



Town of Kill Devil Hills

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

Planning and Inspection Department

BJ2018-197

PROJECT NAME: Joseph Foti and Amanda Jones
SITE ADDRESS: 1719 WYANDOTTE ST KILL DEVIL HILLS

BUILDING JOINT

ISSUED: 10/19/2018

EXPIRES: 11/15/2019

APPLICANT: Nelson, Ben/Southern Cottage Realty, Inc.
1706 Virginia Ave.
Kill Devil Hills, NC 27949
252-207-9837

OWNER: Foti, Joseph and Amanda Jones
1721 Wyandotte Street
Kill Devil Hills, NC 27948
252-573-8946

CONTRACTOR: Nelson, Ben/Southern Cottage Realty, Inc.
1706 Virginia Ave.
Kill Devil Hills, NC 27949
252-207-9837

License: 80428
Expires: 10/31/2019

PARCEL:

PIN: 988409261557 **Parcel Number:** 002691000

Address: 1719 WYANDOTTE ST KILL DEVIL HILLS

Addition: HIGH VIEW - HEDRICKS ADD

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

Legal Description:

FEES:	Paid	Due	BUILDING AREA:	
Covered Porch Residential	\$82.50	\$0.00	Covered Porches/Decks	110 SQFT
Res. Building Permit Fee	\$1,512.25	\$0.00	Residential Unheated (.40)	265 Sq. Ft
T-Pole	\$50.00	\$0.00	Residential Heated Space (.75)	1875 sq. Ft.
Totals :	\$1,644.75	\$0.00	# of Temporary Poles	1 EA

PROJECT DESCRIPTION: Proposed 4 bedroom single family dwelling

BJ2018-197

PROJECT NAME: Joseph Foti and Amanda Jones
SITE ADDRESS: 1719 WYANDOTTE ST KILL DEVIL HILLS

BUILDING JOINT

ISSUED: 10/19/2018

EXPIRES: 11/15/2019

DETAILS

Permit

Name	Value
ZONING DISTRICT	RL
FRONT YARD SETBACK	30
REAR YARD SETBACK	20% Depth >30
SIDE YARD SETBACK	8
HEALTH DEPARTMENT PERMIT #	28132
# PARKING SPACES/BEDROOM	4
CAMA PERMIT	N
CAMA EXEMPTION	N
FLOOD ZONE	X
PURPOSE	Residential New
CONSTRUCTION TYPE	V
CONSTRUCTION COST	190000.00
LOT COVERAGE	35.10
LIVING SPACE (SQFT)	1875
COVERED PORCHES/DECKS (SQFT)	110
GARAGE (SQFT)	265
TOTAL SQUARE FOOTAGE	2250
SURVEYOR NAME AND NUMBER	Styons Surveying Services
ENGINEER AND LICENSE NUMBER	MIKE OSTEEN 032628
ARCHITECT NAME AND LICENSE NUMBER	FLOREZ
CULVERT	N
ROLL OUT CAN	1
DRIVEWAY INVERT 2	Y
OCCUPANCY TYPE	One & Two Family Dwelling

BJ2018-197

PROJECT NAME: Joseph Foti and Amanda Jones
SITE ADDRESS: 1719 WYANDOTTE ST KILL DEVIL HILLS

BUILDING JOINT

ISSUED: 10/19/2018

EXPIRES: 11/15/2019

REQUIRED INSPECTIONS

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

CONDITIONS

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

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

Issued By: _____

Contractor or Authorized Agent: _____ Date: _____



Town of Kill Devil Hills

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

Planning and Inspection Department

BJ2018-199

PROJECT NAME: Ben and Emily Miller
SITE ADDRESS: 634 CANAL DR KILL DEVIL HILLS

BUILDING JOINT

ISSUED: 10/23/2018

EXPIRES: 10/24/2019

APPLICANT: James, Jason
PO Box 1771
nags head, nc 27959
252-599-2999

OWNER: Miller, Ben and Emily
1102 Suite G Cambridge Road
Kill Devil Hills, NC 27948
252-207-9395

CONTRACTOR: James, Jason
PO Box 1771
nags head, nc 27959
252-599-2999

License: 58406
Expires: 03/31/2019

PARCEL:

PIN: 988413240955

Parcel Number: 003365000

Address: 634 CANAL DR KILL DEVIL HILLS

Zoning:

Addition: FIRST FLIGHT VILLAGE SEC 1

Block: 0 Lot(s): 93

Legal Description:

FEES:	Paid	Due	BUILDING AREA:	
Open Deck Fee	\$150.00	\$0.00	Covered Porches/Decks	533 SQFT
Res. Building Permit Fee	\$1,814.80	\$0.00	Open Decks	1 EA
Covered Porch Residential	\$399.75	\$0.00	Residential Heated Space (.75)	2360 sq. Ft.
Totals :	\$2,364.55	\$0.00	Residential Unheated (.40)	112 Sq. Ft

PROJECT DESCRIPTION: Proposed 4 bedroom single family dwelling

BJ2018-199

PROJECT NAME: Ben and Emily Miller
 SITE ADDRESS: 634 CANAL DR KILL DEVIL HILLS

BUILDING JOINT

ISSUED: 10/23/2018

EXPIRES: 10/24/2019

DETAILS**Permit**

Name	Value
ZONING DISTRICT	RL
FRONT YARD SETBACK	30
REAR YARD SETBACK	20% Depth >30
SIDE YARD SETBACK	10
HEALTH DEPARTMENT PERMIT #	28150
# PARKING SPACES/BEDROOM	4
CAMA PERMIT	N
CAMA EXEMPTION	N
CONSTRUCTION COST	340000.00
LOT COVERAGE	34.20
SURVEYOR NAME AND NUMBER	Seaboard Surveying and Planning
CULVERT	Y
ROLL OUT CAN	1
DRIVEWAY INVERT 2	N

REQUIRED INSPECTIONS

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

CONDITIONS

- * This permit becomes null and void if work or construction authorized is not commenced within 6 months or if construction or work is suspended for a period of 12 months at any time after work has started.
- * NOTICE: Call Public Services Department (252) 480-4080 before pouring driveway!
- * Elevation Certificate will be required 21 days after establishment of the reference level in accordance with 151.41(C).
- * As-built survey will be required prior to Certificate of Occupancy or Certificate of Compliance.

BJ2018-199

PROJECT NAME: Ben and Emily Miller
SITE ADDRESS: 634 CANAL DR KILL DEVIL HILLS

BUILDING JOINT

ISSUED: 10/23/2018

EXPIRES: 10/24/2019

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

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Town of Kill Devil Hills

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Planning and Inspection Department

BJ2018-201	BUILDING JOINT
PROJECT NAME: ITAC 409 LLC	ISSUED: 10/25/2018
SITE ADDRESS: 802 AIRSTRIP RD W KILL DEVIL HILLS	EXPIRES: 11/14/2019

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

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

GENERAL, UNLIMITED:

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

License: 25529
Expires: 12/30/2018

PARCEL:

PIN:	988311750771	Parcel Number:	004587000
Address:	802 AIRSTRIP RD W KILL DEVIL HILLS		
Addition:	KILL DEVIL HILLS REALTY CORP	Zoning:	Block: 51 Lot(s): 5
Legal Description:			

FEES:	<u>Paid</u>	<u>Due</u>	BUILDING AREA:	
Res. Building Permit Fee	\$5,928.00	\$0.00	Residential Heated Space	7904 sq. Ft.
T-Pole	\$50.00	\$0.00	(.75)	
			# of Temporary Poles	1 EA
Totals :	\$5,978.00	\$0.00		

PROJECT DESCRIPTION: 6 Unit Townhome

BJ2018-201PROJECT NAME: ITAC 409 LLC
SITE ADDRESS: 802 AIRSTRIP RD W KILL DEVIL HILLS**BUILDING JOINT**

ISSUED: 10/25/2018

EXPIRES: 11/14/2019

DETAILS**Permit**

<u>Name</u>	<u>Value</u>
# OF DUMPSTERS	2.00
ZONING DISTRICT	LI-2
FRONT YARD SETBACK	30
REAR YARD SETBACK	30
SIDE YARD SETBACK	15
STREET SIDE SETBACK	15
HEALTH DEPARTMENT PERMIT #	28080
# PARKING SPACES/BEDROOM	18
CAMA PERMIT	N
CAMA EXEMPTION	N
FLOOD ZONE	X
PURPOSE	Residential New
CONSTRUCTION COST	938000.00
# OF UNITS	6
LOT COVERAGE	43.70
LIVING SPACE (SQFT)	7904
TOTAL SQUARE FOOTAGE	7904
SURVEYOR NAME AND NUMBER	Michael W Robinson 18894
ENGINEER AND LICENSE NUMBER	FEDERECK HOUSE 24740
CULVERT	N
DRIVEWAY INVERT 2	N
OCCUPANCY TYPE	One & Two Family Dwelling

BJ2018-201

PROJECT NAME: ITAC 409 LLC

SITE ADDRESS: 802 AIRSTRIP RD W KILL DEVIL HILLS

BUILDING JOINT

ISSUED: 10/25/2018

EXPIRES: 11/14/2019

REQUIRED INSPECTIONS

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

CONDITIONS

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

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

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Town of Kill Devil Hills

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Planning and Inspection Department

BJ2018-188 PROJECT NAME: 2031 SVDT LLC SITE ADDRESS: 2031 VA DARE TRL S KILL DEVIL HILLS	BUILDING JOINT ISSUED: 10/25/2018 EXPIRES: 11/16/2019
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APPLICANT: SAGA CONSTRUCTION 1314 S Croatan Hwy, Suite 301 PO Box 90 Kill Devil Hills, NC 27948 252-441-9003	OWNER: SAGA CONSTRUCTION 1314 S Croatan Hwy, Suite 301 PO Box 90 Kill Devil Hills, NC 27948 252-441-9003
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GENERAL BUILDING - LIMITED: SAGA CONSTRUCTION 1314 S Croatan Hwy, Suite 301 PO Box 90 Kill Devil Hills, NC 27948 252-441-9003	License: 62306 Expires: 12/30/2019
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PARCEL:

PIN: 989313231979	Parcel Number: 008505000
Address: 2031 VA DARE TRL S KILL DEVIL HILLS	
Addition: NAGS HEAD SHORES AMENDED SEC 4	Zoning: Block: 3 Lot(s): 7
Legal Description:	

FEES:	<u>Paid</u>	<u>Due</u>	BUILDING AREA:	
Covered Porch Residential	\$1,312.50	\$0.00	Covered Porches/Decks	1750 SQFT
Open Deck Fee	\$300.00	\$0.00	Open Decks	2 EA
Pool/Hot Tub	\$200.00	\$0.00	Residential Heated Space	8473 sq. Ft.
Res. Building Permit Fee	\$6,354.75	\$0.00	(.75)	
T-Pole	\$50.00	\$0.00	# of Temporary Poles	1 EA
Totals :	\$8,217.25	\$0.00		

PROJECT DESCRIPTION: Proposed 18 bedroom single family dwelling

BJ2018-188

PROJECT NAME: 2031 SVDT LLC

SITE ADDRESS: 2031 VA DARE TRL S KILL DEVIL HILLS

BUILDING JOINT

ISSUED: 10/25/2018

EXPIRES: 11/16/2019

DETAILS

Permit

Name	Value
# OF DUMPSTERS	1.00
ZONING DISTRICT	OIR
FRONT YARD SETBACK	30
REAR YARD SETBACK	CAMA
SIDE YARD SETBACK	10
# PARKING SPACES/BEDROOM	18
CAMA PERMIT	Y
CAMA EXEMPTION	N
FLOOD ZONE	AE
BASE FLOOD ELEVATION	11
Proposed First Floor Elevation	13.33
CONSTRUCTION COST	1100000.00
LIVING SPACE (SQFT)	8473
COVERED PORCHES/DECKS (SQFT)	1750
OPEN DECK (SQFT)	229
TOTAL SQUARE FOOTAGE	10452
SURVEYOR NAME AND NUMBER	Michael Robinson
ENGINEER AND LICENSE NUMBER	FREDRICK HOUSE 24740
CULVERT	N
DRIVEWAY INVERT 2	Y
OCCUPANCY TYPE	One & Two Family Dwelling

BJ2018-188

PROJECT NAME: 2031 SVDT LLC

SITE ADDRESS: 2031 VA DARE TRL S KILL DEVIL HILLS

BUILDING JOINT

ISSUED: 10/25/2018

EXPIRES: 11/16/2019

REQUIRED INSPECTIONS

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

CONDITIONS

- * NOTICE: Call Public Services Department (252) 480-4080 before pouring driveway!
- * This permit becomes null and void if work or construction authorized is not commenced within 6 months or if construction or work is suspended for a period of 12 months at any time after work has started.
- * Elevation Certificate will be required 21 days after establishment of the reference level in accordance with 151.41(C).
- * As-built survey will be required prior to Certificate of Occupancy or Certificate of Compliance.
- * The developer shall be responsible for maintaining erosion and sediment control at the disturbed area.
- * A final elevation certificate will be required prior to issuance of a Certificate of Occupancy or a Certificate of Compliance in accordance with 151.41(C).
- * THIS PROPERTY IS LOCATED IN A SPECIAL FLOOD HAZARD AREA.
 1. All Special Flood Hazard Areas limit the use of enclosures below the lowest floor for parking, building access and limited storage only.
 2. In the VE Zone, there shall be no alteration of the sand dunes which would increase potential flood damage.
 3. In the VE Zone, there shall be no fill used for structural support.
 4. Elevation Certificate will be required at time of application, 21 days from the establishment of the lowest floor and at construction completion.

