



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

MC2019-193

PROJECT NAME:

SITE ADDRESS: 1006 AVALON DR W KILL DEVIL HILLS

MECHANICAL

ISSUED: 06/24/2019

EXPIRES: 12/21/2019

APPLICANT: Wisecarver, Courtney
1006 W Avalon St
Kill Devil Hills, NC 27948

OWNER: Wisecarver, Courtney
1006 W Avalon St
Kill Devil Hills, NC 27948

H-3, CLASS I:

AIR-O-SMITH
330 North Dogwood Trail
Southern Shores, NC 27949
252-261-5238

License: 30070
Expires: 12/31/2019

PARCEL:

PIN: 987408997466

Parcel Number: 001636000

Address: 1006 AVALON DR W KILL DEVIL HILLS

Zoning:

Addition: AVALON BEACH

Block: 0 **Lot(s):** 283

Legal Description:

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

PROJECT DESCRIPTION: HVAC changout

JUN 24 2019



Town of Kill Devil Hills

PO BOX 1719
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PAD

Planning and Inspection Department

JUN 26 2019

MC2019-194

PROJECT NAME: Leonard HVAC
SITE ADDRESS: 201 WALKER ST E KILL DEVIL HILLS

MECHANICAL

ISSUED: 06/25/2019

EXPIRES: 12/22/2019

APPLICANT: Leonard, Charles
21103 Horseshoe Road
Carson, VA 23830

OWNER: Leonard, Charles
21103 Horseshoe Road
Carson, VA 23830

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

License: 13056
Expires: 12/31/2019

PARCEL:

PIN: 988517127024

Parcel Number: 000377000

Address: 201 WALKER ST E KILL DEVIL HILLS

Addition: VIRGINIA DARE SHORES

Zoning:

Block: 4

Lot(s): PT 15-18

Legal Description:

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

PROJECT DESCRIPTION: C/O 2 Ton HVAC System including duct work

MC2019-194

PROJECT NAME: Leonard HVAC
SITE ADDRESS: 201 WALKER ST E KILL DEVIL HILLS

MECHANICAL

ISSUED: 06/25/2019

EXPIRES: 12/22/2019

DETAILS

Permit

Name	Value
PURPOSE	Residential Repair/Remodel
CONSTRUCTION COST	11539.00
CONSTRUCTION TYPE	V
FLOOD ZONE	AE
BASE FLOOD ELEVATION	9
NATURAL GAS SIGNOFF	N

REQUIRED INSPECTIONS

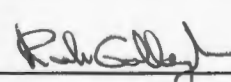
Final

CONDITIONS

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Issued By: 

Contractor or Authorized Agent:  Date: 6-26-19



Town of Kill Devil Hills

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

JUN 26 2019

Planning and Inspection Department

MC2019-195	MECHANICAL
PROJECT NAME: Maloney HVAC	ISSUED: 06/25/2019
SITE ADDRESS: 1611 VA DARE TRL N KILL DEVIL HILLS	EXPIRES: 12/22/2019

APPLICANT: MALONEY, FREDERICK C 2960 River Reach WILLIAMSBURG, VA 23185	OWNER: MALONEY, FREDERICK C 2960 River Reach WILLIAMSBURG, VA 23185
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MECHANICAL:	R A HOY PO Box 265 Kitty Hawk, NC 27949	License: 13056 Expires: 12/31/2019
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PARCEL:

PIN: 98841156567102	Parcel Number: 002780002
Address: 1611 VA DARE TRL N KILL DEVIL HILLS	Zoning:
Addition:	Block: B Lot(s): UNIT 2 LOT 14,15
Legal Description:	

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

PROJECT DESCRIPTION: C/O 3 Ton Heat Pump

DETAILS

Permit

Name	Value
PURPOSE	Residential Repair/Remodel
CONSTRUCTION COST	4237.00
FLOOD ZONE	VE
BASE FLOOD ELEVATION	12
NATURAL GAS SIGNOFF	N

MC2019-195

PROJECT NAME: Maloney HVAC

SITE ADDRESS: 1611 VA DARE TRL N KILL DEVIL HILLS

MECHANICAL

ISSUED: 06/25/2019

EXPIRES: 12/22/2019

REQUIRED INSPECTIONS

Final

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Contractor or Authorized Agent: _____

