

62

**Flood Zone**

X

**Owner Information**

Coastal NC Holdings LLC

**Applicant Information**

Alex Wolcott

**Zoning**

BR-1

**Block**

2

**Constuction Type**

New Single-Family Home

**Address**

3210 N Croatan Highway, Unit 1B  
 Kill Devil Hills NC 27948

**Address**

P O Box 2185  
 Kitty Hawk, NC 27949

**Subdivision**

FIRST FLIGHT RIDGE

**PIN**

987511763739

**Building Code**

BLDG2012

**Phone**

**Phone**

757-477-6867

<u>Contractor(s)</u>	<u>Phone</u>	<u>Contractor Type</u>	<u>License Number</u>	<b>Construction Cost:</b>	<u>350000.00</u>
				<b>Unheated Sq. Feet</b>	<u>2072.00</u>
				<b>Total Sq. Feet:</b>	<u>2952.00</u>
Coastal NC Holdings, LLC	757-477-6867	General	79309		
TBD	000-000-0000	Mechanical	00000		
TBD	000-000-0000	Plumbing	00000		
TBD	000-000-0000	Fuel Piping	00000		
TBD	000-000-0000	Electrical	00000		

**Description of Work: New SFR 4 bedrooms 3.5 baths - 2952 sq. ft. heated; 88 sq. ft. unheated; 376 sq. ft. garage; 1608 sq. ft. porches/decks**

**Building Comments:**

Permit Cost - \$2780.00 The following items are needed: Duct Test due prior to rough-in inspection; Termite Affidavit due prior to rough-in inspection; Energy Certificate due prior to Pre-Final inspection; Address needs to be posed (minimum 4" numbers) prior to Pre-Final inspection; Completed septic due prior to Final Inspection;

**Planning Conditions:**

Flood Zone-Shaded X; Map#-3720987500J; Effective-09/20/2006; The following items are needed: Height Certificate due prior to Rough-In Inspection; Finished Elevation Certificate due prior to Pre-Final Inspection; An As-Built Survey due prior to Final Inspection

The work authorized by this permit is to be performed in accordance with the applicable Kitty Hawk Zoning Restrictions and with the Laws Governing Building Construction in the State of North Carolina and ordinances adopted by the Town of Kitty Hawk. Any change in the work as specified is subject to prior approval of the Building Inspector.

**Owner / Applicant / Contractor / Agent** \_\_\_\_\_ **Date** \_\_\_\_\_



**Town of Kitty Hawk, NC**  
 101 Veterans Memorial Drive  
 Kitty Hawk, NC 27949  
 Phone: (252) 261-3552

**PERMIT**

Permit NO. **17884**  
 Permit Type: Residential  
 Work Classification: [Permit Type]  
 Permit Status: Pending

Issue Date: 8/3/2018

Expires: 1/30/2019  
 Main Permit: Main Permit

**Project Address**

4908 The Woods Road

**Lot**

**Zoning**

VR-1

**Block**

**Subdivision**

SOUTHERN WOODS COTTAGES  
 PH 1

**PIN**

986611662086

**Flood Zone**

AE

**Constuction Type**

Accessory Structure

**Building Code**

BLDG2012

**Owner Information**

DAVID A DVORIN

**Address**

4908 THE WOODS RD  
 KITTY HAWK NC 27949

**Phone**

**Applicant Information**

Dan Osman

**Address**

P O Box 7408  
 Kill Devil Hills, NC 27948

**Phone**

252-202-4599

Contractor(s)	Phone	Contractor Type	License Number	Construction Cost:	Unheated Sq. Feet	Total Sq. Feet:
Daniel S Osman	252-202-4599	General	76259	100000.00	692.00	696.00
TBD	000-000-0000	Mechanical	00000			
TBD	000-000-0000	Plumbing	00000			
TBD	000-000-0000	Electrical	00000			

**Description of Work: New detached garage with a mother-in-law suite and deck - 696 heated sq. ft.; 372 sq ft unheated space; 320 sq. ft. of decks**

**Building Comments:**

Permit Cost \$1115.00 The following items are required: Duct Test due prior to Rough-In Inspection; Termite Affidavit due prior to Rough-In Inspection; Energy Certificate due prior to Pre-Final Inspection; Address to be posted (minimum 4" numbers) prior to Pre-Final Inspection; Completed septic permit due prior to Final Inspection;

**Planning Conditions:**

Flood Zone-AE; Elevation-8.3'+1'=9.3'; Map#-3720986600J; Effective-09/20/2006; Height Certificate due prior to Rough-In Inspection; Finished Elevation Certificate due prior to Pre-Final Inspection; As-Built Survey due prior to Final Inspection; NO STOVE OR STOVE CONNECTIONS PERMITTED; First Floor (FFE) & all attendant utilities must be at or above 9.3' NAVD. The minimum required elevation of HVAC, washer/dryer and hot water heater is 9.3' NAVD. If top of garage floor/ground floor enclosure is below RFPE 9.3', it will be required to have a minimum of 2 flood vents installed. See Zoning Permit for additional requirements.

The work authorized by this permit is to be performed in accordance with the applicable Kitty Hawk Zoning Restrictions and with the Laws Governing Building Construction in the State of North Carolina and ordinances adopted by the Town of Kitty Hawk. Any change in the work as specified is subject to prior approval of the Building Inspector

**Owner / Applicant / Contractor / Agent** \_\_\_\_\_ **Date** \_\_\_\_\_



**Town of Kitty Hawk, NC**  
 101 Veterans Memorial Drive  
 Kitty Hawk, NC 27949  
 Phone: (252) 261-3552

**PERMIT**

Permit NO. **17885**  
 Permit Type: Residential  
 Work Classification: [Permit Type]  
 Permit Status: Pending

Issue Date: 8/7/2018

Expires: 2/3/2019  
 Main Permit: Main Permit

**Project Address**

861 Herbert Perry Road

**Lot**

A

**Flood Zone**

AE

**Owner Information**

Roberto Anonio Busto & Dawn Gray Moraga

**Applicant Information**

Finch & Company, Inc.

**Zoning**

VR-1

**Block**

**Constuction Type**

Addition

**Address**

861 Herbert Perry Road  
 Kitty Hawk NC 27949

**Address**

116 Sandy Ridge Road  
 Duck, NC 27949

**Subdivision**

SUBDIVISION - NONE

**PIN**

987505282111

**Building Code**

BLDG2012

**Phone**

**Phone**

252-202-9879

<b>Construction Cost:</b>	115000.00
<b>Unheated Sq. Feet</b>	708.00
<b>Total Sq. Feet:</b>	708.00

<b>Contractor(s)</b>	<b>Phone</b>	<b>Contractor Type</b>	<b>License Number</b>
Finch & Company, Inc.	(252)261-8710	General	52567

**Description of Work: Add attached garage 708 sq ft with a bedroom suite above 708 heated sq ft**

**Building Comments:**

Permit Cost - \$965.00 The following items are needed: Duct Test due prior to rough-in inspection; Termite Affidavit due prior to rough-in inspection; Energy Certificate due prior to pre-final inspection; Complete septic permit due prior to final inspection

**Planning Conditions:**

Flood Zone-AE; Elevation-8.3'+1'=9.3'; Map#-3720987500J; Effective-09/20/2006; Finished Elevation Certificate due prior to pre-final inspection; As-Built Survey due prior to final inspection; First floor (FFE) and all attendant utilities must be at or above 9.3' NAVD; If top of garage floor/ground floor enclosure is below RFPE 9.3', it will be required to have minimum of 2 flood vents installed no greater than 1' from grade. See Zoning Permit for additional requirements.

The work authorized by this permit is to be performed in accordance with the applicable Kitty Hawk Zoning Restrictions and with the Laws Governing Building Construction in the State of North Carolina and ordinances adopted by the Town of Kitty Hawk. Any change in the work as specified is subject to prior approval of the Building Inspector.

\_\_\_\_\_  
**Owner / Applicant / Contractor / Agent** **Date**

\_\_\_\_\_  
**Building Official** **Date**



**Town of Kitty Hawk, NC**  
 101 Veterans Memorial Drive  
 Kitty Hawk, NC 27949  
 Phone: (252) 261-3552

**PERMIT**

Permit NO. **17886**  
 Permit Type: Residential  
 Work Classification: [Permit Type]  
 Permit Status: Pending

Issue Date: 8/7/2018

Expires: 2/3/2019  
 Main Permit: Main Permit

**Project Address**

307 Jejac Drive

**Lot**

12

**Flood Zone**

X

**Owner Information**

Floyd Dennis & Connie Bernice Bibbee

**Applicant Information**

William K Gibson

**Zoning**

BR-1

**Block**

**Constuction Type**

Elevator

**Address**

307 Jejac Drive  
 Kitty Hawk NC 27949

**Address**

P O Box 2622  
 Kitty Hawk, NC 27949

**Subdivision**

KITTY DUNES II

**PIN**

987516842642

**Building Code**

BLDG2012

**Phone**

**Phone**

252-207-2700

<b>Construction Cost:</b>	<u>20000.00</u>
<b>Unheated Sq. Feet</b>	<u>0.00</u>
<b>Total Sq. Feet:</b>	<u>0.00</u>

<b>Contractor(s)</b>	<b>Phone</b>	<b>Contractor Type</b>	<b>License Number</b>
William K Gibson	252-207-2700	Other	0000
TBD	000-000-0000	Electrical	00000

**Building Comments:**

Permit - \$285.00

**Planning Conditions:**

Flood Zone-Shaded X; Map#-3720987500J; Effective-09/20/2006

**Description of Work: Add  
 elevator shaft inside existing  
 footprint of home**

The work authorized by this permit is to be performed in accordance with the applicable Kitty Hawk Zoning Restrictions and with the Laws Governing Building Construction in the State of North Carolina and ordinances adopted by the Town of Kitty Hawk.

Any change in the work as specified is subject to prior approval of the Building Inspector,

**Owner / Applicant / Contractor / Agent** \_\_\_\_\_ **Date** \_\_\_\_\_

**Building Official** \_\_\_\_\_ **Date** \_\_\_\_\_





**Town of Kitty Hawk, NC**  
 101 Veterans Memorial Drive  
 Kitty Hawk, NC 27949  
 Phone: (252) 261-3552

**PERMIT**

Permit NO. **17890**  
 Permit Type: Residential  
 Work Classification: [Permit Type]  
 Permit Status: Pending

Issue Date: 8/10/2018

Expires: 2/6/2019

Main Permit: Main Permit

**Project Address**

102 Willa Lane  
 Lot

**Zoning**

VR-1

**Block**

**Subdivision**

KITTY DUNES SOUTH

**PIN**

987512952765

**Flood Zone**

AE

**Constuction Type**

Repair/Replace

**Building Code**

BLDG2012

**Owner Information**

LORIS G LONGEST

**Address**

PO BOX 3295  
 CHESTER VA 23831

**Phone**

**Applicant Information**

Gary Ehlert

**Address**

407 Canal Drive  
 Kill Devil Hills, NC 27948

**Phone**

252-202-9842

<b>Construction Cost:</b>	12375.00
<b>Unheated Sq. Feet</b>	392.00
<b>Total Sq. Feet:</b>	0.00

Contractor(s)	Phone	Contractor Type	License Number
Paragon Decks OBX	(252-202-9842)	General	00000

**Description of Work: Remove existing steps, landing and deck. Build new steps and landing in same foot print and increase deck size to a 15 x 24 uncovered.**

**Building Comments:**

Permit Cost - \$155.00

**Planning Conditions:**

Flood Zone-AE; Elevation-9'+1'=10'; Map#-3720987500J; Effective-09/20/2006;

The work authorized by this permit is to be performed in accordance with the applicable Kitty Hawk Zoning Restrictions and with the Laws Governing Building Construction in the State of North Carolina and ordinances adopted by the Town of Kitty Hawk. Any change in the work as specified is subject to prior approval of the Building Inspector.

\_\_\_\_\_  
 Owner / Applicant / Contractor / Agent Date

\_\_\_\_\_  
 Building Official Date



**Town of Kitty Hawk, NC**  
 101 Veterans Memorial Drive  
 Kitty Hawk, NC 27949  
 Phone: (252) 261-3552

**PERMIT**

Permit NO. **17891**  
 Permit Type:  
 Work Classification: [Permit Type]  
 Permit Status: Pending

Issue Date:

Expires: 2/10/2019

Main Permit: Main Permit

**Project Address**

3708 N Virginia Dare Trail

**Zoning**

**Subdivision**

HURDLE, PERRY, JOHNSON & WHITE

**Lot**

**Block**

**PIN**

987508879636

**Flood Zone**

**Constuction Type**

**Building Code**

BLDG2012

**Owner Information**

STEPHEN W LANG

**Address**

12001 BOULDER CT  
 SPOTSYLVANIA VA 22553

**Phone**

**Applicant Information**

MK Contractors LLC by Matthew Koplen

**Address**

P O Box 3014  
 Kill Devil Hills, NC 27948

**Phone**

252-305-3224

Contractor(s)	Phone	Contractor Type	License Number	Construction Cost:	104113.00
Matthew Carey Koplen	252-489-9051		75229	Unheated Sq. Feet	0.00
TBD	000-000-0000	Mechanical	00000	Total Sq. Feet:	0.00
TBD	000-000-0000	Plumbing	00000		
TBD	000-000-0000	Electrical	00000		

**Description of Work: Repairing areas throughout home (all trades) that were damaged from a pipe burst on second floor of home.**

Building Comments:

Permit Cost - \$966.00

Planning Conditions:

Flood Zone-VE; Elevation-12'+1'=13'; Map#-3720987500J; Effective-09/20/2006; Improvements must be designed to minimize flood damages. All materials below 13' NAVD must be flood resistant; Cost of job - \$104,113.00, other permitted jobs within 12 months -\$2200 electrical; \$12,000 for interior demo; Total construction cost within one year period to date \$118,313; Building assessed value - \$296,000; \$29,987 worth of work remaining for year; Not substantial improvement

The work authorized by this permit is to be performed in accordance with the applicable Kitty Hawk Zoning Restrictions and with the Laws Governing Building Construction in the State of North Carolina and ordinances adopted by the Town of Kitty Hawk.

Any change in the work as specified is subject to prior approval of the Building Inspector.

Owner / Applicant / Contractor / Agent \_\_\_\_\_ Date \_\_\_\_\_

Building Official \_\_\_\_\_ Date \_\_\_\_\_



**Town of Kitty Hawk, NC**  
 101 Veterans Memorial Drive  
 Kitty Hawk, NC 27949  
 Phone: (252) 261-3552

**PERMIT**

Permit NO. **17895**  
 Permit Type: Residential  
 Work Classification: [Permit Type]  
 Permit Status: Pending

Issue Date: 8/16/2018

Expires: 2/12/2019  
 Main Permit: Main Permit

<b>Project Address</b> 4148 Thick Ridge Road	<b>Zoning</b> VR-1	<b>Subdivision</b> KITTY HAWK LANDING SEC 6
<b>Lot</b> 7	<b>Block</b>	<b>PIN</b> 986511572476
<b>Flood Zone</b> AE	<b>Constuction Type</b> New Single-Family Home	<b>Building Code</b> BLDG2012
<b>Owner Information</b> Jacob L & Jordan W Warner	<b>Address</b> 3522 Gull Drive Kodiak AK 99615	<b>Phone</b>
<b>Applicant Information</b> R M Saunders General Contractor, Inc.	<b>Address</b> P O Box 1922 Kill Devil Hills, NC 27948	<b>Phone</b> 252-207-8710

<u>Contractor(s)</u>	<u>Phone</u>	<u>Contractor Type</u>	<u>License Number</u>	<b>Construction Cost:</b>	<b>380000.00</b>
R. M. Saunders General Contractor, Inc.	(252)441-2544	General	32380	<b>Unheated Sq. Feet</b>	<b>572.00</b>
TBD	000-000-0000	Mechanical	00000	<b>Total Sq. Feet:</b>	<b>2404.00</b>
TBD	000-000-0000	Plumbing	00000		
TBD	000-000-0000	Fuel Piping	00000		
TBD	000-000-0000	Electrical	00000		

**Description of Work: New SFR 4 bedrooms 3.5 baths - 2404 heated sq ft; 336 sq ft for porch; 236 sq ft for deck**

**Building Comments:**

Permit Cost - \$2855.00 The following items are required: Duct Test prior to Rough-In Inspection; Termite Affidavit prior to Rough-In Inspection; Energy Certificate prior to Pre-Final Inspection; Address on house (minimum 4" numbers) prior to Pre-Final Inspection; Completed Septic Permit prior to Final Inspection;

**Planning Conditions:**

Flood Zone-AE; Elevation-8.3'+1'=9.3'; Map#-3720986500J; Effective-09/20/2006; Under Construction Elevation Certificate due prior to Rough-In Inspection; Height Certificate due prior to Rough-In Inspection; Finished Construction Elevation Certificate due prior to Pre-Final Inspection; As-Built Survey due prior to Final Inspection; See Zoning Permit for additional requirements

The work authorized by this permit is to be performed in accordance with the applicable Kitty Hawk Zoning Restrictions and with the Laws Governing Building Construction in the State of North Carolina and ordinances adopted by the Town of Kitty Hawk. Any change in the work as specified is subject to prior approval of the Building Inspector.

**Owner / Applicant / Contractor / Agent** \_\_\_\_\_ **Date** \_\_\_\_\_



**Town of Kitty Hawk, NC**  
 101 Veterans Memorial Drive  
 Kitty Hawk, NC 27949  
 Phone: (252) 261-3552

**PERMIT**

Permit NO. **17897**  
 Permit Type: Residential  
 Work Classification: [Permit Type]  
 Permit Status: Pending

Issue Date: 8/16/2018

Expires: 2/12/2019

Main Permit: Main Permit

**Project Address**

200 E Sibbern Drive, Lot 99

**Lot**

14 & 15 17-19

**Flood Zone**

AE

**Owner Information**

DECHARMARNEL INC

**Applicant Information**

William K Gibson

**Zoning**

BH-1

**Block**

**Constuction Type**

Repair/Replace

**Address**

108 E SIBBERN DR  
 KITTY HAWK NC 27949

**Address**

P O Box 2622  
 Kitty Hawk, NC 27949

**Subdivision**

W J TATE - DB 78 PG 0394

**PIN**

987512956673

**Building Code**

BLDG2012

**Phone**

**Phone**

252-207-2700

<b>Construction Cost:</b>	3500.00
<b>Unheated Sq. Feet</b>	192.00
<b>Total Sq. Feet:</b>	0.00

<b>Contractor(s)</b>	<b>Phone</b>	<b>Contractor Type</b>	<b>License Number</b>
William K Gibson	252-207-2700	Other	0000

**Building Comments:**

**Description of Work: Replace 2  
 9 x 12 decks and add awning  
 tops to deck**

Permit Cost \$110.00

**Planning Conditions:**

Flood Zone-AE; Elevation 9'+1'=10'; Map#-3720987500.J; Effective-09/20/2006; No connection to the travel trailer;

The work authorized by this permit is to be performed in accordance with the applicable Kitty Hawk Zoning Restrictions and with the Laws Governing Building Construction in the State of North Carolina and ordinances adopted by the Town of Kitty Hawk.

Any change in the work as specified is subject to prior approval of the Building Inspector.

\_\_\_\_\_  
**Owner / Applicant / Contractor / Agent** **Date**

\_\_\_\_\_  
**Building Official** **Date**



**Town of Kitty Hawk, NC**  
 101 Veterans Memorial Drive  
 Kitty Hawk, NC 27949  
 Phone: (252) 261-3552

**PERMIT**

Permit NO. **17900**  
 Permit Type: Residential  
 Work Classification: [Permit Type]  
 Permit Status: Pending

Issue Date: 8/21/2018

Expires: 2/17/2019  
 Main Permit: Main Permit

<b>Project Address</b>	<b>Zoning</b>	<b>Subdivision</b>
1144 W Kitty Hawk Road	VR-1	BURVELL G & LOUISE BEACHAM S/D
<b>Lot</b>	<b>Block</b>	<b>PIN</b>
A		986619512246
<b>Flood Zone</b>	<b>Constuction Type</b>	<b>Building Code</b>
AE	New Single-Family Home	BLDG2012
<b>Owner Information</b>	<b>Address</b>	<b>Phone</b>
Chelsea E Jones & Jason G Jordan	100 Edgerton Court Kitty Hawk NC 27949	252-207-6659
<b>Applicant Information</b>	<b>Address</b>	<b>Phone</b>
R Lawson Construction Company Inc.	8443 Caratoke Highway, Suite J Powells Point, NC 27966	252-202-3428

				<b>Construction Cost:</b>	<u>235000.00</u>
				<b>Unheated Sq. Feet</b>	<u>236.00</u>
				<b>Total Sq. Feet:</b>	<u>1276.00</u>
<b>Contractor(s)</b>	<b>Phone</b>	<b>Contractor Type</b>	<b>License Number</b>		
R. Lawson Construction Company, Inc.	(252)491-9993	General	35765		
TBD	000-000-0000	Mechanical	00000		
TBD	000-000-0000	Plumbing	00000		
TBD	000-000-0000	Fuel Piping	00000		
TBD	000-000-0000	Electrical	00000		

**Description of Work: New SFR 3 bedrooms 2.5 baths - 1276 heated sq ft; 192 sq ft of porch and 44 sq ft of deck**

**Building Comments:**

Permit Cost - \$1871.00 The following items are required: Duct Test due prior to Rough-In Inspection; Termite Affidavit due prior to Rough-In Inspection; Energy Certificate due prior to Pre-Final Inspection; Address posted on house (minimum 4" numbers) prior to Pre-Final Inspection; Address also posted at Road Entrance due to house being on unnamed road; Completed septic permit prior to Final Inspection

**Planning Conditions:**

Flood Zone-AE; Elevation-8.3'+1'=9.3'; Map#-3720986600J; Effective-09/20/2006; Under Construction Elevation Certificate due prior to Rough-In Inspection; Height Certificate due prior to Rough-In Inspection; Finished Elevation Certificate due prior to Pre-Final Inspection; As-Built Survey due prior to Final Inspection; SEE ZONING PERMIT FOR ADDITIONAL REQUIREMENTS

The work authorized by this permit is to be performed in accordance with the applicable Kitty Hawk Zoning Restrictions and with the Laws Governing Building Construction in the State of North Carolina and ordinances adopted by the Town of Kitty Hawk. Any change in the work as specified is subject to prior approval of the Building Inspector.

---

**Owner / Applicant / Contractor / Agent** \_\_\_\_\_ **Date** \_\_\_\_\_



**Town of Kitty Hawk, NC**  
 101 Veterans Memorial Drive  
 Kitty Hawk, NC 27949  
 Phone: (252) 261-3552

**PERMIT**

Permit NO. **17910**  
 Permit Type: Residential  
 Work Classification: [Permit Type]  
 Permit Status: Pending

Issue Date: 8/27/2018

Expires: 2/23/2019

Main Permit: Main Permit

**Project Address**

3945 N Croatan Highway  
 Lot

**Zoning**

BC-1  
 Block

**Subdivision**

SUBDIVISION - NONE  
 PIN

987619700398

**Flood Zone**

AE

**Constuction Type**

Repair/Replace

**Building Code**

BLDG2012

**Owner Information**

Allen Toby Hedgepeth c/o Westley Littlejohn

**Address**

67 Lafayette Street  
 Stafford VA 22554

**Phone**

**Applicant Information**

Coastal Engineering & Surveying

**Address**

P O box 1129  
 Kitty Hawk, NC 27949

**Phone**

252-261-4151

<b>Construction Cost:</b>	2500.00
<b>Unheated Sq. Feet</b>	0.00
<b>Total Sq. Feet:</b>	0.00

<b>Contractor(s)</b>	<b>Phone</b>	<b>Contractor Type</b>	<b>License Number</b>
Coastal Engineering & Surveying	252-261-4151	Other	0000

**Building Comments:**

**Description of Work: Repair existing deck - no change in footing**

Permit Cost - \$70.00

**Planning Conditions:**

Flood Zone-AE; Elevation-10'+1'=11'; Map#-3720987500J; Effective-09/20/2006

The work authorized by this permit is to be performed in accordance with the applicable Kitty Hawk Zoning Restrictions and with the Laws Governing Building Construction in the State of North Carolina and ordinances adopted by the Town of Kitty Hawk. Any change in the work as specified is subject to prior approval of the Building Inspector.

\_\_\_\_\_  
 Owner / Applicant / Contractor / Agent

\_\_\_\_\_  
 Date

\_\_\_\_\_  
 Building Official

\_\_\_\_\_  
 Date



**Town of Kitty Hawk, NC**  
 101 Veterans Memorial Drive  
 Kitty Hawk, NC 27949  
 Phone: (252) 261-3552

**PERMIT**

Permit NO. 17911  
 Permit Type: Commercial  
 Work Classification: [Permit Type]  
 Permit Status: Pending

Issue Date: 8/27/2018

Expires: 2/23/2019

Main Permit: Main Permit

**Project Address**

5400-M N Croatan Highway

**Zoning**

BC-3

**Subdivision**

KITTY HAWK BEACH -  
 COMMERCIAL

**Lot**

1A

**Block**

**PIN**

986720806122

**Flood Zone**

X

**Constuction Type**

Remodeling

**Building Code**

B:DG2012

**Owner Information**

Peachtree Shoreside LLC

**Address**

3425 Duluth Park Lane  
 Duluth GA 30096

**Phone**

330-590-8268

**Applicant Information**

Place Services, Inc.

**Address**

95 Hickory Springs Industrial Drive  
 Canton, GA 30115-7933

**Phone**

678-880-4777

Contractor(s)	Phone	Contractor Type	License Number	Construction Cost:	61756.00
Place Services, Inc.	678-880-4777	General	77246	Unheated Sq. Feet	0.00
Place Services, Inc.	678-880-4777	Electrical	31369	Total Sq. Feet:	0.00

**Building Comments:**

**Description of Work: Interior remodel for apparel and electronics department. Replacing fitting rooms with electrical**

Permit Cost - \$420.00

**Planning Conditions:**

Flood Zone- Shaded X; Map#-3720986600J & 3720986700J; Effective-09/20/2006

The work authorized by this permit is to be performed in accordance with the applicable Kitty Hawk Zoning Restrictions and with the Laws Governing Building Construction in the State of North Carolina and ordinances adopted by the Town of Kitty Hawk. Any change in the work as specified is subject to prior approval of the Building Inspector.

\_\_\_\_\_  
**Owner / Applicant / Contractor / Agent** **Date**

\_\_\_\_\_  
**Building Official** **Date**



**Town of Kitty Hawk, NC**  
 101 Veterans Memorial Drive  
 Kitty Hawk, NC 27949  
 Phone: (252) 261-3552

**PERMIT**

Permit NO. **17912**  
 Permit Type: Commercial  
 Work Classification: [Permit Type]  
 Permit Status: Pending

Issue Date: 8/27/2018

Expires: 2/23/2019  
 Main Permit: Main Permit

**Project Address**

5400-M N Croatan Highway

**Lot**

1A

**Flood Zone**

X

**Owner Information**

Peachtree Shoreside LLC

**Applicant Information**

Place Services, Inc.

**Zoning**

BC-3

**Block**

**Constuction Type**

Remodeling

**Address**

3425 Duluth Park Lane  
 Duluth GA 30096

**Address**

95 Hickory Springs Industrial Drive  
 Canton, GA 30115

**Subdivision**

KITTY HAWK BEACH -  
 COMMERCIAL

**PIN**

986720806122

**Building Code**

BLDG2012

**Phone**

330-590-8268

**Phone**

678-880-4777

Contractor(s)	Phone	Contractor Type	License Number	Construction Cost:	68283.00
Place Services, Inc.	678-880-4777	General	77246	Unheated Sq. Feet	0.00
Place Services, Inc.	678-880-4777	Electrical	31369	Total Sq. Feet:	0.00
TBD	000-000-0000	Other	00000		

**Description of Work: Minor remodel of front end registers; Replace with self checkouts; Pickup are to be modified with new wall and door;**

**Building Comments:**

Permit Cost - \$455.00

**Planning Conditions:**

Flood Zone- Shaded X; Map#3720986600J and 3720986700J; Effective-09/20/2006

The work authorized by this permit is to be performed in accordance with the applicable Kitty Hawk Zoning Restrictions and with the Laws Governing Building Construction in the State of North Carolina and ordinances adopted by the Town of Kitty Hawk. Any change in the work as specified is subject to prior approval of the Building Inspector.

Owner / Applicant / Contractor / Agent \_\_\_\_\_ Date \_\_\_\_\_

Building Official \_\_\_\_\_ Date \_\_\_\_\_





**Town of Kitty Hawk, NC**  
 101 Veterans Memorial Drive  
 Kitty Hawk, NC 27949  
 Phone: (252) 261-3552

**PERMIT**

Permit NO. **17907**  
 Permit Type: Residential  
 Work Classification: [Permit Type]  
 Permit Status: Pending

Issue Date: 8/23/2018

Expires: 2/19/2019  
 Main Permit: Main Permit

**Project Address**

3919 Smith Street

**Lot**

13

**Flood Zone**

X

**Owner Information**

Smith Contracting NCUL, LLC

**Applicant Information**

Smith Contracting NCVL LLC

**Zoning**

BR-2

**Block**

**Constuction Type**

New Single-Family Home

**Address**

P O Box 471  
 Kitty Hawk NC 27949

**Address**

P O Box 471  
 Kitty Hawk, NC 27949

**Subdivision**

TED WOOD KITTY HAWK TERR  
 ADD

**PIN**

987507691704

**Building Code**

BLDG2018

**Phone**

**Phone**

252-202-6602

Contractor(s)	Phone	Contractor Type	License Number	Construction Cost:	215000.00
Smith Contracting NC, LLC	(252)202-6602	General	75610	Unheated Sq. Feet	371.00
TBD	000-000-0000	Mechanical	00000	Total Sq. Feet:	1860.00
TBD	000-000-0000	Plumbing	00000		
TBD	000-000-0000	Electrical	00000		

**Building Comments:**

**Description of Work: New SFR 4 bedrooms 3 baths - 1860 heated sq ft; 111 sq ft covered front porch; 260 sq ft covered rear porch**

Permit Cost - \$1845.00 The following items are required: Duct Test due prior to Rough-In Inspection; Termite Affidavit due prior to Rough-In Inspection; Energy Certificate due prior to Pre-Final Inspection; Address placed on house - minimum 4" numbers prior to Pre-Final Inspection; Completed Septic Permit due prior to Final Inspection;

**Planning Conditions:**

Flood Zone- Shaded X; Map#-3720987500J; Effective-09/20/2006; Height Certificate due prior to Rough-In Inspection; Finished Elevation Certificate due prior to Pre-Final Inspection; As-Built Survey due prior to Final Inspection; See Zoning Permit for any additional requirements

The work authorized by this permit is to be performed in accordance with the applicable Kitty Hawk Zoning Restrictions and with the Laws Governing Building Construction in the State of North Carolina and ordinances adopted by the Town of Kitty Hawk. Any change in the work as specified is subject to prior approval of the Building Inspector.

Owner / Applicant / Contractor / Agent	Date



**Town of Kitty Hawk, NC**  
 101 Veterans Memorial Drive  
 Kitty Hawk, NC 27949  
 Phone: (252) 261-3552

**PERMIT**

Permit NO. **17889**  
 Permit Type: Commercial  
 Work Classification: [Permit Type]  
 Permit Status: Open

Issue Date: 8/9/2018

Expires: 2/5/2019

Main Permit: Main Permit

**Project Address**

1 Cypress Knee Trail  
 Lot:  
 Phase 2A

**Flood Zone**

AE

**Owner Information**

Diamond Resorts GK Development LLC

**Applicant Information**

Daniel Parsons

**Zoning**

BC-3

**Block**

**Constuction Type**

Electrical

**Address**

10600 W Charleston Boulevard  
 Las Vegas NV 89135

**Address**

P O Box 2751  
 Kill Devil Hills, NC 27948

**Subdivision**

SUBDIVISION - NONE

**PIN**

986608888936

**Building Code**

ELEC2017

**Phone**

**Phone**

252-256-7075

<u>Contractor(s)</u>	<u>Phone</u>	<u>Contractor Type</u>	<u>License Number</u>	<u>Construction Cost:</u>	<u>25000.00</u>
LoWire Technologies	(252)449-4690	Electrical	19403-U	<u>Unheated Sq. Feet</u>	<u>0.00</u>
				<u>Total Sq. Feet:</u>	<u>0.00</u>

**Building Comments:**

Permit Cost - \$80.00

**Planning Conditions:**

Flood Zone-AE; Elevation-8.3'+1'=9.3'; Map#-3720986600J; Effective-09/20/2006

**Description of Work: Install 2 key pad operated gate system**

The work authorized by this permit is to be performed in accordance with the applicable Kitty Hawk Zoning Restrictions and with the Laws Governing Building Construction in the State of North Carolina and ordinances adopted by the Town of Kitty Hawk. Any change in the work as specified is subject to prior approval of the Building Inspector.

\_\_\_\_\_  
 Owner / Applicant / Contractor / Agent Date

\_\_\_\_\_  
 Building Official Date



**Town of Kitty Hawk, NC**  
 101 Veterans Memorial Drive  
 Kitty Hawk, NC 27949  
 Phone: (252) 261-3552

**PERMIT**

Permit NO. **17899**  
 Permit Type: Residential  
 Work Classification: [Permit Type]  
 Permit Status: Open

Issue Date: 8/20/2018

Expires: 2/16/2019

Main Permit: Main Permit

**Project Address**  
 4211 N Virginia Dare Trail  
**Lot**

**Zoning**  
 BR-1  
**Block**

**Subdivision**  
 SANDERLIN SHORES  
**PIN**

**Flood Zone**  
 VE  
**Owner Information**  
 SANDRA EIKE OATES

**Constuction Type**  
 Repair/Replace  
**Address**  
 4528 YARMOUTH CT  
 VIRGINIA BEACH VA 23455

**Building Code**  
 ELEC2017  
**Phone**

**Applicant Information**  
 Backline Electric

**Address**  
 P O box 2511  
 Kitty Hawk, NC 27949

**Phone**  
 252-491-7084

<b>Construction Cost:</b>	1600.00
<b>Unheated Sq. Feet</b>	0.00
<b>Total Sq. Feet:</b>	0.00

Contractor(s)	Phone	Contractor Type	License Number
Back Line Electric	(252)489-1979	Electrical	28390-L

**Building Comments:**

**Description of Work: Service change out 200 amp**

Permit Cost - \$80.00

**Planning Conditions:**

Flood Zone-VE; Elevation-12'+1=13'; Map#-3720987600J; Effective-09/20/2006

The work authorized by this permit is to be performed in accordance with the applicable Kitty Hawk Zoning Restrictions and with the Laws Governing Building Construction in the State of North Carolina and ordinances adopted by the Town of Kitty Hawk. Any change in the work as specified is subject to prior approval of the Building Inspector.

\_\_\_\_\_  
**Owner / Applicant / Contractor / Agent** **Date**

\_\_\_\_\_  
**Building Official** **Date**



**Town of Kitty Hawk, NC**  
 101 Veterans Memorial Drive  
 Kitty Hawk, NC 27949  
 Phone: (252) 261-3552

**PERMIT**

Permit NO. **17871**  
 Permit Type: Residential  
 Work Classification: [Permit Type]  
 Permit Status: Pending

Issue Date: 8/1/2018

Expires: 1/28/2019  
 Main Permit: Main Permit

**Project Address**  
 4307 Seascape Drive  
**Lot**  
 436 PT 437  
**Flood Zone**  
 X  
**Owner Information**  
 TED LUCAS GORDON

**Zoning**  
 BR-1  
**Block**  
  
**Constuction Type**  
 Repair/Replace  
**Address**  
 7606 HORNEBECK FARM RD  
 LOUISVILLE KY 40291  
**Address**  
 P O Box 181  
 Kitty Hawk, NC 27949

**Subdivision**  
 SEA SCAPE SEC 1  
**PIN**  
 987614430561  
**Building Code**  
 MECH2012  
**Phone**  
 502-554-8790  
  
**Phone**  
 252-491-2878

**Applicant Information**  
 North Beach Services

Contractor(s)	Phone	Contractor Type	License Number	Construction Cost:	Unheated Sq. Feet	Total Sq. Feet:
North Beach Services	(252)491-2878	Mechanical	22053	2980.00	0.00	0.00
North Beach Services (Elect)	(252)491-2878	Electrical	24744-SP-PH			

**Description of Work: HVAC change our of air handler only**

**Building Comments:**

Permit Cost \$50.00

**Planning Conditions:**

Flood Zone - Shaded X; Map#-3720987600J; Effective-09/20/2006

The work authorized by this permit is to be performed in accordance with the applicable Kitty Hawk Zoning Restrictions and with the Laws Governing Building Construction in the State of North Carolina and ordinances adopted by the Town of Kitty Hawk. Any change in the work as specified is subject to prior approval of the Building Inspector.