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

- * Per §153.082(B)(1)(c) Mechanical equipment, including HVAC equipment and LP Gas equipment shall not project into a minimum yard setback more than four (4) feet.
- * Must comply with Wind Borne Debris requirements as defined in NCBC R301.2.1.2 and NCBC 1609.2.
- * Zoning Final Inspection is required.
- * Construction must meet all aspect of Chapter 153 Zoning including lot coverage and setbacks.
- * Proposed site plan states that it is for CAMA Submittal - Not for construction.
- * Showers cannot encroach on side yard setback.
- * Impact glass required at third and fourth levels per R301.2.1.2 of the 2012 NC Residential Building Code.

BJ2018-188

PROJECT NAME: 2031 SVDT LLC

SITE ADDRESS: 2031 VA DARE TRL S KILL DEVIL HILLS

BUILDING JOINT

ISSUED: 10/25/2018

EXPIRES: 11/16/2019

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

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Contractor or Authorized Agent: _____ Date: _____



Town of Kill Devil Hills

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Kill Devil Hills, NC 27948
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Planning and Inspection Department

004378001

BJ2018-187

PROJECT NAME: PRY Investments
SITE ADDRESS: 1003 Fox Street Kill Devil Hills

BUILDING JOINT

ISSUED: 10/16/2018

EXPIRES: 04/14/2019

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

OWNER: PRY Investments Inc.
116 Discovery Lane
WILLIAMSBURG, VA 23185
757-784-0936

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

License: 45367
Expires: 12/30/2018

PARCEL:

PIN: 988312873328

**Parcel
Number:**

Address: 1003 Fox Street Kill Devil Hills

Zoning:

Addition:

Block:

Lot(s):

Legal Description: Lot 9, Block 16, Kill Devil Hills Realty Corp. S/D

FEES:	Paid	Due	BUILDING AREA:	
Res. Building Permit Fee	\$1,578.50	\$0.00	Residential Heated Space	1838 sq. Ft.
Covered Porch Residential	\$168.00	\$0.00	(.75)	
			Covered Porches/Decks	224 SQFT
Totals :	\$1,746.50	\$0.00	Residential Unheated (.40)	500 Sq. Ft

PROJECT DESCRIPTION: Proposed 4 bedroom single family dwelling

OCT 16 2018

Town of Kill Devil Hills
Water Charges

PAID

Water Tap #: T23317

BJ2018-187

PROJECT NAME: PRY Investments
 SITE ADDRESS: 1003 Fox Street Kill Devil Hills

BUILDING JOINT

ISSUED: 10/16/2018

EXPIRES: 04/14/2019

DETAILS**Permit**

Name	Value
ZONING DISTRICT	RL
FRONT YARD SETBACK	30
REAR YARD SETBACK	20% Depth >30
SIDE YARD SETBACK	10
HEALTH DEPARTMENT PERMIT #	27510
# PARKING SPACES/BEDROOM	4
CAMA PERMIT	N
CAMA EXEMPTION	N
FLOOD ZONE	X
PURPOSE	Residential New
CONSTRUCTION TYPE	V
CONSTRUCTION COST	185000.00
LOT COVERAGE	23.39
LIVING SPACE (SQFT)	1838
COVERED PORCHES/DECKS (SQFT)	224
GARAGE (SQFT)	500
SURVEYOR NAME AND NUMBER	William S. Jones, Jr.
ENGINEER AND LICENSE NUMBER	Raymond Pate 13018
CULVERT	N
ROLL OUT CAN	1
DRIVEWAY INVERT 2	Y

REQUIRED INSPECTIONS

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

BJ2018-187

PROJECT NAME: PRY Investments
SITE ADDRESS: 1003 Fox Street Kill Devil Hills

BUILDING JOINT

ISSUED: 10/16/2018

EXPIRES: 04/14/2019

CONDITIONS

- * This permit becomes null and void if work or construction authorized is not commenced within 6 months or if construction or work is suspended for a period of 12 months at any time after work has started.
- * NOTICE: Call Public Services Department (252) 480-4080 before pouring driveway!
- * As-built survey will be required prior to Certificate of Occupancy or Certificate of Compliance.
- * Per §153.082(B)(1)(c) Mechanical equipment, including HVAC equipment and LP Gas equipment shall not project into a minimum yard setback more than four (4) feet.
- * The developer shall be responsible for maintaining erosion and sediment control at the disturbed area.
- * Must comply with Wind Borne Debris requirements as defined in NCBC R301.2.1.2 and NCBC 1609.2.
- * Construction must meet all aspect of Chapter 153 Zoning including lot coverage and setbacks.
- * Zoning Final Inspection is required.
- * Rear yard setback is 30' - not 28.22. Needs to correct it on foundation survey.

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

Issued By: _____

Contractor or Authorized Agent: _____ Date: 10/16/18



Town of Kill Devil Hills

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

Planning and Inspection Department

BJ2018-186

PROJECT NAME: C & T Contracting
SITE ADDRESS: 1005 FOX ST KILL DEVIL HILLS

BUILDING JOINT

ISSUED: 10/16/2018

EXPIRES: 09/28/2019

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

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

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

License: 45367
Expires: 12/30/2018

PARCEL:

PIN: 988312873362

Parcel Number: 004378000

Address: 1005 FOX ST KILL DEVIL HILLS

Zoning:

Addition: KILL DEVIL HILLS REALTY CORP

Block: 16 **Lot(s):** 8-9

Legal Description:

FEES:	Paid	Due	BUILDING AREA:	
Covered Porch Residential	\$168.00	\$0.00	Covered Porches/Decks	224 SQFT
Res. Building Permit Fee	\$1,369.50	\$0.00	Residential Heated Space	1826 sq. Ft.
T-Pole	\$50.00	\$0.00	(.75)	
			# of Temporary Poles	1 EA
Totals :	\$1,587.50	\$0.00		

PROJECT DESCRIPTION: Proposed 4 bedroom single family dwelling

PAID

OCT 16 2018

Town of Kill Devil Hills
Water Charges

PAID

Water Tap #

T23314

BJ2018-186PROJECT NAME: C & T Contracting
SITE ADDRESS: 1005 FOX ST KILL DEVIL HILLS**BUILDING JOINT**

ISSUED: 10/16/2018

EXPIRES: 09/28/2019

DETAILS**Permit**

Name	Value
ZONING DISTRICT	RL
FRONT YARD SETBACK	30
REAR YARD SETBACK	20% Depth >30
SIDE YARD SETBACK	10
STREET SIDE SETBACK	15
HEALTH DEPARTMENT PERMIT #	27509
# PARKING SPACES/BEDROOM	4
CAMA PERMIT	N
CAMA EXEMPTION	N
FLOOD ZONE	X
PURPOSE	Residential New
CONSTRUCTION TYPE	V
CONSTRUCTION COST	180000.00
LOT COVERAGE	23.39
LIVING SPACE (SQFT)	1826
COVERED PORCHES/DECKS (SQFT)	224
TOTAL SQUARE FOOTAGE	2050
SURVEYOR NAME AND NUMBER	William S. Jones
ENGINEER AND LICENSE NUMBER	Raymond Pate 13018
CULVERT	N
ROLL OUT CAN	1
DRIVEWAY INVERT 2	Y
OCCUPANCY TYPE	One & Two Family Dwelling

BJ2018-186

PROJECT NAME: C & T Contracting
SITE ADDRESS: 1005 FOX ST KILL DEVIL HILLS

BUILDING JOINT

ISSUED: 10/16/2018

EXPIRES: 09/28/2019

REQUIRED INSPECTIONS

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

CONDITIONS

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

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Issued By: _____

Contractor or Authorized Agent: _____ Date: 10/16/18



Town of Kill Devil Hills

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Planning and Inspection Department

BJ2018-193

PROJECT NAME: Johnny and Karin Ventura
SITE ADDRESS: 1611 WRIGHTSVILLE BLVD KILL DEVIL HILLS

BUILDING JOINT

ISSUED: 10/11/2018

EXPIRES: 04/09/2019

APPLICANT: William F. Gregory Inc.
493 A Okisko Road
ELIZABETH CITY, NC 27909
252-339-1356

OWNER: Ventura, Johnny and Karin
1376 Upriver Road
ELIZABETH CITY, NC 27909
252-207-2478

CONTRACTOR: William F. Gregory Inc.
493 A Okisko Road
ELIZABETH CITY, NC 27909
252-339-1356

License: 79129
Expires: 10/31/2019

PARCEL:

PIN: 989309056145

Parcel Number: 008259000

Address: 1611 WRIGHTSVILLE BLVD KILL DEVIL HILLS

Zoning:

Addition: OCEAN ACRES INC

Block: 0 **Lot(s):** 74-76

Legal Description:

FEES:	Paid	Due	BUILDING AREA:	
Covered Porch Residential	\$73.50	\$0.00	Covered Porches/Decks	98 SQFT
Res. Building Permit Fee	\$1,325.80	\$0.00	Residential Unheated (.40)	112 Sq. Ft
Open Deck Fee	\$300.00	\$0.00	Residential Heated Space (.75)	1708 sq. Ft.
Totals :	\$1,699.30	\$0.00	Open Decks	2 EA

PROJECT DESCRIPTION: Proposed 3 bedroom single family dwelling

Town of Kill Devil Hills
Water Charges

PAID

Water Tap #: T23318

PAID

OCT 12 2018

TOWN OF KILL DEVIL HILLS



Town of Kill Devil Hills

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

Planning and Inspection Department

BJ2018-195

PROJECT NAME: JB Sims Construction Co., Inc.
SITE ADDRESS: 810 CEDAR DR KILL DEVIL HILLS

BUILDING JOINT

ISSUED: 10/11/2018

EXPIRES: 04/09/2019

APPLICANT: JB Sims Construction Company Inc
262 Wax Myrtle Trail
Southern Shores, NC 27949
757-748-2150

OWNER: JB Sims Construction Company Inc
262 Wax Myrtle Trail
Southern Shores, NC 27949
757-748-2150

CONTRACTOR: JB Sims Construction Company Inc
262 Wax Myrtle Trail
Southern Shores, NC 27949
757-748-2150

License: 39307
Expires:

PARCEL:

PIN: 988413131265

Parcel Number: 027541000

Address: 810 CEDAR DR KILL DEVIL HILLS

Zoning:

Addition:

Block: 0 **Lot(s):** 145

Legal Description:

FEES:	Paid	Due	BUILDING AREA:	
Res. Building Permit Fee	\$1,974.40	\$0.00	Residential Heated Space	2304 sq. Ft.
Covered Porch Residential	\$366.00	\$0.00	(.75)	
			Residential Unheated (.40)	616 Sq. Ft
Totals :	\$2,340.40	\$0.00	Covered Porches/Decks	488 SQFT

PROJECT DESCRIPTION: Proposed 4 bedroom single family dwelling

Town of Kill Devil Hills
Water Charges

PAID

Water T. # 72315

PAID

OCT 11 2018

TOWN OF
KILL DEVIL HILLS



Town of Kill Devil Hills

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

PAID

OCT 10 2018

Planning and Inspection Department

004045901

TOWN OF
KILL DEVIL HILLS

BJ2018-162

PROJECT NAME: Water Oak Residential, LLC
SITE ADDRESS: 1200 First St. W. Kill Devil Hills

BUILDING JOINT

ISSUED: 10/01/2018

EXPIRES: 03/30/2019

APPLICANT: SAGA CONSTRUCTION
1314 S Croatan Hwy, Suite 301
PO Box 90
Kill Devil Hills, NC 27948
252-441-9003