Date: 6/26/19



Town of Kill Devil Hills

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JUN 26 2019

Planning and Inspection Department

MC2019-197

PROJECT NAME: Short HVAC
SITE ADDRESS: 306 ST LOUIS ST KILL DEVIL HILLS

MECHANICAL

ISSUED: 06/26/2019

EXPIRES: 12/23/2019

APPLICANT: SHORT, DONALD B
4404 POINT WEST DRIVE
PORTSMOUTH, VA 23703

OWNER: SHORT, DONALD B
4404 POINT WEST DRIVE
PORTSMOUTH, VA 23703

H3, CLASS 1: OUTER BANKS HEATING AND COOLING
P.O. Box 1415
Nags Head, NC 27959
441-1740

License: 12643
Expires: 12/31/2019

PARCEL:

PIN: 987516940429

Parcel Number: 000182000

Address: 306 ST LOUIS ST KILL DEVIL HILLS

Addition: ORVILLE BEACH WEST

Zoning:
Block: 0 **Lot(s):** 75

Legal Description:

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

PROJECT DESCRIPTION: C/O 2.5 Ton HVAC System

DETAILS

Permit

Name	Value
PURPOSE	Residential Repair/Remodel
CONSTRUCTION COST	5115.00
CONSTRUCTION TYPE	V
FLOOD ZONE	X
NATURAL GAS SIGNOFF	N



Town of Kill Devil Hills

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PAID

JUN 26 2019

Planning and Inspection Department

MC2019-196

PROJECT NAME:

SITE ADDRESS: 3000 VA DARE TRL N KILL DEVIL HILLS

MECHANICAL

ISSUED: 06/26/2019

EXPIRES: 12/23/2019

APPLICANT: DRAKE, RAYMOND E
29071 NORTH MAIN STREET
NEWSOMS, VA 23874

OWNER: DRAKE, RAYMOND E
29071 NORTH MAIN STREET
NEWSOMS, VA 23874

MECHANICAL, H-2, H-3:

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

License: 11618
Expires: 12/31/2019

PARCEL:

PIN: 988513134278

Parcel Number: 008357000

Address: 3000 VA DARE TRL N KILL DEVIL HILLS

Addition: VIRGINIA DARE SHORES

Zoning:
Block: 9 **Lot(s):** 4

Legal Description:

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

PROJECT DESCRIPTION: HVAC changout

MC2019-196

PROJECT NAME:

SITE ADDRESS: 3000 VA DARE TRL N KILL DEVIL HILLS

MECHANICAL

ISSUED: 06/26/2019

EXPIRES: 12/23/2019

DETAILS

Permit

Name	Value
PURPOSE	Residential Repair/Remodel
CONSTRUCTION COST	5980.00
CONSTRUCTION TYPE	V
FLOOD ZONE	VE
BASE FLOOD ELEVATION	11
NATURAL GAS SIGNOFF	N
OCCUPANCY TYPE	One & Two Family Dwelling

REQUIRED INSPECTIONS

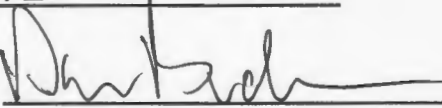
Final

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Issued By: 

Contractor or Authorized Agent: 

Date: 6/25/19

Paid By : ATLANTIC HEATING AN
 Clerk : 981msnyd
 Check/Credit Card #: 026208
 Receipt #: 579582
 Payment : \$ 150.00
 Date / Time : 06/26/19 13:17
 PLANNING
 Town of Kill Devil Hills
 4400
 Printed by : Marty Shaw on: 06/26/2019 09:43 AM
 SET 17 CRT



Town of Kill Devil Hills

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

Planning and Inspection Department

MC2019-198	MECHANICAL
PROJECT NAME:	ISSUED: 06/28/2019
SITE ADDRESS: 1725 VIRGINIA AVE KILL DEVIL HILLS	EXPIRES: 12/25/2019