\_\_\_\_\_  
**Owner / Applicant / Contractor / Agent** **Date**

\_\_\_\_\_  
**Building Official** **Date**



**Town of Kitty Hawk, NC**  
 101 Veterans Memorial Drive  
 Kitty Hawk, NC 27949  
 Phone: (252) 261-3552

**PERMIT**

Permit NO. **17882**  
 Permit Type: Residential  
 Work Classification: [Permit Type]  
 Permit Status: Pending

Issue Date: 8/3/2018

Expires: 1/30/2019  
 Main Permit: Main Permit

**Project Address**  
 5107 Lindbergh Avenue

**Lot**  
 29

**Flood Zone**  
 AE

**Owner Information**  
 Herman Duffer, Jr.

**Applicant Information**  
 Atlantic Heating & Cooling

**Zoning**  
 BR-1

**Block**  
 28

**Constuction Type**  
 Repair/Replace

**Address**  
 P O Box 2350  
 Kill Devil Hills NC 27948

**Address**  
 P O Box 132  
 Kill Devil Hills, NC 27948

**Subdivision**  
 KITTY HAWK BEACH REV SEC A  
**PIN**

987717108061

**Building Code**  
 MECH2012

**Phone**

**Phone**  
 252-441-7642

<u>Contractor(s)</u>	<u>Phone</u>	<u>Contractor Type</u>	<u>License Number</u>	<b>Construction Cost:</b>	<u>5200.00</u>
Atlantic Heating & Cooling Ltd	(252)441-7642	Mechanical	11618	<b>Unheated Sq. Feet</b>	<u>0.00</u>
Winston Peoples King	252-473-7745	Electrical	07274-L	<b>Total Sq. Feet:</b>	<u>0.00</u>

**Building Comments:**

Permit Cost \$50.00

**Planning Conditions:**

Flood Zone-AE; Elevation-9'+1'=10'; Map#-3720987600J;

**Description of Work: HVAC  
 change out for a 2 ton system**

The work authorized by this permit is to be performed in accordance with the applicable Kitty Hawk Zoning Restrictions and with the Laws Governing Building Construction in the State of North Carolina and ordinances adopted by the Town of Kitty Hawk.

Any change in the work as specified is subject to prior approval of the Building Inspector.

**Owner / Applicant / Contractor / Agent** \_\_\_\_\_ **Date** \_\_\_\_\_

**Building Official** \_\_\_\_\_ **Date** \_\_\_\_\_



**Town of Kitty Hawk, NC**  
 101 Veterans Memorial Drive  
 Kitty Hawk, NC 27949  
 Phone: (252) 261-3552

**PERMIT**

Permit NO. **17883**  
 Permit Type: Residential  
 Work Classification: [Permit Type]  
 Permit Status: Open

Issue Date: 8/3/2018

Expires: 1/30/2019  
 Main Permit: Main Permit

**Project Address**

3836 N Virginia Dare Trail, Unit H-3  
 Lot:

**Zoning**

BR-3  
 Block

**Subdivision**

SEA DUNES CONDOS PHASE 3  
 PIN  
 987508881999

**Flood Zone**

VE

**Constuction Type**

Repair/Replace

**Building Code**

MECH2012

**Owner Information**

BRYAN F RUPPERT

**Address**

10120 ASHLEY MANOR LN  
 MECHANICSVILLE VA 23116

**Phone**

**Applicant Information**

Brian M Hedrick

**Address**

17 Palmetto Lane  
 Southern Shores, NC 27949

**Phone**

252-489-5836

Contractor(s)	Phone	Contractor Type	License Number	Construction Cost:	Unheated Sq. Feet	Total Sq. Feet:
Brian Mace Hedrick	(252)715-1448	Mechanical	32559	2800.00	0.00	0.00
TBD	000-000-0000	Electrical	00000			

**Building Comments:**

**Description of Work: HVAC  
 change out of a 2.5 ton system**

Permit Cost \$50.00

**Planning Conditions:**

Flood Zone-VE; Elevation-12'+1'=13'; Map# 3720987500J; Effective-09/20/2006;

The work authorized by this permit is to be performed in accordance with the applicable Kitty Hawk Zoning Restrictions and with the Laws Governing Building Construction in the State of North Carolina and ordinances adopted by the Town of Kitty Hawk.  
 Any change in the work as specified is subject to prior approval of the Building Inspector.

**Owner / Applicant / Contractor / Agent** \_\_\_\_\_ **Date** \_\_\_\_\_

**Building Official** \_\_\_\_\_ **Date** \_\_\_\_\_



**Town of Kitty Hawk, NC**  
 101 Veterans Memorial Drive  
 Kitty Hawk, NC 27949  
 Phone: (252) 261-3552

**PERMIT**

Permit NO. **17892**  
 Permit Type: Residential  
 Work Classification: [Permit Type]  
 Permit Status: Pending

Issue Date: 8/14/2018

Expires: 2/10/2019  
 Main Permit: Main Permit

**Project Address**

112 Ocean Greens Court  
 Lot  
 2 & #

**Flood Zone**

X

**Owner Information**

Christopher Michael & Linda Lee Midcalf

**Applicant Information**

Outer Banks Heating & Cooling

**Zoning**

BR-1

**Block**

**Constuction Type**

Repair/Replace

**Address**

1102 Cambridge Road, Unit G  
 Kill Devil Hills NC 27948

**Address**

P O Box 1415  
 Nags Head, NC 27959

**Subdivision**

OCEAN GREENS AT SEA SCAPE  
 PIN

986720909017

**Building Code**

MECH2012

**Phone**

**Phone**

252-441-1740

<b>Construction Cost:</b>	<u>6158.72</u>
<b>Unheated Sq. Feet</b>	<u>0.00</u>
<b>Total Sq. Feet:</b>	<u>0.00</u>

<b>Contractor(s)</b>	<b>Phone</b>	<b>Contractor Type</b>	<b>License Number</b>
Outer Banks Heating & Cooling	(252)441-1740	Mechanical	12643
Fischer Building Company	(252)480-1288	Electrical	15973-U

**Building Comments:**

**Description of Work: HVAC change out of a 2 ton system**

Permit Cost - \$50.00

**Planning Conditions:**

Flood Zone-Shaded X; Map#-3720987700J; Effective-09/20/2006;

The work authorized by this permit is to be performed in accordance with the applicable Kitty Hawk Zoning Restrictions and with the Laws Governing Building Construction in the State of North Carolina and ordinances adopted by the Town of Kitty Hawk. Any change in the work as specified is subject to prior approval of the Building Inspector.

**Owner / Applicant / Contractor / Agent** \_\_\_\_\_ **Date** \_\_\_\_\_

**Building Official** \_\_\_\_\_ **Date** \_\_\_\_\_



**Town of Kitty Hawk, NC**  
 101 Veterans Memorial Drive  
 Kitty Hawk, NC 27949  
 Phone: (252) 261-3552

**PERMIT**

Permit NO. **17893**  
 Permit Type: Commercial  
 Work Classification: [Permit Type]  
 Permit Status: Pending

Issue Date: 8/14/2018

Expires: 2/10/2019  
 Main Permit: Main Permit

<b>Project Address</b>	<b>Zoning</b>	<b>Subdivision</b>
3810 N Croatan Highway, Unit K	BC-1	BEACON COMMERCIAL LOTS 1 & 2
<b>Lot</b>	<b>Block</b>	<b>PIN</b>
B		987508785036
<b>Flood Zone</b>	<b>Constuction Type</b>	<b>Building Code</b>
X	Repair/Replace	MECH2012
<b>Owner Information</b>	<b>Address</b>	<b>Phone</b>
Harvey K & Kathleen M Hess, Jr.	P O Box 335 Kitty Hawk NC 27949	
<b>Applicant Information</b>	<b>Address</b>	<b>Phone</b>
All-In-One-Mechanical	P O Box 3392 Kitty Hawk, NC 27949	252-202-5350

<b>Construction Cost:</b>	<u>7500.00</u>
<b>Unheated Sq. Feet</b>	<u>0.00</u>
<b>Total Sq. Feet:</b>	<u>0.00</u>

<u>Contractor(s)</u>	<u>Phone</u>	<u>Contractor Type</u>	<u>License Number</u>
All-In-One Mechanical, L.L.C.	(252)491-5334	Mechanical	27675
Herbert Wallace Francis Jr.	(252)202-5350	Electrical	07784-L

**Description of Work: HVAC change out of a 3.5 ton system**

Permit Cost - \$50.00

**Planning Conditions:**

Flood Zone-Shaded X; Map#-3720987500J; Effective-09/20/2006

The work authorized by this permit is to be performed in accordance with the applicable Kitty Hawk Zoning Restrictions and with the Laws Governing Building Construction in the State of North Carolina and ordinances adopted by the Town of Kitty Hawk. Any change in the work as specified is subject to prior approval of the Building Inspector.

\_\_\_\_\_  
**Owner / Applicant / Contractor / Agent** **Date**

\_\_\_\_\_  
**Building Official** **Date**





**Town of Kitty Hawk, NC**  
 101 Veterans Memorial Drive  
 Kitty Hawk, NC 27949  
 Phone: (252) 261-3552

**PERMIT**

Permit NO. **17894**  
 Permit Type: Commercial  
 Work Classification: [Permit Type]  
 Permit Status: Pending

Issue Date: 8/14/2018

Expires: 2/10/2019  
 Main Permit: Main Permit

**Project Address**  
 4117 N Croatan Highway  
**Lot**  
 1, 2, 3  
**Flood Zone**  
 AE  
**Owner Information**  
 Elizabeth Dowless

**Zoning**  
 BC-1  
**Block**  
  
**Constuction Type**  
 Repair/Replace  
**Address**  
 402 Wallace Street  
 Kill Devil Hills NC 27948  
**Address**  
 P O Box 3392  
 Kitty Hawk, NC 27949

**Subdivision**  
 REMELE'S COMMERCIAL LOTS  
**PIN**  
 987619610580  
**Building Code**  
 MECH2012  
**Phone**  
 252-261-4973  
  
**Phone**  
 252-202-5350

**Applicant Information**  
 All-In-One Mechanical

<u>Contractor(s)</u>	<u>Phone</u>	<u>Contractor Type</u>	<u>License Number</u>	<u>Construction Cost:</u>	<u>7200.00</u>
All-In-One Mechanical, L.L.C.	(252)491-5334	Mechanical	27675	<u>Unheated Sq. Feet</u>	<u>0.00</u>
Herbert Wallace Francis Jr.	(252)202-5350	Electrical	07784-L	<u>Total Sq. Feet:</u>	<u>0.00</u>

**Building Comments:**

**Description of Work: HVAC  
 change out of a 7.5 ton system  
 for the kitchen**

Permit Cost - \$50.00

**Planning Conditions:**

Flood Zone-AE; Elevation-10'+1'=11'; Map#-3720987600J; Effective-09/20/2006

The work authorized by this permit is to be performed in accordance with the applicable Kitty Hawk Zoning Restrictions and with the Laws Governing Building Construction in the State of North Carolina and ordinances adopted by the Town of Kitty Hawk.  
 Any change in the work as specified is subject to prior approval of the Building Inspector.

\_\_\_\_\_  
**Owner / Applicant / Contractor / Agent** **Date**

\_\_\_\_\_  
**Building Official** **Date**



**Town of Kitty Hawk, NC**  
 101 Veterans Memorial Drive  
 Kitty Hawk, NC 27949  
 Phone: (252) 261-3552

**PERMIT**

Permit NO. **17887**  
 Permit Type: Residential  
 Work Classification: [Permit Type]  
 Permit Status: Pending

Issue Date: 8/2/2018

Expires: 2/3/2019

Main Permit: Main Permit

**Project Address**

3836 N Virginia Dare Trail, Unit J-1

**Lot**

1

**Flood Zone**

AE

**Owner Information**

Karen B Olson

**Applicant Information**

Air-O-Smith, Inc.

**Zoning**

BR-3

**Block**

J

**Constuction Type**

Repair/Replace

**Address**

10123 SCHOOLHOUSE WOODS  
 CT

Burke VA 22015

**Address**

330 N Dogwood Trail  
 Southern Shores, NC 27949

**Subdivision**

SEA DUNES PHASES 3 & 4

**PIN**

987508881625

**Building Code**

MECH2014

**Phone**

**Phone**

252-491-2356

Contractor(s)	Phone	Contractor Type	License Number	Construction Cost:	6700.00
Air-O-Smith, Inc.	(252)261-5238	Mechanical	30070	Unheated Sq. Feet	0.00
TBD	000-000-0000	Electrical	00000	Total Sq. Feet:	0.00

**Building Comments:**

Permit Cost - \$50.00

**Planning Conditions:**

Flood Zone-AE; Elevation-10'+1'=11"; Map#-3720987500J; Effective-09/20/2006

**Description of Work: HVAC  
 changeout of a 2.5 ton system**

The work authorized by this permit is to be performed in accordance with the applicable Kitty Hawk Zoning Restrictions and with the Laws Governing Building Construction in the State of North Carolina and ordinances adopted by the Town of Kitty Hawk. Any change in the work as specified is subject to prior approval of the Building Inspector.

Owner / Applicant / Contractor / Agent	Date
Building Official	Date



**Town of Kitty Hawk, NC**  
 101 Veterans Memorial Drive  
 Kitty Hawk, NC 27949  
 Phone: (252) 261-3552

**PERMIT**

Permit NO. **17888**  
 Permit Type: Commercial  
 Work Classification: [Permit Type]  
 Permit Status: Pending

Issue Date: 8/7/2018

Expires: 2/3/2019

Main Permit: Main Permit

**Project Address**

3864 N Croatan Highway

**Lot**

Comm Lot B

**Flood Zone**

X

**Owner Information**

Kwik Chek Realty CO, Inc./Tax Department  
 #24554

**Applicant Information**

Dusty Rhoads Heating & Air

**Zoning**

BC-1

**Block**

**Constuction Type**

Repair/Replace

**Address**

P O Box 711

Dallas TX 75221

**Address**

3822 Elijah Baum Road

Kitty Hawk, NC 27949

**Subdivision**

WOODARD ACRES

**PIN**

987507699171

**Building Code**

MECH2012

**Phone**

**Phone**

252-255-0032

Contractor(s)	Phone	Contractor Type	License Number	Construction Cost:	11180.00
Dusty Rhoads HVAC, inc.	(252)261-5892	Mechanical	21691	Unheated Sq. Feet	0.00
TBD	000-000-0000	Electrical	00000	Total Sq. Feet:	0.00

**Building Comments:**

**Description of Work: HVAC change out of 4 ton roof top system**

Permit Cost - \$50.00

**Planning Conditions:**

Flood Zone-Shaded X; Map#-3720987500J; Effective-09/20/2006

The work authorized by this permit is to be performed in accordance with the applicable Kitty Hawk Zoning Restrictions and with the Laws Governing Building Construction in the State of North Carolina and ordinances adopted by the Town of Kitty Hawk. Any change in the work as specified is subject to prior approval of the Building Inspector.

Owner / Applicant / Contractor / Agent \_\_\_\_\_ Date \_\_\_\_\_

Building Official \_\_\_\_\_ Date \_\_\_\_\_



**Town of Kitty Hawk, NC**  
 101 Veterans Memorial Drive  
 Kitty Hawk, NC 27949  
 Phone: (252) 261-3552

**PERMIT**

Permit NO. **17901**  
 Permit Type: Residential  
 Work Classification: [Permit Type]  
 Permit Status: Pending

Issue Date: 8/21/2018

Expires: 2/17/2019

Main Permit: Main Permit

**Project Address**

4801 Capri Terrace

**Lot**

51

**Flood Zone**

AE

**Owner Information**

Bartholomew P Williams & Leah H Felderman

**Applicant Information**

Outer Banks Heating & Air

**Zoning**

BR-1

**Block**

**Constuction Type**

Repair/Replace

**Address**

4801 Capri Terrace  
 Kitty Hawk NC 27949

**Address**

P O Box 1415  
 Nags Head, NC 27954

**Subdivision**

SEA SCAPE SEC 2

**PIN**

987609062093

**Building Code**

MECH2012

**Phone**

**Phone**

252-441-1740

<b>Construction Cost:</b>	6815.18
<b>Unheated Sq. Feet</b>	0.00
<b>Total Sq. Feet:</b>	0.00

Contractor(s)	Phone	Contractor Type	License Number
Outer Banks Heating & Cooling	(252)441-1740	Mechanical	12643
Fischer Building Company	(252)480-1288	Electrical	15973-U

**Building Comments:**

Permit Cost - \$50.00

**Planning Conditions:**

Flood Zone-AE; Elevation-8.3'+1'=9.3'; Map#-3720987600J; Effective-09/20/2006

**Description of Work: HVAC changeout of a 2.5 ton system**

The work authorized by this permit is to be performed in accordance with the applicable Kitty Hawk Zoning Restrictions and with the Laws Governing Building Construction in the State of North Carolina and ordinances adopted by the Town of Kitty Hawk.

Any change in the work as specified is subject to prior approval of the Building Inspector.

\_\_\_\_\_  
**Owner / Applicant / Contractor / Agent** **Date**

\_\_\_\_\_  
**Building Official** **Date**



**Town of Kitty Hawk, NC**  
 101 Veterans Memorial Drive  
 Kitty Hawk, NC 27949  
 Phone: (252) 261-3552

**PERMIT**

Permit NO. **17902**  
 Permit Type: Residential  
 Work Classification: [Permit Type]  
 Permit Status: Pending

Issue Date: 8/21/2018

Expires: 2/17/2019

Main Permit: Main Permit

**Project Address**

1057-B Twiford Street  
 Lot

**Zoning**

VR-1  
 Block

**Subdivision**

SUBDIVISION - NONE  
 PIN

**Flood Zone**

AE

**Constuction Type**

Repair/Replace

**Building Code**

MECH2012

**Owner Information**

Jonathan & Nicole Wood

**Address**

1057-B Twiford Street  
 Kitty Hawk NC 27949

**Phone**

**Applicant Information**

Air-O-Smith, Inc.

**Address**

330 N Dogwood Trail  
 Southern Shores, NC 27949

**Phone**

252-261-5238

<b>Construction Cost:</b>	6200.00
<b>Unheated Sq. Feet</b>	0.00
<b>Total Sq. Feet:</b>	0.00

Contractor(s)	Phone	Contractor Type	License Number
Air-O-Smith, Inc.	(252)261-5238	Mechanical	30070
TBD	000-000-0000	Electrical	00000

**Building Comments:**

**Description of Work: HVAC  
 change out of a 2.5 ton system**

Permit Cost \$50.00

**Planning Conditions:**

Flood Zone-AE; Elevation-8.3'+1=9.3'; Map#-3720986600J; Effective-09/20/2006

The work authorized by this permit is to be performed in accordance with the applicable Kitty Hawk Zoning Restrictions and with the Laws Governing Building Construction in the State of North Carolina and ordinances adopted by the Town of Kitty Hawk. Any change in the work as specified is subject to prior approval of the Building Inspector.

\_\_\_\_\_  
**Owner / Applicant / Contractor / Agent** **Date**

\_\_\_\_\_  
**Building Official** **Date**



**Town of Kitty Hawk, NC**  
 101 Veterans Memorial Drive  
 Kitty Hawk, NC 27949  
 Phone: (252) 261-3552

**PERMIT**

Permit NO. **17903**  
 Permit Type: Residential  
 Work Classification: [Permit Type]  
 Permit Status: Open

Issue Date: 8/22/2018

Expires: 2/18/2019

Main Permit: Main Permit

**Project Address**  
 3836 N Virginia Dare Trail Unit E-4  
 Lot

**Zoning**  
 BR-3  
**Block**

**Subdivision**  
 SEA DUNES PHASE 2  
**PIN**

**Flood Zone**  
 VE  
**Owner Information**  
 RICHARD L HEDGEPEETH

**Constuction Type**  
 Repair/Replace  
**Address**  
 9302 S MOORELAND RD  
 RICHMOND VA 23229

**Building Code**  
 MECH2012  
**Phone**

**Applicant Information**  
 Norris Mechanical, LLC

**Address**  
 P O Box 217  
 Harbinger, NC 27941

**Phone**  
 252-491-2673

Contractor(s)	Phone	Contractor Type	License Number	Construction Cost:	7800.00
Norris Mechanical	(252)491-2673	Mechanical	11100	Unheated Sq. Feet	0.00
TBD	000-000-0000	Electrical	00000	Total Sq. Feet:	0.00

**Building Comments:**

**Description of Work: HVAC  
 change out of a 2.5 ton system**

Permit Cost - \$50.00

**Planning Conditions:**

Flood Zone-VE; Elevation-12'+1'=13'; Map#-3720987500J; Effective-09/20/2006

The work authorized by this permit is to be performed in accordance with the applicable Kitty Hawk Zoning Restrictions and with the Laws Governing Building Construction in the State of North Carolina and ordinances adopted by the Town of Kitty Hawk. Any change in the work as specified is subject to prior approval of the Building Inspector.

\_\_\_\_\_  
**Owner / Applicant / Contractor / Agent** **Date**

\_\_\_\_\_  
**Building Official** **Date**



**Town of Kitty Hawk, NC**  
 101 Veterans Memorial Drive  
 Kitty Hawk, NC 27949  
 Phone: (252) 261-3552

**PERMIT**

Permit NO. **17904**  
 Permit Type: Residential  
 Work Classification: [Permit Type]  
 Permit Status: Pending

Issue Date: 8/22/2018

Expires: 2/18/2019

Main Permit: Main Permit

**Project Address**  
 219 W Tateway Road Unit G  
**Lot**

**Zoning**  
 BR-1  
**Block**

**Subdivision**  
 DUNEVIEW  
**PIN**  
 987512852105

**Flood Zone**  
 X

**Constuction Type**  
 Repair/Replace

**Building Code**  
 MECH2012

**Owner Information**  
 JAMES J ZELNOSKY

**Address**  
 108 NIMBUS CT  
 CARY NC 27513

**Phone**

**Applicant Information**  
 Outer Banks Heating & Cooling

**Address**  
 P O Box 1415  
 Nags Head, NC 27959

**Phone**  
 252-441-1740

Contractor(s)	Phone	Contractor Type	License Number	Construction Cost:	6318.50
Outer Banks Heating & Cooling	(252)441-1740	Mechanical	12643	Unheated Sq. Feet	0.00
Fischer Building Company	(252)480-1288	Electrical	15973-U	Total Sq. Feet:	0.00

**Building Comments:**

**Description of Work: HVAC change out of a 2.5 ton system**

Permit Cost - \$50.00

**Planning Conditions:**

Flood Zone-Shaded X; Map#-3720987500J; Effective-09/20/2006

The work authorized by this permit is to be performed in accordance with the applicable Kitty Hawk Zoning Restrictions and with the Laws Governing Building Construction in the State of North Carolina and ordinances adopted by the Town of Kitty Hawk. Any change in the work as specified is subject to prior approval of the Building Inspector.

**Owner / Applicant / Contractor / Agent** \_\_\_\_\_ **Date** \_\_\_\_\_

**Building Official** \_\_\_\_\_ **Date** \_\_\_\_\_



**Town of Kitty Hawk, NC**  
 101 Veterans Memorial Drive  
 Kitty Hawk, NC 27949  
 Phone: (252) 261-3552

**PERMIT**

Permit NO. **17905**  
 Permit Type: Residential  
 Work Classification: [Permit Type]  
 Permit Status: Open

Issue Date: 8/23/2018

Expires: 2/19/2019

Main Permit: Main Permit

**Project Address**

3526 N Virginia Dare Trail  
 Lot

**Zoning**

BR-1  
 Block

**Subdivision**

KITTY DUNES SOUTH  
 PIN

**Flood Zone**

VE

**Construction Type**

Repair/Replace

**Building Code**

MECH2012

**Owner Information**

MICHAEL G KUHN

**Address**

408 E VALLEYWOOD DR  
 COLLIERVILLE TN 38017

**Phone**

**Applicant Information**

Dusty Rhoads Heating & Cooling

**Address**

3822 Elijah Baum Road  
 Kitty Hawk, NC 27949

**Phone**

252-202-6852

<b>Construction Cost:</b>	1800.00
<b>Unheated Sq. Feet</b>	0.00
<b>Total Sq. Feet:</b>	0.00

Contractor(s)	Phone	Contractor Type	License Number
Dusty Rhoads HVAC, Inc.	(252)261-5892	Mechanical	21691
TBD	000-000-0000	Electrical	00000

**Description of Work: HVAC change out of a 2.5 ton outdoor only**

**Building Comments:**

Permit Cost - \$50.00

**Planning Conditions:**

Flood Zone-VE; Elevation-12'+1'=13'; Map#3720987500J; Effective-09/20/2006

The work authorized by this permit is to be performed in accordance with the applicable Kitty Hawk Zoning Restrictions and with the Laws Governing Building Construction in the State of North Carolina and ordinances adopted by the Town of Kitty Hawk. Any change in the work as specified is subject to prior approval of the Building Inspector.

\_\_\_\_\_  
**Owner / Applicant / Contractor / Agent** **Date**

\_\_\_\_\_  
**Building Official** **Date**





**Town of Kitty Hawk, NC**  
 101 Veterans Memorial Drive  
 Kitty Hawk, NC 27949  
 Phone: (252) 261-3552

**PERMIT**

Permit NO. **17906**  
 Permit Type: Residential  
 Work Classification: [Permit Type]  
 Permit Status: Open

Issue Date: 8/23/2018

Expires: 2/19/2019  
 Main Permit: Main Permit

**Project Address**  
 5210 Poplar Court

**Lot**  
 63

**Flood Zone**  
 AE

**Owner Information**  
 PAMELA NIXON

**Applicant Information**  
 Dusty Rhoads Heating & Cooling

**Zoning**  
 BR-1  
**Block**

**Constuction Type**  
 Repair/Replace

**Address**  
 5210 POPULAR CT  
 KITTY HAWK NC 27949

**Address**  
 3822 Elijah Baum Road  
 Kitty Hawk, NC 27949

**Subdivision**  
 SEA SCAPE SEC 3

**PIN**  
 986607791389

**Building Code**  
 MECH2012

**Phone**  
 252-202-5163

**Phone**  
 252-202-6851

<b>Construction Cost:</b>	4800.00
<b>Unheated Sq. Feet</b>	0.00
<b>Total Sq. Feet:</b>	0.00

Contractor(s)	Phone	Contractor Type	License Number
Dusty Rhoads HVAC, Inc.	(252)261-5892	Mechanical	21691
TBD	000-000-0000	Electrical	00000

**Building Comments:**

Permit Cost - \$50.00

**Planning Conditions:**

Flood Zone-AE; Elevation-8.3'+1'=9.3'; Map#-3720986600J; Effective-09/20/2006

**Description of Work: HVAC change out of a 1.5 ton system**

The work authorized by this permit is to be performed in accordance with the applicable Kitty Hawk Zoning Restrictions and with the Laws Governing Building Construction in the State of North Carolina and ordinances adopted by the Town of Kitty Hawk. Any change in the work as specified is subject to prior approval of the Building Inspector.

\_\_\_\_\_  
**Owner / Applicant / Contractor / Agent** **Date**

\_\_\_\_\_  
**Building Official** **Date**



**Town of Kitty Hawk, NC**  
 101 Veterans Memorial Drive  
 Kitty Hawk, NC 27949  
 Phone: (252) 261-3552

**PERMIT**

Permit NO. **17908**  
 Permit Type: Residential  
 Work Classification: [Permit Type]  
 Permit Status: Pending

Issue Date: 8/24/2018

Expires: 2/20/2019

Main Permit: Main Permit

**Project Address**

3631 Goosander Street

**Lot**

18

**Flood Zone**

AE

**Owner Information**

Donald F & Valerie R Padgett

**Applicant Information**

R A Hoy Heating & Air

**Zoning**

BR-1

**Block**

**Constuction Type**

Repair/Replace

**Address**

20354 Plainfield Street

Ashburn VA 20147

**Address**

3908 N Croatan Highway

Kitty Hawk, NC 27949

**Subdivision**

KITTY DUNES EAST

**PIN**

987512869787

**Building Code**

MECH2012

**Phone**

**Phone**

252-261-2008

Contractor(s)	Phone	Contractor Type	License Number	Construction Cost:	6229.00
				Unheated Sq. Feet	0.00
				Total Sq. Feet:	0.00
R. A. Hoy Heating & Air Conditioning, Inc.	(252)261-2008	Mechanical	13056		
R A Hoy Heating & Air Conditioning, Inc.	(252)261-2008	Electrical	22222-L		

**Building Comments:**

Permit Cost - \$50.00

**Planning Conditions:**

Flood Zone-AE; Elevation-9'+1'=10'; Map#-3720987500J; Effective-09/20/2006

**Description of Work: HVAC change out of a 2 ton system**

The work authorized by this permit is to be performed in accordance with the applicable Kitty Hawk Zoning Restrictions and with the Laws Governing Building Construction in the State of North Carolina and ordinances adopted by the Town of Kitty Hawk. Any change in the work as specified is subject to prior approval of the Building Inspector.

Owner / Applicant / Contractor / Agent

Date

Building Official

Date



**Town of Kitty Hawk, NC**  
 101 Veterans Memorial Drive  
 Kitty Hawk, NC 27949  
 Phone: (252) 261-3552

**PERMIT**

Permit NO. **17909**  
 Permit Type: Residential  
 Work Classification: [Permit Type]  
 Permit Status: Pending

Issue Date: 8/24/2018

Expires: 2/20/2019

Main Permit: Main Permit

**Project Address**

100 W Kitty Hawk Road, Unit A-1

**Lot**

Unit A1

**Flood Zone**

X

**Owner Information**

Katherine S Davis

**Applicant Information**

R A Hoy Heating & Air

**Zoning**

BR-2

**Block**

**Constuction Type**

Repair/Replace

**Address**

100 W Kitty Hawk Road  
 Kitty Hawk 27949

**Address**

3908 N Croatan Highway  
 Kitty Hawk, NC 27949

**Subdivision**

DUNETOP TOWNHOMES

**PIN**

987507696391

**Building Code**

MECH2012

**Phone**

**Phone**

252-261-2008

<b>Construction Cost:</b>	3408.00
<b>Unheated Sq. Feet</b>	0.00
<b>Total Sq. Feet:</b>	0.00

Contractor(s)	Phone	Contractor Type	License Number
R A Hoy Heating & Air Conditioning, Inc.	(252)261-2008	Electrical	22222-L
R. A. Hoy Heating & Air Conditioning, Inc.	(252)261-2008	Mechanical	13056

**Description of Work: HVAC change out of a 2 ton outdoor unit only**

**Building Comments:**

Permit Cost - \$50.00

**Planning Conditions:**

Flood Zone-Shaded X; Map#-3720987500J; Effective-09/20/2006

The work authorized by this permit is to be performed in accordance with the applicable Kitty Hawk Zoning Restrictions and with the Laws Governing Building Construction in the State of North Carolina and ordinances adopted by the Town of Kitty Hawk. Any change in the work as specified is subject to prior approval of the Building Inspector.

\_\_\_\_\_  
**Owner / Applicant / Contractor / Agent** **Date**

\_\_\_\_\_  
**Building Official** **Date**



**Town of Kitty Hawk, NC**  
 101 Veterans Memorial Drive  
 Kitty Hawk, NC 27949  
 Phone: (252) 261-3552

**PERMIT**

Permit NO. **17913**  
 Permit Type: Commercial  
 Work Classification: [Permit Type]  
 Permit Status: Pending

Issue Date: 8/28/2018

Expires: 2/24/2019

Main Permit: Main Permit

**Project Address**  
 3848 N Virginia Dare Trail  
**Lot**

**Zoning**  
 BC-1  
**Block**

**Subdivision**  
 SUBDIVISION - NONE  
**PIN**

**Flood Zone**  
 VE

**Constuction Type**  
 Repair/Replace

**Building Code**  
 BLDG2012

**Owner Information**  
 BLACK PELICAN LLC

**Address**  
 PO BOX 90  
 KITTY HAWK NC 27949

**Phone**  
 252-715-4564

**Applicant Information**  
 Ryland Hughes, Jr.

**Address**  
 3945 Pineway Drive  
 Kitty Hawk, NC 27949

**Phone**  
 252-202-1111

Contractor(s)	Phone	Contractor Type	License Number	Construction Cost:	2500.00
				Unheated Sq. Feet	0.00
				Total Sq. Feet:	0.00
Ryland James Hughes, Jr.	252-261-6450	General	76503		
TBD	000-000-0000	Mechanical	00000		

**Description of Work: Remove HVAC to repair roof leak and reinstall HVAC**

**Building Comments:**

Permit Cost - \$110.00

**Planning Conditions:**

Flood Zone-VE; Elevation-12'+1'=13'; Map#-3720987500J; Effective-09/20/2006

The work authorized by this permit is to be performed in accordance with the applicable Kitty Hawk Zoning Restrictions and with the Laws Governing Building Construction in the State of North Carolina and ordinances adopted by the Town of Kitty Hawk. Any change in the work as specified is subject to prior approval of the Building Inspector.

**Owner / Applicant / Contractor / Agent**

**Date**

**Building Official**

**Date**



BUILDING PERMIT

PERMIT NUMBER: 4586

DATE: 8-13-18

OWNER: The Preservation owners Assoc  
ADDRESS: P.O. Box 457  
CITY: Manteo STATE: NC ZIP: 27954

BUILDER: MILSTON APART  
CONTRACTOR LICENSE #: 78077  
ADDRESS: 700 MANTON WOODS DRIVE  
CITY: Manteo STATE: NC ZIP: 27954  
PHONE: 252-227-2678

LOCATION OF BUILDING SITE: 136 LANE 117 CIRCLE ZONING DISTRICT: \_\_\_\_\_  
PARCEL NUMBER: 025818082 FLOOD ZONE: \_\_\_\_\_ BFE: \_\_\_\_\_ FFE: \_\_\_\_\_  
NC POWER WORK REQUEST NUMBER OR POWER METER NUMBER (IF APPLICABLE) \_\_\_\_\_  
ERECT: \_\_\_\_\_ ALTER: \_\_\_\_\_ REPAIR: \_\_\_\_\_

SQUARE FOOTAGE OF HEATED SPACE: \_\_\_\_\_ UNHEATED SPACE: \_\_\_\_\_  
NUMBER OF STORIES: \_\_\_\_\_ ROOMS: \_\_\_\_\_ BATHS: \_\_\_\_\_ FIREPLACES: \_\_\_\_\_

FINISHES:  
EXTERIOR WALLS: \_\_\_\_\_ INTERIOR WALLS: \_\_\_\_\_ ROOF TYPE AND MATERIAL: \_\_\_\_\_  
HEAT TYPE: \_\_\_\_\_ INSULATION & R VALUE: \_\_\_\_\_ FLOORING: \_\_\_\_\_  
FOOTING: \_\_\_\_\_ FOUNDATION: \_\_\_\_\_

ADDITIONAL NOTES: INSTALL ROOF LIFT AS PER CRACK PERMIT

EACH APPLICATION MUST BE ACCOMPANIED BY:

- SITE PLAN SHOWING ACTUAL DIMENSIONS OF THE LOT, ALL STRUCTURES, DRIVEWAYS AND PARKING
- TWO SETS OF WORKING DRAWINGS
- ELEVATION OF THE SITE
- RESTAURANTS: HEALTH DEPARTMENT APPROVALS
- CAMA PERMIT IF REQUIRED

\*\*\* CALL BUILDING INSPECTOR 24 HOURS IN ADVANCE FOR ALL INSPECTIONS\*\*\*

This building is to be erected or altered in accordance with the latest edition of the General Building Laws of North Carolina and all amendments as adopted by the Town of Manteo. This permit is valid for six (6) months. Compliance with Building Regulations is the responsibility of the undersigned applicant. Any change in construction or site plans will be subject to prior notification of the Planning and Zoning Department and the Building Inspector.

Estimated or Contract Cost: 10,080<sup>00</sup> Permit Cost: 150<sup>00</sup>

Date of Issuance: 8/14/18

Seals: [Signature]  
Applicant

[Signature]  
Inspector

[Signature]  
Zoning Official

Conditions of Permit: \_\_\_\_\_



PLUMBING PERMIT

PERMIT NUMBER: 4588

DATE: 8/14/2018

OWNER: OUTER BANKS INSURANCE CONTRACTOR: SELF  
 ADDRESS: PO BOX 759 ADDRESS: PO BOX 759  
 CITY: MANTEO STATE: NC ZIP: 27954 CITY: MANTEO STATE: NC ZIP: 27954  
 PHONE: 252-305-8596 PHONE: 252-305-8596

LOCATION: 101 BUDLEIGH PARCEL NUMBER: 024585000  
 BUILDER: SELF

NUMBER OF FIXTURES: 5 NUMBER OF WATER HEATERS: N/A

LICENSE NUMBER: \_\_\_\_\_

COST: \$8,000 Permit Cost: \$150

If repairing or altering, please describe work: ADDING A BATHROOM TO AN  
EXISTING SPACE.

\*\*\*CALL BUILDING INSPECTOR 24 HOURS IN ADVANCE FOR ALL INSPECTIONS\*\*\*

DATE OF ISSUANCE: 8/14/2018 SEALS: Allison Martin  
(Applicant)

Fred  
(Inspector)

ALLISON MARTIN

BLIVENS PLUMBING



ELECTRICAL PERMIT

PERMIT NUMBER: 4591

DATE: AUG 20, 2018

OWNER: DARE STORAGE  
WILLIAM J. ADAMS  
ADDRESS: ~~413 S. HWY 64/264~~  
CITY: MANTO STATE: NC ZIP: \_\_\_\_\_  
PHONE: PO BOX 879  
252-441-4872

CONTRACTOR: SEACOAST ELECTRIC  
ADDRESS: 4400 RIDGE RD  
CITY: KIDD HAWK STATE: NC ZIP: 27949  
PHONE: 252-261-6229

LOCATION: 413 S. HWY 64/264 PARCEL NUMBER: \_\_\_\_\_  
BUILDER: N/A

RESIDENTIAL:  NEW  ALTERATION  
COMMERCIAL:  NEW  ALTERATION

NC POWER WORK REQUEST NUMBER OR POWER METER NUMBER (IF APPLICABLE) \_\_\_\_\_

SERVICE AMPS: \_\_\_\_\_ INCREASED TO: N/A  
LICENSE NUMBER: 07781-I WORK ORDER NUMBER: \_\_\_\_\_  
COST: \$600 Permit Cost: \$75.00

If repairing or altering, please describe work: INSTALL THREE EMERG. / EXIT  
SIGNS IN CORRIDORS #1, 3, 7.