OWNER: Water Oak Residential, LLC
PO Box 90
Kill Devil Hills, NC 27948
252-441-9003

GENERAL BUILDING - LIMITED: SAGA CONSTRUCTION
1314 S Croatan Hwy, Suite 301
PO Box 90
Kill Devil Hills, NC 27948
252-441-9003

License: 62306
Expires: 12/30/2019

PARCEL:

PIN: 988417126342

**Parcel
Number:**

Address: 1200 First St. W. Kill Devil Hills

Zoning:

Addition:

Block:

Lot(s):

Legal Description: Parcel A

FEES:	Paid	Due	BUILDING AREA:	
Open Deck Fee	\$150.00	\$0.00	Open Decks	1 EA
Pool/Hot Tub	\$200.00	\$0.00	Residential Unheated (.40)	440 Sq. Ft
Res. Building Permit Fee	\$1,826.75	\$0.00	Residential Heated Space	2201 sq. Ft.
T-Pole	\$50.00	\$0.00	(.75)	
Totals :	\$2,226.75	\$0.00	# of Temporary Poles	1 EA

PROJECT DESCRIPTION: Proposed 3 bedroom

Town of Kill Devil Hills
Water Charges

PAID

Water Tap #: T23313

BJ2018-162

PROJECT NAME: Water Oak Residential, LLC
SITE ADDRESS: 1200 First St. W. Kill Devil Hills

BUILDING JOINT

ISSUED: 10/01/2018

EXPIRES: 03/30/2019

DETAILS**Permit**

Name	Value
ZONING DISTRICT	RL
FRONT YARD SETBACK	30
REAR YARD SETBACK	20% Depth >30
SIDE YARD SETBACK	10
STREET SIDE SETBACK	15
HEALTH DEPARTMENT PERMIT #	27940
# PARKING SPACES/BEDROOM	3
CAMA PERMIT	N
CAMA EXEMPTION	N
FLOOD ZONE	AE
BASE FLOOD ELEVATION	9.0
Proposed First Floor Elevation	7.00
PURPOSE	Residential New
CONSTRUCTION TYPE	V
CONSTRUCTION COST	285000.00
LIVING SPACE (SQFT)	2201
GARAGE (SQFT)	440
OPEN DECK (SQFT)	250
TOTAL SQUARE FOOTAGE	2891
SURVEYOR NAME AND NUMBER	Michael Robinson
ENGINEER AND LICENSE NUMBER	MIKE OSTEEN 092628
CULVERT	N
ROLL OUT CAN	1
DRIVEWAY INVERT 2	Y
OCCUPANCY TYPE	One & Two Family Dwelling

BJ2018-162

PROJECT NAME: Water Oak Residential, LLC
SITE ADDRESS: 1200 First St. W. Kill Devil Hills

BUILDING JOINT

ISSUED: 10/01/2018

EXPIRES: 03/30/2019

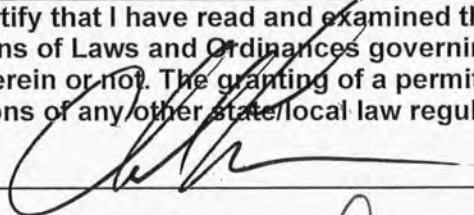
REQUIRED INSPECTIONS

T-Pole	Pre-final
Piling	Insulation
In-Slab Plumbing	Final
Slab/Foundation	Zoning Final
Sheathing	Pool Bonding
Rough In	

CONDITIONS

- * NOTICE: Call Public Services Department (252) 480-4080 before pouring driveway!
- * This permit becomes null and void if work or construction authorized is not commenced within 6 months or if construction or work is suspended for a period of 12 months at any time after work has started.
- * Elevation Certificate will be required 21 days after establishment of the reference level in accordance with 151.41(C).
- * As-built survey will be required prior to Certificate of Occupancy or Certificate of Compliance.
- * The developer shall be responsible for maintaining erosion and sediment control at the disturbed area.
- * A final elevation certificate will be required prior to issuance of a Certificate of Occupancy or a Certificate of Compliance in accordance with 151.41(C).
- * Development must meet all aspects of Chapter 151 Flood Damage Prevention Ordinance including use and elevation.
- * Per §153.082(B)(1)(c) Mechanical equipment, including HVAC equipment and LP Gas equipment shall not project into a minimum yard setback more than four (4) feet.
- * Must comply with Wind Borne Debris requirements as defined in NCBC R301.2.1.2 and NCBC 1609.2.
- * Construction must meet all aspect of Chapter 153 Zoning including lot coverage and setbacks.
- * Zoning Final Inspection is required.
- * Needs: non-conversion agreement, water tap location marked, new site plan with Parcel A - no future lots.
- * Site plan needs to show entire parcel - no future lots should be shown. The setbacks and lot coverage should be based on the entire parcel.

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

Issued By: 

Contractor or Authorized Agent: Gracefa Murck Date: 10.10.18



Town of Kill Devil Hills

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

PAID

OCT - 4 2018

Planning and Inspection Department

TOWN OF

BUILDING JOINT

ISSUED: 10/01/2018

EXPIRES: 03/30/2019

BJ2018-176

PROJECT NAME: 1108 NVDT LLC

SITE ADDRESS: 1108 North Virginia Dare Trail Kill Devil Hills

APPLICANT: SAGA CONSTRUCTION
1314 S Croatan Hwy, Suite 301
PO Box 90
Kill Devil Hills, NC 27948
252-441-9003

OWNER: 1110 NVDT LLC
PO BOX 90
Kill Devil Hills, NC 27948
252-441-9003

GENERAL BUILDING - LIMITED: SAGA CONSTRUCTION
1314 S Croatan Hwy, Suite 301
PO Box 90
Kill Devil Hills, NC 27948
252-441-9003

License: 62306
Expires: 12/30/2019

PARCEL:

PIN: 988415636811

Parcel Number:

003716000

Address: 1108 North Virginia Dare Trail Kill Devil Hills

Zoning:

Addition:

Block:

Lot(s):

Legal Description: Formerly part of Salem Ave., Kitty Hawk Shores Rev. Blk. 15

FEES:	Paid	Due	BUILDING AREA:	
Covered Porch Residential	\$592.50	\$0.00	Residential Unheated (.40)	38 Sq. Ft
Pool/Hot Tub	\$200.00	\$0.00	Covered Porches/Decks	790 SQFT
T-Pole	\$50.00	\$0.00	Residential Heated Space	4254 sq. Ft.
Pool/Hot Tub	\$200.00	\$0.00	(.75)	
Res. Building Permit Fee	\$3,205.70	\$0.00	# of Temporary Poles	1 EA
Totals :	\$4,248.20	\$0.00		

PROJECT DESCRIPTION: Proposed 6 bedroom single family dwelling

Water Charges

PAID

Water Tap #: T23312

BJ2018-176

PROJECT NAME: 1108 NVDT LLC

SITE ADDRESS: 1108 North Virginia Dare Trail Kill Devil Hills

BUILDING JOINT

ISSUED: 10/01/2018

EXPIRES: 03/30/2019

DETAILS**Permit**

Name	Value
ZONING DISTRICT	RL
FRONT YARD SETBACK	30
REAR YARD SETBACK	20% Depth >30
SIDE YARD SETBACK	8
HEALTH DEPARTMENT PERMIT #	KDHWWT
CAMA PERMIT	N
CAMA EXEMPTION	N
FLOOD ZONE	AE
BASE FLOOD ELEVATION	8
Proposed First Floor Elevation	9.20
PURPOSE	Residential New
CONSTRUCTION TYPE	V
CONSTRUCTION COST	500000.00
LOT COVERAGE	37.50
LIVING SPACE (SQFT)	4254
COVERED PORCHES/DECKS (SQFT)	790
ACCESSORY STRUCTURE (SQFT)	38
TOTAL SQUARE FOOTAGE	5082
SURVEYOR NAME AND NUMBER	Michael Robinson
ENGINEER AND LICENSE NUMBER	FREDERICK HOUSE 24740
CULVERT	N
ROLL OUT CAN	3
DRIVEWAY INVERT 2	Y
OCCUPANCY TYPE	One & Two Family Dwelling

BJ2018-176

PROJECT NAME: 1108 NVDT LLC

SITE ADDRESS: 1108 North Virginia Dare Trail Kill Devil Hills

BUILDING JOINT

ISSUED: 10/01/2018

EXPIRES: 03/30/2019

REQUIRED INSPECTIONS

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

CONDITIONS

- * NOTICE: Call Public Services Department (252) 480-4080 before pouring driveway!
- * This permit becomes null and void if work or construction authorized is not commenced within 6 months or if construction or work is suspended for a period of 12 months at any time after work has started.
- * Elevation Certificate will be required 21 days after establishment of the reference level in accordance with 151.41(C).
- * As-built survey will be required prior to Certificate of Occupancy or Certificate of Compliance.
- * The developer shall be responsible for maintaining erosion and sediment control at the disturbed area.
- * A final elevation certificate will be required prior to issuance of a Certificate of Occupancy or a Certificate of Compliance in accordance with 151.41(C).
- * Development must meet all aspects of Chapter 151 Flood Damage Prevention Ordinance including use and elevation.
- * Per §153.082(B)(1)(c) Mechanical equipment, including HVAC equipment and LP Gas equipment shall not project into a minimum yard setback more than four (4) feet.
- * Construction must meet all aspect of Chapter 153 Zoning including lot coverage and setbacks.
- * Must comply with Wind Borne Debris requirements as defined in NCBC R301.2.1.2 and NCBC 1609.2.
- * Zoning Final Inspection is required.
- * Impact resistant glass required at the second and loft floor levels.

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

Issued By: Marty Shaw

Contractor or Authorized Agent: Grace Muck Date: 10.4.18



Town of Kill Devil Hills

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

PAID

OCT - 4 2018

Planning and Inspection Department

BJ2018-179

PROJECT NAME: OBX Cottages, LLC
SITE ADDRESS: 523 West Eden Street Kill Devil Hills

BUILDING JOINT

ISSUED: 09/28/2018

EXPIRES: 03/27/2019

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

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

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

License: 67524
Expires: 12/30/2018

PARCEL:

PIN: 987520906288

Parcel Number:

0007 26009

Address: 523 West Eden Street Kill Devil Hills

Zoning:

Addition:

Block:

Lot(s):

Legal Description: Lot 9R, Block 74, Virginia Dare Shores S/D

FEES:	Paid	Due	BUILDING AREA:	
Covered Porch Residential	\$63.00	\$0.00	Covered Porches/Decks	84 SQFT
Open Deck Fee	\$150.00	\$0.00	Open Decks	1 EA
Res. Building Permit Fee	\$1,377.25	\$0.00	Residential Unheated (.40)	85 Sq. Ft
T-Pole	\$50.00	\$0.00	Residential Heated Space	1791 sq. Ft.
			(.75)	
Totals :	\$1,640.25	\$0.00	# of Temporary Poles	1 EA

PROJECT DESCRIPTION: Proposed 3 bedroom single family dwelling

Town of Kill Devil Hills
 Water Charges

PAID

Water Tap #: T.23314

BJ2018-179**PROJECT NAME:** OBX Cottages, LLC
SITE ADDRESS: 523 West Eden Street Kill Devil Hills**BUILDING JOINT****ISSUED:** 09/28/2018**EXPIRES:** 03/27/2019

DETAILS**Permit**

Name	Value
ZONING DISTRICT	RL
FRONT YARD SETBACK	15
REAR YARD SETBACK	20% Depth >30
SIDE YARD SETBACK	6
HEALTH DEPARTMENT PERMIT #	28069
# PARKING SPACES/BEDROOM	3
CAMA PERMIT	N
CAMA EXEMPTION	N
FLOOD ZONE	AE
BASE FLOOD ELEVATION	8.3
Proposed First Floor Elevation	6.73
PURPOSE	Residential New
CONSTRUCTION COST	180000.00
LOT COVERAGE	40.00
LIVING SPACE (SQFT)	1791
COVERED PORCHES/DECKS (SQFT)	84
STORAGE (SQFT)	85
OPEN DECK (SQFT)	128
TOTAL SQUARE FOOTAGE	2088
ENGINEER AND LICENSE NUMBER	MIKE OSTEEN 092628
CULVERT	N
ROLL OUT CAN	1
DRIVEWAY INVERT 2	Y
OCCUPANCY TYPE	One & Two Family Dwelling