APPLICANT: MORGAN, MICHAEL PAUL 2404 SOUTH VA DARE TR Kill Devil Hills, NC 27948	OWNER: MORGAN, MICHAEL PAUL 2404 SOUTH VA DARE TR Kill Devil Hills, NC 27948
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MECHANICAL:	R A HOY PO Box 265 Kitty Hawk, NC 27949	License: 13056 Expires: 12/31/2019
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PARCEL:

PIN: 988409160149	Parcel Number: 028449000
Address: 1725 VIRGINIA AVE KILL DEVIL HILLS	Zoning:
Addition: CROATAN SHORES SUBDIV	Block: 16 Lot(s): 6
Legal Description:	

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

PROJECT DESCRIPTION: HVAC changout

JUN 28 2019



Town of Kill Devil Hills

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Planning and Inspection Department

MC2019-182	MECHANICAL
PROJECT NAME: Solomon HVAC	ISSUED: 06/12/2019
SITE ADDRESS: 3302 BAY DR KILL DEVIL HILLS	EXPIRES: 12/09/2019

APPLICANT: Solomon, Gloria 213 Chapel Drive LAKE JUNALUSKA, NC 28745	OWNER: Solomon, Gloria 213 Chapel Drive LAKE JUNALUSKA, NC 28745
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H-3, CLASS I:	Beach Air Heating and Cooling PO Box 1047 Manteo, NC 27954 252-216-7544	License: 29768 Expires: 12/31/2019
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PARCEL:

PIN: 987516739705	Parcel Number: 000321000	
Address: 3302 BAY DR KILL DEVIL HILLS	Zoning:	
Addition: ORVILLE BEACH WEST	Block: 0	Lot(s): 243
Legal Description:		

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

PROJECT DESCRIPTION: C/O 2 Ton HVAC System

DETAILS

Permit

Name	Value
PURPOSE	Residential Repair/Remodel
CONSTRUCTION COST	6449.00
CONSTRUCTION TYPE	V
FLOOD ZONE	X
NATURAL GAS SIGNOFF	N

PAID
JUN 12 2019

MC2019-182

PROJECT NAME: Solomon HVAC
SITE ADDRESS: 3302 BAY DR KILL DEVIL HILLS

MECHANICAL

ISSUED: 06/12/2019

EXPIRES: 12/09/2019

REQUIRED INSPECTIONS

Final

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Planning and Inspection Department

MC2019-187	MECHANICAL
PROJECT NAME:	ISSUED: 06/13/2019
SITE ADDRESS: 907 CROATAN HWY S KILL DEVIL HILLS	EXPIRES: 12/10/2019

APPLICANT: OUTER BANKS PRESBYTERIAN PO BOX 2199 KILL DEVIL HILLS, NC 27948	OWNER: OUTER BANKS PRESBYTERIAN PO BOX 2199 KILL DEVIL HILLS, NC 27948
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H3, CLASS 1:	OUTER BANKS HEATING AND COOLING P.O. Box 1415 Nags Head, NC 27959 441-1740	License: 12643 Expires: 12/31/2019
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PARCEL:

PIN: 988308886310	Parcel Number: 008529000
Address: 907 CROATAN HWY S KILL DEVIL HILLS	Zoning:
Addition: KILL DEVIL HILLS REALTY CORP	Block: 3 Lot(s): 1-4 & 7-10 PT OF 5
Legal Description:	

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

PROJECT DESCRIPTION: HVAC changout

JUN 13 2019

MC2019-187

PROJECT NAME:

SITE ADDRESS: 907 CROATAN HWY S KILL DEVIL HILLS

MECHANICAL

ISSUED: 06/13/2019

EXPIRES: 12/10/2019

DETAILS

Permit

Name	Value
PURPOSE	Commercial Repair/Remodel
CONSTRUCTION COST	6590.64
CONSTRUCTION TYPE	III
FLOOD ZONE	AE
BASE FLOOD ELEVATION	8
NATURAL GAS SIGNOFF	N
OCCUPANCY TYPE	Assembly

REQUIRED INSPECTIONS

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Issued By: _____

Contractor or Authorized Agent: _____ Date: 6-13-19



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

Planning and Inspection Department

MC2019-186	MECHANICAL
PROJECT NAME:	ISSUED: 06/13/2019
SITE ADDRESS: 1219 VA DARE TRL S KILL DEVIL HILLS	EXPIRES: 12/10/2019