\*\*\*CALL BUILDING INSPECTOR 24 HOURS IN ADVANCE FOR ALL INSPECTIONS\*\*\*

DATE OF ISSUANCE: 8/21/18 SEALS: [Signature]  
(Applicant)

[Signature]  
(Inspector)



SIGN PERMIT

PERMIT NUMBER: 4592

DATE: 8/14/18

APPLICANT: TIDEWATER HOME FUNDING, LLC

ADDRESS: 1108 EDEN WAY NORTH  
CHESAPEAKE, VIRGINIA 23320

PHONE: 757-366-8690

PAID  
Check #: 22557  
By: BA Date: 8/14/18

THIS PERMIT IS TO: ERECT  \* ALTER:  REPAIR:  A SIGN. (PLEASE CHECK ONE.)

TYPE OF SIGN: WOOD

LOCATION OF SIGN: 514 HIGHWAY 64, UNIT 4, MANTEO, NC 27954

PARCEL NUMBER: 030860000

ZONING DISTRICT: B-2 SQUARE FOOTAGE OF SIGN: 6.32 SQARE FEET

THIS PERMIT MUST BE ACCOMPANIED BY:

- DRAWING OF SIGN TO SCALE
- LOCATION OF PROPOSED SIGN AND ANY OTHER SIGNS ON THE SAME LOT
- DRAWING TO SCALE OF FACE OF BUILDING IF THE SIGN IS TO BE MOUNTED ON THE FACE OF A BUILDING

Beth Twyne  
CONTRACTOR/OWNER SIGNATURE

8/21/18  
DATE

[Signature]  
BUILDING INSPECTOR

8/21/18  
DATE

COMMENTS:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

COST OF PERMIT: \$50



SCANNED

AUG 21 2018



~~EMAILED~~

MECHANICAL PERMIT

PERMIT NUMBER: 4543

DATE: 8/21/18

OWNER: HASSELL BROS. LLC (LT READQUARTERS)

ADDRESS: 321 N. Hwy 64/264

CONTRACTOR: MASTOR HEATING & COOLING

CITY: MANTEO STATE: NC ZIP: 27854

ADDRESS: P.O. BOX 707

PHONE: \_\_\_\_\_

CITY: KITTY HAWK STATE: NC ZIP: 27949

LOCATION: 321 N. Hwy 64/264

PHONE: 252-255-0095

BUILDER: \_\_\_\_\_

NUMBER OF HEATING UNITS: \_\_\_\_\_

NUMBER OF B.T.U.'s: \_\_\_\_\_

LICENSE NUMBER: 18066

COST: 11,000.-

NUMBER OF REGISTERS: \_\_\_\_\_

TONNAGE: 10

WORK ORDER NUMBER: \_\_\_\_\_

Permit Cost: 150.00

If repairing or altering, please describe work: HVAL change out: (1) 10 ton R 410A American Standard R87 top gas pack package unit.

\*\*\*CALL BUILDING INSPECTOR 24 HOURS IN ADVANCE FOR ALL INSPECTIONS\*\*

DATE OF ISSUANCE: 8/24/18

SEALS: Amrion Pritchett (Applicant) [Signature] (Inspector)



PERMIT NUMBER: 4594

BUILDING PERMIT

DATE: 8/21/18

OWNER: GRANDER, LLC  
ADDRESS: 2000 SAILFISH DR  
CITY: MANTEO STATE: NC ZIP: 27954

BUILDER: DESIGN ELECTRIC INC  
CONTRACTOR LICENSE #: U 116336  
ADDRESS: P.O. BOX 5772  
CITY: CHARLOTTEVILLE STATE: VA ZIP: 22905  
PHONE: \_\_\_\_\_

LOCATION OF BUILDING SITE: ON EXISTING ROOFTOP ZONING DISTRICT: COMMERCIAL OTHER  
PARCEL NUMBER: 030645000 FLOOD ZONE: AE(1) BFE: \_\_\_\_\_ FFE: \_\_\_\_\_ WATERFRONT: \_\_\_\_\_  
NC POWER WORK REQUEST NUMBER OR POWER METER NUMBER (IF APPLICABLE) \_\_\_\_\_  
ERECT: X ALTER: \_\_\_\_\_ REPAIR: \_\_\_\_\_

SQUARE FOOTAGE OF HEATED SPACE: NA UNHEATED SPACE: \_\_\_\_\_  
NUMBER OF STORIES: NA ROOMS: NA BATHS: NA FIREPLACES: NA  
FINISHES: \_\_\_\_\_  
EXTERIOR WALLS: NA INTERIOR WALLS: NA ROOF TYPE AND MATERIAL: NA  
HEAT TYPE: NA INSULATION & R VALUE: NA FLOORING: NA  
FOOTING: NA FOUNDATION: NA

ADDITIONAL NOTES: VERIZON WIRELESS INSTALLATION OF ANTENNA AND ASSOCIATED EQUIPMENT ON ROOFTOP - PER THE ATTACHED PLANS

EACH APPLICATION MUST BE ACCOMPANIED BY:

- SITE PLAN SHOWING ACTUAL DIMENSIONS OF THE LOT, ALL STRUCTURES, DRIVEWAYS AND PARKING
- TWO SETS OF WORKING DRAWINGS
- ELEVATION OF THE SITE
- RESTAURANTS: HEALTH DEPARTMENT APPROVALS
- CAMA PERMIT IF REQUIRED
- NC LIEN AGENT FORM

\*\*\* CALL BUILDING INSPECTOR 24 HOURS IN ADVANCE FOR ALL INSPECTIONS\*\*\*

This building is to be erected or altered in accordance with the latest edition of the General Building Laws of North Carolina and all amendments as adopted by the Town of Manteo. This permit is valid for six (6) months. Compliance with Building Regulations is the responsibility of the undersigned applicant. Any change in construction or site plans will be subject to prior notification of the Planning and Zoning Department and the Building Inspector.

Estimated or Contract Cost: \$24,000 Permit Cost: 290<sup>00</sup>%  
Date of Issuance: 8/21/18

Seals: KELSEY CHASE  
Applicant

[Signature]  
Inspector

[Signature]  
Zoning Official

Conditions of Permit: SPECIAL INSPECTION REQUIRED

8/21/18 mm n sent to



MECHANICAL PERMIT

PERMIT NUMBER: 4596

DATE: 8/28/18

OWNER: Janet Haspert CONTRACTOR: Beach Air Heating and Cooling  
ADDRESS: 407 Fernando Street ADDRESS: 551 NC 345  
CITY: Manteo STATE: NC ZIP: 27954 CITY: Manteo STATE: NC ZIP: 27954  
PHONE: 410-707-6075 PHONE: 252-473-1995

LOCATION: 407  
407 Fernando Street PARCEL NUMBER: \_\_\_\_\_  
BUILDER: \_\_\_\_\_

NUMBER OF HEATING UNITS: 1 NUMBER OF AIR HANDLERS: \_\_\_\_\_  
NUMBER OF REGISTERS: \_\_\_\_\_ TONNAGE: 3.5  
LICENSE NUMBER: 29768 WORK ORDER NUMBER: \_\_\_\_\_  
COST: 7,188.00 Permit Cost: 150.00

If repairing or altering, please describe work: remove 3.5 ton gas package unit, install 3.5 ton gas package unit

\*\*\*CALL BUILDING INSPECTOR 24 HOURS IN ADVANCE FOR ALL INSPECTIONS\*\*\*

DATE OF ISSUANCE: 8/28/18 SEALS: Catpaw \_\_\_\_\_ elbert \_\_\_\_\_  
(Applicant) (Inspector)

(UPDATED 7/2017)



BUILDING PERMIT

PERMIT NUMBER: 4597

DATE: 8/29/2018

OWNER: Frank & Deborah Sheppard  
ADDRESS: 2528 Village Manor Way  
CITY: Raleigh STATE: NC ZIP: 27614

BUILDER: Lyn Small Inc.  
CONTRACTOR LICENSE #: 29760  
ADDRESS: 113 Ballast Rock Dr.  
CITY: Powells Point STATE: NC ZIP: 27966  
PHONE: 252-491-8562

LOCATION OF BUILDING SITE: 83 Ballast Point Drive, Pirates Cove, Manteo, NC 27954 ZONING DISTRICT: \_\_\_\_\_  
PARCEL NUMBER: 025694497 FLOOD ZONE: \_\_\_\_\_ BFE: \_\_\_\_\_ FFE: \_\_\_\_\_  
NC POWER WORK REQUEST NUMBER OR POWER METER NUMBER (IF APPLICABLE) \_\_\_\_\_  
ERECT: x ALTER: \_\_\_\_\_ REPAIR: \_\_\_\_\_

SQUARE FOOTAGE OF HEATED SPACE: \_\_\_\_\_ UNHEATED SPACE: \_\_\_\_\_  
NUMBER OF STORIES: \_\_\_\_\_ ROOMS: \_\_\_\_\_ BATHS: \_\_\_\_\_ FIREPLACES: \_\_\_\_\_  
FINISHES: \_\_\_\_\_  
EXTERIOR WALLS: \_\_\_\_\_ INTERIOR WALLS: \_\_\_\_\_ ROOF TYPE AND MATERIAL: \_\_\_\_\_  
HEAT TYPE: \_\_\_\_\_ INSULATION & R VALUE: \_\_\_\_\_ FLOORING: \_\_\_\_\_  
FOOTING: \_\_\_\_\_ FOUNDATION: \_\_\_\_\_

ADDITIONAL NOTES: Constructing a new 6' x 88' pier walkway to a 20' x 20' pier platform (6' x 106' total length), install dock pilings for the pier and 2 boat lift pilings along with a boat lift installation. Wire electrical to the end of the pier as well as run the water connection to the end of the pier.

EACH APPLICATION MUST BE ACCOMPANIED BY:

- SITE PLAN SHOWING ACTUAL DIMENSIONS OF THE LOT, ALL STRUCTURES, DRIVEWAYS AND PARKING
- TWO SETS OF WORKING DRAWINGS
- ELEVATION OF THE SITE
- RESTAURANTS: HEALTH DEPARTMENT APPROVALS
- CAMA PERMIT IF REQUIRED

\*\*\* CALL BUILDING INSPECTOR 24 HOURS IN ADVANCE FOR ALL INSPECTIONS\*\*\*

This building is to be erected or altered in accordance with the latest edition of the General Building Laws of North Carolina and all amendments as adopted by the Town of Manteo. This permit is valid for six (6) months. Compliance with Building Regulations is the responsibility of the undersigned applicant. Any change in construction or site plans will be subject to prior notification of the Planning and Zoning Department and the Building Inspector.

Estimated or Contract Cost: \$67,000 Date of Issuance: 8/31/18 Permit Cost: 1028<sup>00</sup> 7/10

Seals: [Signature] Applicant      [Signature] Inspector      [Signature] Zoning Official

Conditions of Permit: \_\_\_\_\_



BUILDING PERMIT

PERMIT NUMBER: 4598 DATE: 8/30/18  
 OWNER: Robin Hiddemen BUILDER: Vaughan Robinson  
 OWNER: Louis Codeger BUILDER: Coastal Cottage Contracting, LLC  
 ADDRESS: 1325 Ballast Point Dr. #1325 CONTRACTOR LICENSE #: 75876  
 CITY: Manteo STATE: NC ZIP: \_\_\_\_\_ ADDRESS: PO Box 433  
 CITY: Nags Head STATE: NC ZIP: 27959  
 PHONE: 252-715-2576

LOCATION OF BUILDING SITE: 1325 Ballast Point Dr. ZONING DISTRICT: 10  
 PARCEL NUMBER: 025694140 FLOOD ZONE: AE10 BFE: 10 FFE: \_\_\_\_\_  
 NC POWER WORK REQUEST NUMBER OR POWER METER NUMBER (IF APPLICABLE) NA  
 ERECT: \_\_\_\_\_ ALTER:  REPAIR: \_\_\_\_\_

SQUARE FOOTAGE OF HEATED SPACE: 1899 sf UNHEATED SPACE: \_\_\_\_\_  
 NUMBER OF STORIES: 1 ROOMS: 4 BATHS: 3 FIREPLACES: \_\_\_\_\_

FINISHES:

EXTERIOR WALLS: Cedar Lap INTERIOR WALLS: Drywall ROOF TYPE AND MATERIAL: Asphalt  
 HEAT TYPE: Electric INSULATION & R VALUE: NA FLOORING: LVT  
 FOOTING: NA FOUNDATION: NA

ADDITIONAL NOTES: Remodel kitchen, 3 bathrooms, replace HVAC  
replace 2 stairs and flooring  
Frame in closet @ master

EACH APPLICATION MUST BE ACCOMPANIED BY:

- SITE PLAN SHOWING ACTUAL DIMENSIONS OF THE LOT, ALL STRUCTURES, DRIVEWAYS AND PARKING
- TWO SETS OF WORKING DRAWINGS
- ELEVATION OF THE SITE
- RESTAURANTS: HEALTH DEPARTMENT APPROVALS
- CAMA PERMIT IF REQUIRED

\*\*\* CALL BUILDING INSPECTOR 24 HOURS IN ADVANCE FOR ALL INSPECTIONS\*\*\*

This building is to be erected or altered in accordance with the latest edition of the General Building Laws of North Carolina and all amendments as adopted by the Town of Manteo. This permit is valid for six (6) months. Compliance with Building Regulations is the responsibility of the undersigned applicant. Any change in construction or site plans will be subject to prior notification of the Planning and Zoning Department and the Building Inspector.

Estimated or Contract Cost: 90,000 Permit Cost: \$950  
 Date of Issuance: 8/30/2018

Seals: Coastal Cottage Contracting, LLC [Signature] for Fred Featherstone [Signature]  
 Applicant [Signature] Inspector Zoning Official

Conditions of Permit: \_\_\_\_\_



BUILDING PERMIT

PERMIT NUMBER: 4599

DATE: 8-30-18

OWNER: Alex Kaban  
ADDRESS: 822 Buck Bay Road  
CITY: Manteo STATE: NC ZIP: 27954

BUILDER: MUSTON MATEUR  
CONTRACTOR LICENSE #: 78077  
ADDRESS: 7000 Manteo Roads Dr  
CITY: Manteo STATE: NC ZIP: 27954  
PHONE: 252-262-2678

LOCATION OF BUILDING SITE: 822 Buck Bay Road ZONING DISTRICT: \_\_\_\_\_  
PARCEL NUMBER: 025709017 FLOOD ZONE: \_\_\_\_\_ BFE: \_\_\_\_\_ FFE: \_\_\_\_\_  
NC POWER WORK REQUEST NUMBER OR POWER METER NUMBER (IF APPLICABLE) \_\_\_\_\_  
ERECT: \_\_\_\_\_ ALTER: \_\_\_\_\_ REPAIR: \_\_\_\_\_

SQUARE FOOTAGE OF HEATED SPACE: \_\_\_\_\_ UNHEATED SPACE: \_\_\_\_\_  
NUMBER OF STORIES: \_\_\_\_\_ ROOMS: \_\_\_\_\_ BATHS: \_\_\_\_\_ FIREPLACES: \_\_\_\_\_  
FINISHES: \_\_\_\_\_  
EXTERIOR WALLS: \_\_\_\_\_ INTERIOR WALLS: \_\_\_\_\_ ROOF TYPE AND MATERIAL: \_\_\_\_\_  
HEAT TYPE: \_\_\_\_\_ INSULATION & R VALUE: \_\_\_\_\_ FLOORING: \_\_\_\_\_  
FOOTING: \_\_\_\_\_ FOUNDATION: \_\_\_\_\_

ADDITIONAL NOTES: 53' CONSTRUCT A NEW BULKHEAD AS PER REGULATIONS

EACH APPLICATION MUST BE ACCOMPANIED BY:

- SITE PLAN SHOWING ACTUAL DIMENSIONS OF THE LOT, ALL STRUCTURES, DRIVEWAYS AND PARKING
- TWO SETS OF WORKING DRAWINGS
- ELEVATION OF THE SITE
- RESTAURANTS: HEALTH DEPARTMENT APPROVALS
- CAMA PERMIT IF REQUIRED

\*\*\* CALL BUILDING INSPECTOR 24 HOURS IN ADVANCE FOR ALL INSPECTIONS\*\*\*

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Estimated or Contract Cost: 6341<sup>00</sup> Date of Issuance: 9/4/18 Permit Cost: 102<sup>00</sup>/100

Seals. [Signature]  
Applicant

[Signature]  
Inspector

[Signature]  
Zoning Official

Conditions of Permit: \_\_\_\_\_

# TOWN OF NAGS HEAD

PO Box 99  
Nags Head, NC 27959  
Phone (252) 441-7016 Fax (252) 4414290



## Building Permit

RE2018-1735

<b>Owner Name:</b> Mark T Ballog	<b>Owner</b> 2625 S Bridge Ln
<b>Owner Phone:</b> 252 573 9756	<b>Address:</b> Nags Head NC 27959
<b>Parcel PIN:</b> 989206287549	<b>Zoning:</b> Imported Default District
<b>Address:</b> 202 W Albemarle Dr	<b>Lot/Block/Sec:</b> LOT: 3 BLK: D SEC:
<b>Subdivision:</b> VISTA COLONY WEST	
<b>Contractor Name:</b> Property Owner	<b>Contractor</b>
<b>Contractor Phone:</b>	<b>Address:</b> Nags Head NC
<b>Description:</b> Demo ground floor enclosure: includes removing bathroom fixtures, paneling, kitchen cabinets, carpet, etc.	
<b>Construction Value:</b> 1000.00	<b>Construction Type:</b> Repair
<b>Foundation Type:</b>	<b>Heated Space:</b> 0 <b>Unheated Space:</b> 0
	<b># of Bedrooms:</b> 0 <b># of Baths:</b> 0
<b>Zoning Permit:</b> see file	<b>FEMA Flood Zone:</b> X
<b>Septic Permit:</b> na	<b>BFE:</b>
<b>CAMA Permit:</b> na	<b>Flood Permit:</b>
<b>PW Permit#</b> na	

### Conditions:

Electrician must pull no cost permit; See CONDITIONS on Zoning Permit; Additional engineering may be required; FINAL INSPECTION REQUIRED PRIOR TO ISSUANCE OF CERTIFICATE OF COMPLIANCE;

Address #s on home if none are present. Licensed NC electrician needs permit to deal with wiring. Remove all unsafe conditions.

**Total Fees Paid/Due:** 75.00 **Invoice #:** 2018-00857

- All work shall conform to all applicable North Carolina State Building codes and Ordinances of the Town of Nags Head and shall be the responsibility of the undersigned applicant.
- All work shall conform to the plans and specifications provided with the application.
- Any damage to the multi-use path or adjoining right-of-way shall be immediately repaired by the owner and/or applicant.

In accordance with GS160A-418, a permit expires 6 months after the date of issuance if the work authorized by the permit has not been commenced. If, after commencement, the work is discontinued for a period of 12 months (no inspections have taken place) the permit immediately expires. No work authorized by a permit that has expired may be performed until a new permit has been issued.

Building Inspector 08/01/2018 Responsible Party Date

This permit only authorizes work expressly identified in the building permit application, unless otherwise specified herein. The work done shall comply with the State Building Code and all other applicable Federal, State and local laws. The approval and issuance of this permit conveys no rights or guarantees for any future proposed modifications of this permit or the issuance of new permits for any future proposed use and development of the property.

# TOWN OF NAGS HEAD

PO Box 99  
Nags Head, NC 27959  
Phone (252) 441-7016 Fax (252) 4414290



## Building Permit

**RE2018-1752**

<b>Owner Name:</b> LACEY, JOHN M JR	<b>Owner</b> PO Box 1771
<b>Owner Phone:</b>	<b>Address:</b> NAGS HEAD NC 27959
<b>Parcel PIN:</b> 080006484670	<b>Zoning:</b> Imported Default District
<b>Address:</b> 6118 E Baymeadow Dr E	<b>Lot/Block/Sec:</b> LOT: 51 BLK: SEC:
<b>Subdivision:</b> SEASIDE SOUTH SEC 2	
<b>Contractor Name:</b> Property Owner	<b>Contractor</b>
<b>Contractor Phone:</b>	<b>Address:</b> Nags Head NC
<b>Description:</b> Replace deck, handrails, joists on top east facing deck; staying in same footprint. Replace windows	
<b>Construction Value:</b> 18000.00	<b>Construction Type:</b> Other
<b>Foundation Type:</b>	<b>Heated Space:</b> 0 <b>Unheated Space:</b> 0
	<b># of Bedrooms:</b> 0 <b># of Baths:</b> 0
<b>Zoning Permit:</b> see file	<b>FEMA Flood Zone:</b> ae
<b>Septic Permit:</b> na	<b>BFE:</b> 9
<b>CAMA Permit:</b> na	<b>Flood Permit:</b> 2018.1753
<b>PW Permit#</b> na	

### Conditions:

CALL FOR ALL REQUIRED INSPECTIONS; All new work to meet current code; Additional engineering may be required; FINAL INSPECTION REQUIRED PRIOR TO ISSUANCE OF CERTIFICATE OF COMPLIANCE;

STOP WORK ORDER

**Total Fees Paid/Due:** 165.00 **Invoice #:** 2018-00858

- All work shall conform to all applicable North Carolina State Building codes and Ordinances of the Town of Nags Head and shall be the responsibility of the undersigned applicant.
- All work shall conform to the plans and specifications provided with the application.
- Any damage to the multi-use path or adjoining right-of-way shall be immediately repaired by the owner and/or applicant.

In accordance with GS160A-418, a permit expires 6 months after the date of issuance if the work authorized by the permit has not been commenced. If, after commencement, the work is discontinued for a period of 12 months (no inspections have taken place) the permit immediately expires. No work authorized by a permit that has expired may be performed until a new permit has been issued.

Building Inspector 08/01/2018 Responsible Party Date

This permit only authorizes work expressly identified in the building permit application, unless otherwise specified herein. The work done shall comply with the State Building Code and all other applicable Federal, State and local laws. The approval and issuance of this permit conveys no rights or guarantees for any future proposed modifications of this permit or the issuance of new permits for any future proposed use and development of the property.



# TOWN OF NAGS HEAD

PO Box 99  
Nags Head, NC 27959  
Phone (252) 441-7016 Fax (252) 4414290



## Building Permit

RE2018-1711

<b>Owner Name:</b> GOETSCH, MICHAEL F - GOETSCH, ANGELAMETUX	<b>Owner</b> 313 W Villa Dunes Dr
<b>Owner Phone:</b> 252 256 1007	<b>Address:</b> NAGS HEAD NC 27959
<b>Parcel PIN:</b> 989210259375	<b>Zoning:</b> Imported Default District
<b>Address:</b> 313 W Villa Dunes Dr W	<b>Lot/Block/Sec:</b> LOT: 44 BLK: SEC:
<b>Subdivision:</b> KITTY DUNES ESTATES	
<b>Contractor Name:</b> Jennings, Jaden Matthew	<b>Contractor</b> 4025 Pineway Dr
<b>Contractor Phone:</b> 252 267 6503	<b>Address:</b> Kitty Hawk CA 27949
<b>Description:</b> Remove existing decks & frame foyer for 112 Htd SF addition (mudroom); add covered porch & open deck & landing; install siding on east wall	
<b>Construction Value:</b> 61084.00	<b>Construction Type:</b> Addition
<b>Foundation Type:</b>	<b>Heated Space:</b> 0 <b>Unheated Space:</b> 0
	<b># of Bedrooms:</b> 0 <b># of Baths:</b> 0
<b>Zoning Permit:</b> 2018.0227	<b>FEMA Flood Zone:</b> X
<b>Septic Permit:</b> 27969	<b>BFE:</b>
<b>CAMA Permit:</b> na	<b>Flood Permit:</b>
<b>PW Permit#:</b> na	

### Conditions:

CALL FOR ALL REQUIRED INSPECTIONS; All subcontractors shall obtain all permits required by State building codes prior to starting work; All new work to meet current code; See CONDITIONS on Zoning Permit; Additional engineering may be required; Piling inspection required; FINAL INSPECTION REQUIRED PRIOR TO ISSUANCE OF CERTIFICATE OF COMPLIANCE;

Address #s to code if none are present. All subs shall pull permits before commencing work. Smokes and CO2 detectors to code if not to code already. Call for all required inspections. Call for final inspections

**Total Fees Paid/Due:** 325.00 **Invoice #:** 2018-00860

- All work shall conform to all applicable North Carolina State Building codes and Ordinances of the Town of Nags Head and shall be the responsibility of the undersigned applicant.
- All work shall conform to the plans and specifications provided with the application.
- Any damage to the multi-use path or adjoining right-of-way shall be immediately repaired by the owner and/or applicant.

In accordance with GS160A-418, a permit expires 6 months after the date of issuance if the work authorized by the permit has not been commenced. If, after commencement, the work is discontinued for a period of 12 months (no inspections have taken place) the permit immediately expires. No work authorized by a permit that has expired may be performed until a new permit has been issued.

Building Inspector 08/02/2018 Responsible Party Date

This permit only authorizes work expressly identified in the building permit application, unless otherwise specified herein. The work done shall comply with the State Building Code and all other applicable Federal, State and local laws. The approval and issuance of this permit conveys no rights or guarantees for any future proposed modifications of this permit or the issuance of new permits for any future proposed use and development of the property.

# TOWN OF NAGS HEAD

PO Box 99  
Nags Head, NC 27959  
Phone (252) 441-7016 Fax (252) 4414290



## Building Permit

RE2018-1629

<b>Owner Name:</b> Farrell, Gary M - Farrell, Gail H	<b>Owner</b> 708 Crystal Ln
<b>Owner Phone:</b>	<b>Address:</b> Virginia Beach VA 23451
<b>Parcel PIN:</b> 989206395908	<b>Zoning:</b> Imported Default District
<b>Address:</b> 2602 S Memorial Ave S	
<b>Subdivision:</b> NAGS HEAD SHORES AMENDED SEC 2	<b>Lot/Block/Sec:</b> LOT: 11 BLK: 8 SEC: 2
<b>Contractor Name:</b> Property Owner	<b>Contractor</b>
<b>Contractor Phone:</b>	<b>Address:</b> Nags Head NC

**Description:** Repair and remodel kitchen and rear deck to stay in existing footprint

**Construction Value:** 26700.00

**Foundation Type:**

**Construction Type:** Remodel

**Heated Space:** 0

**Unheated Space:** 0

**# of Bedrooms:** 0

**# of Baths:** 0

**Zoning Permit:** 2018.0219

**Septic Permit:** na

**CAMA Permit:**

**PW Permit#** na

**FEMA Flood Zone:** ae

**BFE:** 10

**Flood Permit:** 2018.1630

### Conditions:

CALL FOR ALL REQUIRED INSPECTIONS; All subcontractors shall obtain all permits required by State building codes prior to starting work; All new work to meet current code; See CONDITIONS on Zoning Permit; Dwelling is not compliant with floodplain regulations and all work must be within 50% of building value as documented in the substantial improvement forms; FINAL INSPECTION REQUIRED PRIOR TO ISSUANCE OF CERTIFICATE OF COMPLIANCE;

Address#s to code if none are present. Smoke detectors to code throughout home. Under construction finished construction elevation certificate is required. Flood vents to code. All material below RFE shall be pressure treated. Sway brace plumbing below RFE. Call for all required inspections

**Total Fees Paid/Due:** 195.00

**Invoice #:** 2018-00859

- All work shall conform to all applicable North Carolina State Building codes and Ordinances of the Town of Nags Head and shall be the responsibility of the undersigned applicant.
- All work shall conform to the plans and specifications provided with the application.
- Any damage to the multi-use path or adjoining right-of-way shall be immediately repaired by the owner and/or applicant.

In accordance with GS160A-418, a permit expires 6 months after the date of issuance if the work authorized by the permit has not been commenced. If, after commencement, the work is discontinued for a period of 12 months (no inspections have taken place) the permit immediately expires. No work authorized by a permit that has expired may be performed until a new permit has been issued.

Building Inspector

08/02/2018

Responsible Party

Date

This permit only authorizes work expressly identified in the building permit application, unless otherwise specified herein. The work done shall comply with the State Building Code and all other applicable Federal, State and local laws. The approval and issuance of this permit conveys no rights or guarantees for any future proposed modifications of this permit or the issuance of new permits for any future proposed use and development of the property.

# TOWN OF NAGS HEAD

PO Box 99  
Nags Head, NC 27959  
Phone (252) 441-7016 Fax (252) 4414290



## Building Permit

RE2018-1670

<b>Owner Name:</b> Parker, Charles H - Parker, Mary O	<b>Owner</b> 4125 W Brant Ct
<b>Owner Phone:</b> 757 288 8783	<b>Address:</b> Nags Head NC 27959
<b>Parcel PIN:</b> 989108778656	<b>Zoning:</b> R2 (Medium Density Residential District)
<b>Address:</b> 4125 W Brant Ct	<b>Lot/Block/Sec:</b> LOT: 36 BLK: SEC: 2
<b>Subdivision:</b> SOUTHRIDGE SEC 2	
<b>Contractor Name:</b> Property Owner	<b>Contractor</b>
<b>Contractor Phone:</b>	<b>Address:</b> Nags Head NC

**Description:** Install pre-built Stateline shed (dettached) 14' X 20'

**Construction Value:** 7300.00

**Foundation Type:**

**Construction Type:** Accessory Structure

**Heated Space:** 0

**Unheated Space:** 0

**# of Bedrooms:** 0

**# of Baths:** 0

**Zoning Permit:** 2018.0226

**Septic Permit:** 27131

**CAMA Permit:** na

**PW Permit#** na

**FEMA Flood Zone:** ae

**BFE:** 9

**Flood Permit:** 2018.1671

### Conditions:

CALL FOR ALL REQUIRED INSPECTIONS; All new work to meet current code; See CONDITIONS on Zoning Permit; FINAL INSPECTION REQUIRED PRIOR TO ISSUANCE OF CERTIFICATE OF COMPLIANCE;

Address #s on home if none are present. All material below the regulatory flood elevation shall pressure treated. Tie shed down on 4 corners. Final elevation certificate is required

**Total Fees Paid/Due:** 135.00

**Invoice #:** 2018-00867

- All work shall conform to all applicable North Carolina State Building codes and Ordinances of the Town of Nags Head and shall be the responsibility of the undersigned applicant.
- All work shall conform to the plans and specifications provided with the application.
- Any damage to the multi-use path or adjoining right-of-way shall be immediately repaired by the owner and/or applicant.

In accordance with GS160A-418, a permit expires 6 months after the date of issuance if the work authorized by the permit has not been commenced. If, after commencement, the work is discontinued for a period of 12 months (no inspections have taken place) the permit immediately expires. No work authorized by a permit that has expired may be performed until a new permit has been issued.

Building Inspector

08/03/2018

Responsible Party

Date

This permit only authorizes work expressly identified in the building permit application, unless otherwise specified herein. The work done shall comply with the State Building Code and all other applicable Federal, State and local laws. The approval and issuance of this permit conveys no rights or guarantees for any future proposed modifications of this permit or the issuance of new permits for any future proposed use and development of the property.

# TOWN OF NAGS HEAD

PO Box 99  
Nags Head, NC 27959  
Phone (252) 441-7016 Fax (252) 4414290



## Building Permit

RE2018-1719

<b>Owner Name:</b> Bonday, Thomas L - Bonday, Patricia C	<b>Owner</b> PO Box 3037
<b>Owner Phone:</b> 252 202 6439	<b>Address:</b> Kill Devil Hills NC 27948
<b>Parcel PIN:</b> 080018404611	<b>Zoning:</b> R1 (Low Density Residential District)
<b>Address:</b> 0 Cedar Island Dr	<b>Lot/Block/Sec:</b> LOT: 8 BLK: SEC:
<b>Subdivision:</b> THE LONE CEDAR VILLAGE	
<b>Contractor Name:</b> Lightning Marine Construction, Inc.	<b>Contractor</b> PO Box 1649
<b>Contractor Phone:</b> 252 441 7712	<b>Address:</b> KITTY HAWK NC 27949

**Description:** Construction of pier, platform & boat lift

**Construction Value:** 7000.00

**Foundation Type:**

**Construction Type:** Accessory Structure

**Heated Space:** 0

**Unheated Space:** 0

**# of Bedrooms:** 0

**# of Baths:** 0

**Zoning Permit:** 2018.1719

**Septic Permit:** na

**CAMA Permit:**

**PW Permit#** na

**FEMA Flood Zone:** ae

**BFE:** 10

**Flood Permit:**

### Conditions:

CALL FOR ALL REQUIRED INSPECTIONS; All new work to meet current code; See CONDITIONS on Zoning Permit; Additional engineering may be required; Piling inspection required; FINAL INSPECTION REQUIRED PRIOR TO ISSUANCE OF CERTIFICATE OF COMPLIANCE;

Use plans we have provided. Address #s on home and pier. Call for material check. Pull electrical permit if permanent boatlift wiring tasks place Call for final inspection

**Total Fees Paid/Due:** 135.00

**Invoice #:** 2018-00869

- All work shall conform to all applicable North Carolina State Building codes and Ordinances of the Town of Nags Head and shall be the responsibility of the undersigned applicant.
- All work shall conform to the plans and specifications provided with the application.
- Any damage to the multi-use path or adjoining right-of-way shall be immediately repaired by the owner and/or applicant.

In accordance with GS160A-418, a permit expires 6 months after the date of issuance if the work authorized by the permit has not been commenced. If, after commencement, the work is discontinued for a period of 12 months (no inspections have taken place) the permit immediately expires. No work authorized by a permit that has expired may be performed until a new permit has been issued.

Building Inspector

08/03/2018

Responsible Party

Date

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# TOWN OF NAGS HEAD

PO Box 99

Nags Head, NC 27959

Phone (252) 441-7016 Fax (252) 4414290



## Building Permit

**CA2018-1642**

**Owner Name:** 205 E Baltic LLC

**Owner** P O Box 90

**Owner Phone:** 252 441 9003

**Address:** Kill Devil Hills NC 27948

**Parcel PIN:** 989206397363

**Zoning:** C2 (General Commercial District)

**Address:** 205 E Baltic St E

**Subdivision:** NAGS HEAD SHORES AMENDED SEC 2 **Lot/Block/Sec:** LOT: 9-16 BLK: 7 SEC: 2

**Contractor Name:** SAGA Construction, Inc.

**Contractor PO** Box 90

**Contractor Phone:** 252 441 9003

**Address:** KILL DEVIL HILLS NC 27948

**Description:** Convert the former Dream Center to a Performing Arts Center with two theaters, artist workshop, lobby, concessions, dressing rooms and storage

**Construction Value:** 145249.00

**Construction Type:** Remodel

**Foundation Type:**

**Heated Space:** 0 **Unheated Space:** 0

**# of Bedrooms:** 0 **# of Baths:** 0

**Zoning Permit:** ZN2018-0214

**FEMA Flood Zone:** AE-10

**Septic Permit:** 27950

**BFE:** 10

**CAMA Permit:**

**Flood Permit:** FL2018-1643

**PW Permit#**

### Conditions:

All subcontractors shall obtain all permits required by State building codes prior to starting work; All new work to meet current code; Additional engineering may be required; Please call the Town of Nags Head Fire Department at 252-441-5909 for inspections; FINAL INSPECTION REQUIRED PRIOR TO ISSUANCE OF CERTIFICATE OF COMPLIANCE;

- Estimated cost of construction for this project is \$145,249, which does not constitute a substantial improvement. Existing finished floor elevation is 9.2' above MSL (NAVD-88). Current flood zone is AE-10, with RFE of 11.0' above MSL. Maximum allowable cost of construction for project is \$157,162. If this value is exceeded, structure will be required to meet current flood damage prevention ordinance (elevation of utilities, dry flood-proofing, etc.).

**Total Fees Paid/Due:** 555.00

**Invoice #:** 2018-00861

- All work shall conform to all applicable North Carolina State Building codes and Ordinances of the Town of Nags Head and shall be the responsibility of the undersigned applicant.

- All work shall conform to the plans and specifications provided with the application.

- Any damage to the multi-use path or adjoining right-of-way shall be immediately repaired by the owner and/or applicant.

In accordance with GS160A-418, a permit expires 6 months after the date of issuance if the work authorized by the permit has not been commenced. If, after commencement, the work is discontinued for a period of 12 months (no inspections have taken place) the permit immediately expires. No work authorized by a permit that has expired may be performed until a new permit has been issued.

Building Inspector

08/03/2018

Responsible Party

Date

This permit only authorizes work expressly identified in the building permit application, unless otherwise specified herein. The work done shall comply with the State Building Code and all other applicable Federal, State and local laws. The approval and issuance of this permit conveys no rights or guarantees for any future proposed modifications of this permit or the issuance of new permits for any future proposed use and development of the property.

# TOWN OF NAGS HEAD

PO Box 99

Nags Head, NC 27959

Phone (252) 441-7016 Fax (252) 4414290



## Building Permit

**CA2018-1762**

**Owner Name:** Brittan, Robert A - Brittan, Carie R

**Owner** PO Box 1614

**Owner Phone:** 732 861 5771

**Address:** Kill Devil Hills NC 27948

**Parcel PIN:** 989218326375H1

**Zoning:** Imported Default District

**Address:** 500 W Villa Dunes Dr W

**Subdivision:** VILLAS CONDO

**Lot/Block/Sec:** THE

**Contractor Name:** Property Owner

**Contractor**

**Contractor Phone:**

**Address:** Nags Head NC

**Description:** Remove 6' wall section between kitchen and hall and install new header & post per engineered specs; remove 9' non bearing header partition between kitchen & dining; move electrical & hvac as needed; replace kitchen ceiling

**Construction Value:** 4400.00

**Construction Type:** Remodel

**Heated Space:** 0

**Unheated Space:** 0

**Foundation Type:**

**# of Bedrooms:** 0

**# of Baths:** 0

**Zoning Permit:** see file

**FEMA Flood Zone:** X

**Septic Permit:** na

**BFE:**

**CAMA Permit:** na

**Flood Permit:**

**PW Permit#** na

### Conditions:

CALL FOR ALL REQUIRED INSPECTIONS; All subcontractors shall obtain all permits required by State building codes prior to starting work; All new work to meet current code; See CONDITIONS on Zoning Permit; Additional engineering may be required; FINAL INSPECTION REQUIRED PRIOR TO ISSUANCE OF CERTIFICATE OF COMPLIANCE;

Address #s on unit if none are present. Smokes and CO2 detectors to code throughout home.