BJ2018-179

PROJECT NAME: OBX Cottages, LLC
SITE ADDRESS: 523 West Eden Street Kill Devil Hills

BUILDING JOINT

ISSUED: 09/28/2018

EXPIRES: 03/27/2019

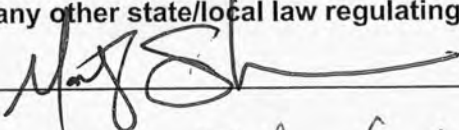
REQUIRED INSPECTIONS


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

CONDITIONS

- * NOTICE: Call Public Services Department (252) 480-4080 before pouring driveway!
- * This permit becomes null and void if work or construction authorized is not commenced within 6 months or if construction or work is suspended for a period of 12 months at any time after work has started.
- * Elevation Certificate will be required 21 days after establishment of the reference level in accordance with 151.41(C).
- * As-built survey will be required prior to Certificate of Occupancy or Certificate of Compliance.
- * A final elevation certificate will be required prior to issuance of a Certificate of Occupancy or a Certificate of Compliance in accordance with 151.41(C).
- * The developer shall be responsible for maintaining erosion and sediment control at the disturbed area.
- * Development must meet all aspects of Chapter 151 Flood Damage Prevention Ordinance including use and elevation.
- * Per §153.082(B)(1)(c) Mechanical equipment, including HVAC equipment and LP Gas equipment shall not project into a minimum yard setback more than four (4) feet.
- * Must comply with Wind Borne Debris requirements as defined in NCBC R301.2.1.2 and NCBC 1609.2.
- * Construction must meet all aspect of Chapter 153 Zoning including lot coverage and setbacks.
- * Zoning Final Inspection is required.
- * X-BRACING required as per 2012 NC Residential code R4603.6

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

Issued By: 

Contractor or Authorized Agent: 

Date: 10-4-18



Town of Kill Devil Hills

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

PAID

OCT - 3 2018

Planning and Inspection Department

TOWN OF
KILL DEVIL HILLS

BJ2018-189	BUILDING JOINT
PROJECT NAME: Stallings Storage	ISSUED: 09/28/2018
SITE ADDRESS: 904 NINTH AVE KILL DEVIL HILLS	EXPIRES: 03/27/2019

APPLICANT: COASTLINE REALTY & CONSTRUCTION LLC
281 Kilmarlic Club
Powels Point, NC 27966
305-8077

OWNER: Bodmer, Greg
7713 Pine St
MANASSAS, VA 20111

GENERAL, UNLIMITED:

COASTLINE REALTY & CONSTRUCTION LLC
281 Kilmarlic Club
Powels Point, NC 27966
305-8077

License: 62368
Expires: 12/31/2018

PARCEL:

PIN: 988311656909

Parcel Number: 004607000

Address: 904 NINTH AVE KILL DEVIL HILLS

Zoning:

Addition: KILL DEVIL HILLS REALTY CORP

Block: 55 **Lot(s):** 3

Legal Description:

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

PROJECT DESCRIPTION: Add additional storage inside of footprint

BJ2018-189

PROJECT NAME: Stallings Storage
SITE ADDRESS: 904 NINTH AVE KILL DEVIL HILLS

BUILDING JOINT

ISSUED: 09/28/2018

EXPIRES: 03/27/2019

DETAILS**Permit**

Name	Value
ZONING DISTRICT	RL
FRONT YARD SETBACK	30
REAR YARD SETBACK	20% Depth >30
SIDE YARD SETBACK	10
CAMA PERMIT	N
CAMA EXEMPTION	N
FLOOD ZONE	X
PURPOSE	Residential Accessory
CONSTRUCTION TYPE	V
CONSTRUCTION COST	10000.00
ACCESSORY STRUCTURE (SQFT)	196
CULVERT	N
DRIVEWAY INVERT 2	N

REQUIRED INSPECTIONS

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

CONDITIONS

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

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

BJ2018-189

PROJECT NAME: Stallings Storage
SITE ADDRESS: 904 NINTH AVE KILL DEVIL HILLS

BUILDING JOINT

ISSUED: 09/28/2018

EXPIRES: 03/27/2019

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

Issued By: _____

Contractor or Authorized Agent: _____

Date: _____



Town of Kill Devil Hills

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

PAID

OCT - 3 2018

Planning and Inspection Department

TOWN OF
KILL DEVIL HILLS

BJ2018-192

PROJECT NAME: VERIZON WIRELESS
SITE ADDRESS: ROW - 207 EAST BAUM ST Kill Devil Hills

BUILDING JOINT

ISSUED: 10/03/2018
EXPIRES: 04/01/2019

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

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

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

License: 0000000
Expires: 03/01/2024

PARCEL:

PIN: ROW-7022

**Parcel
Number:**

Address: ROW - 207 EAST BAUM ST Kill Devil Hills

Zoning:

Addition:

Block:

Lot(s):

Legal Description: ROW 207 E BAUM ST

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

PROJECT DESCRIPTION: INSTALL ANTENNA ON TOP OF EXISTING POLE

BJ2018-192

PROJECT NAME: VERIZON WIRELESS
SITE ADDRESS: ROW - 207 EAST BAUM ST Kill Devil Hills

BUILDING JOINT

ISSUED: 10/03/2018

EXPIRES: 04/01/2019

DETAILS

Permit

Name	Value
CAMA PERMIT	N
CAMA EXEMPTION	N
PURPOSE	Commercial New
CONSTRUCTION COST	10000.00
CULVERT	N
DRIVEWAY INVERT 2	N
OCCUPANCY TYPE	Business

REQUIRED INSPECTIONS

Final

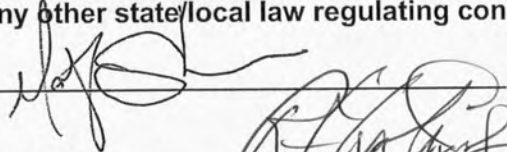
CONDITIONS

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

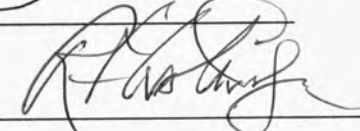
* NOTICE: Call Public Services Department (252) 480-4080 before pouring driveway!

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

Issued By: _____



Contractor or Authorized Agent: _____



Date: _____

10/3/18



Town of Kill Devil Hills

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

PAID

OCT - 8 2018

Planning and Inspection Department

TOWN OF
KILL DEVIL HILLS

BJ2018-198

PROJECT NAME: Branche water damage repair
SITE ADDRESS: 2802 RAYMOND AVE KILL DEVIL HILLS

BUILDING JOINT

ISSUED: 10/08/2018

EXPIRES: 04/06/2019

APPLICANT: SO NICE AGAIN
PO Box 253
kitty hawk, nc 27949
252-455-4328

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

BUILDING LIMITED: SO NICE AGAIN
PO Box 253
kitty hawk, nc 27949
252-455-4328

License: 79762
Expires: 12/31/2018

PARCEL:

PIN: 988513122536

Parcel Number: 000433023

Address: 2802 RAYMOND AVE KILL DEVIL HILLS

Zoning:

Addition: VIRGINIA DARE SHORES

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

Legal Description:

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

PROJECT DESCRIPTION: Repair water damage, includes insulation, plumbing, drywall etc

BJ2018-198

PROJECT NAME: Branche water damage repair
SITE ADDRESS: 2802 RAYMOND AVE KILL DEVIL HILLS

BUILDING JOINT

ISSUED: 10/08/2018

EXPIRES: 04/06/2019

DETAILS**Permit**

Name	Value
ZONING DISTRICT	C
FRONT YARD SETBACK	30
REAR YARD SETBACK	20% Depth >30
SIDE YARD SETBACK	8
CAMA PERMIT	N
CAMA EXEMPTION	N
FLOOD ZONE	AE
BASE FLOOD ELEVATION	9
PURPOSE	Residential Repair/Remodel
CONSTRUCTION COST	15000.00
CULVERT	N
DRIVEWAY INVERT 2	N

REQUIRED INSPECTIONS

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

CONDITIONS

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

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

BJ2018-198

PROJECT NAME: Branche water damage repair
SITE ADDRESS: 2802 RAYMOND AVE KILL DEVIL HILLS

BUILDING JOINT

ISSUED: 10/08/2018

EXPIRES: 04/06/2019

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

Issued By: _____

Contractor or Authorized Agent: _____

Paula Snyder 50 NICE AGAN Date: 10/8/18



Town of Kill Devil Hills

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

Planning and Inspection Department

BJ2018-206	BUILDING JOINT
PROJECT NAME: Liles Pool	ISSUED: 10/26/2018
SITE ADDRESS: 208 QUAIL LN KILL DEVIL HILLS	EXPIRES: 04/24/2019

APPLICANT: CARIBBEAN POOLS
3017 Martins Point Rd
kitty hawk, nc 27949
252-207-1773

OWNER: Liles, Charles
2724 Garnes Ave
CHESAPEAKE, VA 23323

CONTRACTOR: CARIBBEAN POOLS
3017 Martins Point Rd
kitty hawk, nc 27949
252-207-1773

License: LEGACY UNKNOWN
Expires: 12/31/2018

PARCEL:

PIN: 988316943815

Parcel Number: 005116000

Address: 208 QUAIL LN KILL DEVIL HILLS

Addition: WHISPERING PINES SEC 1

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

Legal Description:

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

PROJECT DESCRIPTION: Install inground pool

PAID

OCT 26 2018

TOWN OF
KILL DEVIL HILLS

BJ2018-206

PROJECT NAME: Liles Pool

SITE ADDRESS: 208 QUAIL LN KILL DEVIL HILLS

BUILDING JOINT

ISSUED: 10/26/2018

EXPIRES: 04/24/2019

DETAILS**Permit**

Name	Value
ZONING DISTRICT	RL
FRONT YARD SETBACK	30
REAR YARD SETBACK	20% Depth >30
SIDE YARD SETBACK	10
CAMA PERMIT	N
CAMA EXEMPTION	N
FLOOD ZONE	X
PURPOSE	Residential Accessory
CONSTRUCTION COST	32248.00
CULVERT	N
DRIVEWAY INVERT 2	N

REQUIRED INSPECTIONS

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

CONDITIONS

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

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

BJ2018-206

PROJECT NAME: Liles Pool

SITE ADDRESS: 208 QUAIL LN KILL DEVIL HILLS

BUILDING JOINT

ISSUED: 10/26/2018

EXPIRES: 04/24/2019

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

Issued By: _____

Contractor or Authorized Agent: _____

Date: 10-26-18



Town of Kill Devil Hills

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

Planning and Inspection Department

BJ2018-208

PROJECT NAME: Fernandez Music Room
SITE ADDRESS: 321 AYCOCK ST W KILL DEVIL HILLS

BUILDING JOINT

ISSUED: 10/29/2018

EXPIRES: 04/27/2019

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

OWNER: Jesse Fernandez
321 Aycock St.
Kill Devil Hills, NC 27948
267-5509

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

License: 60944
Expires:

PARCEL:

PIN: 988517015004

Parcel Number: 000601000

Address: 321 AYCOCK ST W KILL DEVIL HILLS

Addition: VIRGINIA DARE SHORES

Zoning:

Block: 47 **Lot(s):** 7-10

Legal Description:

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

PROJECT DESCRIPTION: Relocate aux. structure add HVAC and full bath

PAID

OCT 31 2018

TOWN OF
KILL DEVIL HILLS

BJ2018-208

PROJECT NAME: Fernandez Music Room
SITE ADDRESS: 321 AYCOCK ST W KILL DEVIL HILLS

BUILDING JOINT

ISSUED: 10/29/2018

EXPIRES: 04/27/2019

DETAILS**Permit**

Name	Value
ZONING DISTRICT	RL
FRONT YARD SETBACK	30
REAR YARD SETBACK	20% Depth >30
SIDE YARD SETBACK	10
CAMA PERMIT	N
CAMA EXEMPTION	N
FLOOD ZONE	AE
BASE FLOOD ELEVATION	8
PURPOSE	Residential Accessory
CONSTRUCTION COST	16000.00
CULVERT	N
DRIVEWAY INVERT 2	N

REQUIRED INSPECTIONS

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

CONDITIONS

- * This permit becomes null and void if work or construction authorized is not commenced within 6 months or if construction or work is suspended for a period of 12 months at any time after work has started.
- * As-built survey will be required prior to Certificate of Occupancy or Certificate of Compliance.
- * Construction must meet all aspect of Chapter 153 Zoning including lot coverage and setbacks.
- * A final elevation certificate will be required prior to issuance of a Certificate of Occupancy or a Certificate of Compliance in accordance with 151.41(C).
- * Development must meet all aspects of Chapter 151 Flood Damage Prevention Ordinance including use and elevation.