APPLICANT: Mauck, Douglas 8308 University PL Henrico, VA 23229 804-441-3892	OWNER: Mauck, Douglas 8308 University PL Henrico, VA 23229 804-441-3892
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MECHANICAL H-3, CLASS 1:	AIR HANDLERS OBX 8788 Caratoke Hwy Harbinger, NC 27941 252-216-8945	License: 26599 Expires: 12/31/2019
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PARCEL:

PIN: 989309073323B4	Parcel Number: 002975000
Address: 1219 VA DARE TRL S KILL DEVIL HILLS	Zoning:
Addition:	Block: 5 Lot(s): UNIT B-4 LT 11-12
Legal Description:	

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

PROJECT DESCRIPTION: Replace air handler only

PAID
JUN 13 2019
TOWN OF KILL DEVIL HILLS

MC2019-186

PROJECT NAME:

SITE ADDRESS: 1219 VA DARE TRL S KILL DEVIL HILLS

MECHANICAL

ISSUED: 06/13/2019

EXPIRES: 12/10/2019

DETAILS

Permit

Name	Value
PURPOSE	Residential Repair/Remodel
CONSTRUCTION COST	4087.00
CONSTRUCTION TYPE	V
FLOOD ZONE	VE
BASE FLOOD ELEVATION	11
NATURAL GAS SIGNOFF	N
OCCUPANCY TYPE	Residential

REQUIRED INSPECTIONS

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Contractor or Authorized Agent: _____

Date: _____

6/13/19



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

MC2019-184	MECHANICAL
PROJECT NAME: PETERS HVAC	ISSUED: 06/12/2019
SITE ADDRESS: 509 WILKINSON ST W KILL DEVIL HILLS	EXPIRES: 12/09/2019

APPLICANT: JOHN PETERS 509 W WILKINSON ST Kill Devil Hills, NC 27948	OWNER: JOHN PETERS 509 W WILKINSON ST Kill Devil Hills, NC 27948
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MECHANICAL:	R A HOY PO Box 265 Kitty Hawk, NC 27949	License: 13056 Expires: 12/31/2019
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PARCEL:

PIN: 987520819929	Parcel Number: 000696000
Address: 509 WILKINSON ST W KILL DEVIL HILLS	Zoning:
Addition: VIRGINIA DARE SHORES	Block: 67 Lot(s): 16-18
Legal Description:	

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

PROJECT DESCRIPTION: HVAC CHANGE OUT

JUN 12 2019

MC2019-184

PROJECT NAME: PETERS HVAC

SITE ADDRESS: 509 WILKINSON ST W KILL DEVIL HILLS

MECHANICAL

ISSUED: 06/12/2019

EXPIRES: 12/09/2019

DETAILS

Permit

Name	Value
PURPOSE	Residential Repair/Remodel
CONSTRUCTION COST	6883.00
CONSTRUCTION TYPE	V
FLOOD ZONE	AE
BASE FLOOD ELEVATION	8.00
NATURAL GAS SIGNOFF	N
OCCUPANCY TYPE	One & Two Family Dwelling

REQUIRED INSPECTIONS

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Date: _____

6/12/19



Town of Kill Devil Hills

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Planning and Inspection Department

MC2019-176	MECHANICAL
PROJECT NAME: Lewis HVAC	ISSUED: 06/06/2019
SITE ADDRESS: 1718 WYANDOTTE ST KILL DEVIL HILLS	EXPIRES: 12/03/2019

APPLICANT: Lewis, Mary 9315 Penshurst Trce CHARLOTTE, NC 28210	OWNER: Lewis, Mary 9315 Penshurst Trce CHARLOTTE, NC 28210
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H3, CLASS 1:	OUTER BANKS HEATING AND COOLING P.O. Box 1415 Nags Head, NC 27959 441-1740	License: 12643 Expires: 12/31/2019
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PARCEL:

PIN: 988409260409	Parcel Number: 002715000
Address: 1718 WYANDOTTE ST KILL DEVIL HILLS	Zoning:
Addition: HIGH VIEW - HEDRICKS ADD	Block: E Lot(s): 23
Legal Description:	