**Total Fees Paid/Due:** 105.00

**Invoice #:** 2018-00866

- All work shall conform to all applicable North Carolina State Building codes and Ordinances of the Town of Nags Head and shall be the responsibility of the undersigned applicant.

- All work shall conform to the plans and specifications provided with the application.

- Any damage to the multi-use path or adjoining right-of-way shall be immediately repaired by the owner and/or applicant.

In accordance with GS160A-418, a permit expires 6 months after the date of issuance if the work authorized by the permit has not been commenced. If, after commencement, the work is discontinued for a period of 12 months (no inspections have taken place) the permit immediately expires. No work authorized by a permit that has expired may be performed until a new permit has been issued.

Building Inspector

08/03/2018

Responsible Party

Date

This permit only authorizes work expressly identified in the building permit application, unless otherwise specified herein. The work done shall comply with the State Building Code and all other applicable Federal, State and local laws. The approval and issuance of this permit conveys no rights or guarantees for any future proposed modifications of this permit or the issuance of new permits for any future proposed use and development of the property.

# TOWN OF NAGS HEAD

PO Box 99  
Nags Head, NC 27959  
Phone (252) 441-7016 Fax (252) 4414290



## Building Permit

**RE2018-1717**

<b>Owner Name:</b> Council, Herbert H - Council, Kathryn A	<b>Owner</b> 3309 Marblehead Ln
<b>Owner Phone:</b>	<b>Address:</b> Raleigh NC 27612
<b>Parcel PIN:</b> 071913138635	<b>Zoning:</b> R2 (Medium Density Residential District)
<b>Address:</b> 8928 S Old Oregon Inlet Rd S	<b>Lot/Block/Sec:</b> LOT: 14 BLK: SEC:
<b>Subdivision:</b> SOUTH CREEK ACRES PH 2	
<b>Contractor Name:</b> Barnes Construction	<b>Contractor</b> 432 Colington Dr
<b>Contractor Phone:</b>	<b>Address:</b> Kill Devil Hills NC 27948
<b>Description:</b> Rot repair; replace damaged framing and plywood also replace cedar shakes 8/7/18 Amend permit to include new roof deck enclosure	
<b>Construction Value:</b> 25000.00	<b>Construction Type:</b> Repair
<b>Foundation Type:</b>	<b>Heated Space:</b> 0 <b>Unheated Space:</b> 0
	<b># of Bedrooms:</b> 0 <b># of Baths:</b> 0
<b>Zoning Permit:</b> see file	<b>FEMA Flood Zone:</b> ae
<b>Septic Permit:</b> na	<b>BFE:</b> 11
<b>CAMA Permit:</b> na	<b>Flood Permit:</b> 2018.1718
<b>PW Permit#</b> na	

### Conditions:

CALL FOR ALL REQUIRED INSPECTIONS; All new work to meet current code; Additional engineering may be required; FINAL INSPECTION REQUIRED PRIOR TO ISSUANCE OF CERTIFICATE OF COMPLIANCE;

Address #s on home if none are present. Call for any rot repair. If electrical is disturbed than electrical permit will be required. New enclosure is approved to be unfinished and unheated space. Spiral stairs do not meet egress for habitable space. New space shall meet minimum electrical requirements. Smokes and Co2 detectors to code if needed. Allow us to see tie down connection.. Call for final inspection

**Total Fees Paid/Due:** 195.00 **Invoice #:** 2018-00864

- All work shall conform to all applicable North Carolina State Building codes and Ordinances of the Town of Nags Head and shall be the responsibility of the undersigned applicant.
- All work shall conform to the plans and specifications provided with the application.
- Any damage to the multi-use path or adjoining right-of-way shall be immediately repaired by the owner and/or applicant.

In accordance with GS160A-418, a permit expires 6 months after the date of issuance if the work authorized by the permit has not been commenced. If, after commencement, the work is discontinued for a period of 12 months (no inspections have taken place) the permit immediately expires. No work authorized by a permit that has expired may be performed until a new permit has been issued.

Building Inspector 08/03/2018 Responsible Party Date

This permit only authorizes work expressly identified in the building permit application, unless otherwise specified herein. The work done shall comply with the State Building Code and all other applicable Federal, State and local laws. The approval and issuance of this permit conveys no rights or guarantees for any future proposed modifications of this permit or the issuance of new permits for any future proposed use and development of the property.

# TOWN OF NAGS HEAD

PO Box 99  
Nags Head, NC 27959  
Phone (252) 441-7016 Fax (252) 4414290



## Building Permit

RE2018-1763

Owner Name: TRUSKOSKI, BENJAMIN B -  
TRUSKOSKI, BARBARA S  
Owner Phone: ETUX

Owner 818 N. 64th St  
Address: WAUWATOSA WI 53213

Parcel PIN: 080117203319  
Address: 208 Fairway Ln  
Subdivision: RIDGES SEC 1

Zoning: SPD-C SF-2 (Village Detached Residential  
Single Family)  
Lot/Block/Sec: THE

Contractor Name: Home Depot USA, Inc.  
Contractor Phone: 770 433 8211

Contractor 2455 Paces Ferry Rd  
Address: Atlanta GA 30339

Description: Change out 22 windows and replace with 22 vinyl Stormbreaker windows (same size)

Construction Value: 24242.00

Construction Type: Repair

Foundation Type:

Heated Space: 0 Unheated Space: 0

# of Bedrooms: 0

# of Baths: 0

Zoning Permit: see file  
Septic Permit: na  
CAMA Permit: na  
PW Permit#: na

FEMA Flood Zone: ae  
BFE: 9  
Flood Permit: 2018.1763

### Conditions:

CALL FOR ALL REQUIRED INSPECTIONS; All new work to meet current code; Additional engineering may be required; FINAL INSPECTION REQUIRED PRIOR TO ISSUANCE OF CERTIFICATE OF COMPLIANCE;

Address #s on home if none are present. Review window and door handout we have provided. Call for all required inspections.  
Call for final inspection

Total Fees Paid/Due: 195.00

Invoice #: 2018-00868

- All work shall conform to all applicable North Carolina State Building codes and Ordinances of the Town of Nags Head and shall be the responsibility of the undersigned applicant.
- All work shall conform to the plans and specifications provided with the application.
- Any damage to the multi-use path or adjoining right-of-way shall be immediately repaired by the owner and/or applicant.

In accordance with GS160A-418, a permit expires 6 months after the date of issuance if the work authorized by the permit has not been commenced. If, after commencement, the work is discontinued for a period of 12 months (no inspections have taken place) the permit immediately expires. No work authorized by a permit that has expired may be performed until a new permit has been issued.

Building Inspector

08/03/2018

Responsible Party

Date

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# TOWN OF NAGS HEAD

PO Box 99  
Nags Head, NC 27959  
Phone (252) 441-7016 Fax (252) 4414290



## Building Permit

**RE2018-1765**

**Owner Name:** WARREN, LAMONT C - WARREN, LINDA **Owner** 4307 Hesperides Dr  
**Owner Phone:** 252-256-2595 **Address:** NAGS HEAD NC 27959  
**Parcel PIN:** 989112867730 **Zoning:** R2 (Medium Density Residential District)  
**Address:** 4307 S Hesperides Dr S  
**Subdivision:** OLD NAGS HEAD COVE SEC E **Lot/Block/Sec:** LOT: 54 BLK: SEC: E  
**Contractor Name:** GranPlan, Inc. **Contractor** 349C Water Plant Rd  
**Contractor Phone:** 252 473 3334 **Address:** Manteo NC 27954

**Description:** Remove and replace level 3 handrails and posts above screened porch

**Construction Value:** 5697.00

**Foundation Type:**

**Construction Type:** Repair

**Heated Space:** 0

**Unheated Space:** 0

**# of Bedrooms:** 0

**# of Baths:** 0

**Zoning Permit:** see file

**Septic Permit:** na

**CAMA Permit:** na

**PW Permit#** na

**FEMA Flood Zone:** X

**BFE:**

**Flood Permit:**

### Conditions:

CALL FOR ALL REQUIRED INSPECTIONS; All new work to meet current code; Additional engineering may be required; FINAL INSPECTION REQUIRED PRIOR TO ISSUANCE OF CERTIFICATE OF COMPLIANCE;

Address#s on home if none are present. Read comments on plans and sheets we have provided. Call for final inspection

**Total Fees Paid/Due:** 135.00

**Invoice #:** 2018-00863

- All work shall conform to all applicable North Carolina State Building codes and Ordinances of the Town of Nags Head and shall be the responsibility of the undersigned applicant.

- All work shall conform to the plans and specifications provided with the application.

- Any damage to the multi-use path or adjoining right-of-way shall be immediately repaired by the owner and/or applicant.

In accordance with GS160A-418, a permit expires 6 months after the date of issuance if the work authorized by the permit has not been commenced. If, after commencement, the work is discontinued for a period of 12 months (no inspections have taken place) the permit immediately expires. No work authorized by a permit that has expired may be performed until a new permit has been issued.

Building Inspector

08/03/2018

Responsible Party

Date

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# TOWN OF NAGS HEAD

PO Box 99  
Nags Head, NC 27959  
Phone (252) 441-7016 Fax (252) 4414290



## Building Permit

**RE2018-1768**

<b>Owner Name:</b> Craig D Errickson	<b>Owner</b> 2908 S Pamlico Ave
<b>Owner Phone:</b> 252 207 5840	<b>Address:</b> Nags Head NC 27959
<b>Parcel PIN:</b> 989206487359	<b>Zoning:</b> Imported Default District
<b>Address:</b> 2912 S Va Dare Trl S	
<b>Subdivision:</b> NAGS HEAD SHORES AMENDED SEC 1	<b>Lot/Block/Sec:</b> LOT: 6 BLK: 6 SEC: 1
<b>Contractor Name:</b> Ryan Waddell Construction	<b>Contractor</b> 2604 S Memorial
<b>Contractor Phone:</b> 252 599 1611	<b>Address:</b> NAGS HEAD NC 27959

**Description:** Replace deck and stairs in same footprint

<b>Construction Value:</b> 16000.00	<b>Construction Type:</b> Repair
<b>Foundation Type:</b>	<b>Heated Space:</b> 0 <b>Unheated Space:</b> 0
	<b># of Bedrooms:</b> 0 <b># of Baths:</b> 0

<b>Zoning Permit:</b> see file	<b>FEMA Flood Zone:</b> ae
<b>Septic Permit:</b> na	<b>BFE:</b> 10
<b>CAMA Permit:</b> na	<b>Flood Permit:</b> 2018.1769
<b>PW Permit#</b> na	

### Conditions:

CALL FOR ALL REQUIRED INSPECTIONS; All new work to meet current code; FINAL INSPECTION REQUIRED PRIOR TO ISSUANCE OF CERTIFICATE OF COMPLIANCE;

Address #s on home if none are present. Review deck and window handout we have provided. Call for final inspection

**Total Fees Paid/Due:** 165.00 **Invoice #:** 2018-00862

- All work shall conform to all applicable North Carolina State Building codes and Ordinances of the Town of Nags Head and shall be the responsibility of the undersigned applicant.
- All work shall conform to the plans and specifications provided with the application.
- Any damage to the multi-use path or adjoining right-of-way shall be immediately repaired by the owner and/or applicant.

In accordance with GS160A-418, a permit expires 6 months after the date of issuance if the work authorized by the permit has not been commenced. If, after commencement, the work is discontinued for a period of 12 months (no inspections have taken place) the permit immediately expires. No work authorized by a permit that has expired may be performed until a new permit has been issued.

Building Inspector	08/03/2018	Responsible Party	Date
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This permit only authorizes work expressly identified in the building permit application, unless otherwise specified herein. The work done shall comply with the State Building Code and all other applicable Federal, State and local laws. The approval and issuance of this permit conveys no rights or guarantees for any future proposed modifications of this permit or the issuance of new permits for any future proposed use and development of the property.

# TOWN OF NAGS HEAD

PO Box 99  
Nags Head, NC 27959  
Phone (252) 441-7016 Fax (252) 4414290



## Building Permit

**RE2018-1713**

<b>Owner Name:</b> Hardy, lone Gates - Hardy, John Showalte	<b>Owner</b> PO Box 652
<b>Owner Phone:</b>	<b>Address:</b> Nags Head NC 27959
<b>Parcel PIN:</b> 080006391013	<b>Zoning:</b> SPD-C SF-3 (Village Detached Residential Single Family)
<b>Address:</b> 6009 S North Shore Ct	<b>Lot/Block/Sec:</b> LOT: 5 BLK: SEC:
<b>Subdivision:</b> LEEWARD SHORES	
<b>Contractor Name:</b> Beach Construction Group, LLC	<b>Contractor</b> 1496 Colington Rd
<b>Contractor Phone:</b> 252 441 8224	<b>Address:</b> Kill Devil Hills NC 27948
<b>Description:</b> Siding & window replacement; partial enclosure of garage; interior renovation 8/29/18 Adding elevator shaft, delete all work on 2nd floor including laundry room, closets & door replacements	
<b>Construction Value:</b> 143020.00	<b>Construction Type:</b> Remodel
<b>Foundation Type:</b>	<b>Heated Space:</b> 0 <b>Unheated Space:</b> 0
	<b># of Bedrooms:</b> 0 <b># of Baths:</b> 0
<b>Zoning Permit:</b> 2018.0228	<b>FEMA Flood Zone:</b> X
<b>Septic Permit:</b> village	<b>BFE:</b>
<b>CAMA Permit:</b> na	<b>Flood Permit:</b>
<b>PW Permit#</b> na	

### Conditions:

CALL FOR ALL REQUIRED INSPECTIONS; All subcontractors shall obtain all permits required by State building codes prior to starting work; All new work to meet current code; Additional engineering may be required; FINAL INSPECTION REQUIRED PRIOR TO ISSUANCE OF CERTIFICATE OF COMPLIANCE;

Address #s on home if none are present. See notes on building plans for permit conditions. Licensed electrician shall pull permit to deal with electrical problems as they arise. Call for final inspections. Need engineered plans for elevator shaft

**Total Fees Paid/Due:** 565.00 **Invoice #:** 2018-00870

- All work shall conform to all applicable North Carolina State Building codes and Ordinances of the Town of Nags Head and shall be the responsibility of the undersigned applicant.
- All work shall conform to the plans and specifications provided with the application.
- Any damage to the multi-use path or adjoining right-of-way shall be immediately repaired by the owner and/or applicant.

**In accordance with GS160A-418, a permit expires 6 months after the date of issuance if the work authorized by the permit has not been commenced. If, after commencement, the work is discontinued for a period of 12 months (no inspections have taken place) the permit immediately expires. No work authorized by a permit that has expired may be performed until a new permit has been issued.**

Building Inspector 08/06/2018 Responsible Party Date

This permit only authorizes work expressly identified in the building permit application, unless otherwise specified herein. The work done shall comply with the State Building Code and all other applicable Federal, State and local laws. The approval and issuance of this permit conveys no rights or guarantees for any future proposed modifications of this permit or the issuance of new permits for any future proposed use and development of the property.

**TOWN OF NAGS HEAD**

PO Box 99  
Nags Head, NC 27959  
Phone (252) 441-7016 Fax (252) 4414290



**Building Permit**

**RE2018-1707**

<b>Owner Name:</b> CHERRY, INC.	<b>Owner</b> 1400 Linliar Dr
<b>Owner Phone:</b> 757 477 2400	<b>Address:</b> VIRGINIABEACH VA 23451
<b>Parcel PIN:</b> 071815731788	<b>Zoning:</b> R2 (Medium Density Residential District)
<b>Address:</b> 10211 E Sea Gull Dr E	<b>Lot/Block/Sec:</b> LOT: 13 BLK: SEC:
<b>Subdivision:</b> GOOSE WING	
<b>Contractor Name:</b> Emanuelson & Dad, Inc	<b>Contractor</b> 6705 S Croatan Hwy
<b>Contractor Phone:</b> 252 261 2212	<b>Address:</b> Nags Head NC 27959
<b>Description:</b> Set up temporary bracing & jack up SW corner; install 3 piles, bolted to new sister piles, notched & bolted to existing girder system; install one additional sister pile	
<b>Construction Value:</b> 6990.00	<b>Construction Type:</b> Repair
<b>Foundation Type:</b>	<b>Heated Space:</b> 0 <b>Unheated Space:</b> 0
	<b># of Bedrooms:</b> 3 <b># of Baths:</b> 2.0
<b>Zoning Permit:</b> 2018.	<b>FEMA Flood Zone:</b> ve
<b>Septic Permit:</b> na	<b>Lot Elevation:</b>
<b>CAMA Permit:</b>	<b>BFE:</b> 12
<b>PW Permit#</b>	

**Total Fees Paid/Due:** 135.00 / **Invoice #:** 2018-00871

- All work shall conform to all applicable North Carolina State Building codes and Ordinances of the Town of Nags Head and shall be the responsibility of the undersigned applicant.

- All work shall conform to the plans and specifications provided with the application.

- Any damage to the multi-use path or adjoining right-of-way shall be immediately repaired by the owner and/or applicant.

**In accordance with GS160A-418, a permit expires 6 months after the date of issuance if the work authorized by the permit has not been commenced. If, after commencement, the work is discontinued for a period of 12 months (no inspections have taken place) the permit immediately expires. No work authorized by a permit that has expired may be performed until a new permit has been issued.**

Building Inspector	08/06/2018	Responsible Party	Date
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**Conditions:**  
CALL FOR ALL REQUIRED INSPECTIONS; All new work to meet current code; See CONDITIONS on Zoning Permit; Additional engineering may be required; Piling inspection required; FINAL INSPECTION REQUIRED PRIOR TO ISSUANCE OF CERTIFICATE OF COMPLIANCE;

SEE CONDITIONS ON BACK

# TOWN OF NAGS HEAD

PO Box 99  
Nags Head, NC 27959  
Phone (252) 441-7016 Fax (252) 4414290



## Building Permit

**RE2018-1777**

**Owner Name:** Hawks Nest Company of Nags Head III c/o Village Realty & Mgmt Services, Inc. **Owner** PO BOX 1807  
**Owner Phone:** **Address:** Nags Head NC 27959  
**Parcel PIN:** 080109077261 **Zoning:** CR (Commercial Residential District)  
**Address:** 4333 S Va Dare Trl S  
**Subdivision:** HAWKS NEST **Lot/Block/Sec:** LOT: A - UTS 21A-21B BLK: SEC:

**Contractor Name:** O'Neill Construction **Contractor PO Box** 1476  
**Contractor Phone:** 252 305 6780 **Address:** Manteo NC 27954

**Description:** 21A Struck by lightning, replace plywood at ridge, replace roofing on repair area, repair popcorn ceiling texture

**Construction Value:** 2500.00 **Construction Type:** Repair  
**Foundation Type:** **Heated Space:** 0 **Unheated Space:** 0  
**# of Bedrooms:** 0 **# of Baths:** 0

**Zoning Permit:** see file **FEMA Flood Zone:** V  
**Septic Permit:** na **BFE:** 11  
**CAMA Permit:** na **Flood Permit:** 2018.1778  
**PW Permit#** na

### Conditions:

CALL FOR ALL REQUIRED INSPECTIONS; FINAL INSPECTION REQUIRED PRIOR TO ISSUANCE OF CERTIFICATE OF COMPLIANCE;

Call for inspection of repair and damage to determine permit conditions

**Total Fees Paid/Due:** 75.00 **Invoice #:** 2018-00878

- All work shall conform to all applicable North Carolina State Building codes and Ordinances of the Town of Nags Head and shall be the responsibility of the undersigned applicant.
- All work shall conform to the plans and specifications provided with the application.
- Any damage to the multi-use path or adjoining right-of-way shall be immediately repaired by the owner and/or applicant.

**In accordance with GS160A-418, a permit expires 6 months after the date of issuance if the work authorized by the permit has not been commenced. If, after commencement, the work is discontinued for a period of 12 months (no inspections have taken place) the permit immediately expires. No work authorized by a permit that has expired may be performed until a new permit has been issued.**

Building Inspector 08/07/2018 Responsible Party Date

This permit only authorizes work expressly identified in the building permit application, unless otherwise specified herein. The work done shall comply with the State Building Code and all other applicable Federal, State and local laws. The approval and issuance of this permit conveys no rights or guarantees for any future proposed modifications of this permit or the issuance of new permits for any future proposed use and development of the property.

# TOWN OF NAGS HEAD

PO Box 99  
Nags Head, NC 27959  
Phone (252) 441-7016 Fax (252) 4414290



## Building Permit

BR2018-1639

<b>Owner Name:</b> Marchione, John R - Marchione, Eva T	<b>Owner</b> 1246 Charles St
<b>Owner Phone:</b>	<b>Address:</b> State College PA 16801
<b>Parcel PIN:</b> 989318402109	<b>Zoning:</b> CR (Commercial Residential District)
<b>Address:</b> 2609 S Va Dare Trl	
<b>Subdivision:</b> NAGS HEAD SHORES AMENDED SEC 2	<b>Lot/Block/Sec:</b> LOT: 8 BLK: 2 SEC: 2
<b>Contractor Name:</b> Fulcher Homes Inc	<b>Contractor</b> PO Box 543
<b>Contractor Phone:</b> 252 261 3316	<b>Address:</b> Kitty Hawk NC 27949
<b>Description:</b> Construct new single family dwelling on piling foundation, 8 bedrooms, 7.2 baths with swimming pool	
<b>Construction Value:</b> 1200000.00	<b>Construction Type:</b> New Construction
<b>Foundation Type:</b>	<b>Heated Space:</b> 4571 <b>Unheated Space:</b> 1741
	<b># of Bedrooms:</b> 7 <b># of Baths:</b> 7.2
<b>Zoning Permit:</b> 2018.0224	<b>FEMA Flood Zone:</b> ve
<b>Septic Permit:</b> 27884	<b>Lot Elevation:</b>
<b>CAMA Permit:</b> 18-053	<b>BFE:</b> 11
<b>PW Permit#</b> 2018.1641	

**Total Fees Paid/Due:** 3363.74 / **Invoice #:** 2018-00884

- All work shall conform to all applicable North Carolina State Building codes and Ordinances of the Town of Nags Head and shall be the responsibility of the undersigned applicant.  
- All work shall conform to the plans and specifications provided with the application.  
- Any damage to the multi-use path or adjoining right-of-way shall be immediately repaired by the owner and/or applicant.  
**In accordance with GS160A-418, a permit expires 6 months after the date of issuance if the work authorized by the permit has not been commenced. If, after commencement, the work is discontinued for a period of 12 months (no inspections have taken place) the permit immediately expires. No work authorized by a permit that has expired may be performed until a new permit has been issued.**

Building Inspector	08/10/2018	Responsible Party	Date
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**This permit only authorizes work expressly identified in the building permit application, unless otherwise specified herein. The work done shall comply with the State Building Code and all other applicable Federal, State and local laws. The approval and issuance of this permit conveys no rights or guarantees for any future proposed modifications of this permit or the issuance of new permits for any future proposed use and development of the property.**

### Conditions:

CALL FOR ALL REQUIRED INSPECTIONS; All subcontractors shall obtain all permits required by State building codes prior to starting work; All new work to meet current code; Piling inspection required; See conditions of Public Works, Zoning and Building Permits; FINAL INSPECTION REQUIRED PRIOR TO ISSUANCE OF CERTIFICATE OF COMPLIANCE;

- Site copy of plans shall be on site for all inspections

# TOWN OF NAGS HEAD

PO Box 99  
Nags Head, NC 27959  
Phone (252) 441-7016 Fax (252) 4414290



## Building Permit

**BR2018-1492**

<b>Owner Name:</b> Cville Ventures LLC	<b>Owner</b> 505 Foxdale Ln
<b>Owner Phone:</b> 434 326 3903	<b>Address:</b> Charlottesville VA 22903
<b>Parcel PIN:</b> 989210466630	<b>Zoning:</b> Imported Default District
<b>Address:</b> 3208 Salada Ln	<b>Lot/Block/Sec:</b> LOT: 7 BLK: SEC: A
<b>Subdivision:</b> THE ENCLAVES AT NAGS HEAD	
<b>Contractor Name:</b> Cville OBX, LLC	<b>Contractor</b> 6150 N Croatan Hwy
<b>Contractor Phone:</b> 252 489 0156	<b>Address:</b> Kitty Hawk NC 27949
<b>Description:</b>	Construct new Single Family Dwelling on piling foundation, with 3 bedrooms and 2 baths

<b>Construction Value:</b> 170000.00	<b>Construction Type:</b> New Construction
<b>Foundation Type:</b>	<b>Heated Space:</b> 1345 <b>Unheated Space:</b> 364
	<b># of Bedrooms:</b> 0 <b># of Baths:</b> 0

<b>Zoning Permit:</b> 2018.	<b>FEMA Flood Zone:</b> AE
<b>Septic Permit:</b> 27878	<b>Lot Elevation:</b>
<b>CAMA Permit:</b> na	<b>BFE:</b> 10
<b>PW Permit#</b> 2018.1494	

<b>Total Fees Paid/Due:</b> 1833.08 /	<b>Invoice #:</b> 2018-00889
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- All work shall conform to all applicable North Carolina State Building codes and Ordinances of the Town of Nags Head and shall be the responsibility of the undersigned applicant.
  - All work shall conform to the plans and specifications provided with the application.
  - Any damage to the multi-use path or adjoining right-of-way shall be immediately repaired by the owner and/or applicant.
- In accordance with GS160A-418, a permit expires 6 months after the date of issuance if the work authorized by the permit has not been commenced. If, after commencement, the work is discontinued for a period of 12 months (no inspections have taken place) the permit immediately expires. No work authorized by a permit that has expired may be performed until a new permit has been issued.

Building Inspector	08/14/2018	Responsible Party	Date
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This permit only authorizes work expressly identified in the building permit application, unless otherwise specified herein. The work done shall comply with the State Building Code and all other applicable Federal, State and local laws. The approval and issuance of this permit conveys no rights or guarantees for any future proposed modifications of this permit or the issuance of new permits for any future proposed use and development of the property.

### Conditions:

CALL FOR ALL REQUIRED INSPECTIONS; All subcontractors shall obtain all permits required by State building codes prior to starting work; All new work to meet current code; Additional engineering may be required; Piling inspection required; See conditions of Public Works, Zoning and Building Permits; FINAL INSPECTION REQUIRED PRIOR TO ISSUANCE OF CERTIFICATE OF COMPLIANCE;

Review TONH inspection procedure handout.

# TOWN OF NAGS HEAD

PO Box 99  
Nags Head, NC 27959  
Phone (252) 441-7016 Fax (252) 4414290



## Building Permit

**BR2018-1602**

<b>Owner Name:</b> Reynaldo Estrada	<b>Owner</b> PO Box 2054
<b>Owner Phone:</b> 252 573 8157	<b>Address:</b> Manteo NC 27954
<b>Parcel PIN:</b> 989206285728	<b>Zoning:</b> R2 (Medium Density Residential District)
<b>Address:</b> 204 W Lost Colony Dr	<b>Lot/Block/Sec:</b> LOT: 3 BLK: C SEC:
<b>Subdivision:</b> VISTA COLONY WEST	
<b>Contractor Name:</b> Aria Construction & Development, Inc.	<b>Contractor</b> PO Box 321
<b>Contractor Phone:</b> 252 796 7737	<b>Address:</b> Creswell NC 27928

**Description:** Build new single family dwelling on piling foundation; 3 bedrooms & 2.1 baths

**Construction Value:** 200000.00

**Foundation Type:**

**Construction Type:** New Construction  
**Heated Space:** 1789 **Unheated Space:** 189  
**# of Bedrooms:** 3 **# of Baths:** 2.1

**Zoning Permit:** 2018.0211  
**Septic Permit:** 27750  
**CAMA Permit:** na  
**PW Permit#** 2018.1603

**FEMA Flood Zone:** X  
**BFE:**  
**Flood Permit:**

### Conditions:

CALL FOR ALL REQUIRED INSPECTIONS; All subcontractors shall obtain all permits required by State building codes prior to starting work; All new work to meet current code; Piling inspection required; See conditions of Public Works, Zoning and Building Permits; FINAL INSPECTION REQUIRED PRIOR TO ISSUANCE OF CERTIFICATE OF COMPLIANCE;

Review TONH inspection procedure handout. Review comments on plans. Plans on site for all inspections

**Total Fees Paid/Due:** 2011.33 **Invoice #:** 2018-00892

- All work shall conform to all applicable North Carolina State Building codes and Ordinances of the Town of Nags Head and shall be the responsibility of the undersigned applicant.
- All work shall conform to the plans and specifications provided with the application.
- Any damage to the multi-use path or adjoining right-of-way shall be immediately repaired by the owner and/or applicant.

In accordance with GS160A-418, a permit expires 6 months after the date of issuance if the work authorized by the permit has not been commenced. If, after commencement, the work is discontinued for a period of 12 months (no inspections have taken place) the permit immediately expires. No work authorized by a permit that has expired may be performed until a new permit has been issued.

Building Inspector 08/14/2018

Responsible Party Date

This permit only authorizes work expressly identified in the building permit application, unless otherwise specified herein. The work done shall comply with the State Building Code and all other applicable Federal, State and local laws. The approval and issuance of this permit conveys no rights or guarantees for any future proposed modifications of this permit or the issuance of new permits for any future proposed use and development of the property.



# TOWN OF NAGS HEAD

PO Box 99

Nags Head, NC 27959

Phone (252) 441-7016 Fax (252) 4414290



## Building Permit

**RE2018-1571**

**Owner Name:** STEGMAN, JOHN G - BARBARA M  
STEGMAN ETUX  
**Owner Phone:** 703 618 4546

**Owner** 424 Thaddeus Ln  
**Address:** Bentonville VA 22610

**Parcel PIN:** 989112958073  
**Address:** 4618 S Pamlico Way S  
**Subdivision:** OLD NAGS HEAD COVE SEC A

**Zoning:** R2 (Medium Density Residential District)

**Lot/Block/Sec:** LOT: 76 BLK: SEC: A

**Contractor Name:** Carpentry Services, Inc.  
**Contractor Phone:** 252 256 1775

**Contractor** 805 8th Ave  
**Address:** KILL DEVIL HILL NC 27948

**Description:** Construct wood deck under house; staying within existing footprint

**Construction Value:** 4000.00

**Construction Type:** Remodel

**Foundation Type:**

**Heated Space:** 0 **Unheated Space:** 0

**# of Bedrooms:** 0 **# of Baths:** 0

**Zoning Permit:** 2018.0205  
**Septic Permit:** na  
**CAMA Permit:**  
**PW Permit#** na

**FEMA Flood Zone:** ae  
**BFE:** 9  
**Flood Permit:** 2018.1572

### Conditions:

CALL FOR ALL REQUIRED INSPECTIONS; All new work to meet current code; Additional engineering may be required; FINAL INSPECTION REQUIRED PRIOR TO ISSUANCE OF CERTIFICATE OF COMPLIANCE;

Address #s on home if none are present. Call for floor inspection before covering with deck boards . Call for final inspection

**Total Fees Paid/Due:** 105.00

**Invoice #:** 2018-00817

- All work shall conform to all applicable North Carolina State Building codes and Ordinances of the Town of Nags Head and shall be the responsibility of the undersigned applicant.
- All work shall conform to the plans and specifications provided with the application.
- Any damage to the multi-use path or adjoining right-of-way shall be immediately repaired by the owner and/or applicant.

In accordance with GS160A-418, a permit expires 6 months after the date of issuance if the work authorized by the permit has not been commenced. If, after commencement, the work is discontinued for a period of 12 months (no inspections have taken place) the permit immediately expires. No work authorized by a permit that has expired may be performed until a new permit has been issued.

Building Inspector

08/14/2018

Responsible Party

Date

This permit only authorizes work expressly identified in the building permit application, unless otherwise specified herein. The work done shall comply with the State Building Code and all other applicable Federal, State and local laws. The approval and issuance of this permit conveys no rights or guarantees for any future proposed modifications of this permit or the issuance of new permits for any future proposed use and development of the property.

# TOWN OF NAGS HEAD

PO Box 99  
Nags Head, NC 27959  
Phone (252) 441-7016 Fax (252) 4414290



## Building Permit

**BC2018-1801**

<b>Owner Name:</b> NAGS HEAD, TOWN OF	<b>Owner</b> PO BOX 99
<b>Owner Phone:</b> 252-441-5508	<b>Address:</b> NAGS HEAD NC 27959
<b>Parcel PIN:</b> 989206471533	<b>Zoning:</b> C2 (General Commercial District)
<b>Address:</b> 3005 S Croatan Hwy S	<b>Lot/Block/Sec:</b> LOT: BLK: SEC:
<b>Subdivision:</b> SUBDIVISION-NONE	
<b>Contractor Name:</b> Godfrey Construction LLC	<b>Contractor</b> PO Box 694 Trl
<b>Contractor Phone:</b> 252 261 8600	<b>Address:</b> Kill Devil Hills NC 27948
<b>Description:</b> Phase II/III construction of town park to include: earthwork, drainage, construction of paved trails, sports courts, restrooms & all associated utility, plumbing and electrical improvements	
<b>Construction Value:</b> 715000.00	<b>Construction Type:</b> New Construction
<b>Foundation Type:</b>	<b>Heated Space:</b> 0 <b>Unheated Space:</b> 0
	<b># of Bedrooms:</b> 0 <b># of Baths:</b> 0
<b>Zoning Permit:</b> ZN2018-0233	<b>FEMA Flood Zone:</b> AE
<b>Septic Permit:</b> 27667	<b>BFE:</b> 10
<b>CAMA Permit:</b> N/A	<b>Flood Permit:</b>
<b>PW Permit#</b> N/A	

### Conditions:

CALL FOR ALL REQUIRED INSPECTIONS; All subcontractors shall obtain all permits required by State building codes prior to starting work; Work must meet previously submitted and approved plans; FINAL INSPECTION REQUIRED PRIOR TO ISSUANCE OF CERTIFICATE OF COMPLIANCE;

### Total Fees Paid/Due:

### Invoice #:

- All work shall conform to all applicable North Carolina State Building codes and Ordinances of the Town of Nags Head and shall be the responsibility of the undersigned applicant.
- All work shall conform to the plans and specifications provided with the application.
- Any damage to the multi-use path or adjoining right-of-way shall be immediately repaired by the owner and/or applicant.

**In accordance with GS160A-418, a permit expires 6 months after the date of issuance if the work authorized by the permit has not been commenced. If, after commencement, the work is discontinued for a period of 12 months (no inspections have taken place) the permit immediately expires. No work authorized by a permit that has expired may be performed until a new permit has been issued.**

Building Inspector

08/16/2018

Responsible Party

Date

This permit only authorizes work expressly identified in the building permit application, unless otherwise specified herein. The work done shall comply with the State Building Code and all other applicable Federal, State and local laws. The approval and issuance of this permit conveys no rights or guarantees for any future proposed modifications of this permit or the issuance of new permits for any future proposed use and development of the property.

**TOWN OF NAGS HEAD**

PO Box 99  
Nags Head, NC 27959  
Phone (252) 441-7016 Fax (252) 4414290



**Building Permit**

**RE2018-1772**

**Owner Name:** KATHERMAN, RELLIOT - KATHERMAN, KATHY LETUX  
**Owner Phone:** 717 968 8221  
**Owner:** 105 N Rockburn St  
**Address:** YORK PA 17401

**Parcel PIN:** 071913139426  
**Address:** 9004 S Old Oregon Inlet Rd S  
**Subdivision:** SOUTH CREEK ACRES PH 2  
**Zoning:** Imported Default District  
**Lot/Block/Sec:** LOT: 10&11 BLK: SEC:

**Contractor Name:** Barnes Construction  
**Contractor Phone:**  
**Contractor:** 432 Colington Dr  
**Address:** Kill Devil Hills NC 27948

**Description:** Remove and replace front deck handrail; remove and replace 2 rows of cedar shakes for fiberglass deck

**Construction Value:** 3000.00  
**Foundation Type:**  
**Construction Type:** Repair  
**Heated Space:** 0  
**Unheated Space:** 0  
**# of Bedrooms:** 0  
**# of Baths:** 0

**Zoning Permit:** see file  
**Septic Permit:** na  
**CAMA Permit:** na  
**PW Permit#:** na  
**FEMA Flood Zone:** ae  
**BFE:** 11  
**Flood Permit:** 2018.1775

**Conditions:**

CALL FOR ALL REQUIRED INSPECTIONS; All new work to meet current code; Additional engineering may be required; FINAL INSPECTION REQUIRED PRIOR TO ISSUANCE OF CERTIFICATE OF COMPLIANCE;

Work was done without proper permits and is subject to on site inspection to determine permit conditions

**Total Fees Paid/Due:** 105.00  
**Invoice #:** 2018-00900

- All work shall conform to all applicable North Carolina State Building codes and Ordinances of the Town of Nags Head and shall be the responsibility of the undersigned applicant.
- All work shall conform to the plans and specifications provided with the application.
- Any damage to the multi-use path or adjoining right-of-way shall be immediately repaired by the owner and/or applicant.