BJ2018-208

PROJECT NAME: Fernandez Music Room
SITE ADDRESS: 321 AYCOCK ST W KILL DEVIL HILLS

BUILDING JOINT

ISSUED: 10/29/2018

EXPIRES: 04/27/2019

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

Issued By: _____

Contractor or Authorized Agent: _____

Date: 10/31/18



Town of Kill Devil Hills

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

PAID

OCT 18 2018

Planning and Inspection Department

TOWN OF
KILL DEVIL HILLS

BJ2018-174

PROJECT NAME:

SITE ADDRESS: 802 CLAM SHELL DR KILL DEVIL HILLS

BUILDING JOINT

ISSUED: 09/18/2018

EXPIRES: 03/17/2019

APPLICANT: STANLEY AKINS
3 Fisher's Landing
Newport News, VA 23606
757-930-1716

OWNER: STANLEY AKINS
3 Fisher's Landing
Newport News, VA 23606
757-930-1716

GENERAL BUILDING-LIMITED: PHOENIX RESTORATION
UNKNOWN
UNKNOWN, XX 00000
480-1044

License: 41630
Expires: 12/30/2018

PARCEL:

PIN: 988409172277

Parcel Number: 012356000

Address: 802 CLAM SHELL DR KILL DEVIL HILLS

Addition: SEA HOLLY RIDGE

Zoning:
Block: A **Lot(s):** 11

Legal Description:

FEES:	<u>Paid</u>	<u>Due</u>	BUILDING AREA:	
Renovation/Remodel/Relocate	\$272.70	\$0.00	Remodel/Renovation	606 SQFT
Totals :	\$272.70	\$0.00		

PROJECT DESCRIPTION: Water damage repairs to unpermitted living space under house. Asbuilt survey and 4 parking spaces required. Not approved for duplex use. No cooking appliances approved.

BJ2018-174

PROJECT NAME:

SITE ADDRESS: 802 CLAM SHELL DR KILL DEVIL HILLS

BUILDING JOINT

ISSUED: 09/18/2018

EXPIRES: 03/17/2019

DETAILS**Permit**

Name	Value
ZONING DISTRICT	RL
FRONT YARD SETBACK	30
REAR YARD SETBACK	20% Depth >30
SIDE YARD SETBACK	8
HEALTH DEPARTMENT PERMIT #	11344
CAMA PERMIT	N
CAMA EXEMPTION	N
FLOOD ZONE	X
PURPOSE	Residential Repair/Remodel
CONSTRUCTION TYPE	V
CONSTRUCTION COST	27000.00
# OF UNITS	1
TOTAL SQUARE FOOTAGE	606
SURVEYOR NAME AND NUMBER	W. Jones L-2532
CULVERT	N
DRIVEWAY INVERT 2	N
OCCUPANCY TYPE	One & Two Family Dwelling

REQUIRED INSPECTIONS

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

CONDITIONS

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

BJ2018-174

PROJECT NAME:

SITE ADDRESS: 802 CLAM SHELL DR KILL DEVIL HILLS

BUILDING JOINT

ISSUED: 09/18/2018

EXPIRES: 03/17/2019

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

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

Issued By: _____

Contractor or Authorized Agent: _____

Date: _____

10/18/18



Town of Kill Devil Hills

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

Planning and Inspection Department

BJ2018-200

PROJECT NAME: THOMAS REPAIRS
SITE ADDRESS: 1728A BAY DR KILL DEVIL HILLS

BUILDING JOINT

ISSUED: 10/16/2018

EXPIRES: 04/14/2019

APPLICANT: RYAN, THOMAS JOSEPH JR
P O BOX 44
NAGS HEAD, NC 27959

OWNER: RYAN, THOMAS JOSEPH JR
P O BOX 44
NAGS HEAD, NC 27959

BUILDING LIMITED:

SO NICE AGAIN
PO Box 253
kitty hawk, nc 27949
252-455-4328

License: 79762
Expires: 12/31/2018

PARCEL:

PIN: 98840905359801

Parcel Number: 002548001

Address: 1728A BAY DR KILL DEVIL HILLS

Zoning:

Addition: CROATAN SHORES INC SEC 1

Block: 21 Lot(s): UT 1728A

Legal Description:

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

PROJECT DESCRIPTION: REPAIR FROM BROKEN WATER PIPE

PAID

OCT 16 2018

TOWN OF
KILL DEVIL HILLS

BJ2018-200

PROJECT NAME: THOMAS REPAIRS

SITE ADDRESS: 1728A BAY DR KILL DEVIL HILLS

BUILDING JOINT

ISSUED: 10/16/2018

EXPIRES: 04/14/2019

DETAILS

Permit

Name	Value
ZONING DISTRICT	RL
CAMA PERMIT	N
CAMA EXEMPTION	N
FLOOD ZONE	AE
BASE FLOOD ELEVATION	9
PURPOSE	Residential Repair/Remodel
CONSTRUCTION COST	30908.27
CULVERT	N
DRIVEWAY INVERT 2	N
OCCUPANCY TYPE	One & Two Family Dwelling

REQUIRED INSPECTIONS

Rough In
Insulation

Final

CONDITIONS

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

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

Issued By: _____

Contractor or Authorized Agent: Paula Snyder 50 Nice Again Date: 10/16/18



Town of Kill Devil Hills

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

Planning and Inspection Department

BJ2018-196	BUILDING JOINT
PROJECT NAME: Dough Windows & HVAC	ISSUED: 10/08/2018
SITE ADDRESS: 1508 Monument Ln Kill Devil Hills	EXPIRES: 04/06/2019

APPLICANT: PHOENIX RESTORATION 601 W Fresh Pond Dr. Kill Devil Hills, NC 27948 480-1044	OWNER: Dough, Cindy 1508 Monument Ln Kill Devil Hills, NC 27948
---	--

GENERAL BUILDING-LIMITED: PHOENIX RESTORATION 601 W Fresh Pond Dr. Kill Devil Hills, NC 27948 480-1044	License: 58038 Expires: 12/30/2018
--	---

PARCEL:

PIN: 003391001	Parcel Number:
Address: 1508 Monument Ln Kill Devil Hills	Zoning:
Addition:	Block: Lot(s):
Legal Description: Pin#: 988414343554	

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

PROJECT DESCRIPTION: C/O HVAC system and replace windows on upper level.

PAID

OCT 16 2018

TOWN OF
KILL DEVIL HILLS

BJ2018-196

PROJECT NAME: Dough Windows & HVAC
SITE ADDRESS: 1508 Monument Ln Kill Devil Hills

BUILDING JOINT**ISSUED:** 10/08/2018**EXPIRES:** 04/06/2019

DETAILS**Permit**

Name	Value
ZONING DISTRICT	RL
FRONT YARD SETBACK	30
REAR YARD SETBACK	20% Depth >30
SIDE YARD SETBACK	10
CAMA PERMIT	N
CAMA EXEMPTION	N
FLOOD ZONE	AE
BASE FLOOD ELEVATION	8
PURPOSE	Residential Repair/Remodel
CONSTRUCTION COST	13000.00
CULVERT	N
DRIVEWAY INVERT 2	N

REQUIRED INSPECTIONS

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

CONDITIONS

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

BJ2018-196

PROJECT NAME: Dough Windows & HVAC
SITE ADDRESS: 1508 Monument Ln Kill Devil Hills

BUILDING JOINT

ISSUED: 10/08/2018

EXPIRES: 04/06/2019

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

Issued By: _____

Contractor or Authorized Agent: _____

Date: 10/16/2018



Town of Kill Devil Hills

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

Planning and Inspection Department

BJ2018-119

PROJECT NAME: HADDON HOMES POOL
SITE ADDRESS: 1424 SHAY ST KILL DEVIL HILLS

BUILDING JOINT

ISSUED: 06/11/2018

EXPIRES: 12/08/2018

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

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

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

License: 55566
Expires: 01/05/2019

PARCEL:

PIN: 988316749087

Parcel Number: 004890302

Address: 1424 SHAY ST KILL DEVIL HILLS

Zoning:

Addition: WHISPERING PINES SEC 2 & 3

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

Legal Description:

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

PROJECT DESCRIPTION: INSTALL IN GROUND POOL WITH 47'X38' CONC POOL DECK & POOL BARRIER.

PAID

OCT 16 2018

BJ2018-119

PROJECT NAME: HADDON HOMES POOL
SITE ADDRESS: 1424 SHAY ST KILL DEVIL HILLS

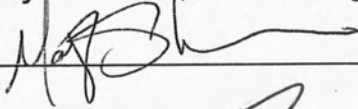
BUILDING JOINT

ISSUED: 06/11/2018

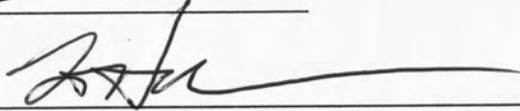
EXPIRES: 12/08/2018

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Issued By: _____



Contractor or Authorized Agent: _____



Date: _____

10/16/2018



Town of Kill Devil Hills

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

PAID

OCT - 2 2018

Planning and Inspection Department

TOWN OF
KILL DEVIL HILLS

BP2018-179

PROJECT NAME: Argaman Storage Area Floor
SITE ADDRESS: 707 FOX ST KILL DEVIL HILLS

BUILDING

ISSUED: 10/01/2018
EXPIRES: 03/30/2019

APPLICANT: ARGAMAN, JUDAH Y
P O BOX 2103
KITTY HAWK, NC 27949
252-982-6850

OWNER: ARGAMAN, JUDAH Y
P O BOX 2103
KITTY HAWK, NC 27949
252-982-6850

GENERAL: Self
UNKNOWN
UNKNOWN, XX 00000

License: Unlicensed
Expires: 12/31/2020

PARCEL:

PIN: 988308788306

Parcel Number: 004357000

Address: 707 FOX ST KILL DEVIL HILLS

Addition: KILL DEVIL HILLS REALTY CORP

Zoning:
Block: 13 Lot(s): 5

Legal Description:

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

PROJECT DESCRIPTION: Raise floor in existing ground floor unconditioned storage area.

BP2018-179

PROJECT NAME: Argaman Storage Area Floor
SITE ADDRESS: 707 FOX ST KILL DEVIL HILLS

BUILDING

ISSUED: 10/01/2018

EXPIRES: 03/30/2019

DETAILS

Permit

Name	Value
CAMA PERMIT	N
CAMA EXEMPTION	N
ZONING DISTRICT	RL
PURPOSE	Residential Repair/Remodel
FRONT YARD SETBACK	30
SIDE YARD SETBACK	10
REAR YARD SETBACK	20% Depth >30
STREET SIDE SETBACK	15
FLOOD ZONE	AE
BASE FLOOD ELEVATION	9
FINAL ELEVATION CERTIFICATE	N
CONSTRUCTION COST	3000.00

REQUIRED INSPECTIONS

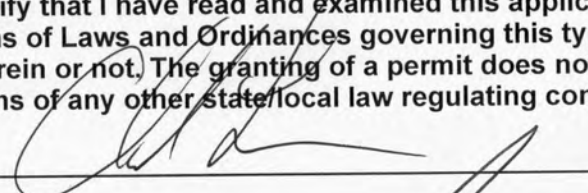
Zoning Final

Final

CONDITIONS

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

Issued By: 

Contractor or Authorized Agent: 

Date: 10-02-18



Town of Kill Devil Hills

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

PAID

OCT - 2 2018

Planning and Inspection Department

TOWN OF
KILL DEVIL HILLS

OP2018-057

PROJECT NAME: Suzanne Stallings
SITE ADDRESS: 2008 CROATAN HWY N KILL DEVIL HILLS

OCCUPANCY

ISSUED: 10/01/2018

EXPIRES:

PARENT PERMIT #: BJ2018-089

APPLICANT: Dennis Bright Contracting, LLC
1261 Florida Road
Elizabeth City, NC 27909
252-330-2021

OWNER: Stallings, Suzanne
417 Selden Street
ELIZABETH CITY, NC 27909
252-333-7174

GENERAL BUILDING-INTERMEDIATE: Dennis Bright Contracting, LLC
1261 Florida Road
Elizabeth City, NC 27909
252-330-2021

License: 58012
Expires: 01/01/2019

PARCEL:

PIN: 988406295400

Parcel Number: 001299000

Address: 2008 CROATAN HWY N KILL DEVIL HILLS

Addition: AVALON BEACH ANNEX 2 & 3

Zoning:

Block: 0 **Lot(s):** 533

Legal Description:

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

PROJECT DESCRIPTION: Proposed 3 bedroom single family dwelling

OP2018-057

PROJECT NAME: Suzanne Stallings
SITE ADDRESS: 2008 CROATAN HWY N KILL DEVIL HILLS

OCCUPANCY

ISSUED: 10/01/2018

EXPIRES:

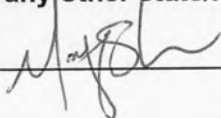
DETAILS

Permit

Name	Value
# OF TRASH CANS	1
PURPOSE	Residential New
ZONING DISTRICT	RL
FLOOD ZONE	AE
BASE FLOOD ELEVATION	9
OCCUPANCY TYPE	One & Two Family Dwelling

CONDITIONS

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Issued By: 

Contractor or Authorized Agent: 

Date: 10-2-18



Town of Kill Devil Hills

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

PAID

OCT - 2 2018

Planning and Inspection Department

TOWN OF
KILL DEVIL HILLS

BP2018-178

PROJECT NAME: Huddleston Deck
SITE ADDRESS: 110 SPORTSMAN DR E KILL DEVIL HILLS

BUILDING

ISSUED: 10/01/2018
EXPIRES: 03/30/2019

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

OWNER: Huddleston, Henry
137 Nautical Lane
currituck, nc 27929

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

License: 45367
Expires: 12/30/2018

PARCEL:

PIN: 988517211016

Parcel Number: 001718000

Address: 110 SPORTSMAN DR E KILL DEVIL HILLS

Addition: AVALON BEACH

Zoning:

Block: 0 **Lot(s):** 66

Legal Description:

FEES:	Paid	Due	BUILDING AREA:	
Covered Porch Residential	\$156.00	\$0.00	Covered Porches/Decks	208 SQFT
Totals :	\$156.00	\$0.00		

PROJECT DESCRIPTION: Add mid level deck on existing pilings, convert window to door.

BP2018-178PROJECT NAME: Huddleston Deck
SITE ADDRESS: 110 SPORTSMAN DR E KILL DEVIL HILLS**BUILDING**

ISSUED: 10/01/2018

EXPIRES: 03/30/2019

DETAILS**Permit**

Name	Value
CAMA PERMIT	N
CAMA EXEMPTION	N
ZONING DISTRICT	RL
PURPOSE	Residential Repair/Remodel
FRONT YARD SETBACK	30
SIDE YARD SETBACK	8
REAR YARD SETBACK	20% Depth >30
FLOOD ZONE	AE
BASE FLOOD ELEVATION	9
FINAL ELEVATION CERTIFICATE	N
CONSTRUCTION COST	10000.00
COVERED PORCHES/DECKS (SQFT)	208
CONSTRUCTION TYPE	V

REQUIRED INSPECTIONS

Zoning Final

Final

CONDITIONS

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Issued By: _____

Contractor or Authorized Agent: _____ Date: 10/2/18



Town of Kill Devil Hills

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

PAID

OCT - 5 2018

TOWN OF
KILL DEVIL HILLS

Planning and Inspection Department

BP2018-181

PROJECT NAME: Harris remodel
SITE ADDRESS: 303 AYCOCK ST W KILL DEVIL HILLS

BUILDING

ISSUED: 10/05/2018

EXPIRES: 04/03/2019

APPLICANT: GRANT CONSTRUCTION
165 Dr. Newbern Rd
Powels Point, NC 27966
252-207-2833

OWNER: HARRIS, PATRICIA C
9618 Baypoint Dr.
NORFOLK, VA 23518
757-287-2180

GENERAL: GRANT CONSTRUCTION
165 Dr. Newbern Rd
Powels Point, NC 27966
252-207-2833

License: 36195
Expires: 12/31/2018

PARCEL:

PIN: 988517017147

Parcel Number: 000604000

Address: 303 AYCOCK ST W KILL DEVIL HILLS

Addition: VIRGINIA DARE SHORES

Zoning:
Block: 47 **Lot(s):** 19-20

Legal Description:

FEES:	Paid	Due	BUILDING AREA:
Renovation/Remodel/Relocate	\$345.60	\$0.00	Remodel/Renovation 768 SQFT
Totals :	\$345.60	\$0.00	

PROJECT DESCRIPTION: Install new windows and cabinets, update interior of cottage. Repair/replace decking and steps as needed.

BP2018-181

PROJECT NAME: Harris remodel

SITE ADDRESS: 303 AYCOCK ST W KILL DEVIL HILLS

BUILDING

ISSUED: 10/05/2018

EXPIRES: 04/03/2019

DETAILS**Permit**

Name	Value
CAMA PERMIT	N
CAMA EXEMPTION	N
ZONING DISTRICT	RL
PURPOSE	Residential Repair/Remodel
FRONT YARD SETBACK	30
SIDE YARD SETBACK	8
REAR YARD SETBACK	20% Depth >30
FLOOD ZONE	AE
BASE FLOOD ELEVATION	8
FINAL ELEVATION CERTIFICATE	N
CONSTRUCTION COST	25000.00

REQUIRED INSPECTIONS

Zoning Final

Final

CONDITIONS

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

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

Issued By: _____

Contractor or Authorized Agent: _____

Date: _____



Town of Kill Devil Hills

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

OCT - 8 2018

TOWN OF
KILL DEVIL HILLS

Planning and Inspection Department

BP2018-182

PROJECT NAME: Krueger Windows
SITE ADDRESS: 1911 VA DARE TRL N KILL DEVIL HILLS

BUILDING

ISSUED: 10/08/2018

EXPIRES: 04/06/2019

APPLICANT: Simmons, Samantha
1239 Revere Drive
Chalfont, PA 18914
443-709-9356

OWNER: KRUEGER, C NORMAN
10204 Ruffian Ln
BERLIN, MD 21811
443-397-5822

BUILDING-UNLIMITED: Home Depot
1500 Caton Centre Dr.
HALETHORPE, MD 21227
717-650-2112

License: 31521
Expires: 12/31/2018

PARCEL:

PIN: 988406491264

Parcel Number: 002815000

Address: 1911 VA DARE TRL N KILL DEVIL HILLS

Zoning:

Addition: Croatan Shores Amended

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

Legal Description:

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

PROJECT DESCRIPTION: Replace 2 windows with vinyl StormBreaker windows

BP2018-182PROJECT NAME: Krueger Windows
SITE ADDRESS: 1911 VA DARE TRL N KILL DEVIL HILLS**BUILDING**

ISSUED: 10/08/2018

EXPIRES: 04/06/2019

DETAILS**Permit**

Name	Value
CAMA PERMIT	N
CAMA EXEMPTION	N
ZONING DISTRICT	OIR
PURPOSE	Residential Repair/Remodel
FRONT YARD SETBACK	30
SIDE YARD SETBACK	10
REAR YARD SETBACK	CAMA
FLOOD ZONE	VE
BASE FLOOD ELEVATION	12
FINAL ELEVATION CERTIFICATE	N
CONSTRUCTION COST	2926.00

REQUIRED INSPECTIONS

Zoning Final

Final

CONDITIONS

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

Issued By: _____

Contractor or Authorized Agent: _____ Date: 10-8-18



Town of Kill Devil Hills

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

PAID

OCT - 9 2018

Planning and Inspection Department

TOWN OF
KILL DEVIL HILLS

BP2018-183

PROJECT NAME: Blankenship Crawlspace
SITE ADDRESS: 1306 WRIGHTSVILLE BLVD KILL DEVIL HILLS

BUILDING JOINT

ISSUED: 10/09/2018

EXPIRES: 04/07/2019

APPLICANT: Blankenship, Randall
84 Cumberland Ave
NEW CASTLE, VA 24127
540-266-4420

OWNER: Blankenship, Randall
84 Cumberland Ave
NEW CASTLE, VA 24127
540-266-4420

CONTRACTOR: JOE HANTON
121 White Acres DR
JARVISBURG, NC 27947
252-207-3553

UNLICENSED BUILDER: JOE HANTON
121 White Acres DR
JARVISBURG, NC 27947
252-207-3553

License: unlicensed
Expires: 12/01/2020

PARCEL:

PIN: 988312968196

Parcel Number: 004751000

Address: 1306 WRIGHTSVILLE BLVD KILL DEVIL HILLS

Zoning:

Addition: KILL DEVIL BEACH SEC 1 REVISED

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

Legal Description:

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

PROJECT DESCRIPTION: Enclose 16'x24' under existing SFD for crawlspace, includes light and light switch.

BP2018-183

PROJECT NAME: Blankenship Crawlspace
 SITE ADDRESS: 1306 WRIGHTSVILLE BLVD KILL DEVIL HILLS

BUILDING JOINT

ISSUED: 10/09/2018

EXPIRES: 04/07/2019

DETAILS**Permit**

Name	Value
CAMA PERMIT	N
CAMA EXEMPTION	N
ZONING DISTRICT	C
PURPOSE	Residential Repair/Remodel
FRONT YARD SETBACK	30
SIDE YARD SETBACK	8
REAR YARD SETBACK	20% Depth >30
FLOOD ZONE	AE
BASE FLOOD ELEVATION	9
FINAL ELEVATION CERTIFICATE	N
CONSTRUCTION COST	5000.00
LOT COVERAGE	32.19
CONSTRUCTION TYPE	V
SURVEYOR NAME AND NUMBER	Gloria J. Rogers L-3531
OCCUPANCY TYPE	One & Two Family Dwelling

REQUIRED INSPECTIONS

Zoning Final

Final

CONDITIONS

- * This permit becomes null and void if work or construction authorized is not commenced within 6 months or if construction or work is suspended for a period of 12 months at any time after work has started.
- * Development must meet all aspects of Chapter 151 Flood Damage Prevention Ordinance including use and elevation.
- * A final elevation certificate will be required prior to issuance of a Certificate of Occupancy or a Certificate of Compliance in accordance with 151.41(C).
- * Light and light switch required if using a hinged entry door.

BP2018-183

PROJECT NAME: Blankenship Crawlspace
SITE ADDRESS: 1306 WRIGHTSVILLE BLVD KILL DEVIL HILLS

BUILDING JOINT

ISSUED: 10/09/2018

EXPIRES: 04/07/2019

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

Issued By: _____

Contractor or Authorized Agent: Joe Rats Date: 10-9-18



Town of Kill Devil Hills

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

Planning and Inspection Department

BP2018-184

PROJECT NAME: LETH PILING REPAIR
SITE ADDRESS: 511 ARMSTRONG CT KILL DEVIL HILLS

BUILDING

ISSUED: 10/09/2018

EXPIRES: 04/07/2019

APPLICANT: LETH, ISOBEL
511 Armstrong CT
Kill Devil Hills, NC 27948
252-480-6668

OWNER: LETH, ISOBEL
511 Armstrong CT
Kill Devil Hills, NC 27948
252-480-6668

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

License: 79801
Expires: 06/14/2019

PARCEL:

PIN: 988405187274

Parcel Number: 002101000

Address: 511 ARMSTRONG CT KILL DEVIL HILLS

Addition: WRIGHT'S SHORES

Zoning:

Block: 0 **Lot(s):** 139-140

Legal Description:

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

PROJECT DESCRIPTION: INSTALL 6 SISTER PILINGS

PAID

OCT 10 2018

TOWN OF
KILL DEVIL HILLS

BP2018-184PROJECT NAME: LETH PILING REPAIR
SITE ADDRESS: 511 ARMSTRONG CT KILL DEVIL HILLS**BUILDING**

ISSUED: 10/09/2018

EXPIRES: 04/07/2019

DETAILS**Permit**

Name	Value
CAMA PERMIT	N
CAMA EXEMPTION	N
ZONING DISTRICT	RL
PURPOSE	Residential Repair/Remodel
FLOOD ZONE	X
FINAL ELEVATION CERTIFICATE	N
CONSTRUCTION COST	3700.00
CONSTRUCTION TYPE	V
OCCUPANCY TYPE	One & Two Family Dwelling

REQUIRED INSPECTIONS

Final

Piling

CONDITIONS

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Issued By: _____

Contractor or Authorized Agent: _____

Date: 10/10/18



Town of Kill Devil Hills

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

Planning and Inspection Department

BP2018-190	BUILDING
PROJECT NAME:	ISSUED: 10/24/2018
SITE ADDRESS: 2039 YORKTOWN KILL DEVIL HILLS	EXPIRES: 04/22/2019

APPLICANT: CARTER, MIKE & PHYLLIS
2039 YORKTOWN ST
Kill Devil Hills, NC 27948

OWNER: CARTER, MIKE & PHYLLIS
2039 YORKTOWN ST
Kill Devil Hills, NC 27948

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

License: 67524
Expires: 12/30/2018

PARCEL:

PIN: 988405099500

Parcel Number: 001476000

Address: 2039 YORKTOWN KILL DEVIL HILLS

Zoning:

Addition: AVALON BEACH ANNEX 2 & 3

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

Legal Description:

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

PROJECT DESCRIPTION: Repair/replace 2 pilings & girder.