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

PROJECT DESCRIPTION: C/O 2.5 Ton HVAC Heat Pump

DETAILS

Permit	
Name	Value
PURPOSE	Residential Repair/Remodel
CONSTRUCTION COST	3465.00
CONSTRUCTION TYPE	V
FLOOD ZONE	X
NATURAL GAS SIGNOFF	N

PAID
JUN 13 2019
TOWN OF KILL DEVIL HILLS

MC2019-176

PROJECT NAME: Lewis HVAC

SITE ADDRESS: 1718 WYANDOTTE ST KILL DEVIL HILLS

MECHANICAL

ISSUED: 06/06/2019

EXPIRES: 12/03/2019

REQUIRED INSPECTIONS

Final

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Contractor or Authorized Agent: _____

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6-13-19



Town of Kill Devil Hills

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PAID

JUN 18 2019

Planning and Inspection Department

TOWN OF
KILL DEVIL HILLS

MC2019-181	MECHANICAL
PROJECT NAME: Zawojski HVAC	ISSUED: 06/10/2019
SITE ADDRESS: 1504 KETCH LN KILL DEVIL HILLS	EXPIRES: 12/07/2019

APPLICANT: Zawojski, Stephen 11388 Oak Grove Rd GRAND HAVEN, MI 49417	OWNER: Zawojski, Stephen 11388 Oak Grove Rd GRAND HAVEN, MI 49417
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MECHANICAL:	American Refrigeration P.O. Box 835 nags head, nc 27959 252-305-5320	License: 29031 Expires: 12/31/2019
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PARCEL:

PIN: 988414236609	Parcel Number: 026956000
Address: 1504 KETCH LN KILL DEVIL HILLS	Zoning:
Addition: FIRST FLIGHT VLG PH A SEC 3	Block: 0 Lot(s): 13
Legal Description:	

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

PROJECT DESCRIPTION: C/O 3 Ton HVAC System

MC2019-181

PROJECT NAME: Zawojski HVAC
SITE ADDRESS: 1504 KETCH LN KILL DEVIL HILLS

MECHANICAL

ISSUED: 06/10/2019

EXPIRES: 12/07/2019

DETAILS

Permit

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

REQUIRED INSPECTIONS

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Contractor or Authorized Agent: _____

Date: _____



Town of Kill Devil Hills

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

JUN 17 2019

Planning and Inspection Department

EL2019-056

PROJECT NAME:

SITE ADDRESS: ROW 1811 S VA DARE TRL Kill Devil Hills

ELECTRICAL

ISSUED: 06/12/2019

EXPIRES: 12/09/2019

APPLICANT: CHARTER COMMUNICATIONS
2400 S. Va. Dare Tr.
KILL DEVIL HILLS, NC 27948

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

ELECTRICAL: BEACON ELECTRIC
UNKNOWN
Wanchese, NC 27954
489-5680

License: 28692-I
Expires: 03/03/2020

PARCEL:

PIN: ROW 989313146939

**Parcel
Number:**

Address: ROW 1811 S VA DARE TRL Kill Devil Hills

Zoning:

Addition:

Block:

Lot(s):

Legal Description: ROW at 1811 S VDT

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

PROJECT DESCRIPTION: INSTALL METER/DISCONNECT/RISER FOR POWER SUPPLY CABINET

DETAILS

Permit

Name	Value
ZONING DISTRICT	OIR
PURPOSE	Commercial New
CONSTRUCTION COST	500.00
FLOOD ZONE	VE
BASE FLOOD ELEVATION	11

EL2019-056

PROJECT NAME:

SITE ADDRESS: ROW 1811 S VA DARE TRL Kill Devil Hills

ELECTRICAL

ISSUED: 06/12/2019

EXPIRES: 12/09/2019

REQUIRED INSPECTIONS

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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: _____

6/17/19



Town of Kill Devil Hills

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

JUN 19 2019

Planning and Inspection Department

MC2019-189	MECHANICAL
PROJECT NAME: WEBB HVAC	ISSUED: 06/19/2019
SITE ADDRESS: 2301 BAY DR KILL DEVIL HILLS	EXPIRES: 12/16/2019

APPLICANT: Dianne Webb P. O. Box 1037 BOWLING GREEN, VA 22427 540-903-1100	OWNER: Dianne Webb P. O. Box 1037 BOWLING GREEN, VA 22427 540-903-1100
--	--