**In accordance with GS160A-418, a permit expires 6 months after the date of issuance if the work authorized by the permit has not been commenced. If, after commencement, the work is discontinued for a period of 12 months (no inspections have taken place) the permit immediately expires. No work authorized by a permit that has expired may be performed until a new permit has been issued.**

Building Inspector 08/16/2018 Responsible Party Date

**This permit only authorizes work expressly identified in the building permit application, unless otherwise specified herein. The work done shall comply with the State Building Code and all other applicable Federal, State and local laws. The approval and issuance of this permit conveys no rights or guarantees for any future proposed modifications of this permit or the issuance of new permits for any future proposed use and development of the property.**

# TOWN OF NAGS HEAD

PO Box 99  
Nags Head, NC 27959  
Phone (252) 441-7016 Fax (252) 4414290



## Building Permit

**RE2018-1805**

**Owner Name:** MISMAS, DENNIS JAMES - MARY YERBYMISMAS  
**Owner:** CAROL Manieri Yerby 1021 Grapevine Rd

**Owner Phone:** \_\_\_\_\_  
**Address:** SANDSTON VA 23150

**Parcel PIN:** 989112964330  
**Zoning:** Imported Default District

**Address:** 213 W Barracuda Dr W  
**Lot/Block/Sec:** LOT: 80 BLK: SEC: F

**Subdivision:** OLD NAGS HEAD COVE SEC F

**Contractor Name:** Gibbs Daughters NC, LLC  
**Contractor PO Box 2387**  
**Contractor Phone:** 252 202 5991  
**Address:** Manteo NC 27954

**Description:** Replacing deck boards, railings and stairs on front & rear of property

**Construction Value:** 8050.00

**Construction Type:** Repair

**Heated Space:** 0 **Unheated Space:** 0

**# of Bedrooms:** 0 **# of Baths:** 0

**Foundation Type:** \_\_\_\_\_

**Zoning Permit:** see file

**FEMA Flood Zone:** AE

**Septic Permit:** na

**BFE:** 9

**CAMA Permit:** \_\_\_\_\_

**Flood Permit:** 2018.1806

**PW Permit#** \_\_\_\_\_

### Conditions:

CALL FOR ALL REQUIRED INSPECTIONS; All new work to meet current code; Additional engineering may be required; FINAL INSPECTION REQUIRED PRIOR TO ISSUANCE OF CERTIFICATE OF COMPLIANCE;

Address #s on home if none are present. Review deck repair handout we have provided. Call for final inspection

**Total Fees Paid/Due:** 135.00

**Invoice #:** 2018-00899

- All work shall conform to all applicable North Carolina State Building codes and Ordinances of the Town of Nags Head and shall be the responsibility of the undersigned applicant.
- All work shall conform to the plans and specifications provided with the application.
- Any damage to the multi-use path or adjoining right-of-way shall be immediately repaired by the owner and/or applicant.

In accordance with GS160A-418, a permit expires 6 months after the date of issuance if the work authorized by the permit has not been commenced. If, after commencement, the work is discontinued for a period of 12 months (no inspections have taken place) the permit immediately expires. No work authorized by a permit that has expired may be performed until a new permit has been issued.

Building Inspector 08/16/2018

Responsible Party Date

This permit only authorizes work expressly identified in the building permit application, unless otherwise specified herein. The work done shall comply with the State Building Code and all other applicable Federal, State and local laws. The approval and issuance of this permit conveys no rights or guarantees for any future proposed modifications of this permit or the issuance of new permits for any future proposed use and development of the property.

# TOWN OF NAGS HEAD

PO Box 99  
Nags Head, NC 27959  
Phone (252) 441-7016 Fax (252) 4414290



## Building Permit

CA2018-1281

<b>Owner Name:</b> BurgerBusters, Inc. - Tassos Paphites	<b>Owner</b> 2242 W Great Neck Rd
<b>Owner Phone:</b> 804 385 4430	<b>Address:</b> Virginia Beach VA
<b>Parcel PIN:</b> 080015720591	<b>Zoning:</b> C2 (General Commercial District)
<b>Address:</b> 7328 S Va Dare Trl S	<b>Lot/Block/Sec:</b> LOT: 3-4 & PT 5 BLK: 11A SEC:
<b>Subdivision:</b> WHALEBONE BEACHES REVISED	
<b>Contractor Name:</b> Scotty Signs	<b>Contractor</b> 340 Ed Wright Ln
<b>Contractor Phone:</b> 757 245 7129	<b>Address:</b> Newport News VA 23606
<b>Description:</b> Install new freestanding drive thru canopy onto new foundation with anchor bolts to replace existing; install new freestanding menu board to replace existing 7/27 Install new Clearance bar to replace existing	<b>Construction Type:</b> Remodel
<b>Construction Value:</b> 3000.00	<b>Heated Space:</b> 0 <b>Unheated Space:</b> 0
<b>Foundation Type:</b>	<b># of Bedrooms:</b> 0 <b># of Baths:</b> 0
<b>Zoning Permit:</b> see file	<b>FEMA Flood Zone:</b> AE
<b>Septic Permit:</b> na	<b>Lot Elevation:</b>
<b>CAMA Permit:</b>	<b>BFE:</b> 9
<b>PW Permit#</b> NA	

**Total Fees Paid/Due:** 105.00 / **Invoice #:** 2018-00904

- All work shall conform to all applicable North Carolina State Building codes and Ordinances of the Town of Nags Head and shall be the responsibility of the undersigned applicant.  
- All work shall conform to the plans and specifications provided with the application.  
- Any damage to the multi-use path or adjoining right-of-way shall be immediately repaired by the owner and/or applicant.  
**In accordance with GS160A-418, a permit expires 6 months after the date of issuance if the work authorized by the permit has not been commenced. If, after commencement, the work is discontinued for a period of 12 months (no inspections have taken place) the permit immediately expires. No work authorized by a permit that has expired may be performed until a new permit has been issued.**

Building Inspector 08/17/2018 Responsible Party Date

This permit only authorizes work expressly identified in the building permit application, unless otherwise specified herein. The work done shall comply with the State Building Code and all other applicable Federal, State and local laws. The approval and issuance of this permit conveys no rights or guarantees for any future proposed modifications of this permit or the issuance of new permits for any future proposed use and development of the property.

### Conditions:

CALL FOR ALL REQUIRED INSPECTIONS; All subcontractors shall obtain all permits required by State building codes prior to starting work; All new work to meet current code; Additional engineering may be required; FINAL INSPECTION REQUIRED PRIOR TO ISSUANCE OF CERTIFICATE OF COMPLIANCE;

Pull electrical permit. Call for trench inspections. Call for footing inspections. Footing shall be a minimum of 12 inches below

# TOWN OF NAGS HEAD

PO Box 99  
Nags Head, NC 27959  
Phone (252) 441-7016 Fax (252) 4414290



## Building Permit

**RE2018-1709**

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<b>Owner Name:</b> Nerdahl, Cameron B - Nerdahl, Frances P	<b>Owner</b> 3221 Barbara Ln
<b>Owner Phone:</b> 757 559 5200	<b>Address:</b> Fairfax VA 22031
<b>Parcel PIN:</b> 080109152425	<b>Zoning:</b> C2 (General Commercial District)
<b>Address:</b> 4712 S Va Dare Trl S	<b>Lot/Block/Sec:</b> LOT: 6 BLK: SEC:
<b>Subdivision:</b> NAGS HEAD DUNES	
<b>Contractor Name:</b> J & T Construction	<b>Contractor P</b> O Box 1316
<b>Contractor Phone:</b> 252 489 3950	<b>Address:</b> Kill Devil Hills NC 27948

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**Description:** Replace about 400 SF of decking: boards, pickets, handrails, joists & girders; replace east side steps

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<b>Construction Value:</b> 6800.00	<b>Construction Type:</b> Repair
<b>Foundation Type:</b>	<b>Heated Space:</b> 0 <b>Unheated Space:</b> 0
	<b># of Bedrooms:</b> 0 <b># of Baths:</b> 0
<b>Zoning Permit:</b> 2018.	<b>FEMA Flood Zone:</b> ae
<b>Septic Permit:</b> na	<b>BFE:</b> 11
<b>CAMA Permit:</b> na	<b>Flood Permit:</b> 2018.1710
<b>PW Permit#</b> na	

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### Conditions:

CALL FOR ALL REQUIRED INSPECTIONS; All new work to meet current code; See CONDITIONS on Zoning Permit; Additional engineering may be required; Piling inspection required; FINAL INSPECTION REQUIRED PRIOR TO ISSUANCE OF CERTIFICATE OF COMPLIANCE;

Address #s on home. Girders may require engineering. Call for final inspection. Call for site visit be starting work.

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**Total Fees Paid/Due:** 135.00 **Invoice #:** 2018-00906

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- All work shall conform to all applicable North Carolina State Building codes and Ordinances of the Town of Nags Head and shall be the responsibility of the undersigned applicant.
- All work shall conform to the plans and specifications provided with the application.
- Any damage to the multi-use path or adjoining right-of-way shall be immediately repaired by the owner and/or applicant.

In accordance with GS160A-418, a permit expires 6 months after the date of issuance if the work authorized by the permit has not been commenced. If, after commencement, the work is discontinued for a period of 12 months (no inspections have taken place) the permit immediately expires. No work authorized by a permit that has expired may be performed until a new permit has been issued.

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Building Inspector	08/17/2018	Responsible Party	Date
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This permit only authorizes work expressly identified in the building permit application, unless otherwise specified herein. The work done shall comply with the State Building Code and all other applicable Federal, State and local laws. The approval and issuance of this permit conveys no rights or guarantees for any future proposed modifications of this permit or the issuance of new permits for any future proposed use and development of the property.

# TOWN OF NAGS HEAD

PO Box 99

Nags Head, NC 27959

Phone (252) 441-7016 Fax (252) 4414290



## Building Permit

RE2018-1750

Owner Name: Miller, Glenn T - Miller, Nancy V

Owner Phone:

Parcel PIN: 080006378967

Address: 104 W Bay Winds

Subdivision: BAYMEADOWPARCELA

Contractor Name: Coastal Roofing and Siding, Inc.

Contractor Phone: 252 480 0515

Description: Replace cedar shake roof

Owner 2203 Old Church Rd

Address: Powhatan VA 23139

Zoning: Imported Default District

Lot/Block/Sec: LOT: 11 BLK: SEC:

Contractor 2401 Colington Rd

Address: KILL DEVIL HILLS NC 27948

Construction Value: 28750.00

Foundation Type:

Construction Type: Repair

Heated Space: 0

Unheated Space: 0

# of Bedrooms: 0

# of Baths: 0

Zoning Permit: see file

Septic Permit: na

CAMA Permit:

PW Permit# na

FEMA Flood Zone: ae

BFE: 9

Flood Permit: 2018.1751

### Conditions:

CALL FOR ALL REQUIRED INSPECTIONS; Material check inspection required; FINAL INSPECTION REQUIRED PRIOR TO ISSUANCE OF CERTIFICATE OF COMPLIANCE;

Address #s on home if none are present. Call for material check. Call for final inspection

Total Fees Paid/Due: 195.00

Invoice #: 2018-00902

- All work shall conform to all applicable North Carolina State Building codes and Ordinances of the Town of Nags Head and shall be the responsibility of the undersigned applicant.

- All work shall conform to the plans and specifications provided with the application.

- Any damage to the multi-use path or adjoining right-of-way shall be immediately repaired by the owner and/or applicant.

In accordance with GS160A-418, a permit expires 6 months after the date of issuance if the work authorized by the permit has not been commenced. If, after commencement, the work is discontinued for a period of 12 months (no inspections have taken place) the permit immediately expires. No work authorized by a permit that has expired may be performed until a new permit has been issued.

Building Inspector

08/17/2018

Responsible Party

Date

This permit only authorizes work expressly identified in the building permit application, unless otherwise specified herein. The work done shall comply with the State Building Code and all other applicable Federal, State and local laws. The approval and issuance of this permit conveys no rights or guarantees for any future proposed modifications of this permit or the issuance of new permits for any future proposed use and development of the property.

# TOWN OF NAGS HEAD

PO Box 99  
Nags Head, NC 27959  
Phone (252) 441-7016 Fax (252) 4414290



## Building Permit

BR2018-1795

<b>Owner Name:</b> Davis, Douglas W - Davis, Kathryn S	<b>Owner</b> 1132 Wivenhoe Way
<b>Owner Phone:</b> 757 449 9963	<b>Address:</b> Virginia Beach VA 23454
<b>Parcel PIN:</b> 080007575545	<b>Zoning:</b> CR (Commercial Residential District)
<b>Address:</b> 6503 S Va Dare Trl S	<b>Lot/Block/Sec:</b> LOT: 14 BLK: A SEC:
<b>Subdivision:</b> PEBBLE BEACH SHORES	
<b>Contractor Name:</b> Finch and Co., Inc.	<b>Contractor</b> 116 Sandy Ridge Rd
<b>Contractor Phone:</b> 252 261 8710	<b>Address:</b> Duck NC 27949
<b>Description:</b> Construct new single family dwelling on piling foundation, 6 bedrooms, 6.3 baths, with swimming pool	
<b>Construction Value:</b> 898539.00	<b>Construction Type:</b> New Construction
<b>Foundation Type:</b>	<b>Heated Space:</b> 4984 <b>Unheated Space:</b> 1240
	<b># of Bedrooms:</b> 6 <b># of Baths:</b> 6.3
<b>Zoning Permit:</b> 2018.	<b>FEMA Flood Zone:</b> ve
<b>Septic Permit:</b> 27746	<b>Lot Elevation:</b>
<b>CAMA Permit:</b> 18-038	<b>BFE:</b> 11
<b>PW Permit#</b> 2018.1797	
<b>Total Fees Paid/Due:</b> 3062.00 /	<b>Invoice #:</b> 2018-00915

- All work shall conform to all applicable North Carolina State Building codes and Ordinances of the Town of Nags Head and shall be the responsibility of the undersigned applicant.  
- All work shall conform to the plans and specifications provided with the application.  
- Any damage to the multi-use path or adjoining right-of-way shall be immediately repaired by the owner and/or applicant.  
**In accordance with GS160A-418, a permit expires 6 months after the date of issuance if the work authorized by the permit has not been commenced. If, after commencement, the work is discontinued for a period of 12 months (no inspections have taken place) the permit immediately expires. No work authorized by a permit that has expired may be performed until a new permit has been issued.**

Building Inspector	08/20/2018	Responsible Party	Date
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**This permit only authorizes work expressly identified in the building permit application, unless otherwise specified herein. The work done shall comply with the State Building Code and all other applicable Federal, State and local laws. The approval and issuance of this permit conveys no rights or guarantees for any future proposed modifications of this permit or the issuance of new permits for any future proposed use and development of the property.**

### Conditions:

CALL FOR ALL REQUIRED INSPECTIONS; All subcontractors shall obtain all permits required by State building codes prior to starting work; All new work to meet current code; Additional engineering may be required; Piling inspection required; See conditions of Public Works, Zoning and Building Permits; Work must meet previously submitted and approved plans; FINAL INSPECTION REQUIRED PRIOR TO ISSUANCE OF CERTIFICATE OF COMPLIANCE;

- Site copy of plans shall be on site for all inspections



# TOWN OF NAGS HEAD

PO Box 99  
Nags Head, NC 27959  
Phone (252) 441-7016 Fax (252) 4414290



## Building Permit

CA2018-1831

<b>Owner Name:</b> NORTH BANK PROPERTIES - C/O LAIRD SAGER	<b>Owner</b> PO Box 128
<b>Owner Phone:</b> 252 202 3292	<b>Address:</b> Point Harbor NC 27964
<b>Parcel PIN:</b> 989210366384	<b>Zoning:</b> Imported Default District
<b>Address:</b> 119 W Woodhill Dr W	<b>Lot/Block/Sec:</b> LOT: A1 BLK: SEC:
<b>Subdivision:</b> HILLS OF NAGS HEAD	
<b>Contractor Name:</b> Renaissance Construction Co., Inc.	<b>Contractor</b> PO Box 1411
<b>Contractor Phone:</b> 252 473 3316	<b>Address:</b> Manteo NC 27954

**Description:** Units 1 & 2 Demo units for office upfit

<b>Construction Value:</b> 8900.00	<b>Construction Type:</b> Remodel
<b>Foundation Type:</b>	<b>Heated Space:</b> 0 <b>Unheated Space:</b> 0
	<b># of Bedrooms:</b> 0 <b># of Baths:</b> 0

<b>Zoning Permit:</b> see file	<b>FEMA Flood Zone:</b> x
<b>Septic Permit:</b> na	<b>BFE:</b>
<b>CAMA Permit:</b> na	<b>Flood Permit:</b>
<b>PW Permit#</b> na	

### Conditions:

CALL FOR ALL REQUIRED INSPECTIONS; All subcontractors shall obtain all permits required by State building codes prior to starting work; FINAL INSPECTION REQUIRED PRIOR TO ISSUANCE OF CERTIFICATE OF COMPLIANCE;

Call for a site visit prior to starting Demolition. Pull trade permits as required. Call for final inspection

**Total Fees Paid/Due:** 135.00 **Invoice #:** 2018-00913

- All work shall conform to all applicable North Carolina State Building codes and Ordinances of the Town of Nags Head and shall be the responsibility of the undersigned applicant.
- All work shall conform to the plans and specifications provided with the application.
- Any damage to the multi-use path or adjoining right-of-way shall be immediately repaired by the owner and/or applicant.

In accordance with GS160A-418, a permit expires 6 months after the date of issuance if the work authorized by the permit has not been commenced. If, after commencement, the work is discontinued for a period of 12 months (no inspections have taken place) the permit immediately expires. No work authorized by a permit that has expired may be performed until a new permit has been issued.

Building Inspector	08/20/2018	Responsible Party	Date
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This permit only authorizes work expressly identified in the building permit application, unless otherwise specified herein. The work done shall comply with the State Building Code and all other applicable Federal, State and local laws. The approval and issuance of this permit conveys no rights or guarantees for any future proposed modifications of this permit or the issuance of new permits for any future proposed use and development of the property.

# TOWN OF NAGS HEAD

PO Box 99  
Nags Head, NC 27959  
Phone (252) 441-7016 Fax (252) 4414290



## Building Permit

**RE2018-1834**

<b>Owner Name:</b> Kittrell, John S - Kittrell, Kathy M	<b>Owner</b> 2505 Grove Ave
<b>Owner Phone:</b> 804 512 9270	<b>Address:</b> Richmond VA 23220
<b>Parcel PIN:</b> 989116934392	<b>Zoning:</b> R2 (Medium Density Residential District)
<b>Address:</b> 4722 S Roanoke Way S	<b>Lot/Block/Sec:</b> LOT: 57 BLK: SEC: B
<b>Subdivision:</b> OLD NAGS HEAD COVE SEC B	
<b>Contractor Name:</b> Radford, Jeff	<b>Contractor</b> 517 W Archdale St
<b>Contractor Phone:</b> 252 207 2910	<b>Address:</b> Kill Devil Hills NC 27948

**Description:** Replace slider doors and add upper windows

**Construction Value:** 7500.00

**Foundation Type:**

**Construction Type:** Remodel

**Heated Space:** 0

**Unheated Space:** 0

**# of Bedrooms:** 0

**# of Baths:** 0

**Zoning Permit:** see file

**Septic Permit:** na

**CAMA Permit:** na

**PW Permit#** na

**FEMA Flood Zone:** AE

**BFE:** 9

**Flood Permit:** 2018.1835

### Conditions:

CALL FOR ALL REQUIRED INSPECTIONS; All new work to meet current code; See CONDITIONS on Zoning Permit; Additional engineering may be required; FINAL INSPECTION REQUIRED PRIOR TO ISSUANCE OF CERTIFICATE OF COMPLIANCE;

Adress #s to TONH ordinance. Engineering may be requested. Pull electrical permit if any wiring is altered. Smokes and Co2 detectors to code. Call for framing and sheathing inspection. Call for final inspection

**Total Fees Paid/Due:** 135.00

**Invoice #:** 2018-00909

- All work shall conform to all applicable North Carolina State Building codes and Ordinances of the Town of Nags Head and shall be the responsibility of the undersigned applicant.
- All work shall conform to the plans and specifications provided with the application.
- Any damage to the multi-use path or adjoining right-of-way shall be immediately repaired by the owner and/or applicant.

**In accordance with GS160A-418, a permit expires 6 months after the date of issuance if the work authorized by the permit has not been commenced. If, after commencement, the work is discontinued for a period of 12 months (no inspections have taken place) the permit immediately expires. No work authorized by a permit that has expired may be performed until a new permit has been issued.**

Building Inspector

08/20/2018

Responsible Party

Date

This permit only authorizes work expressly identified in the building permit application, unless otherwise specified herein. The work done shall comply with the State Building Code and all other applicable Federal, State and local laws. The approval and issuance of this permit conveys no rights or guarantees for any future proposed modifications of this permit or the issuance of new permits for any future proposed use and development of the property.

# TOWN OF NAGS HEAD

PO Box 99

Nags Head, NC 27959

Phone (252) 441-7016 Fax (252) 4414290



## Building Permit

RE2018-1813

Owner Name: Plante, Daniel L - Plante, Jane B

Owner 303 West Rd

Owner Phone: 757 418 2025

Address: Portsmouth VA 23707

Parcel PIN: 080011562952

Zoning: Imported Default District

Address: 106 E Flicker St E

Subdivision: WHALEBONE BEACH EXT AT NH

Lot/Block/Sec: LOT: 8 BLK: C SEC:

Contractor Name: Emanuelson & Dad, Inc

Contractor 6705 S Croatan Hwy

Contractor Phone: 252 261 2212

Address: Nags Head NC 27959

Description: Install 5 sister piles 6x6x12'

Construction Value: 3000.00

Construction Type: Repair

Foundation Type:

Heated Space: 0

Unheated Space: 0

# of Bedrooms: 0

# of Baths: 0

Zoning Permit: see file

FEMA Flood Zone: AE

Septic Permit: na

BFE: 9

CAMA Permit:

Flood Permit: 2018.1814

PW Permit#

### Conditions:

CALL FOR ALL REQUIRED INSPECTIONS; All new work to meet current code; Material check inspection required; FINAL INSPECTION REQUIRED PRIOR TO ISSUANCE OF CERTIFICATE OF COMPLIANCE;

Address #s on home if none are present. Install pilings per engineer detail. Pilings shall stay inside the footprint of the building unless approved by zoning. Call for piling inspection. Call for final inspection

Total Fees Paid/Due: 105.00

Invoice #: 2018-00912

- All work shall conform to all applicable North Carolina State Building codes and Ordinances of the Town of Nags Head and shall be the responsibility of the undersigned applicant.
- All work shall conform to the plans and specifications provided with the application.
- Any damage to the multi-use path or adjoining right-of-way shall be immediately repaired by the owner and/or applicant.

In accordance with GS160A-418, a permit expires 6 months after the date of issuance if the work authorized by the permit has not been commenced. If, after commencement, the work is discontinued for a period of 12 months (no inspections have taken place) the permit immediately expires. No work authorized by a permit that has expired may be performed until a new permit has been issued.

Building Inspector

08/20/2018

Responsible Party

Date

This permit only authorizes work expressly identified in the building permit application, unless otherwise specified herein. The work done shall comply with the State Building Code and all other applicable Federal, State and local laws. The approval and issuance of this permit conveys no rights or guarantees for any future proposed modifications of this permit or the issuance of new permits for any future proposed use and development of the property.

# TOWN OF NAGS HEAD

PO Box 99

Nags Head, NC 27959

Phone (252) 441-7016 Fax (252) 4414290



## Building Permit

**RE2018-1840**

**Owner Name:** Fisk, Thomas P - Fisk D. Elizabeth

**Owner** 7421 Elgar St

**Owner Phone:** 571 276 3257

**Address:** Springfield VA 22151

**Parcel PIN:** 989206387647

**Zoning:** Imported Default District

**Address:** 115 E Barnes St E

**Subdivision:** VISTA COLONY SECTION 2

**Lot/Block/Sec:** LOT: 24 BLK: SEC:

**Contractor Name:** Sharpnack Construction Services

**Contractor** 7049 Currituck Rd

**Contractor Phone:** 808 398 6590

**Address:** Kitty Hawk NC 27949

**Description:** Remove & replace existing entry stair & deck handrails, replace upper deck railings with new knee wall to create a screened porch area

**Construction Value:** 10893.00

**Construction Type:** Remodel

**Foundation Type:**

**Heated Space:** 0

**Unheated Space:** 0

**# of Bedrooms:** 0

**# of Baths:** 0

**Zoning Permit:** 2018.0236

**FEMA Flood Zone:** AE

**Septic Permit:** na

**BFE:** 10

**CAMA Permit:** na

**Flood Permit:** 2018.1841

**PW Permit#** na

### Conditions:

CALL FOR ALL REQUIRED INSPECTIONS; All new work to meet current code; Additional engineering may be required; FINAL INSPECTION REQUIRED PRIOR TO ISSUANCE OF CERTIFICATE OF COMPLIANCE;

Address #s on home if none are present. Review deck and stair handouts we have provided. Call for final inspection

**Total Fees Paid/Due:** 165.00

**Invoice #:** 2018-00917

- All work shall conform to all applicable North Carolina State Building codes and Ordinances of the Town of Nags Head and shall be the responsibility of the undersigned applicant.

- All work shall conform to the plans and specifications provided with the application.

- Any damage to the multi-use path or adjoining right-of-way shall be immediately repaired by the owner and/or applicant.

**In accordance with GS160A-418, a permit expires 6 months after the date of issuance if the work authorized by the permit has not been commenced. If, after commencement, the work is discontinued for a period of 12 months (no inspections have taken place) the permit immediately expires. No work authorized by a permit that has expired may be performed until a new permit has been issued.**

Building Inspector

08/21/2018

Responsible Party

Date

This permit only authorizes work expressly identified in the building permit application, unless otherwise specified herein. The work done shall comply with the State Building Code and all other applicable Federal, State and local laws. The approval and issuance of this permit conveys no rights or guarantees for any future proposed modifications of this permit or the issuance of new permits for any future proposed use and development of the property.

# TOWN OF NAGS HEAD

PO Box 99  
Nags Head, NC 27959  
Phone (252) 441-7016 Fax (252) 4414290



## Building Permit

**RE2018-1851**

<b>Owner Name:</b> Mark T Ballog	<b>Owner:</b> 2625 S Bridge Ln
<b>Owner Phone:</b> 252 573 9756	<b>Address:</b> Nags Head NC 27959
<b>Parcel PIN:</b> 989206287549	<b>Zoning:</b> Imported Default District
<b>Address:</b> 202 W Albemarle Dr	<b>Lot/Block/Sec:</b> LOT: 3 BLK: D SEC:
<b>Subdivision:</b> VISTA COLONY WEST	

<b>Contractor Name:</b> Property Owner	<b>Contractor:</b>
<b>Contractor Phone:</b>	<b>Address:</b> Nags Head NC

<b>Description:</b> Add 250 sq ft under house, elevated 1 ft for existing washer, dryer & hot water heater, replace existing deck & handrails, add 2nd bathroom, update kitchen with new window & dishwasher, relocate panel box, replace flooring & light fixtures	<b>Construction Type:</b> Remodel
<b>Construction Value:</b> 28000.00	<b>Heated Space:</b> 0 <b>Unheated Space:</b> 0
<b>Foundation Type:</b>	<b># of Bedrooms:</b> 0 <b># of Baths:</b> 0

<b>Zoning Permit:</b> 2018.0237	<b>FEMA Flood Zone:</b> x
<b>Septic Permit:</b> na	<b>BFE:</b>
<b>CAMA Permit:</b> na	<b>Flood Permit:</b>
<b>PW Permit#:</b> na	

### Conditions:

CALL FOR ALL REQUIRED INSPECTIONS; All subcontractors shall obtain all permits required by State building codes prior to starting work; All new work to meet current code; Additional engineering may be required; FINAL INSPECTION REQUIRED PRIOR TO ISSUANCE OF CERTIFICATE OF COMPLIANCE;

Address #s to TONH ordinance. Smoke detectors to code throughout home. Review plumbing fixture clearances for new bathroom. Have subs pull permits before starting work.

<b>Total Fees Paid/Due:</b> 195.00	<b>Invoice #:</b> 2018-00919
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- All work shall conform to all applicable North Carolina State Building codes and Ordinances of the Town of Nags Head and shall be the responsibility of the undersigned applicant.
- All work shall conform to the plans and specifications provided with the application.
- Any damage to the multi-use path or adjoining right-of-way shall be immediately repaired by the owner and/or applicant.

In accordance with GS160A-418, a permit expires 6 months after the date of issuance if the work authorized by the permit has not been commenced. If, after commencement, the work is discontinued for a period of 12 months (no inspections have taken place) the permit immediately expires. No work authorized by a permit that has expired may be performed until a new permit has been issued.

Building Inspector	08/21/2018	Responsible Party	Date
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# TOWN OF NAGS HEAD

PO Box 99

Nags Head, NC 27959

Phone (252) 441-7016 Fax (252) 4414290



## Building Permit

**RE2018-1842**

**Owner Name:** Mandozzi, Jarrod - Mandozzi, Maria

**Owner** 168 Venetian Dr

**Owner Phone:**

**Address:** Islamorada FL 33036

**Parcel PIN:** 071815730295

**Zoning:** R2 (Medium Density Residential District)

**Address:** 10228 E Sea Gull Dr E

**Subdivision:** GOOSE WING

**Lot/Block/Sec:** LOT: 47 BLK: SEC:

**Contractor Name:** Macko Construction, SMS

**Contractor** PO Box 3689

**Contractor Phone:** 252 480 6411

**Address:** KILL DEVIL HILLS NC 27948

**Description:** Replace fiberglass deck & railing

**Construction Value:** 15000.00

**Construction Type:** Repair

**Foundation Type:**

**Heated Space:** 0

**Unheated Space:** 0

**# of Bedrooms:** 0

**# of Baths:** 0

**Zoning Permit:** see file

**FEMA Flood Zone:** v

**Septic Permit:** na

**BFE:** 11

**CAMA Permit:** na

**Flood Permit:** 2018.1843

**PW Permit#** na

### Conditions:

CALL FOR ALL REQUIRED INSPECTIONS; All new work to meet current code; Additional engineering may be required; FINAL INSPECTION REQUIRED PRIOR TO ISSUANCE OF CERTIFICATE OF COMPLIANCE;

Address #s on home if none are present. Let us see framing before it gets covered. We need to see all bolts before they are covered. Remove unsafe conditions. Call for final inspection.

**Total Fees Paid/Due:** 165.00

**Invoice #:** 2018-00918

- All work shall conform to all applicable North Carolina State Building codes and Ordinances of the Town of Nags Head and shall be the responsibility of the undersigned applicant.

- All work shall conform to the plans and specifications provided with the application.

- Any damage to the multi-use path or adjoining right-of-way shall be immediately repaired by the owner and/or applicant.

**In accordance with GS160A-418, a permit expires 6 months after the date of issuance if the work authorized by the permit has not been commenced. If, after commencement, the work is discontinued for a period of 12 months (no inspections have taken place) the permit immediately expires. No work authorized by a permit that has expired may be performed until a new permit has been issued.**

Building Inspector

08/21/2018

Responsible Party

Date

This permit only authorizes work expressly identified in the building permit application, unless otherwise specified herein. The work done shall comply with the State Building Code and all other applicable Federal, State and local laws. The approval and issuance of this permit conveys no rights or guarantees for any future proposed modifications of this permit or the issuance of new permits for any future proposed use and development of the property.

# TOWN OF NAGS HEAD

PO Box 99  
Nags Head, NC 27959  
Phone (252) 441-7016 Fax (252) 4414290



## Building Permit

**RE2018-1869**

<b>Owner Name:</b> HOGGARD, AALAN - HOGGARD, TAMMYMETUX	<b>Owner</b> P O Box 607 Rd
<b>Owner Phone:</b>	<b>Address:</b> WINDSOR NC 27983
<b>Parcel PIN:</b> 071810468764	<b>Zoning:</b> R2 (Medium Density Residential District)
<b>Address:</b> 117 W Westside Ct W	<b>Lot/Block/Sec:</b> LOT: 10 BLK: SEC:
<b>Subdivision:</b> CHAWANOOK WEST	

<b>Contractor Name:</b> Hardin Eric Wyant	<b>Contractor</b> 100 Inge Dr
<b>Contractor Phone:</b> 252 216 8991	<b>Address:</b> Manteo NC 27954

**Description:** Remove handrails on existing deck mid floor, add 8x8 piling and roof to cover deck to keep doors from leaking. REMOVE 3rd floor deck & door and replace with double windows, replace handrails

<b>Construction Value:</b> 22000.00	<b>Construction Type:</b> Remodel
<b>Foundation Type:</b>	<b>Heated Space:</b> 0 <b>Unheated Space:</b> 0
	<b># of Bedrooms:</b> 0 <b># of Baths:</b> 0

<b>Zoning Permit:</b> 2018.0239	<b>FEMA Flood Zone:</b> AE
<b>Septic Permit:</b> 28024	<b>BFE:</b> 10
<b>CAMA Permit:</b> na	<b>Flood Permit:</b> 2018.1870
<b>PW Permit#</b> na	

### Conditions:

CALL FOR ALL REQUIRED INSPECTIONS; All subcontractors shall obtain all permits required by State building codes prior to starting work; All new work to meet current code; See CONDITIONS on Zoning Permit; Additional engineering may be required; Material check inspection required; Piling inspection required; FINAL INSPECTION REQUIRED PRIOR TO ISSUANCE OF CERTIFICATE OF COMPLIANCE;

Work is subject to possible engineering. Call for all required inspections. Call for final

<b>Total Fees Paid/Due:</b> 205.00	<b>Invoice #:</b> 2018-00928
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- All work shall conform to all applicable North Carolina State Building codes and Ordinances of the Town of Nags Head and shall be the responsibility of the undersigned applicant.
- All work shall conform to the plans and specifications provided with the application.
- Any damage to the multi-use path or adjoining right-of-way shall be immediately repaired by the owner and/or applicant.

In accordance with GS160A-418, a permit expires 6 months after the date of issuance if the work authorized by the permit has not been commenced. If, after commencement, the work is discontinued for a period of 12 months (no inspections have taken place) the permit immediately expires. No work authorized by a permit that has expired may be performed until a new permit has been issued.

Building Inspector	08/27/2018	Responsible Party	Date
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# TOWN OF NAGS HEAD

PO Box 99

Nags Head, NC 27959

Phone (252) 441-7016 Fax (252) 4414290



## Building Permit

RE2018-1811

**Owner Name:** SCHUBERT, GERALD T JR - MARGARET MULLERY SCHUBERT ETUX  
**Owner Phone:** 703 343 0480  
**Owner:** 1326 Terrace Park Dr  
**Address:** Columbus OH 43235

**Parcel PIN:** 071815638499  
**Address:** 10215 S Bodie Isle Ct  
**Subdivision:** GOOSEWING  
**Zoning:** R2 (Medium Density Residential District)  
**Lot/Block/Sec:** LOT: 42 BLK: SEC:

**Contractor Name:** J. L. FIRESTONE CONSTRUCTION  
**Contractor Phone:** 252 202 2760  
**Contractor:** P O Box 344  
**Address:** Jarvisburg NC 27947

**Description:** Remove & replace worn out decking & handrails on 2 small decks, remove & replace 2 sets of back stairs

**Construction Value:** 7000.00

**Foundation Type:**

**Construction Type:** Repair

**Heated Space:** 0

**Unheated Space:** 0

**# of Bedrooms:** 0

**# of Baths:** 0

**Zoning Permit:** see file

**Septic Permit:** na

**CAMA Permit:**

**PW Permit#** na

**FEMA Flood Zone:** SV

**BFE:** 11

**Flood Permit:** 2018.1812

### Conditions:

CALL FOR ALL REQUIRED INSPECTIONS; All new work to meet current code; Additional engineering may be required; Piling inspection required; FINAL INSPECTION REQUIRED PRIOR TO ISSUANCE OF CERTIFICATE OF COMPLIANCE;

Address #s on home if none are present. Review deck repair handout we have provided. Call for final inspection

**Total Fees Paid/Due:** 135.00

**Invoice #:** 2018-00927

- All work shall conform to all applicable North Carolina State Building codes and Ordinances of the Town of Nags Head and shall be the responsibility of the undersigned applicant.

- All work shall conform to the plans and specifications provided with the application.

- Any damage to the multi-use path or adjoining right-of-way shall be immediately repaired by the owner and/or applicant.

In accordance with GS160A-418, a permit expires 6 months after the date of issuance if the work authorized by the permit has not been commenced. If, after commencement, the work is discontinued for a period of 12 months (no inspections have taken place) the permit immediately expires. No work authorized by a permit that has expired may be performed until a new permit has been issued.

Building Inspector

08/27/2018

Responsible Party

Date

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# TOWN OF NAGS HEAD

PO Box 99  
Nags Head, NC 27959  
Phone (252) 441-7016 Fax (252) 4414290



## Building Permit

**RE2018-1858**

**Owner Name:** CAHOON, BENJAMIN-CAHOON,  
MELANIE SETUX

**Owner** 2616 Compass Ln

**Owner Phone:**

**Address:** NAGS HEAD NC 27959

**Parcel PIN:** 989205280916

**Zoning:** Imported Default District

**Address:** 2616 S Compass Ln

**Subdivision:** NAGS HEAD ACRES SECTION 3

**Lot/Block/Sec:** LOT: 131 BLK: SEC: 3

**Contractor Name:** JB Utz Construction

**Contractor** 2719 S Wrightsville Ave

**Contractor Phone:** 252 480 3989

**Address:** Nags Head NC 27959

**Description:** Replace existing front stairs & 2 columns

**Construction Value:** 2500.00

**Construction Type:** Repair

**Foundation Type:**

**Heated Space:** 0

**Unheated Space:** 0

**# of Bedrooms:** 0

**# of Baths:** 0

**Zoning Permit:** see file

**FEMA Flood Zone:** x

**Septic Permit:** na

**BFE:**

**CAMA Permit:** na

**Flood Permit:**

**PW Permit#** na

### Conditions:

CALL FOR ALL REQUIRED INSPECTIONS; All new work to meet current code; FINAL INSPECTION REQUIRED PRIOR TO ISSUANCE OF CERTIFICATE OF COMPLIANCE;

Address numbers on home if none are present. Provide continuous tie from piling to roof. Call for final inspection

**Total Fees Paid/Due:** 75.00

**Invoice #:** 2018-00929

- All work shall conform to all applicable North Carolina State Building codes and Ordinances of the Town of Nags Head and shall be the responsibility of the undersigned applicant.