PAID

OCT 23 2018

TOWN OF
KILL DEVIL HILLS

BP2018-190

PROJECT NAME:

SITE ADDRESS: 2039 YORKTOWN KILL DEVIL HILLS

BUILDING

ISSUED: 10/24/2018

EXPIRES: 04/22/2019

DETAILS**Permit**

Name	Value
CAMA PERMIT	N
CAMA EXEMPTION	N
ZONING DISTRICT	RL
PURPOSE	Residential Repair/Remodel
FLOOD ZONE	AE
BASE FLOOD ELEVATION	8
FINAL ELEVATION CERTIFICATE	N
CONSTRUCTION COST	5000.00
CONSTRUCTION TYPE	V
OCCUPANCY TYPE	One & Two Family Dwelling

REQUIRED INSPECTIONS

Final

Piling

CONDITIONS

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Issued By: Contractor or Authorized Agent:  Date: 10-24-18



Town of Kill Devil Hills

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

PAID

OCT 25 2018

TOWN OF
KILL DEVIL HILLS

Planning and Inspection Department

BP2018-188

PROJECT NAME: Widgeon Pilings
SITE ADDRESS: 1705 WRIGHTSVILLE BLVD KILL DEVIL HILLS

BUILDING

ISSUED: 10/23/2018
EXPIRES: 04/21/2019

APPLICANT: NORTHEASTERN MARINE CONSTRUCTION
P.O. Box 42
Kitty Hawk, NC 27949
261-3682

OWNER: WIDGEON, WILSON D
935 Bingham St
VIRGINIA BEACH, VA 23451

LIMITED- SPECIALTY-MARINE CONSTR: NORTHEASTERN MARINE CONSTRUCTION
P.O. Box 42
Kitty Hawk, NC 27949
261-3682

License: 30026
Expires: 12/30/2018

PARCEL:

PIN: 989313047952 **Parcel Number:** 008263000

Address: 1705 WRIGHTSVILLE BLVD KILL DEVIL HILLS

Addition: OCEAN ACRES INC **Zoning:**

Block: 0 **Lot(s):** 85-86

Legal Description:

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

PROJECT DESCRIPTION: Replace (10) 6x6 pilings with 8x8 pilings

BP2018-188

PROJECT NAME: Widgeon Pilings

SITE ADDRESS: 1705 WRIGHTSVILLE BLVD KILL DEVIL HILLS

BUILDING

ISSUED: 10/23/2018

EXPIRES: 04/21/2019

DETAILS**Permit**

Name	Value
CAMA PERMIT	N
CAMA EXEMPTION	N
ZONING DISTRICT	C
PURPOSE	Residential Repair/Remodel
FRONT YARD SETBACK	30
SIDE YARD SETBACK	8
REAR YARD SETBACK	20% Depth >30
FLOOD ZONE	AE
BASE FLOOD ELEVATION	9
FINAL ELEVATION CERTIFICATE	N
CONSTRUCTION COST	12500.00

REQUIRED INSPECTIONS

Piling

Zoning Final

Final

CONDITIONS

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Issued By: _____

Contractor or Authorized Agent: _____

Date: _____



Town of Kill Devil Hills

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

PAID

OCT 25 2018

Planning and Inspection Department

TOWN OF
KILL DEVIL HILLS

BP2018-189

PROJECT NAME: West Steps
SITE ADDRESS: 2016 NORFOLK ST KILL DEVIL HILLS

BUILDING

ISSUED: 10/23/2018

EXPIRES: 04/21/2019

APPLICANT: Ellison, Michael
105 Trout Ter
GRANDY, NC 27939
252-619-4895

OWNER: WEST, DARRELL R
1604 Poplar Spring Church Rd
Sanford, NC 27330
919-818-4158

UNLICENSED - REMODELING: Ellison, Michael
105 Trout Ter
GRANDY, NC 27939
252-619-4895

License: 0000000
Expires:

PARCEL:

PIN: 988405199413

Parcel Number: 001215000

Address: 2016 NORFOLK ST KILL DEVIL HILLS

Zoning:

Addition: AVALON BEACH ANNEX 2 & 3

Block: 0 **Lot(s):** 761

Legal Description:

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

PROJECT DESCRIPTION: Remove and replace steps on the north side of deck, "as is where is"

BP2018-189

PROJECT NAME: West Steps

SITE ADDRESS: 2016 NORFOLK ST KILL DEVIL HILLS

BUILDING

ISSUED: 10/23/2018

EXPIRES: 04/21/2019

DETAILS**Permit**

Name	Value
CAMA PERMIT	N
CAMA EXEMPTION	N
ZONING DISTRICT	RL
PURPOSE	Residential Repair/Remodel
FRONT YARD SETBACK	30
SIDE YARD SETBACK	8
REAR YARD SETBACK	20% Depth >30
FLOOD ZONE	AE
BASE FLOOD ELEVATION	8
FINAL ELEVATION CERTIFICATE	N
CONSTRUCTION COST	1600.00

REQUIRED INSPECTIONS

Zoning Final

Final

CONDITIONS

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

Issued By: _____

Contractor or Authorized Agent: _____

Date: 10-25-18



Town of Kill Devil Hills

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

PAID

OCT 25 2018

Planning and Inspection Department

TOWN OF
KILL DEVIL HILLS

BP2018-192

PROJECT NAME: Turner Deck Repair
SITE ADDRESS: 107 RALEIGH AVE KILL DEVIL HILLS

BUILDING

ISSUED: 10/25/2018
EXPIRES: 04/23/2019

APPLICANT: Jochheim, John
320 Harbour RD
Kill Devil Hills, NC 27948
252-202-4979

OWNER: Steven Turner
105 Atoka Ln.
Yorktown, Va 23693

UNLICENSED - REMODELING: Jochheim, John
320 Harbour RD
Kill Devil Hills, NC 27948
252-202-4979

License: 0000000
Expires:

PARCEL:

PIN: 988419619824

Parcel Number: 003956000

Address: 107 RALEIGH AVE KILL DEVIL HILLS

Addition: KITTY HAWK SHORES - REVISED

Zoning:
Block: 42 **Lot(s):** 16

Legal Description:

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

PROJECT DESCRIPTION: Add piling and joist under east wall, replace decking and handrail

BP2018-192PROJECT NAME: Turner Deck Repair
SITE ADDRESS: 107 RALEIGH AVE KILL DEVIL HILLS**BUILDING**

ISSUED: 10/25/2018

EXPIRES: 04/23/2019

DETAILS**Permit**

Name	Value
CAMA PERMIT	N
CAMA EXEMPTION	N
ZONING DISTRICT	RL
PURPOSE	Residential Repair/Remodel
FRONT YARD SETBACK	30
SIDE YARD SETBACK	8
REAR YARD SETBACK	20% Depth >30
FLOOD ZONE	AE
BASE FLOOD ELEVATION	8
FINAL ELEVATION CERTIFICATE	N
CONSTRUCTION COST	6700.00

REQUIRED INSPECTIONS

Zoning Final

Final

CONDITIONS

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

Issued By: _____

Contractor or Authorized Agent: _____

Date: _____

10-25-18



Town of Kill Devil Hills

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

Planning and Inspection Department

BP2018-193

PROJECT NAME: Beverly Crisp
SITE ADDRESS: 518 CANAL DR KILL DEVIL HILLS

BUILDING

ISSUED: 10/26/2018

EXPIRES: 04/24/2019

APPLICANT: Crisp, Beverly
518 Canal Drive
Kill Devil Hills, NC 27948
706-970-1159

OWNER: Crisp, Beverly
518 Canal Drive
Kill Devil Hills, NC 27948
706-970-1159

CONTRACTOR: SAME AS OWNER
UNKNOWN
UNKNOWN, XX 00000

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

PARCEL:

PIN: 988414247284

Parcel Number: 003397000

Address: 518 CANAL DR KILL DEVIL HILLS

Zoning:

Addition: FIRST FLIGHT VILLAGE SEC 1

Block: 0 **Lot(s):** 137

Legal Description:

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

PROJECT DESCRIPTION: 8x7 Shed

PAID

OCT 26 2018

TOWN OF
KILL DEVIL HILLS

BP2018-193

PROJECT NAME: Beverly Crisp
SITE ADDRESS: 518 CANAL DR KILL DEVIL HILLS

BUILDING

ISSUED: 10/26/2018

EXPIRES: 04/24/2019

DETAILS**Permit**

Name	Value
CAMA PERMIT	N
CAMA EXEMPTION	N
ZONING DISTRICT	RL
PURPOSE	Residential Accessory
FRONT YARD SETBACK	30
SIDE YARD SETBACK	10
REAR YARD SETBACK	20% Depth >30
STREET SIDE SETBACK	15
FLOOD ZONE	AE
BASE FLOOD ELEVATION	8.3
FINAL ELEVATION CERTIFICATE	N
CONSTRUCTION COST	900.00
LOT COVERAGE	20.00
CONSTRUCTION TYPE	V
OCCUPANCY TYPE	One & Two Family Dwelling

REQUIRED INSPECTIONS

Zoning Final

Final

CONDITIONS

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

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

BP2018-193

PROJECT NAME: Beverly Crisp
SITE ADDRESS: 518 CANAL DR KILL DEVIL HILLS

BUILDING

ISSUED: 10/26/2018

EXPIRES: 04/24/2019

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

Issued By:  _____

Contractor or Authorized Agent: Beverly N. Crisp Date: 10-26-18



Town of Kill Devil Hills

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

PAID

OCT 23 2018

Planning and Inspection Department

TOWN OF
KILL DEVIL HILLS

BP2018-187	BUILDING
PROJECT NAME:	ISSUED: 10/23/2018
SITE ADDRESS: 2701 VA DARE TRL N KILL DEVIL HILLS	EXPIRES: 04/21/2019

APPLICANT: Mark Pizzoferrato
2701 N. Va. Dare Tr.
Kill Devil Hills, NC 27948

OWNER: Mark Pizzoferrato
2701 N. Va. Dare Tr.
Kill Devil Hills, NC 27948

GENERAL BUILDING-LIMITED: SEA THRU CONSTRUCTION
PO BOX 2471
Kitty Hawk, NC 27949
252-491-6964

License: 57130
Expires: 01/01/2019

PARCEL:

PIN: 988513221666

Parcel Number: 000834000

Address: 2701 VA DARE TRL N KILL DEVIL HILLS

Addition: VIRGINIA DARE SHORES PLAT B

Zoning:

Block: 0 **Lot(s):** 29

Legal Description:

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

PROJECT DESCRIPTION: REPLACE EAST SIDE STEPS AND RAILINGS

BP2018-187

PROJECT NAME:

SITE ADDRESS: 2701 VA DARE TRL N KILL DEVIL HILLS

BUILDING

ISSUED: 10/23/2018

EXPIRES: 04/21/2019

DETAILS

Permit

Name	Value
CAMA PERMIT	N
CAMA EXEMPTION	N
ZONING DISTRICT	OIR
FLOOD ZONE	VE
BASE FLOOD ELEVATION	12
FINAL ELEVATION CERTIFICATE	N
CONSTRUCTION COST	2100.00
CONSTRUCTION TYPE	V
OCCUPANCY TYPE	One & Two Family Dwelling

REQUIRED INSPECTIONS

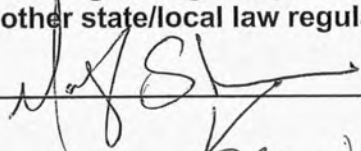
Final

CONDITIONS

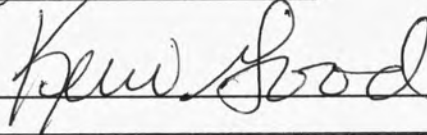
* This permit becomes null and void if work or construction authorized is not commenced within 6 months or if construction or work is suspended for a period of 12 months at any time after work has started.