MECHANICAL, H-3, I:	MASTER HEATING AND COOLING P.O. Box 707 Kitty Hawk, NC 27949 255-0095	License: 18066 Expires: 12/31/2019
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PARCEL:

PIN: 987408991854	Parcel Number: 000775004
Address: 2301 BAY DR KILL DEVIL HILLS	Zoning:
Addition: VIRGINIA DARE SH BLK 77 RECOMB	Block: 77 Lot(s): 4
Legal Description:	

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

PROJECT DESCRIPTION: HVAC CHANGE OUT

MC2019-189

PROJECT NAME: WEBB HVAC
SITE ADDRESS: 2301 BAY DR KILL DEVIL HILLS

MECHANICAL

ISSUED: 06/19/2019

EXPIRES: 12/16/2019

DETAILS

Permit

Name	Value
PURPOSE	Residential Repair/Remodel
CONSTRUCTION COST	6900.00
CONSTRUCTION TYPE	V
FLOOD ZONE	AE
BASE FLOOD ELEVATION	8.00
NATURAL GAS SIGNOFF	N
OCCUPANCY TYPE	One & Two Family Dwelling

REQUIRED INSPECTIONS

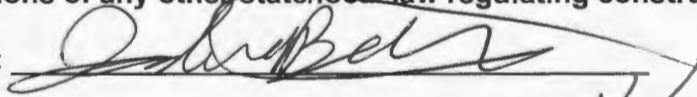
Final

CONDITIONS

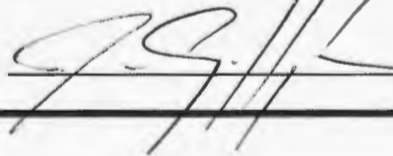
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Issued By:



Contractor or Authorized Agent:



Date:

6/19/19



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

ZP2019-053	ZONING PERMIT
PROJECT NAME: MENENDEZ FENCE	ISSUED: 06/19/2019
SITE ADDRESS: 511 FIRST ST W KILL DEVIL HILLS	EXPIRES: 12/16/2019

APPLICANT: Jillian Menedez 511 W First St KILL DEVIL HILLS, NC 27948 252-489-3294	OWNER: Jillian Menedez 511 W First St KILL DEVIL HILLS, NC 27948 252-489-3294
---	---

GENERAL:	Self UNKNOWN UNKNOWN, XX 00000 917-862-9006	License: Unlicensed Expires: 12/31/2020
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PARCEL:

PIN: 988409251037	Parcel Number: 003338000
Address: 511 FIRST ST W KILL DEVIL HILLS	Zoning:
Addition: FIRST FLIGHT VILLAGE SEC 1	Block: 0 Lot(s): 56
Legal Description:	

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

PROJECT DESCRIPTION: FENCE ALONG REAR AND SIDE PROPERTY LINE

JUN 19 2019

ZP2019-053

PROJECT NAME: MENENDEZ FENCE
SITE ADDRESS: 511 FIRST ST W KILL DEVIL HILLS

ZONING PERMIT

ISSUED: 06/19/2019

EXPIRES: 12/16/2019

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	8.3
PURPOSE	Residential Accessory
CONSTRUCTION COST	1000.00
LOT COVERAGE	32.60
CULVERT	N
DRIVEWAY INVERT 2	N

REQUIRED INSPECTIONS

Stringline

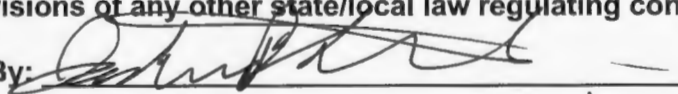
Final

CONDITIONS

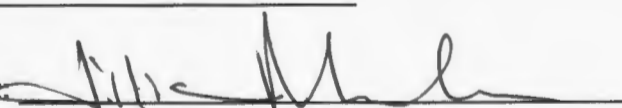
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Issued By:



Contractor or Authorized Agent



Date: 6/19/19



Town of Kill Devil Hills

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

PAID
JUN 19 2019

Planning and Inspection Department

TOWN OF
KILL DEVIL HILLS

MC2019-188	MECHANICAL
PROJECT NAME: Cernetich HVAC	ISSUED: 06/17/2019
SITE ADDRESS: 112 AVIATION AVE E KILL DEVIL HILLS	EXPIRES: 12/14/2019