- All work shall conform to the plans and specifications provided with the application.

- Any damage to the multi-use path or adjoining right-of-way shall be immediately repaired by the owner and/or applicant.

In accordance with GS160A-418, a permit expires 6 months after the date of issuance if the work authorized by the permit has not been commenced. If, after commencement, the work is discontinued for a period of 12 months (no inspections have taken place) the permit immediately expires. No work authorized by a permit that has expired may be performed until a new permit has been issued.

Building Inspector

08/27/2018

Responsible Party

Date

This permit only authorizes work expressly identified in the building permit application, unless otherwise specified herein. The work done shall comply with the State Building Code and all other applicable Federal, State and local laws. The approval and issuance of this permit conveys no rights or guarantees for any future proposed modifications of this permit or the issuance of new permits for any future proposed use and development of the property.

# TOWN OF NAGS HEAD

PO Box 99

Nags Head, NC 27959

Phone (252) 441-7016 Fax (252) 4414290



## Building Permit

CA2018-1852

Owner Name: OUTER BANKS HOSPITAL INC

Owner 4800 S Croatan Hwy

Owner Phone:

Address: NAGS HEAD NC 27959

Parcel PIN: 080113049010

Zoning: SPD-C SF-4 (Village Attached Residential Single Family)

Address: 4800 S Croatan Hwy S

Subdivision: SUBDIVISION-NONE

Lot/Block/Sec: LOT: PARCEL L BLK: SEC:

Contractor Name: Albemarle Contracting Services (ACS)

Contractor PO Box 1771

Contractor Phone: 252 599 2999

Address: Nags Head NC 27959

Description: Office renovation, remove flooring, old doors, cap plumbing/electric & painting

Construction Value: 40000.00

Construction Type: Remodel

Foundation Type:

Heated Space: 5630

Unheated Space: 0

# of Bedrooms: 0

# of Baths: 0

Zoning Permit: see file

FEMA Flood Zone: x

Septic Permit: na

BFE:

CAMA Permit: na

Flood Permit:

PW Permit#: na

### Conditions:

CALL FOR ALL REQUIRED INSPECTIONS; All subcontractors shall obtain all permits required by State building codes prior to starting work; All new work to meet current code; Additional engineering may be required; FINAL INSPECTION REQUIRED PRIOR TO ISSUANCE OF CERTIFICATE OF COMPLIANCE;

Call for site visit to determine conditions of permit prior to starting work.

Total Fees Paid/Due: 225.00

Invoice #: 2018-00936

- All work shall conform to all applicable North Carolina State Building codes and Ordinances of the Town of Nags Head and shall be the responsibility of the undersigned applicant.

- All work shall conform to the plans and specifications provided with the application.

- Any damage to the multi-use path or adjoining right-of-way shall be immediately repaired by the owner and/or applicant.

In accordance with GS160A-418, a permit expires 6 months after the date of issuance if the work authorized by the permit has not been commenced. If, after commencement, the work is discontinued for a period of 12 months (no inspections have taken place) the permit immediately expires. No work authorized by a permit that has expired may be performed until a new permit has been issued.

Building Inspector

08/30/2018

Responsible Party

Date

This permit only authorizes work expressly identified in the building permit application, unless otherwise specified herein. The work done shall comply with the State Building Code and all other applicable Federal, State and local laws. The approval and issuance of this permit conveys no rights or guarantees for any future proposed modifications of this permit or the issuance of new permits for any future proposed use and development of the property.

# TOWN OF NAGS HEAD

PO Box 99  
Nags Head, NC 27959  
Phone (252) 441-7016 Fax (252) 4414290



## Building Permit

**RE2018-1865**

<b>Owner Name:</b> Ogburn, Elizabeth R TTEE TRE	<b>Owner</b> 7565 Melissa Ln
<b>Owner Phone:</b> 757 870 6150	<b>Address:</b> Williamsburg VA 23188
<b>Parcel PIN:</b> 07182072702202	<b>Zoning:</b> R2 (Medium Density Residential District)
<b>Address:</b> 10333 D S Old Oregon Inlet Rd	<b>Lot/Block/Sec:</b> LOT: UNIT D BLK: SEC:
<b>Subdivision:</b> CASUAL COVE CONDOS	
<b>Contractor Name:</b> Property Owner	<b>Contractor</b>
<b>Contractor Phone:</b>	<b>Address:</b> Nags Head NC

**Description:** Add stairway from lower deck to topo deck

**Construction Value:** 2000.00

**Foundation Type:**

**Construction Type:** Remodel

**Heated Space:** 0

**Unheated Space:** 0

**# of Bedrooms:** 0

**# of Baths:** 0

**Zoning Permit:** 2018.0238

**Septic Permit:** na

**CAMA Permit:**

**PW Permit#** na

**FEMA Flood Zone:** V

**BFE:** 11

**Flood Permit:** 2018.1866

### Conditions:

CALL FOR ALL REQUIRED INSPECTIONS; All new work to meet current code; See CONDITIONS on Zoning Permit; Additional engineering may be required; FINAL INSPECTION REQUIRED PRIOR TO ISSUANCE OF CERTIFICATE OF COMPLIANCE;

Address #s on home if none are present. Stairs shall meet todays code. Review stair handout we have provided. If putting pile in ground pre and post v zone cert are required. Call for final inspection

**Total Fees Paid/Due:** 75.00

**Invoice #:** 2018-00933

- All work shall conform to all applicable North Carolina State Building codes and Ordinances of the Town of Nags Head and shall be the responsibility of the undersigned applicant.
- All work shall conform to the plans and specifications provided with the application.
- Any damage to the multi-use path or adjoining right-of-way shall be immediately repaired by the owner and/or applicant.

**In accordance with GS160A-418, a permit expires 6 months after the date of issuance if the work authorized by the permit has not been commenced. If, after commencement, the work is discontinued for a period of 12 months (no inspections have taken place) the permit immediately expires. No work authorized by a permit that has expired may be performed until a new permit has been issued.**

Building Inspector

08/30/2018

Responsible Party

Date

This permit only authorizes work expressly identified in the building permit application, unless otherwise specified herein. The work done shall comply with the State Building Code and all other applicable Federal, State and local laws. The approval and issuance of this permit conveys no rights or guarantees for any future proposed modifications of this permit or the issuance of new permits for any future proposed use and development of the property.

# TOWN OF NAGS HEAD

PO Box 99  
Nags Head, NC 27959  
Phone (252) 441-7016 Fax (252) 4414290



## Building Permit

**RE2018-1880**

<b>Owner Name:</b> Previs, Stephen D EUX - Previs, Yolanda MEUX	<b>Owner</b> 7405 Lexington Dr
<b>Owner Phone:</b> 804 512 6475	<b>Address:</b> Mechanicsville VA 23111
<b>Parcel PIN:</b> 989108887002	<b>Zoning:</b> Imported Default District
<b>Address:</b> 4126 W Drifting Sands Ct W	<b>Lot/Block/Sec:</b> LOT: 11 BLK: SEC: 1
<b>Subdivision:</b> SOUTHRIDGE SEC 1	
<b>Contractor Name:</b> Williams, Wes	<b>Contractor</b> 500 W Airstrip Rd
<b>Contractor Phone:</b> 252 480 3371	<b>Address:</b> Kill Devil Hills NC 27948

**Description:** Replace/new deck, rails & steps

**Construction Value:** 5000.00

**Foundation Type:**

**Construction Type:** Repair

**Heated Space:** 0

**Unheated Space:** 0

**# of Bedrooms:** 0

**# of Baths:** 0

**Zoning Permit:** see file  
**Septic Permit:** na  
**CAMA Permit:** na  
**PW Permit#** na

**FEMA Flood Zone:** x  
**BFE:**  
**Flood Permit:**

### Conditions:

CALL FOR ALL REQUIRED INSPECTIONS; FINAL INSPECTION REQUIRED PRIOR TO ISSUANCE OF CERTIFICATE OF COMPLIANCE;

SWO. Work already complete. Call for final inspection.

**Total Fees Paid/Due:** 105.00

**Invoice #:** 2018-00937

- All work shall conform to all applicable North Carolina State Building codes and Ordinances of the Town of Nags Head and shall be the responsibility of the undersigned applicant.
- All work shall conform to the plans and specifications provided with the application.
- Any damage to the multi-use path or adjoining right-of-way shall be immediately repaired by the owner and/or applicant.

**In accordance with GS160A-418, a permit expires 6 months after the date of issuance if the work authorized by the permit has not been commenced. If, after commencement, the work is discontinued for a period of 12 months (no inspections have taken place) the permit immediately expires. No work authorized by a permit that has expired may be performed until a new permit has been issued.**

Building Inspector 08/31/2018

Responsible Party Date

This permit only authorizes work expressly identified in the building permit application, unless otherwise specified herein. The work done shall comply with the State Building Code and all other applicable Federal, State and local laws. The approval and issuance of this permit conveys no rights or guarantees for any future proposed modifications of this permit or the issuance of new permits for any future proposed use and development of the property.



TOWN OF SOUTHERN SHORES  
5375 N Virginia Dare Trl  
Southern Shores NC  
27949  
(252) 261-2394 tel  
(252) 255-0876 fax  
[www.southernshores-nc.gov](http://www.southernshores-nc.gov)

**SUB-CONTRACTOR SIGN OFF AND/OR PERMIT**

Date 7-24-18

PROJECT ADDRESS 102 High Dune Loop

Owner Gordon Stephens  
Mailing Address 4700 N. 38th Place  
City, State, Zip Avinton, VA 22007  
Phone 1-202-390-8167

Permit Number 10222  
Fee \$ 100

EXISTING Building Permit Number \_\_\_\_\_ NO FEE (if work is associated with a Building Permit) \_\_\_\_\_

**ELECTRICAL** = Licensee Name Benjamin Dwight Reynolds NC License/Classification 7520-L  
Company Name RR; D Electric Inc.  
Address 373-A St. Davids Rd. Phone 601-1553  
City State & zip Creswell NC 27928 Estimated Project Cost \$200  
Description of Work: hook to unit

**PLUMBING** = Licensee Name \_\_\_\_\_ NC License/Classification \_\_\_\_\_  
Company Name \_\_\_\_\_  
Address \_\_\_\_\_ Phone \_\_\_\_\_  
City State & zip \_\_\_\_\_ Estimated Project Cost \_\_\_\_\_  
Description of Work: \_\_\_\_\_

**GAS** = Licensee Name \_\_\_\_\_ NC License/Classification \_\_\_\_\_  
Company Name \_\_\_\_\_  
Address \_\_\_\_\_ Phone \_\_\_\_\_  
City State & zip \_\_\_\_\_ Estimated Project Cost \_\_\_\_\_  
Description of Work: \_\_\_\_\_

**MECHANICAL** = Licensee Name Grady James Armstrong NC License/Classification 22516 - Class I  
Company Name Armstrong; son  
Address 3978 Albemarle Church Rd. Phone 252-777-4100  
City State & zip Columbia NC 27925 Estimated Project Cost \$5200  
Description of Work: Changeout: Installing a 3.5-ton York Heat Pump & 3.5-ton York air handler, use existing ductwork

**FIRE SPRINKLER** = Licensee Name \_\_\_\_\_ NC License/Classification \_\_\_\_\_  
Company Name \_\_\_\_\_  
Address \_\_\_\_\_ Phone \_\_\_\_\_  
City State & zip \_\_\_\_\_ Estimated Project Cost \_\_\_\_\_  
Description of Work: \_\_\_\_\_

I hereby certify that all information in this application is correct and all work will comply with the State Building Code and all other local laws and ordinances and regulations. The Inspection Department will be notified of any changes in the approved plans and specification for the project permitted herein.

Grady James Armstrong 7-31-18  
Signature of Licensee Date

Buddy Shearer 8-2-18  
Signature of Permit Official Date  
DJNS

TOWN OF  
SOUTHERN SHORES  
5375 N Virginia Dare Trl  
Southern Shores, NC  
27949  
(252) 261-2394 tel  
(252) 255-0876 fax  
[www.southernshores-nc.gov](http://www.southernshores-nc.gov)



**SUBCONTRACTOR SIGN OFF AND/OR PERMIT**

Date 07/31/2018  
PROJECT ADDRESS 228 OCEAN BLVD  
Owner WALTER LISCHICK  
Mailing Address 1115 COTTON PATCH ISLAND  
City, State, Zip SALISBURY, MD 21801  
Phone 410-543-8310

Permit Number 10224  
Fee \$ 100

EXISTING Building Permit Number \_\_\_\_\_ NO FEE \_\_\_\_\_

**ELECTRICAL** = Licensee Name FREDERICK MARKLIN NC License/Classification 22222-L / LTD  
Company Name R A HOY HEATING & A/C, INC  
Address P O BOX 179 Phone (252) 261-2008  
City State & zip KITTY HAWK, NC 27949 Estimated Project Cost INCL in MECH  
Description of Work: CONNECTION OF MECH EQUIP BELOW

**PLUMBING** = Licensee Name \_\_\_\_\_ NC License/Classification \_\_\_\_\_  
Company Name \_\_\_\_\_  
Address \_\_\_\_\_ Phone \_\_\_\_\_  
City State & zip \_\_\_\_\_ Estimated Project Cost \_\_\_\_\_  
Description of Work: \_\_\_\_\_

**GAS** = Licensee Name \_\_\_\_\_ NC License/Classification \_\_\_\_\_  
Company Name \_\_\_\_\_  
Address \_\_\_\_\_ Phone \_\_\_\_\_  
City State & zip \_\_\_\_\_ Estimated Project Cost \_\_\_\_\_  
Description of Work: \_\_\_\_\_

**MECHANICAL** = Licensee Name DOUGLAS WAKELEY NC License/Classification 13056 / H 2 & 3 P-1  
Company Name R A HOY HEATING & A/C, INC  
Address P O BOX 179 Phone (252) 261-2008  
City State & zip KITTY HAWK, NC 27949 Estimated Project Cost 3678  
Description of Work: C/O 3 TON 16 SEER TRANE OUTDOOR HEAT PUMP ONLY

I hereby certify that all information in this application is correct and all work will comply with the State Building Code and all other local laws and ordinances and regulations. The Inspection Department will be notified of any changes in the approved plans and specification for the project permitted herein.

Douglas Wakeley 07/31/2018  
Signature of Licensee Date

Buddy Shelton 8-6-18  
Signature of Permit Official Date

Andrew John Marklin (ELEC)

DLIS

TOWN OF SOUTHERN SHORES  
 PLANNING AND CODE  
 ENFORCEMENT  
 5375 N Virginia Dare Trl  
 Southern Shores NC 27949  
 (252) 261-2394 ext 4 tel  
 (252) 255-0876 fax  
 www.southernshores-nc.gov



**SUB-CONTRACTOR SIGN OFF AND/OR PERMIT**

Date 31-July-2018

PROJECT ADDRESS 20 MALLARD COVE

Owner DAVID WHITMAN  
 Mailing Address 337 N. DOGWOOD TRAIL  
 City, State, Zip SOUTHERN SHORES, NC 27949  
 Phone 301-466-5111

Permit Number 10223  
 Fee \$ 100

EXISTING Building Permit Number \_\_\_\_\_ NO FEE (if work is associated with a Building Permit) \_\_\_\_\_

**ELECTRICAL** = Licensee Name TIMOTHIE GRIFFITHS NC License/Classification 26180 - UL  
 Company Name GRIFFITHS ELECTRICAL  
 Address P.O. BOX 82 Phone 252-599-7891  
 City State & zip HARBINGER, NC 27941 Estimated Project Cost \_\_\_\_\_  
 Description of Work: LINE AND LOW VOLTAGE WIRING

**PLUMBING** = Licensee Name \_\_\_\_\_ NC License/Classification \_\_\_\_\_  
 Company Name \_\_\_\_\_  
 Address \_\_\_\_\_ Phone \_\_\_\_\_  
 City State & zip \_\_\_\_\_ Estimated Project Cost \_\_\_\_\_  
 Description of Work: \_\_\_\_\_

**GAS** = Licensee Name \_\_\_\_\_ NC License/Classification \_\_\_\_\_  
 Company Name \_\_\_\_\_  
 Address \_\_\_\_\_ Phone \_\_\_\_\_  
 City State & zip \_\_\_\_\_ Estimated Project Cost \_\_\_\_\_  
 Description of Work: \_\_\_\_\_

**MECHANICAL** = Licensee Name STEVE SMITH NC License/Classification 30070  
 Company Name AIR-O-SMITH, INC.  
 Address 330 N. DOGWOOD TRAIL Phone 252-261-5238  
 City State & zip SOUTHERN SHORES, NC 27949 Estimated Project Cost 6,856.00  
 Description of Work: REPLACE 3-TON, 410A, SINGLE STAGE HP, 95% SINGLE STAGE GAS FURNANCE, AND EVAPORATOR COIL

**FIRE SPRINKLER** = Licensee Name \_\_\_\_\_ NC License/Classification \_\_\_\_\_  
 Company Name \_\_\_\_\_  
 Address \_\_\_\_\_ Phone \_\_\_\_\_  
 City State & zip \_\_\_\_\_ Estimated Project Cost \_\_\_\_\_  
 Description of Work: \_\_\_\_\_

I hereby certify that all information in this application is correct and all work will comply with the State Building Code and all other local laws and ordinances and regulations. The Inspection Department will be notified of any changes in the approved plans and specification for the project permitted herein.

Steven M. Smith, President  
 Signature of Licensee \_\_\_\_\_ Date \_\_\_\_\_

Digitally signed by Steven M. Smith, President  
 DN: cn=Steven M. Smith, President, ou=Air-O-Smith, Inc., ou=mail, email=stevesmith@gmail.com, c=US  
 Date: 2018.07.31 15:36:40 -0400

Burley J. O'Neal 8-6-18  
 Signature of Permit Official \_\_\_\_\_ Date \_\_\_\_\_  
 . T. I. N. K.



**TOWN OF SOUTHERN SHORES**  
**PLANNING AND CODE ENFORCEMENT**  
 5375 N Virginia Dare Trail, Southern Shores, NC 27949  
 (252) 261-2394 Ext 4 - Office (252) 255-0876 - Fax  
 www.southernshores-nc.gov

**RESIDENTIAL**  
**BUILDING/FLOODPLAIN DEVELOPMENT PERMIT**  
**BUILDING PERMIT #10221**

**Location:** 291 Duck Road  
  
**Parcel:** 021338000 PIN: 986810353335  
**District:** 20- SOUTHERN SHORES  
**Subdivision:** SO/SH BEACH BLKS 63 73 83 82A  
**LotBlkSect:** LOT: 7 BLK: 63 SEC:

**RYAN, EDWARD J**  
**291 DUCK RD**  
**KITTY HAWK NC 27949**  
  
**PHONE #:** 202-213-6179 **CELL #:**

**BUSINESS NAME:** EMS Construction  
**CONTRACTOR'S NAME:** Chris MacDonald  
**ADDRESS:** 1396 Duck Road  
**CITY, STATE, ZIP:** Duck, NC 27949  
**OFFICE#:**  
**CELL#:** 252-337-4097  
**FAX#:**  
**EMAIL:** emsconst@yahoo.com

**NC G.C. LICENSED CONTRACTOR:** \_\_\_ YES \_\_\_ X\_NO  
**NC G.C. LICENSE NUMBER:**  
**LIMITATION:**  
**CLASSIFICATION:**  
**QUALIFIER:**

**LIEN AGENT:** n/a

**DESCRIPTION OF WORK – (Any deviation from the Building Plan or Site Plan requires prior approval):** Remove existing portions of pool/pool deck in violation (w/out permits & encroachments) – Install new pool and modify existing decks to bring into compliance

**SPECIAL CONDITIONS -**

<b>TYPE OF CONSTRUCTION:</b> Accessory Pool	<b>TYPE OF FOUNDATION:</b>	<b>PERMIT TYPE:</b> Residential
	HEAT:	RESIDENCE/2 <sup>nd</sup> HOME/RENTAL: Residence
<b>TOTAL HEATED/LIVING AREAS (SF):</b>	A/C:	PROPERTY USE: Single Family Dwelling
<b>TOTAL NON-HEATED AREAS (SF):</b>	INTERIOR WALLS:	ZONING DISTRICT: RS-1
	EXTERIOR WALLS:	ZONING PERMIT #: 2018-76
<b>NUMBER OF STORIES:</b>	FIREPLACE:	DATE ISSUED: 8/1/2018
<b>BEDROOMS:</b>	ROOF:	
<b>SEPTIC CAPACITY # OF PERSONS:</b>	INSULATION:	CAMA PERMIT #: n/a
<b>BATHS:</b> 1/2 BATHS:	ELEVATOR (SF):	DATE ISSUED:
<b>GARAGE:</b> STORAGE BLDG:	DECKS (SF):	SEPTIC PERMIT #: 27977
<b>STORAGE ENCLOSURE:</b> POOL: 25x47 total area	PORCHES (SF):	DATE ISSUED: 7/26/2018
<b>FLOOD ZONE:</b> Shaded X	WINDOWS MAKE:	
<b>BASE FLOOD ELEVATION:</b> PLUS 2FT=	TYPE:	

\*\*\*The owner and builder are responsible for the following: All work done shall comply with the State Building Code and all other applicable State and local laws. The applicant certifies that the information on this permit is correct; that he/she is the owner or duly authorized agent of owner; that all construction shall be as shown on the submitted plans and specifications; the he/she understands this permit is valid for 180 days to begin construction and may be revoked for failure to comply with applicable regulations and laws.

<b>TOTAL CONSTRUCTION COST</b>	<b>\$15,000</b>		
<b>HEATED/LIVING AREA (sf)</b> (new square footage)		X .60/sf (single family) =	\$
		X .75/sf (all others) =	\$
<b>NON-HEATED AREA (sf)</b> (new square footage)		X .30/sf (single family) =	\$
		X .35/sf (all others) =	\$
<b>REMODEL/REPAIR/ALTERATION</b> (no additional square footage)	\$	X \$10 per \$1,000 of cost =	\$
		Pool = \$125	\$125.00
***Work proceeded without		Zoning Permit Fee = \$50	\$50.00
Necessary permits –		Plan Review Fee = \$150 or \$100	\$
<b>DOUBLE PERMIT FEE =</b>		Minimum Permit Fee = \$100	\$
<b>\$175.00 X 2 = TOTAL FEE \$350.00</b>		Homeowner's Recovery Fund \$10	\$
		<b>TOTAL FEE</b>	<b>***\$350.00</b>

*Chris MacDonald* **CHRIS MACDONALD** **8.8.18**  
 Applicant - Owner/Contractor (Please print and sign name) Date Issued  
*Buddy Shelton* **Buddy Shelton** **8-1-18**  
 Building/Code/Zoning Official Date Approved  
*DU NIS*





**TOWN OF SOUTHERN SHORES**  
**PLANNING AND CODE ENFORCEMENT**  
 5375 N Virginia Dare Trail, Southern Shores, NC 27949  
 (252) 261-2394 Ext 4 - Office (252) 255-0876 - Fax  
 www.southernshores-nc.gov

**RESIDENTIAL**  
**BUILDING/FLOODPLAIN DEVELOPMENT PERMIT**  
**BUILDING PERMIT #9922**

**Location:** 108 Osprey Lane  
**Parcel:** 022298000 PIN: 986709263866  
**District:** 20- SOUTHERN SHORES  
**Subdivision:** SO/SH 114-117 126,127 200-202  
**LotBlkSect:** LOT: 1 BLK: 126 SEC:

**RIDDLE, CORI N**  
 1313 S CROATAN HWY  
 KILL DEVIL HILLS NC 27948

PHONE #: \_\_\_\_\_ CELL #: 252-207-1534

**BUSINESS NAME:**  
**CONTRACTOR'S NAME:** Property Owner  
**ADDRESS:**  
**CITY, STATE, ZIP:**  
**OFFICE#:**  
**CELL#:**  
**FAX#:**  
**EMAIL:**

NC G.C. LICENSED CONTRACTOR:  YES  NO  
 NC G.C. LICENSE NUMBER:  
 LIMITATION:  
 CLASSIFICATION:  
 QUALIFIER:  
 LIEN AGENT: n/a

**DESCRIPTION OF WORK – (Any deviation from the Building Plan or Site Plan requires prior approval):** Remodel – interior (footprint, layout, # of bedrooms and septic capacity to remain unchanged), new electrical, plumbing, mechanical work and garage doors

**SPECIAL CONDITIONS-All wood below base flood elevation is required to be treated – Nonconforming structure per FEMA-permit to include bringing into compliance**

<b>TYPE OF CONSTRUCTION:</b> Remodel	<b>TYPE OF FOUNDATION:</b>	<b>PERMIT TYPE:</b> Residential
	HEAT: Heat Pump	RESIDENCE/2 <sup>nd</sup> HOME/RENTAL: Residence
<b>TOTAL HEATED/LIVING AREAS (SF):</b>	A/C: Heat Pump	PROPERTY USE: Single Family Dwelling
<b>TOTAL NON-HEATED AREAS (SF):</b>	INTERIOR WALLS: Drywall	ZONING DISTRICT: RS-1
	EXTERIOR WALLS:	ZONING PERMIT #: n/a 2018-79
<b>NUMBER OF STORIES:</b>	FIREPLACE:	DATE ISSUED: 8-8-18
<b>BEDROOMS:</b>	ROOF:	
<b>SEPTIC CAPACITY # OF PERSONS:</b>	INSULATION: Batt	CAMA PERMIT #: n/a
<b>BATHS: 1/2 BATHS:</b>	ELEVATOR (SF):	DATE ISSUED:
<b>GARAGE: STORAGE BLDG:</b>	DECKS (SF):	SEPTIC PERMIT #: n/a
<b>STORAGE ENCLOSURE: POOL:</b>	PORCHES (SF):	DATE ISSUED:
<b>FLOOD ZONE: AE</b>	WINDOWS MAKE:	
<b>BASE FLOOD ELEVATION: 7FT PLUS 2FT= 9FT</b>	TYPE:	

\*\*\*The owner and builder are responsible for the following: All work done shall comply with the State Building Code and all other applicable State and local laws. The applicant certifies that the information on this permit is correct; that he/she is the owner or duly authorized agent of owner; that all construction shall be as shown on the submitted plans and specifications; the he/she understands this permit is valid for 180 days to begin construction and may be revoked for failure to comply with applicable regulations and laws.

<b>TOTAL CONSTRUCTION COST</b>	\$100,000	+ (new decks) \$1,000 = \$101,000 total
HEATED/LIVING AREA (sf) (new square footage)		X .60/sf (single family) = \$ X .75/sf (all others) = \$
NON-HEATED AREA (sf) (new square footage)		X .30/sf (single family) = \$ X .35/sf (all others) = \$
REMODEL/REPAIR/ALTERATION (no additional square footage)	\$100,000	X \$10 per \$1,000 of cost = \$1,000.00
*Amended - 8-8-18		Pool = \$125 \$
Replaces add new		Zoning Permit Fee = \$50 \$
decks = 616 SF X .30 =		Plan Review Fee = \$150 or \$100 \$100.00
additional fee \$184.80		Minimum Permit Fee = \$100 \$
ce 218115 ZP + 50.00		Homeowner's Recovery Fund \$10 \$
(234.80)		<b>TOTAL FEE</b>
		<b>\$1,100.00</b>

Applicant - Owner/Contractor: Cori N Riddle (Please print and sign name) Date Issued: 12-6-17  
 Building/Code/Zoning Official: Buddy Sheota Date Approved: 12-4-17  
by JVS

TOWN OF  
SOUTHERN SHORES  
5375 N Virginia Dare Trl  
Southern Shores, NC  
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[www.southernshores-nc.gov](http://www.southernshores-nc.gov)



**SUBCONTRACTOR SIGN OFF AND/OR PERMIT**

Date 08/08/2018  
PROJECT ADDRESS 128 OCEAN BLVD  
Owner JIM HEYWARD - 128 Surfside Cottage, LLC  
Mailing Address PO BOX 82  
City, State, Zip EARLYSVILLE, VA 22936  
Phone 434-981-7957

Permit Number 10227  
Fee \$ 100

EXISTING Building Permit Number \_\_\_\_\_ NO FEE \_\_\_\_\_

**ELECTRICAL** = Licensee Name FREDERICK MARKLIN NC License/Classification 22222-L / LTD  
Company Name R A HOY HEATING & A/C, INC  
Address P O BOX 179 Phone (252) 261-2008  
City State & zip KITTY HAWK, NC 27949 Estimated Project Cost INCL in MECH  
Description of Work: CONNECTION OF MECH EQUIP BELOW

**PLUMBING** = Licensee Name \_\_\_\_\_ NC License/Classification \_\_\_\_\_  
Company Name \_\_\_\_\_  
Address \_\_\_\_\_ Phone \_\_\_\_\_  
City State & zip \_\_\_\_\_ Estimated Project Cost \_\_\_\_\_  
Description of Work: \_\_\_\_\_

**GAS** = Licensee Name \_\_\_\_\_ NC License/Classification \_\_\_\_\_  
Company Name \_\_\_\_\_  
Address \_\_\_\_\_ Phone \_\_\_\_\_  
City State & zip \_\_\_\_\_ Estimated Project Cost \_\_\_\_\_  
Description of Work: \_\_\_\_\_

**MECHANICAL** = Licensee Name DOUGLAS WAKELEY NC License/Classification 13056 / H 2 & 3 P-1  
Company Name R A HOY HEATING & A/C, INC  
Address P O BOX 179 Phone (252) 261-2008  
City State & zip KITTY HAWK, NC 27949 Estimated Project Cost 6345  
Description of Work: C/O 1.5 TON 16 SEER TRANE SYSTEM FOR SOUTH BEDROOMS WITH T6 THERMOSTAT

I hereby certify that all information in this application is correct and all work will comply with the State Building Code and all other local laws and ordinances and regulations. The Inspection Department will be notified of any changes in the approved plans and specification for the project permitted herein.

Douglas Wakeley 08/08/2018  
Signature of Licensee Date  
Douglas Wakeley (ELEC)

Bunny Stewart 8-9-18  
Signature of Permit Official Date  
DJ WH

TOWN OF SOUTHERN SHORES  
5375 N Virginia Dare Trl  
Southern Shores NC  
27949  
(252) 261-2394 tel  
(252) 255-0876 fax  
[www.southernshores-nc.gov](http://www.southernshores-nc.gov)



**SUB-CONTRACTOR SIGN OFF AND/OR PERMIT**

Date 8-9-18  
PROJECT ADDRESS 14 5TH AVE  
Owner DANIEL SANDS  
Mailing Address 14 5TH AVE  
City, State, Zip SOUTHERN SHORES  
Phone (252) 715-0083

Permit Number 10228  
Fee \$ 100.00

EXISTING Building Permit Number \_\_\_\_\_ NO FEE (if work is associated with a Building Permit) \_\_\_\_\_

**ELECTRICAL** = Licensee Name HUBERT HARDELLA NC License/Classification 18979-L  
Company Name GEORGIE & COMPANY  
Address 105 BEAU PARKWAY Phone 335-2596  
City State & zip ELIZABETH CITY, N.C. 27909 Estimated Project Cost \$850.00  
Description of Work: INSTALLATION OF (1) BATHROOM EXHAUST FAN

**PLUMBING** = Licensee Name \_\_\_\_\_ NC License/Classification \_\_\_\_\_  
Company Name \_\_\_\_\_  
Address \_\_\_\_\_ Phone \_\_\_\_\_  
City State & zip \_\_\_\_\_ Estimated Project Cost \_\_\_\_\_  
Description of Work: \_\_\_\_\_

**GAS** = Licensee Name \_\_\_\_\_ NC License/Classification \_\_\_\_\_  
Company Name \_\_\_\_\_  
Address \_\_\_\_\_ Phone \_\_\_\_\_  
City State & zip \_\_\_\_\_ Estimated Project Cost \_\_\_\_\_  
Description of Work: \_\_\_\_\_

**MECHANICAL** = Licensee Name \_\_\_\_\_ NC License/Classification \_\_\_\_\_  
Company Name \_\_\_\_\_  
Address \_\_\_\_\_ Phone \_\_\_\_\_  
City State & zip \_\_\_\_\_ Estimated Project Cost \_\_\_\_\_  
Description of Work: \_\_\_\_\_

**FIRE SPRINKLER** = Licensee Name \_\_\_\_\_ NC License/Classification \_\_\_\_\_  
Company Name \_\_\_\_\_  
Address \_\_\_\_\_ Phone \_\_\_\_\_  
City State & zip \_\_\_\_\_ Estimated Project Cost \_\_\_\_\_  
Description of Work: \_\_\_\_\_

I hereby certify that all information in this application is correct and all work will comply with the State Building Code and all other local laws and ordinances and regulations. The Inspection Department will be notified of any changes in the approved plans and specification for the project permitted herein.

[Signature] 8-9-18  
Signature of Licensee Date

[Signature] 8-9-18  
Signature of Permit Official Date

**TOWN OF SOUTHERN SHORES**  
 5375 N Virginia Dare Trl  
 Southern Shores NC  
 27949  
 (252) 261-2394 tel  
 (252) 255-0876 fax  
 www.southernshores-nc.gov



**SUB-CONTRACTOR SIGN OFF AND/OR PERMIT**

Date 2/6/18  
 PROJECT ADDRESS 48 Dewberry Ln  
 Owner Jansen Christopher  
 Mailing Address 48 Dewberry Ln  
 City, State, Zip Southern Shores, NC 27949  
 Phone 757-870-6373

Permit Number 10226  
 Fee \$ 100

EXISTING Building Permit Number \_\_\_\_\_ NO FEE (if work is associated with a Building Permit) \_\_\_\_\_

**ELECTRICAL** = Licensee Name Jimmy Weaver NC License/Classification 24744  
 Company Name North Beach Services  
 Address P.O. Box 181 Phone 252-491-2878  
 City State & zip Kitty Hawk NC Estimated Project Cost 100  
 Description of Work: All necessary electrical hook ups

**PLUMBING** = Licensee Name \_\_\_\_\_ NC License/Classification \_\_\_\_\_  
 Company Name \_\_\_\_\_  
 Address \_\_\_\_\_ Phone \_\_\_\_\_  
 City State & zip \_\_\_\_\_ Estimated Project Cost \_\_\_\_\_  
 Description of Work: \_\_\_\_\_

**GAS** = Licensee Name \_\_\_\_\_ NC License/Classification \_\_\_\_\_  
 Company Name \_\_\_\_\_  
 Address \_\_\_\_\_ Phone \_\_\_\_\_  
 City State & zip \_\_\_\_\_ Estimated Project Cost \_\_\_\_\_  
 Description of Work: \_\_\_\_\_

**MECHANICAL** = Licensee Name Suzanne Rich NC License/Classification 33023  
 Company Name North Beach Services  
 Address P.O. Box 181 Phone 252-491-2878  
 City State & zip Kitty Hawk NC Estimated Project Cost 5320.00  
 Description of Work: Replace existing heat pump and air handler with matching 1.5 ton heat pump

**FIRE SPRINKLER** = Licensee Name \_\_\_\_\_ NC License/Classification \_\_\_\_\_  
 Company Name \_\_\_\_\_  
 Address \_\_\_\_\_ Phone \_\_\_\_\_  
 City State & zip \_\_\_\_\_ Estimated Project Cost \_\_\_\_\_  
 Description of Work: \_\_\_\_\_

I hereby certify that all information in this application is correct and all work will comply with the State Building Code and all other local laws and ordinances and regulations. The Inspection Department will be notified of any changes in the approved plans and specification for the project permitted herein.