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

Issued By: _____



Contractor or Authorized Agent: _____



Date: _____

10/23/18



Town of Kill Devil Hills

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

PAID

OCT 19 2018

Planning and Inspection Department

TOWN OF
KILL DEVIL HILLS

PAID
WITH
CASH

BP2018-186
PROJECT NAME: Burnette
SITE ADDRESS: 415 CAMERON ST KILL DEVIL HILLS

BUILDING
ISSUED: 10/18/2018
EXPIRES: 04/16/2019

APPLICANT: MICHAEL BURNETTE
613 Baldwin Ave.
Norfolk, va 23517
757-478-8585

OWNER: MICHAEL BURNETTE
613 Baldwin Ave.
Norfolk, va 23517
757-478-8585

GENERAL, UNLICENSED: Awesome Remodeling
1809 Va. AVE
Kill Devil Hills, NC 27948
252-305-0636

License: 123
Expires:

PARCEL:

PIN: 987516840296

Parcel Number: 000166000

Address: 415 CAMERON ST KILL DEVIL HILLS

Zoning:

Addition: ORVILLE BEACH WEST

Block: 0 **Lot(s):** 54 E PT 55

Legal Description:

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

PROJECT DESCRIPTION: Concrete patio, pergola, new stairs, and repair/replace existing decking. (Existing deck benches encroach 1' into front yard setback. If replaced it must meet front yard setback.)

BP2018-186

PROJECT NAME: Burnette

SITE ADDRESS: 415 CAMERON ST KILL DEVIL HILLS

BUILDING

ISSUED: 10/18/2018

EXPIRES: 04/16/2019

DETAILS**Permit**

Name	Value
CAMA PERMIT	N
CAMA EXEMPTION	N
ZONING DISTRICT	RL
PURPOSE	Modular Home Repair/Remodel
FRONT YARD SETBACK	30
SIDE YARD SETBACK	10
REAR YARD SETBACK	20% Depth >30
HEALTH DEPARTMENT PERMIT #	28149
FLOOD ZONE	X
FINAL ELEVATION CERTIFICATE	N
CONSTRUCTION COST	19500.00
LOT COVERAGE	38.40
CONSTRUCTION TYPE	V
SURVEYOR NAME AND NUMBER	M. Douglas Styons L- 3227

REQUIRED INSPECTIONS

Piling

Zoning Final

Final

CONDITIONS

- * This permit becomes null and void if work or construction authorized is not commenced within 6 months or if construction or work is suspended for a period of 12 months at any time after work has started.
- * As-built survey will be required prior to Certificate of Occupancy or Certificate of Compliance.
- * Construction must meet all aspect of Chapter 153 Zoning including lot coverage and setbacks.
- * Proposed concrete patio must stay at least 5' from side property line. Proposed Pergola must meet 10' side yard setback. Existing cantilevered benches encroach front yard setback. If replaced they must meet front yard setback.

BP2018-186

PROJECT NAME: Burnette

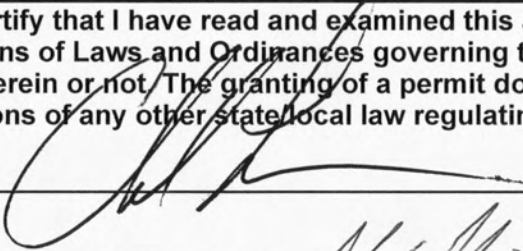
SITE ADDRESS: 415 CAMERON ST KILL DEVIL HILLS

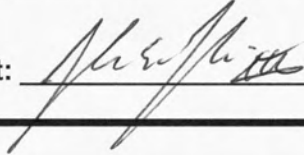
BUILDING

ISSUED: 10/18/2018

EXPIRES: 04/16/2019

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

Issued By:  _____

Contractor or Authorized Agent:  _____

Date: 10/19/18



Town of Kill Devil Hills

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

PAID

OCT 22 2018

Planning and Inspection Department

TOWN OF
KILL DEVIL HILLS

BP2018-185	BUILDING
PROJECT NAME: Rick and Linda Culotta	ISSUED: 10/11/2018
SITE ADDRESS: 300 GUNAS DR KILL DEVIL HILLS	EXPIRES: 04/09/2019

APPLICANT: Culotta, Rick and Linda 300 Gunas Drive Kill Devil Hills, NC 27948 757-236-1127	OWNER: Culotta, Rick and Linda 300 Gunas Drive Kill Devil Hills, NC 27948 757-236-1127
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CONTRACTOR:	SAME AS OWNER UNKNOWN UNKNOWN, XX 00000	License: Same as Owner Expires: 12/30/2019
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PARCEL:

PIN: 988316935835	Parcel Number: 008480000
Address: 300 GUNAS DR KILL DEVIL HILLS	
Addition: OCEAN ACRES TRACT 3 SEC 1	Zoning: Block: G Lot(s): 2
Legal Description:	

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

PROJECT DESCRIPTION: 12' X 12' shed

BP2018-185

PROJECT NAME: Rick and Linda Culotta
SITE ADDRESS: 300 GUNAS DR KILL DEVIL HILLS

BUILDING**ISSUED:** 10/11/2018**EXPIRES:** 04/09/2019

DETAILS**Permit**

Name	Value
CAMA PERMIT	Y
CAMA EXEMPTION	N
ZONING DISTRICT	RL
FRONT YARD SETBACK	30
SIDE YARD SETBACK	10
REAR YARD SETBACK	20% Depth >30
FLOOD ZONE	X
FINAL ELEVATION CERTIFICATE	N
CONSTRUCTION COST	4865.00
LOT COVERAGE	29.12
SURVEYOR NAME AND NUMBER	William S. Jones

REQUIRED INSPECTIONS

Zoning Final

Final

CONDITIONS

- * This permit becomes null and void if work or construction authorized is not commenced within 6 months or if construction or work is suspended for a period of 12 months at any time after work has started.
- * As-built survey will be required prior to Certificate of Occupancy or Certificate of Compliance.
- * Must comply with Wind Borne Debris requirements as defined in NCBC R301.2.1.2 and NCBC 1609.2.
- * Construction must meet all aspect of Chapter 153 Zoning including lot coverage and setbacks.
- * Zoning Final Inspection is required.

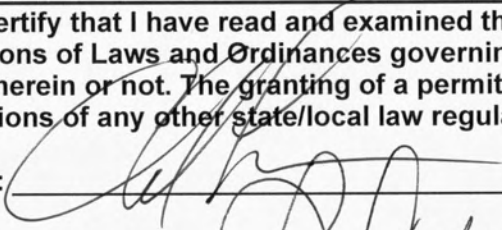
BP2018-185

PROJECT NAME: Rick and Linda Culotta
SITE ADDRESS: 300 GUNAS DR KILL DEVIL HILLS

BUILDING

ISSUED: 10/11/2018
EXPIRES: 04/09/2019

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

Issued By:  _____

Contractor or Authorized Agent:  _____ Date: 10/22/2018



Town of Kill Devil Hills

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

PAID

OCT 17 2018

Planning and Inspection Department

TOWN OF
KILL DEVIL HILLS

BP2018-180

PROJECT NAME: Reed Deck Repair
SITE ADDRESS: 305 VA DARE TRL N KILL DEVIL HILLS

BUILDING

ISSUED: 10/05/2018

EXPIRES: 04/03/2019

APPLICANT: Heath, Wayne
302 North Virginia Dare Trail
Kill Devil Hills, NC 27948
252-207-5468

OWNER: REED, WILMER H III
2400 Crystal Cove Ln
Apt 1302
MIRAMAR BEACH, FL 32550

UNLICENSED - REMODELING: Heath, Wayne
302 North Virginia Dare Trail
Kill Devil Hills, NC 27948
252-207-5468

License: 000000000
Expires:

PARCEL:

PIN: 988420811675

Parcel Number: 003682000

Address: 305 VA DARE TRL N KILL DEVIL HILLS

Addition: KITTY HAWK SHORES - REVISED

Zoning:

Block: 4

Lot(s): 4 & 1/2 3

Legal Description:

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

PROJECT DESCRIPTION: Replace handrail, decking and anything else requiring repair

BP2018-180

PROJECT NAME: Reed Deck Repair

SITE ADDRESS: 305 VA DARE TRL N KILL DEVIL HILLS

BUILDING

ISSUED: 10/05/2018

EXPIRES: 04/03/2019

DETAILS**Permit**

Name	Value
CAMA PERMIT	N
CAMA EXEMPTION	N
ZONING DISTRICT	OIR
PURPOSE	Residential Repair/Remodel
FRONT YARD SETBACK	30
SIDE YARD SETBACK	12
REAR YARD SETBACK	CAMA
FLOOD ZONE	VE
BASE FLOOD ELEVATION	11
FINAL ELEVATION CERTIFICATE	N
CONSTRUCTION COST	3500.00

REQUIRED INSPECTIONS

Zoning Final

Final

CONDITIONS

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Issued By: _____

Contractor or Authorized Agent: Edson W. Keith Date: 11-17-18



Town of Kill Devil Hills

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

Planning and Inspection Department

BP2018-177	BUILDING
PROJECT NAME: Water Oak Pier	ISSUED: 10/01/2018
SITE ADDRESS: 1200 West First Street Kill Devil Hills	EXPIRES: 03/30/2019

APPLICANT: MILLSTONE MARINE
7000 MARITIME WOODS DR
MANTEO, NC 27954
252-491-2888

OWNER: Water Oak Residential, LLC
PO Box 90
Kill Devil Hills, NC 27948
252-441-9003

GENERAL: MILLSTONE MARINE
7000 MARITIME WOODS DR
MANTEO, NC 27954
252-491-2888

License: 78077
Expires: 12/30/2019

PARCEL:

PIN: 988417126342

Parcel Number:

Address: 1200 West First Street Kill Devil Hills

Zoning:

Addition:

Block:

Lot(s):

Legal Description: Parcel A

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

PROJECT DESCRIPTION: Construct community pier with gazebo and kayak platform

PAID

OCT 11 2018

TOWN OF
KILL DEVIL HILLS

BP2018-177

PROJECT NAME: Water Oak Pier
SITE ADDRESS: 1200 West First Street Kill Devil Hills

BUILDING

ISSUED: 10/01/2018

EXPIRES: 03/30/2019

DETAILS

Permit

Name	Value
CAMA PERMIT	Y
CAMA EXEMPTION	N
ZONING DISTRICT	RL
FLOOD ZONE	AE
BASE FLOOD ELEVATION	9
FINAL ELEVATION CERTIFICATE	N
CONSTRUCTION COST	81882.00

REQUIRED INSPECTIONS

Zoning Final

Final

CONDITIONS

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Issued By: _____

Contractor or Authorized Agent: _____

Date: _____

10-11-18



Town of Kill Devil Hills

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

PAID

OCT - 4 2018

Planning and Inspection Department

TOWN OF
KILL DEVIL HILLS

MC2018-325

PROJECT NAME: Atlantic St. Inn HVAC
SITE ADDRESS: 205 ATLANTIC ST E KILL DEVIL HILLS

MECHANICAL

ISSUED: 10/03/2018

EXPIRES: 04/01/2019

APPLICANT: Coastal Elements
172 Bean Landing Rd.
Harbinger, NC 27941
252-548-4202

OWNER: Kill Devil Hills Properties
1407 Percy St
Kill Devil Hills, NC 27948

MECHANICAL H-3 CLASS 1: Coastal Elements
172 Bean Landing Rd.
Harbinger, NC 27941
252-548-4202

License: 32607
Expires: 12/31/2018

PARCEL:

PIN: 989309060367

Parcel Number: 004732000

Address: 205 ATLANTIC ST E KILL DEVIL HILLS

Addition: KILL DEVIL BEACH SEC 1 REVISED

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

Legal Description:

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

PROJECT DESCRIPTION: C/O 4 PTAC units with mini-splits

DETAILS

Permit

Name	Value
PURPOSE	Commercial Repair/Remodel
CONSTRUCTION COST	7600.00
FLOOD ZONE	AE
BASE FLOOD ELEVATION	9
NATURAL GAS SIGNOFF	N

MC2018-325

PROJECT NAME: Atlantic St. Inn HVAC
SITE ADDRESS: 205 ATLANTIC ST E KILL DEVIL HILLS

MECHANICAL

ISSUED: 10/03/2018

EXPIRES: 04/01/2019

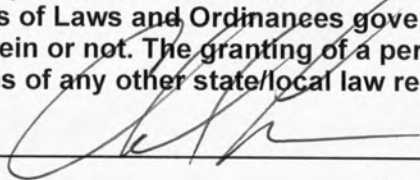
REQUIRED INSPECTIONS

Final

CONDITIONS

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Issued By: 

Contractor or Authorized Agent: Kathy Gallop Date: 10/4/18