APPLICANT: Cernetich, Greg 302 Woodmont Rd JOHNSTOWN, PA 15905 814-659-8472	OWNER: Cernetich, Greg 302 Woodmont Rd JOHNSTOWN, PA 15905 814-659-8472
---	---

MECHANICAL H-3 CLASS 1:	HARCO AIR PO BOX 3156 KITTY HAWK, NC 27949 207-1371	License: 30194 Expires: 12/31/2019
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PARCEL:

PIN: 988419714174	Parcel Number: 003903000
Address: 112 AVIATION AVE E KILL DEVIL HILLS	Zoning:
Addition: KITTY HAWK SHORES - REVISED	Block: 39 Lot(s): 6
Legal Description:	

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

PROJECT DESCRIPTION: C/O 1.5 Ton HVAC System

MC2019-188

PROJECT NAME: Cernetich HVAC

SITE ADDRESS: 112 AVIATION AVE E KILL DEVIL HILLS

MECHANICAL

ISSUED: 06/17/2019

EXPIRES: 12/14/2019

DETAILS

Permit

Name	Value
PURPOSE	Residential Repair/Remodel
CONSTRUCTION COST	5700.00
CONSTRUCTION TYPE	V
FLOOD ZONE	AE
BASE FLOOD ELEVATION	8
NATURAL GAS SIGNOFF	N

REQUIRED INSPECTIONS

Final

CONDITIONS

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Issued By: _____

Contractor or Authorized Agent: _____

Date: _____

6-19-19

Town of Kill Devil Hills

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

PAID

JUN 21 2019



Planning and Inspection Department

TOWN OF
KILL DEVIL HILLS

MC2019-190	MECHANICAL
PROJECT NAME: RUEBUSCH HVAC	ISSUED: 06/21/2019
SITE ADDRESS: 2018 EDENTON ST ST KILL DEVIL HILLS	EXPIRES: 12/18/2019

APPLICANT: MICHAEL RUEBUSCH 104 PINTAIL DR suffolk, va 23435 757-538-9498	OWNER: MICHAEL RUEBUSCH 104 PINTAIL DR suffolk, va 23435 757-538-9498
---	---

H-3, CLASS I:	Beach Air Heating and Cooling PO Box 1047 Manteo, NC 27954 252-216-7544	License: 29768 Expires: 12/31/2019
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PARCEL:

PIN: 987408989337	Parcel Number: 001278000
Address: 2018 EDENTON ST ST KILL DEVIL HILLS	Zoning:
Addition: AVALON BEACH ANNEX 2 & 3	Block: 0 Lot(s): 833
Legal Description:	

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

PROJECT DESCRIPTION: HVAC CHANGE OUT

MC2019-190

PROJECT NAME: RUEBUSCH HVAC

SITE ADDRESS: 2018 EDENTON ST ST KILL DEVIL HILLS

MECHANICAL

ISSUED: 06/21/2019

EXPIRES: 12/18/2019

DETAILS

Permit

Name	Value
PURPOSE	Residential Repair/Remodel
CONSTRUCTION COST	6227.00
CONSTRUCTION TYPE	V
FLOOD ZONE	AE
BASE FLOOD ELEVATION	8.00
NATURAL GAS SIGNOFF	N
OCCUPANCY TYPE	One & Two Family Dwelling

REQUIRED INSPECTIONS

Final

CONDITIONS

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Issued By: 

Contractor or Authorized Agent: 

Date: 6-21-19



Town of Kill Devil Hills

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

PAID

JUN 24 2019

Planning and Inspection Department

TOWN OF
KILL DEVIL HILLS

MC2019-191

PROJECT NAME: HVAC
SITE ADDRESS: 2701 Croatan HWY N. KILL DEVIL HILLS

MECHANICAL

ISSUED: 06/24/2019

EXPIRES: 12/21/2019

APPLICANT: Small, Priscilla E.
P O BOX 426
KILL DEVIL HILLS, NC 27948
252-449-5565