Jimmy S. Weaver  
 Signature of Licensee \_\_\_\_\_ Date \_\_\_\_\_

Buddy Shelton  
 Signature of Permit Official \_\_\_\_\_ Date \_\_\_\_\_  
JWS



**TOWN OF SOUTHERN SHORES  
PLANNING AND CODE ENFORCEMENT**  
5375 N Virginia Dare Trail, Southern Shores, NC 27949  
(252) 261-2394 Ext 4 - Office (252) 255-0876 - Fax  
www.southernshores-nc.gov

**RESIDENTIAL  
BUILDING/FLOODPLAIN DEVELOPMENT PERMIT  
BUILDING PERMIT #10229**

**Location:** 184 Wax Myrtle Trail  
  
**Parcel:** 021987000 PIN: 986819508546  
**District:** 20- SOUTHERN SHORES  
**Subdivision:** SO/SH AMENDED PLAT B SEC 3  
**LotBlkSect:** LOT: 50A BLK: 41 SEC: 3

**SCHMITZ, BARBARA F EVR  
LEONARD J SCHMITZ EVR  
8116 BRUCAR CT  
GAITHERSBURG MD 20877**  
  
PHONE #: \_\_\_\_\_ CELL #: 240-401-9550

**BUSINESS NAME:**  
**CONTRACTOR'S NAME:** Property Owner  
**ADDRESS:**  
**CITY, STATE, ZIP:**  
**OFFICE#:**  
**CELL#:**  
**FAX#:**  
**EMAIL:**

**NC G.C. LICENSED CONTRACTOR:** \_\_\_ YES \_\_\_ NO  
**NC G.C. LICENSE NUMBER:**  
**LIMITATION:**  
**CLASSIFICATION:**  
**QUALIFIER:**

**LIEN AGENT:** n/a

**DESCRIPTION OF WORK – (Any deviation from the Building Plan or Site Plan requires prior approval):** Remodel kitchen to include new plumbing and electrical work

**SPECIAL CONDITIONS -**

<b>TYPE OF CONSTRUCTION:</b> Remodel	<b>TYPE OF FOUNDATION:</b>	<b>PERMIT TYPE:</b> Residential
<b>TOTAL HEATED/LIVING AREAS (SF):</b>	HEAT:	<b>RESIDENCE/2<sup>nd</sup> HOME/RENTAL:</b> 2 <sup>nd</sup> Home
<b>TOTAL NON-HEATED AREAS (SF):</b>	A/C:	<b>PROPERTY USE:</b> Single Family Dwelling
<b>NUMBER OF STORIES:</b>	INTERIOR WALLS:	<b>ZONING DISTRICT:</b> RS-1
<b>BEDROOMS:</b>	EXTERIOR WALLS:	<b>ZONING PERMIT #:</b> n/a
<b>SEPTIC CAPACITY # OF PERSONS:</b>	FIREPLACE:	<b>DATE ISSUED:</b>
<b>BATHS:</b> ½ BATHS:	ROOF:	<b>CAMA PERMIT #:</b> n/a
<b>GARAGE:</b> STORAGE BLDG:	INSULATION:	<b>DATE ISSUED:</b>
<b>STORAGE ENCLOSURE:</b> POOL:	ELEVATOR (SF):	<b>SEPTIC PERMIT #:</b> n/a
<b>FLOOD ZONE:</b> Shaded X	DECKS (SF):	<b>DATE ISSUED:</b>
<b>BASE FLOOD ELEVATION:</b> PLUS 2FT=	PORCHES (SF):	
	<b>WINDOWS MAKE:</b>	
	<b>TYPE:</b>	

\*\*\*The owner and builder are responsible for the following: All work done shall comply with the State Building Code and all other applicable State and local laws. The applicant certifies that the information on this permit is correct; that he/she is the owner or duly authorized agent of owner; that all construction shall be as shown on the submitted plans and specifications; the he/she understands this permit is valid for 180 days to begin construction and may be revoked for failure to comply with applicable regulations and laws.

<b>TOTAL CONSTRUCTION COST</b>	\$27,000		
<b>HEATED/LIVING AREA (sf)</b> (new square footage)		X .60/sf (single family) =	\$
		X .75/sf (all others) =	
<b>NON-HEATED AREA (sf)</b> (new square footage)		X .30/sf (single family) =	\$
		X .35/sf (all others) =	
<b>REMODEL/REPAIR/ALTERATION</b> (no additional square footage)	\$27,000	X \$10 per \$1,000 of cost =	\$270.00
		Pool = \$125	\$
		Zoning Permit Fee = \$50	\$
		Plan Review Fee = \$150 or \$100	\$
		Minimum Permit Fee = \$100	\$
		Homeowner's Recovery Fund\$10	\$
		<b>TOTAL FEE</b>	<b>\$270.00</b>

*Leonard Schmitz* LEONARD SCHMITZ 8/10/18  
Applicant - Owner/Contractor (Please print and sign name) Date Issued  
*Buddy Shultz* Building/Code/Zoning Official *JUDIS* 8-10-18 Date Approved

TOWN OF  
SOUTHERN SHORES  
5375 N Virginia Dare Trl  
Southern Shores, NC  
27949  
(252) 261-2394 tel  
(252) 255-0876 fax  
[www.southernshores-nc.gov](http://www.southernshores-nc.gov)



**SUBCONTRACTOR SIGN OFF AND/OR PERMIT**

Date 08/14/2018  
PROJECT ADDRESS 289 SEA OATS TRAIL  
Owner ANDREW BAUMANN  
Mailing Address 21645 DEMOTT DRIVE  
City, State, Zip ASHBURN, VA 20148  
Phone 703-819-7595

Permit Number 10232  
Fee \$ 100

EXISTING Building Permit Number \_\_\_\_\_ NO FEE \_\_\_\_\_

**ELECTRICAL** = Licensee Name FREDERICK MARKLIN NC License/Classification 22222-L / LTD  
Company Name R A HOY HEATING & A/C, INC  
Address P O BOX 179 Phone (252) 261-2008  
City State & zip KITTY HAWK, NC 27949 Estimated Project Cost INCL in MECH  
Description of Work: CONNECTION OF MECH EQUIP BELOW

**PLUMBING** = Licensee Name \_\_\_\_\_ NC License/Classification \_\_\_\_\_  
Company Name \_\_\_\_\_  
Address \_\_\_\_\_ Phone \_\_\_\_\_  
City State & zip \_\_\_\_\_ Estimated Project Cost \_\_\_\_\_  
Description of Work: \_\_\_\_\_

**GAS** = Licensee Name \_\_\_\_\_ NC License/Classification \_\_\_\_\_  
Company Name \_\_\_\_\_  
Address \_\_\_\_\_ Phone \_\_\_\_\_  
City State & zip \_\_\_\_\_ Estimated Project Cost \_\_\_\_\_  
Description of Work: \_\_\_\_\_

**MECHANICAL** = Licensee Name DOUGLAS WAKELEY NC License/Classification 13056 / H 2 & 3 P-1  
Company Name R A HOY HEATING & A/C, INC  
Address P O BOX 179 Phone (252) 261-2008  
City State & zip KITTY HAWK, NC 27949 Estimated Project Cost 5251  
Description of Work: C/O 2 TON 14 SEER TRANE SYSTEM WHOLE HOUSE WITH T6 THERMOSTAT

I hereby certify that all information in this application is correct and all work will comply with the State Building Code and all other local laws and ordinances and regulations. The Inspection Department will be notified of any changes in the approved plans and specification for the project permitted herein.

Douglas Wakeley 08/14/2018  
Signature of Licensee Date  
Andrew John Baumann (ELEC)

Permitted for 8-14-18  
Signature of Permit Official Date  
Jay DS



**TOWN OF SOUTHERN SHORES  
PLANNING AND CODE ENFORCEMENT**  
5375 N Virginia Dare Trail, Southern Shores, NC 27949  
(252) 261-2394 Ext 4 - Office (252) 255-0876 - Fax  
www.southernshores-nc.gov

**RESIDENTIAL  
BUILDING/FLOODPLAIN DEVELOPMENT PERMIT  
BUILDING PERMIT #10234**

Location: 192 Wax Myrtle Trail  
Parcel: 027294000 PIN: 986819506973  
District: 20- SOUTHERN SHORES  
Subdivision: SO/SH AMENDED PLAT B SEC 3 REV  
LotBlkSect: LOT: 42 43 BLK: 41 SEC: 3

BROWN, JERRY T TTEE TRE  
BROWN, BARBARA B TTEE TRE  
5114 GLENEAGLES WAY  
SUFFOLK VA 23435

PHONE #: 252-599-0317

CELL #:

**BUSINESS NAME:** Sandmark Custom Homes, Inc  
**CONTRACTOR'S NAME:** Mark Martin  
**ADDRESS:** 191 Wax Myrtle Trail  
**CITY, STATE, ZIP:** Southern Shores, NC 27949  
**OFFICE#:** 252-261-1123  
**CELL#:** 252-202-3808  
**FAX#:** 252-261-5879  
**EMAIL:** mark@outerbanksbuilders.com

**NC G.C. LICENSED CONTRACTOR:**  YES  NO  
**NC G.C. LICENSE NUMBER:** 75383  
**LIMITATION:** Unlimited  
**CLASSIFICATION:** Residential  
**QUALIFIER:** Mark Martin

**LIEN AGENT:** Stewart Title Guaranty Company Entry# 901154  
19 W. Hargett Street, Suite 507, Raleigh, NC 27601

**DESCRIPTION OF WORK – (Any deviation from the Building Plan or Site Plan requires prior approval):** Construction of a 6' x 6' elevator addition and removal of wood walkway

**SPECIAL CONDITIONS -**

<b>TYPE OF CONSTRUCTION:</b> Addition-Elevator	<b>TYPE OF FOUNDATION:</b> Slab	<b>PERMIT TYPE:</b> Residential
<b>TOTAL HEATED/LIVING AREAS (SF):</b>	HEAT:	<b>RESIDENCE/2<sup>nd</sup> HOME/RENTAL:</b> Residence
<b>TOTAL NON-HEATED AREAS (SF):</b>	A/C:	<b>PROPERTY USE:</b> Single Family Dwelling
<b>NUMBER OF STORIES:</b> 3	<b>INTERIOR WALLS:</b> Drywall	<b>ZONING DISTRICT:</b> RS-1
<b>BEDROOMS:</b>	<b>EXTERIOR WALLS:</b> fiber cement	<b>ZONING PERMIT #:</b> 2018-81
<b>SEPTIC CAPACITY # OF PERSONS:</b>	<b>FIREPLACE:</b>	<b>DATE ISSUED:</b> 8/15/2018
<b>BATHS:</b> ½ BATHS:	<b>ROOF:</b>	<b>CAMA PERMIT #:</b> n/a
<b>GARAGE:</b> STORAGE BLDG:	<b>INSULATION:</b>	<b>DATE ISSUED:</b>
<b>STORAGE ENCLOSURE:</b> POOL:	<b>ELEVATOR (SF):</b> 36	<b>SEPTIC PERMIT #:</b> n/a
<b>FLOOD ZONE:</b> Shaded X	<b>DECKS (SF):</b>	<b>DATE ISSUED:</b>
<b>BASE FLOOD ELEVATION:</b> PLUS 2FT=	<b>PORCHES (SF):</b>	
	<b>WINDOWS MAKE:</b>	
	<b>TYPE:</b>	

\*\*\*The owner and builder are responsible for the following: All work done shall comply with the State Building Code and all other applicable State and local laws. The applicant certifies that the information on this permit is correct; that he/she is the owner or duly authorized agent of owner; that all construction shall be as shown on the submitted plans and specifications; the he/she understands this permit is valid for 180 days to begin construction and may be revoked for failure to comply with applicable regulations and laws.

<b>TOTAL CONSTRUCTION COST</b>	\$56,000		
<b>HEATED/LIVING AREA (sf)</b> (new square footage)		X .60/sf (single family) =	\$
		X .75/sf (all others) =	
<b>NON-HEATED AREA (sf)</b> (new square footage)	36	X .30/sf (single family) =	\$0
		X .35/sf (all others) =	
<b>REMODEL/REPAIR/ALTERATION</b> (no additional square footage)	\$	X \$10 per \$1,000 of cost =	\$
		Pool = \$125	\$
		Zoning Permit Fee = \$50	\$50.00
		Plan Review Fee = \$150 or \$100	\$
		Minimum Permit Fee = \$100	\$100.00
		Homeowner's Recovery Fund\$10	\$10.00
		<b>TOTAL FEE</b>	<b>\$160.00</b>

*Sandra E. Martin*      *Sandra E. Martin*      8/16/2018  
Applicant - Owner/Contractor      (Please print and sign name)      Date Issued  
*Buddy Shelton*      *du DVS*      8-16-18  
Building/Code/Zoning Official      Date Approved



**TOWN OF SOUTHERN SHORES  
PLANNING AND CODE ENFORCEMENT**  
5375 N Virginia Dare Trail, Southern Shores, NC 27949  
(252) 261-2394 Ext 4 - Office (252) 255-0876 - Fax  
[www.southernshores-nc.gov](http://www.southernshores-nc.gov)

**RESIDENTIAL  
BUILDING/FLOODPLAIN DEVELOPMENT PERMIT  
BUILDING PERMIT #10232**

**Location:** 68 E Dogwood Trl  
**Parcel:** 022192000 PIN: 986818310568  
**District:** 20- SOUTHERN SHORES  
**Subdivision:** SO/SH SOUNDSIDE BLK 95  
**LotBlkSect:** LOT: 34 BLK: 95 SEC:

**Owner:** PROTO, CHRISTOPHER  
**Owner:** LE MAIR, LISA  
**Address:** 68 E DOGWOOD TRL

**PHONE #:** 252-261-0454

**CELL #:**

**BUSINESS NAME:**  
**CONTRACTOR'S NAME:** Property Owner  
**ADDRESS:**  
**CITY, STATE, ZIP:**  
**OFFICE#:**  
**CELL#:**  
**FAX#:**  
**EMAIL:**

**NC G.C. LICENSED CONTRACTOR:** \_\_\_ YES \_\_\_ X\_NO  
**NC G.C. LICENSE NUMBER:**  
**LIMITATION:**  
**CLASSIFICATION:**  
**QUALIFIER:**

**LIEN AGENT:** N/A

**DESCRIPTION OF WORK – (Any deviation from the Building Plan or Site Plan requires prior approval):** Remove 126sf existing open deck and construct a new 336sf screened porch

**SPECIAL CONDITIONS -**

<b>TYPE OF CONSTRUCTION:</b> Addition	<b>TYPE OF FOUNDATION:</b> Piling	<b>PERMIT TYPE:</b> Residential
<b>TOTAL HEATED/LIVING AREAS (SF):</b>	<b>HEAT:</b>	<b>RESIDENCE/2<sup>nd</sup> HOME/RENTAL:</b> Residence
<b>TOTAL NON-HEATED AREAS (SF):</b>	<b>A/C:</b>	<b>PROPERTY USE:</b> Single Family Dwelling
<b>NUMBER OF STORIES:</b>	<b>INTERIOR WALLS:</b>	<b>ZONING DISTRICT:</b> RS-1
<b>BEDROOMS:</b>	<b>EXTERIOR WALLS:</b>	<b>ZONING PERMIT #:</b> 2018-82
<b>SEPTIC CAPACITY # OF PERSONS:</b>	<b>FIREPLACE:</b>	<b>DATE ISSUED:</b> 8/14/2018
<b>BATHS:</b> ½ BATHS:	<b>ROOF:</b> Metal	<b>CAMA PERMIT #:</b> n/a
<b>GARAGE:</b> STORAGE BLDG:	<b>INSULATION:</b>	<b>DATE ISSUED:</b>
<b>STORAGE ENCLOSURE:</b> POOL:	<b>ELEVATOR (SF):</b>	<b>SEPTIC PERMIT #:</b> 27968
<b>FLOOD ZONE:</b> Shaded X	<b>DECKS:</b>	<b>DATE ISSUED:</b> 8/8/2018
<b>BASE FLOOD ELEVATION:</b> PLUS 2FT=	<b>PORCHES:</b>	
	<b>WINDOWS MAKE:</b>	
	<b>TYPE:</b>	

\*\*\*The owner and builder are responsible for the following: All work done shall comply with the State Building Code and all other applicable State and local laws. The applicant certifies that the information on this permit is correct; that he/she is the owner or duly authorized agent of owner; that all construction shall be as shown on the submitted plans and specifications; the he/she understands this permit is valid for 180 days to begin construction and may be revoked for failure to comply with applicable regulations and laws.

<b>TOTAL CONSTRUCTION COST</b>	\$25,000		
<b>HEATED/LIVING AREA (sf)</b> (new square footage)		X .60/sf (single family) =	\$
		X .75/sf (all others) =	
<b>NON-HEATED AREA (sf)</b> (new square footage)	336	X .30/sf (single family) =	\$100.80
		X .35/sf (all others) =	
<b>REMODEL/REPAIR/ALTERATION</b> (no additional square footage)		X \$10 per \$1,000 of cost =	\$
		Pool = \$125	\$
		Zoning Permit Fee = \$50	\$
		Plan Review Fee = \$150 or \$100	\$
		Minimum Permit Fee = \$100	\$
		Homeowner's Recovery Fund \$10	\$
		<b>TOTAL FEE</b>	<b>\$100.80</b>

Applicant - Owner/Contractor

(Please print and sign name)

Date Issued

Building/Code/Zoning Official

Date Approved

*[Signature]*  
**Buddy J. Heister**

*[Signature]*  
**LISA M LE MAIR**

*[Signature]*  
**8-14-18**

*[Signature]*  
**JY DKS**





TOWN OF  
SOUTHERN SHORES  
5375 N Virginia Dare Trl  
Southern Shores, NC  
27949  
(252) 261-2394 tel  
(252) 255-0876 fax  
[www.southernshores-nc.gov](http://www.southernshores-nc.gov)

**SUBCONTRACTOR SIGN OFF AND/OR PERMIT**

Date 08/16/2018  
PROJECT ADDRESS 181 OCEAN BLVD  
Owner FLOYD CASADAY  
Mailing Address 70 BRADLEY COURT  
City, State, Zip INDIANA, PA 15701  
Phone 724-388-2997

Permit Number 10230  
Fee \$ 100

EXISTING Building Permit Number \_\_\_\_\_ NO FEE \_\_\_\_\_

**ELECTRICAL** = Licensee Name FREDERICK MARKLIN NC License/Classification 22222-L / LTD  
Company Name R A HOY HEATING & A/C. INC  
Address P O BOX 179 Phone (252) 261-2008  
City State & zip KITTY HAWK, NC 27949 Estimated Project Cost INCL in MECH  
**Description of Work:** CONNECTION OF MECH EQUIP BELOW

**PLUMBING** = Licensee Name \_\_\_\_\_ NC License/Classification \_\_\_\_\_  
Company Name \_\_\_\_\_  
Address \_\_\_\_\_ Phone \_\_\_\_\_  
City State & zip \_\_\_\_\_ Estimated Project Cost \_\_\_\_\_  
**Description of Work:** \_\_\_\_\_

**GAS** = Licensee Name \_\_\_\_\_ NC License/Classification \_\_\_\_\_  
Company Name \_\_\_\_\_  
Address \_\_\_\_\_ Phone \_\_\_\_\_  
City State & zip \_\_\_\_\_ Estimated Project Cost \_\_\_\_\_  
**Description of Work:** \_\_\_\_\_

**MECHANICAL** = Licensee Name DOUGLAS WAKELEY NC License/Classification 13056 / H 2 & 3 P-1  
Company Name R A HOY HEATING & A/C. INC  
Address P O BOX 179 Phone (252) 261-2008  
City State & zip KITTY HAWK, NC 27949 Estimated Project Cost 5517  
**Description of Work:** C/O 2.5 TON 14 SEER TRANE SYSTEM TOP LICING AREA WITH T6 THERMOSTAT

I hereby certify that all information in this application is correct and all work will comply with the State Building Code and all other local laws and ordinances and regulations. The Inspection Department will be notified of any changes in the approved plans and specification for the project permitted herein.

Douglas Wakeley 08/16/2018  
Signature of Licensee Date  
Douglas Wakeley (ELEC)

Robert J. O'Neil  
Signature of Permit Official Date  
JL/DLS

TOWN OF SOUTHERN SHORES  
5375 N Virginia Dare Trl  
Southern Shores NC  
27949  
(252) 261-2394 tel  
(252) 255-0876 fax  
www.southernshores-nc.gov



SUB-CONTRACTOR SIGN OFF AND/OR PERMIT

Date 8-17-18  
PROJECT ADDRESS 128 Tea Plant Ct  
Owner Michael S Hayhoe  
Mailing Address 128 Tea Plant Ct  
City, State, Zip Kitty Hawk NC 27949  
Phone \_\_\_\_\_

Permit Number 10239  
Fee \$ \_\_\_\_\_

EXISTING Building Permit Number \_\_\_\_\_ NO FEE (if work is associated with a Building Permit) \_\_\_\_\_

**ELECTRICAL** = Licensee Name Jeff Fischer NC License/Classification 15973-004  
Company Name Fischer Building Co.  
Address 105 Rhodans Dr Phone 702-9468  
City State & zip KDH NC 27948 Estimated Project Cost 400"  
Description of Work: Wire airhandler & heat pump

**PLUMBING** = Licensee Name \_\_\_\_\_ NC License/Classification \_\_\_\_\_  
Company Name \_\_\_\_\_  
Address \_\_\_\_\_ Phone \_\_\_\_\_  
City State & zip \_\_\_\_\_ Estimated Project Cost \_\_\_\_\_  
Description of Work: \_\_\_\_\_

**GAS** = Licensee Name \_\_\_\_\_ NC License/Classification \_\_\_\_\_  
Company Name \_\_\_\_\_  
Address \_\_\_\_\_ Phone \_\_\_\_\_  
City State & zip \_\_\_\_\_ Estimated Project Cost \_\_\_\_\_  
Description of Work: \_\_\_\_\_

**MECHANICAL** = Licensee Name Brian McDonald NC License/Classification 12443 H2.3 class 1  
Company Name Outlet Banks Heating & Cooling  
Address Box 1415 Phone 441-1740  
City State & zip Nags Head NC 27959 Estimated Project Cost 5514.10  
Description of Work: Replace HVAC with 14 seer 2 ton Carrier air handler & heat pump

**FIRE SPRINKLER** = Licensee Name \_\_\_\_\_ NC License/Classification \_\_\_\_\_  
Company Name \_\_\_\_\_  
Address \_\_\_\_\_ Phone \_\_\_\_\_  
City State & zip \_\_\_\_\_ Estimated Project Cost \_\_\_\_\_  
Description of Work: \_\_\_\_\_

I hereby certify that all information in this application is correct and all work will comply with the State Building Code and all other local laws and ordinances and regulations. The Inspection Department will be notified of any changes in the approved plans and specification for the project permitted herein.

[Signature]  
Signature of Licensee  
8-17-18  
Date

[Signature]  
Signature of Permit Official  
8-17-18  
Date  
[Signature]

TOWN OF SOUTHERN SHORES  
5375 N Virginia Dare Trl  
Southern Shores NC  
27949  
(252) 261-2394 tel  
(252) 255-0876 fax  
www.southernshores-nc.gov



**SUB-CONTRACTOR SIGN OFF AND/OR PERMIT**

Date 08/20/2018

PROJECT ADDRESS 39 Juniper Trail

Owner Elaine M. Dawson

Mailing Address 600 Legrand

City, State, Zip Panama City Beach FL 32413

Phone 850-278-0457

Permit Number 10243  
Fee \$ 100

**FAXED**

EXISTING Building Permit Number \_\_\_\_\_ NO FEE (if work is associated with a Building Permit) \_\_\_\_\_

**ELECTRICAL** = Licensee Name \_\_\_\_\_ NC License/Classification \_\_\_\_\_  
Company Name \_\_\_\_\_  
Address \_\_\_\_\_ Phone \_\_\_\_\_  
City State & zip \_\_\_\_\_ Estimated Project Cost \_\_\_\_\_  
Description of Work: \_\_\_\_\_

**PLUMBING** = Licensee Name \_\_\_\_\_ NC License/Classification \_\_\_\_\_  
Company Name \_\_\_\_\_  
Address \_\_\_\_\_ Phone \_\_\_\_\_  
City State & zip \_\_\_\_\_ Estimated Project Cost \_\_\_\_\_  
Description of Work: \_\_\_\_\_

**GAS** = Licensee Name \_\_\_\_\_ NC License/Classification \_\_\_\_\_  
Company Name \_\_\_\_\_  
Address \_\_\_\_\_ Phone \_\_\_\_\_  
City State & zip \_\_\_\_\_ Estimated Project Cost \_\_\_\_\_  
Description of Work: \_\_\_\_\_

**MECHANICAL** = Licensee Name HERSEY B. NORRIS NC License/Classification 11100 P,H1,H2,H3  
Company Name NORRIS MECHANICAL LLC  
Address PO BOX 217 Phone 252-491-2673  
City State & zip HARBINGER NC 27941 Estimated Project Cost 8100.00  
Description of Work: CHANGEOUT EXISTING HVAC SYSTEM WITH NEW HVAC SYSTEM

**FIRE SPRINKLER** = Licensee Name \_\_\_\_\_ NC License/Classification \_\_\_\_\_  
Company Name \_\_\_\_\_  
Address \_\_\_\_\_ Phone \_\_\_\_\_  
City State & zip \_\_\_\_\_ Estimated Project Cost \_\_\_\_\_  
Description of Work: \_\_\_\_\_

I hereby certify that all information in this application is correct and all work will comply with the State Building Code and all other local laws and ordinances and regulations. The Inspection Department will be notified of any changes in the approved plans and specification for the project permitted herein.

Hersey B. Norris \_\_\_\_\_  
Signature of Licensee \_\_\_\_\_ Date 08/20/2018

Randy J. [Signature] 8-20-18  
Signature of Permit Official \_\_\_\_\_ Date \_\_\_\_\_

TOWN OF SOUTHERN SHORES  
5375 N Virginia Dare Trl  
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27949  
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[www.southernshores-nc.gov](http://www.southernshores-nc.gov)



**SUB-CONTRACTOR SIGN OFF AND/OR PERMIT**

Date 08/20/2018  
PROJECT ADDRESS 9 MALLARD COVE LOOP #9  
Owner BARBARA L. ADAMS  
Mailing Address 9 MALLARD COVE LOOP  
City, State, Zip SOUTHERN SHORES NC 27949  
Phone 252-256-0842

**TAXED**

Permit Number 10242  
Fee \$ 100

EXISTING Building Permit Number \_\_\_\_\_ NO FEE (if work is associated with a Building Permit) \_\_\_\_\_

**ELECTRICAL** = Licensee Name \_\_\_\_\_ NC License/Classification \_\_\_\_\_  
Company Name \_\_\_\_\_  
Address \_\_\_\_\_ Phone \_\_\_\_\_  
City State & zip \_\_\_\_\_ Estimated Project Cost \_\_\_\_\_  
Description of Work: \_\_\_\_\_

**PLUMBING** = Licensee Name \_\_\_\_\_ NC License/Classification \_\_\_\_\_  
Company Name \_\_\_\_\_  
Address \_\_\_\_\_ Phone \_\_\_\_\_  
City State & zip \_\_\_\_\_ Estimated Project Cost \_\_\_\_\_  
Description of Work: \_\_\_\_\_

**GAS** = Licensee Name \_\_\_\_\_ NC License/Classification \_\_\_\_\_  
Company Name \_\_\_\_\_  
Address \_\_\_\_\_ Phone \_\_\_\_\_  
City State & zip \_\_\_\_\_ Estimated Project Cost \_\_\_\_\_  
Description of Work: \_\_\_\_\_

**MECHANICAL** = Licensee Name HERSEY B. NORRIS NC License/Classification 11100 P,H1,H2,H3  
Company Name NORRIS MECHANICAL LLC  
Address PO BOX 217 Phone 252-491-2673  
City State & zip HARBINGER NC 27941 Estimated Project Cost \$8,800.00  
Description of Work: CHANGEOUT EXISTING HVAC SYSTEM WITH NEW HVAC SYSTEM

**FIRE SPRINKLER** = Licensee Name \_\_\_\_\_ NC License/Classification \_\_\_\_\_  
Company Name \_\_\_\_\_  
Address \_\_\_\_\_ Phone \_\_\_\_\_  
City State & zip \_\_\_\_\_ Estimated Project Cost \_\_\_\_\_  
Description of Work: \_\_\_\_\_

I hereby certify that all information in this application is correct and all work will comply with the State Building Code and all other local laws and ordinances and regulations. The Inspection Department will be notified of any changes in the approved plans and specification for the project permitted herein.

Hersey B. Norris \_\_\_\_\_  
Signature of Licensee \_\_\_\_\_ Date 08/20/2018

Barbara L Adams 8-20-18  
Signature of Permit Official \_\_\_\_\_ Date \_\_\_\_\_  
TRINK

**TOWN OF SOUTHERN SHORES**  
 5375 N Virginia Dare Trl  
 Southern Shores NC  
 27949  
 (252) 261-2394 tel  
 (252) 255-0876 fax  
 www.southernshores-nc.gov



**SUB-CONTRACTOR SIGN OFF AND/OR PERMIT**

Date July 02, 2018

PROJECT ADDRESS 242 Ocean blvd

Owner Mike Balthaser

Mailing Address 28 Stone Hill Dr

City, State, Zip Mchnton PA 19540

Phone 215-313-7748

Permit Number 10203  
 Fee \$ 100

EXISTING Building Permit Number \_\_\_\_\_ NO FEE (if work is associated with a Building Permit) \_\_\_\_\_

**ELECTRICAL** = Licensee Name CHRIS STERNER NC License/Classification 22217

Company Name CHRIS'S ELECTRICAL and MECHANICAL LLC

Address 2039 NEW BERN ST Phone 252-480-0938

City State & zip KILL DEVIL HILLS NC 27948 Estimated Project Cost \$ 150.00

Description of Work: HOOK UP EXISTING ELECTRIC TO HVAC SYSTEM

**PLUMBING** = Licensee Name \_\_\_\_\_ NC License/Classification \_\_\_\_\_

Company Name \_\_\_\_\_

Address \_\_\_\_\_ Phone \_\_\_\_\_

City State & zip \_\_\_\_\_ Estimated Project Cost \_\_\_\_\_

Description of Work: \_\_\_\_\_

**GAS** = Licensee Name \_\_\_\_\_ NC License/Classification \_\_\_\_\_

Company Name \_\_\_\_\_

Address \_\_\_\_\_ Phone \_\_\_\_\_

City State & zip \_\_\_\_\_ Estimated Project Cost \_\_\_\_\_

Description of Work: \_\_\_\_\_

**MECHANICAL** = Licensee Name HERSEY B. NORRIS NC License/Classification 11100 P,H1,H2,H3

Company Name NORRIS MECHANICAL LLC

Address PO BOX 217 Phone 252-491-2673

City State & zip HARBINGER NC 27941 Estimated Project Cost \$8200.00

Description of Work: CHANGEOUT EXISTING HVAC SYSTEM WITH NEW HVAC SYSTEM

**FIRE SPRINKLER** = Licensee Name \_\_\_\_\_ NC License/Classification \_\_\_\_\_

Company Name \_\_\_\_\_

Address \_\_\_\_\_ Phone \_\_\_\_\_


City State & zip \_\_\_\_\_ Estimated Project Cost \_\_\_\_\_

Description of Work: \_\_\_\_\_

I hereby certify that all information in this application is correct and all work will comply with the State Building Code and all other local laws and ordinances and regulations. The Inspection Department will be notified of any changes in the approved plans and specification for the project permitted herein.

  
 Signature of Licensee

07/02/2018  
 Date

 8-20-18  
 Signature of Permit Official Date  
DUHIS

TOWN OF SOUTHERN SHORES  
5375 N Virginia Dare Trl  
Southern Shores NC  
27949  
(252) 261-2394 tel  
(252) 255-0876 fax  
www.southernshores-nc.gov



**SUB-CONTRACTOR SIGN OFF AND/OR PERMIT**

Date 8/13/18  
PROJECT ADDRESS 45 N. Dune Loop

Owner Steve Kirton  
Mailing Address 10 Hards tooth Ln  
City, State, Zip Chester Springs, PA 19245  
Phone 610-633-5680

Permit Number 10235  
Fee \$ 100

EXISTING Building Permit Number \_\_\_\_\_ NO FEE (if work is associated with a Building Permit) \_\_\_\_\_

**ELECTRICAL** = Licensee Name Jimmy Weaver NC License/Classification 24744  
Company Name North Beach Services  
Address P.O. Box 181 Phone 252-491-2878  
City State & zip Kitty Hawk NC Estimated Project Cost 100  
Description of Work: All necessary electrical hookups

**PLUMBING** = Licensee Name \_\_\_\_\_ NC License/Classification \_\_\_\_\_  
Company Name \_\_\_\_\_  
Address \_\_\_\_\_ Phone \_\_\_\_\_  
City State & zip \_\_\_\_\_ Estimated Project Cost \_\_\_\_\_  
Description of Work: \_\_\_\_\_

**GAS** = Licensee Name \_\_\_\_\_ NC License/Classification \_\_\_\_\_  
Company Name \_\_\_\_\_  
Address \_\_\_\_\_ Phone \_\_\_\_\_  
City State & zip \_\_\_\_\_ Estimated Project Cost \_\_\_\_\_  
Description of Work: \_\_\_\_\_

**MECHANICAL** = Licensee Name Suzanne Rich NC License/Classification 33023  
Company Name North Beach Services  
Address P.O. Box 181 Phone 252-491-2878  
City State & zip Kitty Hawk NC Estimated Project Cost 5660.00  
Description of Work: Replace existing heat pump and air handler with matching 3 ton heat pump

**FIRE SPRINKLER** = Licensee Name \_\_\_\_\_ NC License/Classification \_\_\_\_\_  
Company Name \_\_\_\_\_  
Address \_\_\_\_\_ Phone \_\_\_\_\_  
City State & zip \_\_\_\_\_ Estimated Project Cost \_\_\_\_\_  
Description of Work: \_\_\_\_\_

I hereby certify that all information in this application is correct and all work will comply with the State Building Code and all other local laws and ordinances and regulations. The Inspection Department will be notified of any changes in the approved plans and specification for the project permitted herein.

Jimmy Weaver  
Signature of Licensee \_\_\_\_\_ Date \_\_\_\_\_

Buddy Shelton 8-22-18  
Signature of Permit Official \_\_\_\_\_ Date \_\_\_\_\_  
JULI DKS



TOWN OF SOUTHERN SHORES  
 5375 N Virginia Dare Trl  
 Southern Shores NC  
 27949  
 (252) 261-2394 tel  
 (252) 255-0876 fax  
 www.southernshores-nc.gov

**SUB-CONTRACTOR SIGN OFF AND/OR PERMIT**

Date 8/9/18  
 PROJECT ADDRESS 44 Sandrift Trl  
 Owner Wayne Whitley  
 Mailing Address 44 Sandrift  
 City, State, Zip Southern Shores  
 Phone 252-202-1630

Permit Number 10246  
 Fee \$ 100

EXISTING Building Permit Number \_\_\_\_\_ NO FEE (if work is associated with a Building Permit) \_\_\_\_\_

**ELECTRICAL** = Licensee Name Jimmy Weaver NC License/Classification 24744  
 Company Name North Beach Services  
 Address P.O. Box 181 Phone 252-491-2878  
 City State & zip Kitty Hawk nc Estimated Project Cost 100  
 Description of Work: All necessary electrical hookups

**PLUMBING** = Licensee Name \_\_\_\_\_ NC License/Classification \_\_\_\_\_  
 Company Name \_\_\_\_\_  
 Address \_\_\_\_\_ Phone \_\_\_\_\_  
 City State & zip \_\_\_\_\_ Estimated Project Cost \_\_\_\_\_  
 Description of Work: \_\_\_\_\_

**GAS** = Licensee Name \_\_\_\_\_ NC License/Classification \_\_\_\_\_  
 Company Name \_\_\_\_\_  
 Address \_\_\_\_\_ Phone \_\_\_\_\_  
 City State & zip \_\_\_\_\_ Estimated Project Cost \_\_\_\_\_  
 Description of Work: \_\_\_\_\_

**MECHANICAL** = Licensee Name Suzanne Rich NC License/Classification 33023  
 Company Name North Beach Services  
 Address P.O. Box 181 Phone 252-491-2878  
 City State & zip Kitty Hawk nc Estimated Project Cost 4620.00  
 Description of Work: Replace existing heat pump and air handler with matching 6.5 ton heat pump

**FIRE SPRINKLER** = Licensee Name \_\_\_\_\_ NC License/Classification \_\_\_\_\_  
 Company Name \_\_\_\_\_  
 Address \_\_\_\_\_ Phone \_\_\_\_\_  
 City State & zip \_\_\_\_\_ Estimated Project Cost \_\_\_\_\_  
 Description of Work: \_\_\_\_\_

I hereby certify that all information in this application is correct and all work will comply with the State Building Code and all other local laws and ordinances and regulations. The Inspection Department will be notified of any changes in the approved plans and specification for the project permitted herein.

Jimmy Weaver 8/9/18 Buddy Shelton 8-22-18  
 Signature of Licensee Date Signature of Permit Official Date  
 JWS

TOWN OF SOUTHERN SHORES  
PLANNING AND CODE  
ENFORCEMENT  
5375 N Virginia Dare Trl  
Southern Shores NC 27949  
(252) 261-2394 ext 4 tel  
(252) 255-0876 fax  
www.southernshores-nc.gov



**SUB-CONTRACTOR SIGN OFF AND/OR PERMIT**

Date 8-22-18

PROJECT ADDRESS 192 Ocean Blvd.

Owner Browning family trust  
Mailing Address 410 Stage Browning 21010  
City, State, Zip Christman Hill Ter boyds Maryland  
Phone 20841

Permit Number 10247  
Fee \$ 100

EXISTING Building Permit Number \_\_\_\_\_ NO FEE (if work is associated with a Building Permit) \_\_\_\_\_

**ELECTRICAL** = Licensee Name Fredrick Stafford NC License/Classification 289571  
Company Name Additive Electric  
Address PO Box 1207 Phone 252 484 1690  
City State & zip Kill Devil Hills Estimated Project Cost \$ 2100.00  
Description of Work: Service Change

**PLUMBING** = Licensee Name \_\_\_\_\_ NC License/Classification \_\_\_\_\_  
Company Name \_\_\_\_\_  
Address \_\_\_\_\_ Phone \_\_\_\_\_  
City State & zip \_\_\_\_\_ Estimated Project Cost \_\_\_\_\_  
Description of Work: \_\_\_\_\_

**GAS** = Licensee Name \_\_\_\_\_ NC License/Classification \_\_\_\_\_  
Company Name \_\_\_\_\_  
Address \_\_\_\_\_ Phone \_\_\_\_\_  
City State & zip \_\_\_\_\_ Estimated Project Cost \_\_\_\_\_  
Description of Work: \_\_\_\_\_

**MECHANICAL** = Licensee Name \_\_\_\_\_ NC License/Classification \_\_\_\_\_  
Company Name \_\_\_\_\_  
Address \_\_\_\_\_ Phone \_\_\_\_\_  
City State & zip \_\_\_\_\_ Estimated Project Cost \_\_\_\_\_  
Description of Work: \_\_\_\_\_

**FIRE SPRINKLER** = Licensee Name \_\_\_\_\_ NC License/Classification \_\_\_\_\_  
Company Name \_\_\_\_\_  
Address \_\_\_\_\_ Phone \_\_\_\_\_  
City State & zip \_\_\_\_\_ Estimated Project Cost \_\_\_\_\_  
Description of Work: \_\_\_\_\_

I hereby certify that all information in this application is correct and all work will comply with the State Building Code and all other local laws and ordinances and regulations. The Inspection Department will be notified of any changes in the approved plans and specification for the project permitted herein.

[Signature]  
Signature of Licensee  
8/22/18  
Date

Buddy Shestak  
Signature of Permit Official  
8/22-18  
Date  
[Signature]





**TOWN OF SOUTHERN SHORES  
PLANNING AND CODE ENFORCEMENT**  
5375 N Virginia Dare Trail, Southern Shores, NC 27949  
(252) 261-2394 Ext 4 - Office (252) 255-0876 - Fax  
[www.southernshores-nc.gov](http://www.southernshores-nc.gov)

**RESIDENTIAL  
BUILDING/FLOODPLAIN DEVELOPMENT PERMIT  
BUILDING PERMIT #10245**

**Location:** 154 Tall Cliff Ct  
**Parcel:** 022448000 PIN: 986716726747  
**District:** 20- SOUTHERN SHORES  
**Subdivision:** CHICHAUK  
**LotBlkSect:** LOT: 295 BLK: SEC:

**BANDUR, STANLEY C TTEE TRE  
BANDUR, DEIRDRE M TTEE TRE  
154 TALL CLIFF CT  
KITTY HAWK NC 27949**  
**PHONE #:** 252-619-7151 **CELL #:**

**BUSINESS NAME:** Compass Edge Construction, Inc  
**CONTRACTOR'S NAME:** David Buchanan  
**ADDRESS:** 103 High Dune Lp  
**CITY, STATE, ZIP:** Southern Shores, NC 27949  
**OFFICE#:**  
**CELL#:** 252-202-4217  
**FAX#:**  
**EMAIL:** [david@compassedge.com](mailto:david@compassedge.com)

**NC G.C. LICENSED CONTRACTOR:**  YES  NO  
**NC G.C. LICENSE NUMBER:** 56041  
**LIMITATION:** Intermediate  
**CLASSIFICATION:** Building  
**QUALIFIER:** David Buchanan

**LIEN AGENT:** n/a

**DESCRIPTION OF WORK – (Any deviation from the Building Plan or Site Plan requires prior approval):** Remodel 2 existing bathrooms – no change in footprint or location of fixtures

**SPECIAL CONDITIONS -**

<b>TYPE OF CONSTRUCTION:</b> Remodel	<b>TYPE OF FOUNDATION:</b>	<b>PERMIT TYPE:</b> Residential
<b>TOTAL HEATED/LIVING AREAS (SF):</b>	<b>HEAT:</b>	<b>RESIDENCE/2<sup>nd</sup> HOME/RENTAL:</b> Residence
<b>TOTAL NON-HEATED AREAS (SF):</b>	<b>A/C:</b>	<b>PROPERTY USE:</b> Single Family Dwelling
<b>NUMBER OF STORIES:</b>	<b>INTERIOR WALLS:</b> Sheetrock	<b>ZONING DISTRICT:</b> RS-1
<b>BEDROOMS:</b>	<b>EXTERIOR WALLS:</b>	<b>ZONING PERMIT #:</b> n/a
<b>SEPTIC CAPACITY # OF PERSONS:</b>	<b>FIREPLACE:</b>	<b>DATE ISSUED:</b>
<b>BATHS:</b> ½ BATHS:	<b>ROOF:</b>	<b>CAMA PERMIT #:</b> n/a
<b>GARAGE:</b> STORAGE BLDG:	<b>INSULATION:</b>	<b>DATE ISSUED:</b>
<b>STORAGE ENCLOSURE:</b> POOL:	<b>ELEVATOR (SF):</b>	<b>SEPTIC PERMIT #:</b> n/a
<b>FLOOD ZONE:</b> Shaded X	<b>DECKS (SF):</b>	<b>DATE ISSUED:</b>
<b>BASE FLOOD ELEVATION:</b> PLUS 2FT=	<b>PORCHES (SF):</b>	
	<b>WINDOWS MAKE:</b>	
	<b>TYPE:</b>	

\*\*\*The owner and builder are responsible for the following: All work done shall comply with the State Building Code and all other applicable State and local laws. The applicant certifies that the information on this permit is correct; that he/she is the owner or duly authorized agent of owner; that all construction shall be as shown on the submitted plans and specifications; the he/she understands this permit is valid for 180 days to begin construction and may be revoked for failure to comply with applicable regulations and laws.

<b>TOTAL CONSTRUCTION COST</b>	\$30,000		
<b>HEATED/LIVING AREA (sf) (new square footage)</b>		X .60/sf (single family) =	\$
		X .75/sf (all others) =	
<b>NON-HEATED AREA (sf) (new square footage)</b>		X .30/sf (single family) =	\$
		X .35/sf (all others) =	
<b>REMODEL/REPAIR/ALTERATION (no additional square footage)</b>	\$30,000	X \$10 per \$1,000 of cost =	\$30,000
		Pool = \$125	\$
		Zoning Permit Fee = \$50	\$
		Plan Review Fee = \$150 or \$100	\$
		Minimum Permit Fee = \$100	\$
		Homeowner's Recovery Fund\$10	\$10.00
		<b>TOTAL FEE</b>	<b>\$310.00</b>

*[Signature]* Applicant - Owner/Contractor  
*[Signature]* David P. Buchanan (Please print and sign name)  
*[Signature]* Building/Code/Zoning Official  
 8-22-18 Date Issued  
 8-22-18 Date Approved

TOWN OF  
SOUTHERN SHORES  
5375 N Virginia Dare Trl  
Southern Shores, NC  
27949  
(252) 261-2394 tel  
(252) 255-0876 fax  
[www.southernshores-nc.gov](http://www.southernshores-nc.gov)



**SUBCONTRACTOR SIGN OFF AND/OR PERMIT**

Date 08/23/2018  
PROJECT ADDRESS 1 YUCCA LANE  
Owner WILLIAM KALLIO  
Mailing Address 3409 STRATFORD ROAD  
City, State, Zip RICHMOND, VA 23225  
Phone 804-323-3012

Permit Number 10248  
Fee \$ 100

EXISTING Building Permit Number \_\_\_\_\_ NO FEE \_\_\_\_\_

**ELECTRICAL** = Licensee Name FREDERICK MARKLIN NC License/Classification 22222-L / LTD  
Company Name R A HOY HEATING & A/C INC  
Address P O BOX 179 Phone (252) 261-2008  
City State & zip KITTY HAWK, NC 27949 Estimated Project Cost INCL in MECH  
Description of Work: CONNECTION OF MECH EQUIP BELOW

**PLUMBING** = Licensee Name \_\_\_\_\_ NC License/Classification \_\_\_\_\_  
Company Name \_\_\_\_\_  
Address \_\_\_\_\_ Phone \_\_\_\_\_  
City State & zip \_\_\_\_\_ Estimated Project Cost \_\_\_\_\_  
Description of Work: \_\_\_\_\_

**GAS** = Licensee Name \_\_\_\_\_ NC License/Classification \_\_\_\_\_  
Company Name \_\_\_\_\_  
Address \_\_\_\_\_ Phone \_\_\_\_\_  
City State & zip \_\_\_\_\_ Estimated Project Cost \_\_\_\_\_  
Description of Work: \_\_\_\_\_

**MECHANICAL** = Licensee Name DOUGLAS WAKELEY NC License/Classification 13056 / H 2 & 3 P-1  
Company Name R A HOY HEATING & A/C INC  
Address P O BOX 179 Phone (252) 261-2008  
City State & zip KITTY HAWK, NC 27949 Estimated Project Cost \$6,750  
Description of Work: C/O 4 TON 14 SEER TRANE SYSTEM WHOLE HOUSE REUSE OWNERS THERMOSTAT

I hereby certify that all information in this application is correct and all work will comply with the State Building Code and all other local laws and ordinances and regulations. The Inspection Department will be notified of any changes in the approved plans and specification for the project permitted herein.

Douglas Wakeley 08/23/2018  
Signature of Licensee Date  
Douglas Wakeley (ELEC)

Brenda Shelton 08/24/18  
Signature of Permit Official Date  
DU 115

TOWN OF  
SOUTHERN SHORES  
5375 N Virginia Dare Trl  
Southern Shores, NC  
27949  
(252) 261-2394 tel  
(252) 255-0876 fax  
[www.southernshores-nc.gov](http://www.southernshores-nc.gov)



**SUBCONTRACTOR SIGN OFF AND/OR PERMIT**

Date 08/17/2018  
PROJECT ADDRESS 129 OCEAN BLVD  
Owner DAVID DEJOHN  
Mailing Address 7 HEATHER LANE  
City, State, Zip RENSSELAR, NY 12144  
Phone 518-380-3664

Permit Number 10240

Fee \$ 100

EXISTING Building Permit Number \_\_\_\_\_ NO FEE \_\_\_\_\_

**ELECTRICAL** = Licensee Name FREDERICK MARKLIN NC License/Classification 22222-L / LTD  
Company Name R A HOY HEATING & A/C INC  
Address P O BOX 179 Phone (252) 261-2008  
City State & zip KITTY HAWK, NC 27949 Estimated Project Cost INCL in MECH  
Description of Work: CONNECTION OF MECH EQUIP BELOW

**PLUMBING** = Licensee Name \_\_\_\_\_ NC License/Classification \_\_\_\_\_  
Company Name \_\_\_\_\_  
Address \_\_\_\_\_ Phone \_\_\_\_\_  
City State & zip \_\_\_\_\_ Estimated Project Cost \_\_\_\_\_  
Description of Work: \_\_\_\_\_

**GAS** = Licensee Name \_\_\_\_\_ NC License/Classification \_\_\_\_\_  
Company Name \_\_\_\_\_  
Address \_\_\_\_\_ Phone \_\_\_\_\_  
City State & zip \_\_\_\_\_ Estimated Project Cost \_\_\_\_\_  
Description of Work: \_\_\_\_\_

**MECHANICAL** = Licensee Name DOUGLAS WAKELEY NC License/Classification 13056 / H 2 & 3 P-1  
Company Name R A HOY HEATING & A/C INC  
Address P O BOX 179 Phone (252) 261-2008  
City State & zip KITTY HAWK, NC 27949 Estimated Project Cost 6545  
Description of Work: C/O 3 TON 16 SEER TRANE SYSTEM TOP LEVEL WITH T6 THERMOSTAT

I hereby certify that all information in this application is correct and all work will comply with the State Building Code and all other local laws and ordinances and regulations. The Inspection Department will be notified of any changes in the approved plans and specification for the project permitted herein.

Douglas Wakeley 08/17/2018  
Signature of Licensee Date  
Douglas Wakeley (ELEC)

Bryan SHM 8-24-18  
Signature of Permit Official Date  
By: WA



**TOWN OF SOUTHERN SHORES**  
**PLANNING AND CODE ENFORCEMENT**  
 5375 N Virginia Dare Trail, Southern Shores, NC 27949  
 (252) 261-2394 Ext 4 - Office (252) 255-0876 - Fax  
 www.southernshores-nc.gov

**RESIDENTIAL**  
**BUILDING/FLOODPLAIN DEVELOPMENT PERMIT**  
**BUILDING PERMIT #10225**

**Location:** 46 Hickory Trail  
**Parcel:** 021432000 PIN: 986813233211  
**District:** 20- SOUTHERN SHORES  
**Subdivision:** SO/SH SOUNDSIDE BLK 104  
**LotBlkSect:** LOT: 19 BLK: 104 SEC:

**BROWN, RICHARD A EUX**  
**BROWN, MICHELLE G EUX**  
**4 GINGUITE TRL**  
**KITTY HAWK NC 27949**

**PHONE #:** 252-619-1082

**CELL #:**

**BUSINESS NAME:** Albemarle Contractors, Inc  
**CONTRACTOR'S NAME:** Joe and Lori McGraw  
**ADDRESS:** PO Box 146  
**CITY, STATE, ZIP:** Kitty Hawk, NC 27949  
**OFFICE#:** 252-261-1080  
**CELL#:** 252-202-9994  
**FAX#:**  
**EMAIL:** albemarle27949@gmail.com

**NC G.C. LICENSED CONTRACTOR:**  YES  NO  
**NC G.C. LICENSE NUMBER:** 53847  
**LIMITATION:** Intermediate  
**CLASSIFICATION:** Building  
**QUALIFIER:** Lori N McGraw

**LIEN AGENT:** Premier Land Title Insurance Company Entry# 888184  
 19 W. Hargett Street, Suite 507, Raleigh, NC 27601

**DESCRIPTION OF WORK – (Any deviation from the Building Plan or Site Plan requires prior approval):** Construction of a new single family dwelling with a detached accessory building (with ground level garage & living space on 1<sup>st</sup> floor) and retaining walls

**\*\*\*SFD is located within the Shaded X zone // Detached Accessory Garage is located within the AE flood zone and must meet all flood requirements**

<b>TYPE OF CONSTRUCTION:</b> New SFD	<b>TYPE OF FOUNDATION:</b> SFD=Piling GARAGE=Slab	<b>PERMIT TYPE:</b> Residential
<b>TOTAL HEATED/LIVING AREAS (SF):</b> 3,864 total	<b>HEAT:</b> Geothermal	<b>RESIDENCE/2<sup>nd</sup> HOME/RENTAL:</b> Residence
<b>TOTAL NON-HEATED AREAS (SF):</b> 2,000 total	<b>A/C:</b> Geothermal	<b>PROPERTY USE:</b> Single Family Dwelling
<b>NUMBER OF STORIES:</b> 2	<b>INTERIOR WALLS:</b> Drywall	<b>ZONING DISTRICT:</b> RS-1
<b>BEDROOMS:</b> 4	<b>EXTERIOR WALLS:</b> Lap and Faux Stone	<b>ZONING PERMIT #:</b> 2018-77
<b>SEPTIC CAPACITY # OF PERSONS:</b> 8	<b>ROOF:</b> Asphalt/Metal	<b>DATE ISSUED:</b> 8/23/2018
<b>BATHS:</b> 3 ½ BATHS: 1	<b>INSULATION:</b> Batt	<b>CAMA PERMIT #:</b> n/a
<b>DETACHED GARAGE:</b> 650sf (heated)	<b>ELEVATOR (SF):</b> 24	<b>DATE ISSUED:</b>
833sf (non-heated)	<b>FIREPLACE:</b> wood stove on plans	<b>SEPTIC PERMIT #:</b> 27903
<b>FLOOD ZONE:</b> SFD=Shaded X Garage=AE	<b>DECKS/PORCHES (SF):</b> 1,167	<b>DATE ISSUED:</b> 6/20/2018
<b>BASE FLOOD ELEVATION:</b> 7FT PLUS 2FT= 9FT	<b>WINDOWS MAKE:</b> TBD	
	<b>TYPE:</b>	

**\*\*\*The owner and builder are responsible for the following: All work done shall comply with the State Building Code and all other applicable State and local laws. The applicant certifies that the information on this permit is correct; that he/she is the owner or duly authorized agent of owner; that all construction shall be as shown on the submitted plans and specifications; that he/she understands this permit is valid for 180 days to begin construction and may be revoked for failure to comply with applicable regulations and laws.**

<b>TOTAL CONSTRUCTION COST</b>	\$878,345		
<b>HEATED/LIVING AREA (sf) (new square footage)</b>	3,864	X .60/sf (single family) =	\$2,318.40
<b>NON-HEATED AREA (sf) (new square footage)</b>	2,000	X .75/sf (all others) =	
<b>REMODEL/REPAIR/ALTERATION (no additional square footage)</b>	\$	X .30/sf (single family) =	\$600
		X .35/sf (all others) =	
		X \$10 per \$1,000 of cost =	\$
		Pool = \$125	\$
		Zoning Permit Fee = \$50	\$50.00
		Plan Review Fee = \$150 or \$100	\$pd
		Minimum Permit Fee = \$100	\$
		Homeowner's Recovery Fund \$10	\$10.00
		<b>TOTAL FEE</b>	<b>\$2,978.40</b>

Joseph D McGraw Joseph D McGraw  
 Applicant - Owner/Contractor (Please print and sign name)

8-23-18

Bunky Shelton  
 Building/Code/Zoning Official

Date Issued  
8-23-18

DJ DVS

Date Approved



**TOWN OF SOUTHERN SHORES**  
**PLANNING AND CODE ENFORCEMENT**  
 5375 N Virginia Dare Trail, Southern Shores, NC 27949  
 (252) 261-2394 Ext 4 - Office (252) 255-0876 - Fax  
[www.southernshores-nc.gov](http://www.southernshores-nc.gov)

**RESIDENTIAL**  
**BUILDING/FLOODPLAIN DEVELOPMENT PERMIT**  
**BUILDING PERMIT #10244**

**Location:** 237 Woodland Drive  
**Parcel:** 022165000 PIN: 986818217919  
**District:** 20- SOUTHERN SHORES  
**Subdivision:** SO/SH SOUNDSIDE BLK 95  
**LotBlkSect:** LOT: 77 BLK: 95 SEC:

**FINCH, OLIN E**  
 116 SANDY RIDGE RD  
 DUCK NC 27949

PHONE #: 252-261-8710      CELL #:

**BUSINESS NAME:** Finch & Co Inc.  
**CONTRACTOR'S NAME:** Olin Finch  
**ADDRESS:** 116 Sandy Ridge Rd  
**CITY, STATE, ZIP:** Duck, NC 27949  
**OFFICE#:** 252-261-8710  
**CELL#:** 252-207-4566  
**FAX#:**  
**EMAIL:** olinfinch@gmail.com

**NC G.C. LICENSED CONTRACTOR:**  YES  NO  
**NC G.C. LICENSE NUMBER:** 52567  
**LIMITATION:** Unlimited  
**CLASSIFICATION:** Building  
**QUALIFIER:** Olin Finch/Marc Murray

**LIEN AGENT:** Chicago Title Company, LLC    Entry# 898669  
 19 W. Hargett Street, Suite 507, Raleigh, NC 27601

**DESCRIPTION OF WORK – (Any deviation from the Building Plan or Site Plan requires prior approval):** Construction of a new single family dwelling with 2 attached garages

**SPECIAL CONDITIONS -**

<b>TYPE OF CONSTRUCTION:</b> New SFD	<b>TYPE OF FOUNDATION:</b> Piling	<b>PERMIT TYPE:</b> Residential
<b>TOTAL HEATED/LIVING AREAS (SF):</b> 3,301	<b>HEAT:</b> Heat pump	<b>RESIDENCE/2<sup>ND</sup> HOME/RENTAL:</b> Residence
<b>TOTAL NON-HEATED AREAS (SF):</b> 1,449	<b>A/C:</b> Heat pump	<b>PROPERTY USE:</b> Single Family Dwelling
<b>NUMBER OF STORIES:</b> 3	<b>INTERIOR WALLS:</b> Drywall	<b>ZONING DISTRICT:</b> RS-1
<b>BEDROOMS:</b> 4	<b>EXTERIOR WALLS:</b> Smart Side	<b>ZONING PERMIT #:</b> 2018-84
<b>SEPTIC CAPACITY # OF PERSONS:</b> 8	<b>FIREPLACE:</b> n/a	<b>DATE ISSUED:</b> 8/28/2018
<b>BATHS:</b> 4      ½ BATHS: N/A	<b>ROOF:</b> Asphalt	<b>CAMA PERMIT #:</b> n/a
<b>ATTACHED GARAGE - 2 GARAGES = 1,038 SF</b>	<b>INSULATION:</b> Batt	<b>DATE ISSUED:</b>
<b>FLOOD ZONE:</b> AE	<b>ELEVATOR (SF):</b> n/a	<b>SEPTIC PERMIT #:</b> 28023
<b>BASE FLOOD ELEVATION:</b> 7FT PLUS 2FT= 9FT	<b>DECKS (SF):</b> 441	<b>DATE ISSUED:</b> 8/20/2018
	<b>PORCHES (SF):</b> n/a	
	<b>WINDOWS MAKE:</b> Jeldwen	
	<b>TYPE:</b> Double Hung	

\*\*\*The owner and builder are responsible for the following: All work done shall comply with the State Building Code and all other applicable State and local laws. The applicant certifies that the information on this permit is correct; that he/she is the owner or duly authorized agent of owner; that all construction shall be as shown on the submitted plans and specifications; the he/she understands this permit is valid for 180 days to begin construction and may be revoked for failure to comply with applicable regulations and laws.

<b>TOTAL CONSTRUCTION COST</b>	\$425,000		
<b>HEATED/LIVING AREA (sf)</b> (new square footage)	3,301	X .60/sf (single family) =	\$1,980.60
<b>NON-HEATED AREA (sf)</b> (new square footage)	1,449	X .75/sf (all others) =	
<b>REMODEL/REPAIR/ALTERATION</b> (no additional square footage)	\$	X .30/sf (single family) =	\$434.70
		X .35/sf (all others) =	
		X \$10 per \$1,000 of cost =	\$
		Pool = \$125	\$
		Zoning Permit Fee = \$50	\$50.00
		Plan Review Fee = \$150 or \$100	\$pd
		Minimum Permit Fee = \$100	\$
		Homeowner's Recovery Fund\$10	\$10.00
		<b>TOTAL FEE</b>	<b>\$2,475.30</b>

*Marc Murray*      **MARC MURRAY**  
 Applicant - Owner/Contractor      (Please print and sign name)

*Buddy Shepton*  
 Building/Code/Zoning Official      **JY DVS**

Date Issued: **8-28-18**  
 Date Approved:

TOWN OF SOUTHERN SHORES  
PLANNING AND CODE  
ENFORCEMENT

5375 N Virginia Dare Trl  
Southern Shores NC 27949  
(252) 261-2394 ext 4 tel  
(252) 255-0876 fax  
www.southernshores-nc.gov



**SUB-CONTRACTOR SIGN OFF AND/OR PERMIT**

Date August 15, 2018

PROJECT ADDRESS 46 Ginguite Trail

Owner Susan Leggett

Mailing Address 46 Ginguite Trail

City, State, Zip Southern Shores NC 27949

Phone 252-261-4428

Permit Number 10237  
Fee \$ 100

EXISTING Building Permit Number \_\_\_\_\_ NO FEE (if work is associated with a Building Permit) \_\_\_\_\_

**ELECTRICAL** = Licensee Name \_\_\_\_\_ NC License/Classification \_\_\_\_\_  
Company Name \_\_\_\_\_  
Address \_\_\_\_\_ Phone \_\_\_\_\_  
City State & zip \_\_\_\_\_ Estimated Project Cost \_\_\_\_\_  
**Description of Work:** \_\_\_\_\_

**PLUMBING** = Licensee Name \_\_\_\_\_ NC License/Classification \_\_\_\_\_  
Company Name \_\_\_\_\_  
Address \_\_\_\_\_ Phone \_\_\_\_\_  
City State & zip \_\_\_\_\_ Estimated Project Cost \_\_\_\_\_  
**Description of Work:** \_\_\_\_\_

**GAS** = Licensee Name \_\_\_\_\_ NC License/Classification \_\_\_\_\_  
Company Name \_\_\_\_\_  
Address \_\_\_\_\_ Phone \_\_\_\_\_  
City State & zip \_\_\_\_\_ Estimated Project Cost \_\_\_\_\_  
**Description of Work:** \_\_\_\_\_

**MECHANICAL** = Licensee Name Henry J Liverman NC License/Classification 11618 H2 / H3-1  
Company Name Atlantic Heating & Cooling, Ltd.  
Address P O Box 132 Phone 252-441-7642  
City State & zip Kill Devil Hills NC 27948 Estimated Project Cost \$4,950  
**Description of Work:** Remove & replace the indoor & outdoor sections of the HVAC system using a 14 SEER R410A 2 ton Goodman heat pump & a matching Goodman air handler for the bedroom zone.

**FIRE SPRINKLER** = Licensee Name \_\_\_\_\_ NC License/Classification \_\_\_\_\_  
Company Name \_\_\_\_\_  
Address \_\_\_\_\_ Phone \_\_\_\_\_  
City State & zip \_\_\_\_\_ Estimated Project Cost \_\_\_\_\_  
**Description of Work:** \_\_\_\_\_

I hereby certify that all information in this application is correct and all work will comply with the State Building Code and all other local laws and ordinances and regulations. The Inspection Department will be notified of any changes in the approved plans and specification for the project permitted herein.

Henry J Liverman  
Signature of Licensee Date 8/15/18

Brenda J. Grew  
Signature of Permit Official Date \_\_\_\_\_

TOWN OF SOUTHERN SHORES  
5375 N Virginia Dare Trl  
Southern Shores NC  
27949  
(252) 261-2394 tel  
(252) 255-0876 fax  
www.southernshores-nc.gov



**SUB-CONTRACTOR SIGN OFF AND/OR PERMIT**

Date 8/20/18

PROJECT ADDRESS 143 S. DOGWOOD T

Owner TIMBER LAKE  
Mailing Address 143 S. DOGWOOD TR.  
City, State, Zip S. SHORES NC 27949  
Phone 252 744-5764

Permit Number 10241  
Fee \$ 100

EXISTING Building Permit Number \_\_\_\_\_ NO FEE (if work is associated with a Building Permit) \_\_\_\_\_

**ELECTRICAL** = Licensee Name BRYAN MUTHIER NC License/Classification 26395U  
Company Name PRECISE ELECTRICAL SVS.  
Address 534 LEVELS RD. Phone 252 796-7900  
City State & zip COLUMBIA NC  
Description of Work: \_\_\_\_\_ Estimated Project Cost \_\_\_\_\_

**PLUMBING** = Licensee Name \_\_\_\_\_ NC License/Classification \_\_\_\_\_  
Company Name \_\_\_\_\_  
Address \_\_\_\_\_ Phone \_\_\_\_\_  
City State & zip \_\_\_\_\_ Estimated Project Cost \_\_\_\_\_  
Description of Work: \_\_\_\_\_

**GAS** = Licensee Name \_\_\_\_\_ NC License/Classification \_\_\_\_\_  
Company Name \_\_\_\_\_  
Address \_\_\_\_\_ Phone \_\_\_\_\_  
City State & zip \_\_\_\_\_ Estimated Project Cost \_\_\_\_\_  
Description of Work: \_\_\_\_\_

**MECHANICAL** = Licensee Name ANTHONY PRITCHETT NC License/Classification 18066  
Company Name \_\_\_\_\_  
Address MASTER HEATING & COOLING  
P.O. BOX 707 Phone 255.0095  
City State & zip KITTY HAWK, NC 27949 Estimated Project Cost 10530.5  
Description of Work: HVAC components: (2) 1.5 ton, 14 SEER R410A Maytag heat pump systems.

**FIRE SPRINKLER** = Licensee Name \_\_\_\_\_ NC License/Classification \_\_\_\_\_  
Company Name \_\_\_\_\_  
Address \_\_\_\_\_ Phone \_\_\_\_\_  
City State & zip \_\_\_\_\_ Estimated Project Cost \_\_\_\_\_  
Description of Work: \_\_\_\_\_

I hereby certify that all information in this application is correct and all work will comply with the State Building Code and all other local laws and ordinances and regulations. The Inspection Department will be notified of any changes in the approved plans and specification for the project permitted herein.

Anthony Pritchett 8/20/18  
Signature of Licensee Date

Buddy Shelton 8-29-18  
Signature of Permit Official Date



**TOWN OF SOUTHERN SHORES**  
**PLANNING AND CODE ENFORCEMENT**  
 5375 N Virginia Dare Trail, Southern Shores, NC 27949  
 (252) 261-2394 Ext 4 - Office (252) 255-0876 - Fax  
 www.southernshores-nc.gov

**Residential**  
**BUILDING/FLOODPLAIN DEVELOPMENT PERMIT**  
**BUILDING PERMIT #: 10208**

**Location:** 62 Fairway Drive  
**Parcel:** 022346000 PIN: 986706288292  
**District:** 20- SOUTHERN SHORES  
**Subdivision:** SO/SH COMMUNITY BLK 118  
**LotBlkSect:** LOT: 6 BLK: 118 SEC:

**BRADLEY, GREGORY EUX**  
**BRADLEY, ELIZABETH A EUX**  
**6 COMMONS LN**  
**LAKE LUZERNE NY 12846**

PHONE #: 518-708-7388      CELL #:

**BUSINESS NAME:** Northeastern Marine, Inc  
**CONTRACTOR'S NAME:** Bill Jones  
**ADDRESS:** PO Box 42  
**CITY, STATE, ZIP:** Kitty Hawk, NC 27949  
**OFFICE#:** 252-261-3682  
**CELL#:**  
**FAX#:** 252-261-2275  
**EMAIL:** julle@nemarineconst.com

**NC G.C. LICENSED CONTRACTOR:**  YES     NO  
**NC G.C. LICENSE NUMBER:** 30026  
**LIMITATION:** Limited  
**CLASSIFICATION:** S- Marine  
**QUALIFIER:** n/a

**LIEN AGENT:** n/a

**DESCRIPTION OF WORK – (Any deviation from the Building Plan or Site Plan requires prior approval):** Construction of a 4x28 dock adjacent to existing bulkhead - Amended 8-29-18 - 4x4' & 16x10' landward platform JLB 8/31/18

**SPECIAL CONDITIONS - All wood below base flood elevation is required to be treated**

<b>TYPE OF CONSTRUCTION:</b> Other - Dock	<b>TYPE OF FOUNDATION:</b>	<b>PERMIT TYPE:</b> Residential
<b>HEATED/LIVING AREAS (SF):</b>	<b>HEAT:</b>	<b>RESIDENCE/2<sup>ND</sup> HOME/RENTAL:</b> Residence
<b>NON-HEATED AREAS (SF):</b>	<b>A/C:</b>	<b>PROPERTY USE:</b> Single Family Dwelling
<b>NUMBER OF STORIES:</b>	<b>INTERIOR WALLS:</b>	<b>ZONING DISTRICT:</b> RS-1
<b>HABITABLE ROOMS:</b>	<b>EXTERIOR WALLS:</b>	<b>ZONING PERMIT #:</b> 2018-72
<b>BEDROOMS:</b>	<b>FIREPLACE:</b>	<b>DATE ISSUED:</b> 7/13/2018
<b>OCCUPANCY:</b>	<b>ROOF:</b>	<b>CAMA PERMIT #:</b> General #71572A - Amended 8-29-18 to include platform
<b>BATHS:</b> ½ BATHS:	<b>INSULATION:</b>	<b>DATE ISSUED:</b> 7/11/2018
<b>GARAGE:</b> SHED:    STORAGE ENCLOSURE:	<b>ELEVATOR (SF):</b>	<b>SEPTIC PERMIT #:</b>
<b>FLOOD ZONE:</b> AE	<b>WINDOWS:</b>	<b>DATE ISSUED:</b>
<b>BASE FLOOD ELEVATION:</b> 7FT PLUS 2FT= 9FT	<b>MAKE:</b>	<b>WATER TAP#:</b>
	<b>TYPE:</b>	

\*\*\*The owner and builder are responsible for the following: All work done shall comply with the State Building Code and all other applicable State and local laws. The applicant certifies that the information on this permit is correct; that he/she is the owner or duly authorized agent of owner; that all construction shall be as shown on the submitted plans and specifications; the he/she understands this permit is valid for 180 days to begin construction and may be revoked for failure to comply with applicable regulations and laws.

<b>TOTAL CONSTRUCTION COST</b>	\$2,850	+ \$1,000	
<b>HEATED/LIVING AREA (sf)</b> (new square footage)		X .60/sf (single family) =	\$
<b>NON-HEATED AREA (sf)</b> (new square footage)		X .75/sf (all others) =	\$
<b>REMODEL/REPAIR/ALTERATION</b> (no additional square footage)	\$	X \$10 per \$1,000 of cost =	\$
		Pool = \$125	
<b>Additional fee -</b> JLB 8/31/18		Zoning Permit = \$50	\$50.00
<b>176' x .30 = \$52.80</b>		Plan Review Fee = \$150 or \$100	
		Minimum Permit Fee = \$100	\$100.00
		Homeowner's Recovery Fund \$10	
		<b>TOTAL FEE</b>	<b>\$150.00</b>

**Applicant - Owner/Contractor** Julie Emory (NE Marine) Julie Emory (Please print and sign name)      **Date Issued** 11/16/18  
**Building/Code/Zoning Official** Bill Smith      **Date Approved** 7-13-18  
By: WJA





**TOWN OF SOUTHERN SHORES**  
**PLANNING AND CODE ENFORCEMENT**  
 5375 N Virginia Dare Trail, Southern Shores, NC 27949  
 (252) 261-2394 Ext 4 - Office (252) 255-0876 - Fax  
[www.southernshores-nc.gov](http://www.southernshores-nc.gov)

**RESIDENTIAL**  
**BUILDING/FLOODPLAIN DEVELOPMENT PERMIT**  
**BUILDING PERMIT #10251**

**Location:** 85 Hollow Beech Ct  
**Parcel:** 022383468 PIN: 986711558672  
**District:** 20- SOUTHERN SHORES  
**Subdivision:** CHICHAUK  
**LotBlkSect:** LOT: 468 BLK: SEC:

**COLLINS, PETER M EUX**  
**COLLINS, JANIS L EUX**  
**85 HOLLOW BEECH CT**  
**SOUTHERN SHORES NC 27949**

PHONE #:

CELL #: 703-625-8490

**BUSINESS NAME:**  
**CONTRACTOR'S NAME:** Property Owner  
**ADDRESS:**  
**CITY, STATE, ZIP:**  
**OFFICE#:**  
**CELL#:**  
**FAX#:**  
**EMAIL:**

**NC G.C. LICENSED CONTRACTOR:** \_\_\_ YES \_\_\_ NO  
**NC G.C. LICENSE NUMBER:**  
**LIMITATION:**  
**CLASSIFICATION:**  
**QUALIFIER:**

**LIEN AGENT:** n/a

**DESCRIPTION OF WORK – (Any deviation from the Building Plan or Site Plan requires prior approval):** Construction of a detached accessory garage 15' x 25'– unfinished only

**SPECIAL CONDITIONS -**

<b>TYPE OF CONSTRUCTION:</b> Accessory - Garage	<b>TYPE OF FOUNDATION:</b> slab	<b>PERMIT TYPE:</b> Residential
<b>TOTAL HEATED/LIVING AREAS (SF):</b>	<b>HEAT:</b>	<b>RESIDENCE/2<sup>ND</sup> HOME/RENTAL:</b> Residence
<b>TOTAL NON-HEATED AREAS (SF):</b> 375	<b>A/C:</b>	<b>PROPERTY USE:</b> Single Family Dwelling
<b>NUMBER OF STORIES:</b>	<b>INTERIOR WALLS:</b> unfinished	<b>ZONING DISTRICT:</b> RS-1
<b>BEDROOMS:</b>	<b>EXTERIOR WALLS:</b> cedar shake	<b>ZONING PERMIT #:</b> 2018-88
<b>SEPTIC CAPACITY # OF PERSONS:</b>	<b>FIREPLACE:</b>	<b>DATE ISSUED:</b> 8/31/2018
<b>BATHS:</b> ½ BATHS:	<b>ROOF:</b> asphalt	<b>CAMA PERMIT #:</b> n/a
<b>GARAGE:</b> STORAGE BLDG:	<b>INSULATION:</b>	<b>DATE ISSUED:</b>
<b>STORAGE ENCLOSURE:</b> POOL:	<b>ELEVATOR (SF):</b>	<b>SEPTIC PERMIT #:</b> n/a
<b>FLOOD ZONE:</b> Shaded X	<b>DECKS (SF):</b>	<b>DATE ISSUED:</b> 8/30/2018
<b>BASE FLOOD ELEVATION:</b> PLUS 2FT=	<b>PORCHES (SF):</b>	
	<b>WINDOWS MAKE:</b> Anderson	
	<b>TYPE:</b> double-hung	

\*\*\*The owner and builder are responsible for the following: All work done shall comply with the State Building Code and all other applicable State and local laws. The applicant certifies that the information on this permit is correct; that he/she is the owner or duly authorized agent of owner; that all construction shall be as shown on the submitted plans and specifications; the he/she understands this permit is valid for 180 days to begin construction and may be revoked for failure to comply with applicable regulations and laws.

<b>TOTAL CONSTRUCTION COST</b>	\$30,000		
<b>HEATED/LIVING AREA (sf)</b> (new square footage)		X .60/sf (single family) =	\$
		X .75/sf (all others) =	
<b>NON-HEATED AREA (sf)</b> (new square footage)	375	X .30/sf (single family) =	\$112.50
		X .35/sf (all others) =	
<b>REMODEL/REPAIR/ALTERATION</b> (no additional square footage)	\$	X \$10 per \$1,000 of cost =	\$
		Pool = \$125	\$
		Zoning Permit Fee = \$50	\$50.00
		Plan Review Fee = \$150 or \$100	\$
		Minimum Permit Fee = \$100	\$
		Homeowner's Recovery Fund \$10	\$
		<b>TOTAL FEE</b>	<b>\$162.50</b>

**Applicant - Owner/Contractor**  
*Buddy Shultor*  
**Building/Code/Zoning Official**

(Please print and sign name)

*J. D. S. Collins*

**Date Issued**

*8-31-18*

**Date Approved**