OWNER: Small, Priscilla E.
P O BOX 426
KILL DEVIL HILLS, NC 27948
252-449-5565

MECHANICAL, H-2, H-3:

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

License: 11618
Expires: 12/31/2019

PARCEL:

PIN: 988517121167

Parcel Number: 003001001

Address: 2701 Croatan HWY N. KILL DEVIL HILLS

Addition: VIRGINIA DARE SHORES

Zoning:
Block: 19 **Lot(s):** 28,29,30 &

Legal Description:

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

PROJECT DESCRIPTION: C/O 1.5 Ton HVAC System

MC2019-191

PROJECT NAME: HVAC

SITE ADDRESS: 2701 Croatan HWY N. KILL DEVIL HILLS

MECHANICAL

ISSUED: 06/24/2019

EXPIRES: 12/21/2019

DETAILS

Permit

Name	Value
PURPOSE	Commercial Repair/Remodel
CONSTRUCTION COST	5340.00
CONSTRUCTION TYPE	V
FLOOD ZONE	AE
BASE FLOOD ELEVATION	9
NATURAL GAS SIGNOFF	N

REQUIRED INSPECTIONS

Final

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Issued By: _____

Contractor or Authorized Agent: _____

Date: _____

4/24/19



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

MC2019-175	MECHANICAL
PROJECT NAME:	ISSUED: 06/06/2019
SITE ADDRESS: 301 WILBUR CT KILL DEVIL HILLS	EXPIRES: 12/03/2019

APPLICANT: Caniglia, David
726 Rextur Dr.
AKRON, OH 44319
330-414-9958

OWNER: Caniglia, David
726 Rextur Dr.
AKRON, OH 44319
330-414-9958

H-3, CLASS I: AIR-O-SMITH
330 North Dogwood Trail
Southern Shores, NC 27949
252-261-5238

License: 30070
Expires: 12/31/2019

PARCEL:

PIN: 988405282722

Parcel Number: 002125000

Address: 301 WILBUR CT KILL DEVIL HILLS

Zoning:

Addition: WRIGHT'S SHORES

Block: 0 **Lot(s):** 166

Legal Description:

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

PROJECT DESCRIPTION: HVAC changout

JUN 24 2019

MC2019-175

PROJECT NAME:

SITE ADDRESS: 301 WILBUR CT KILL DEVIL HILLS

MECHANICAL

ISSUED: 06/06/2019

EXPIRES: 12/03/2019

DETAILS

Permit

Name	Value
PURPOSE	Residential Repair/Remodel
CONSTRUCTION COST	6684.00
CONSTRUCTION TYPE	V
FLOOD ZONE	X
NATURAL GAS SIGNOFF	N
OCCUPANCY TYPE	One & Two Family Dwelling

REQUIRED INSPECTIONS

Final

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Issued By: 

Contractor or Authorized Agent:  **Date:** 6/24/19



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

MC2019-178	MECHANICAL
PROJECT NAME:	ISSUED: 06/10/2019
SITE ADDRESS: 1102 Cambridge Rd 302-C Kill Devil Hills	EXPIRES: 12/07/2019

APPLICANT: Trotta, Ann Marie
201 Moody'S Run
WILLIAMSBURG, VA 23185
571-271-3531

OWNER: Trotta, Ann Marie
201 Moody'S Run
WILLIAMSBURG, VA 23185
571-271-3531

H-3, CLASS I: AIR-O-SMITH
330 North Dogwood Trail
Southern Shores, NC 27949
252-261-5238

License: 30070
Expires: 12/31/2019

PARCEL:

PIN: 98830648123811
Address: 1102 Cambridge Rd 302-C Kill Devil Hills

Parcel Number:
Zoning:
Block: **Lot(s):**

Legal Description: 98830648123811

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

PROJECT DESCRIPTION: HVAC changout

JUN 24 2019

MC2019-178

PROJECT NAME:

SITE ADDRESS: 1102 Cambridge Rd 302-C Kill Devil Hills

MECHANICAL

ISSUED: 06/10/2019

EXPIRES: 12/07/2019

DETAILS

Permit

Name	Value
PURPOSE	Residential Repair/Remodel
CONSTRUCTION COST	7400.00
CONSTRUCTION TYPE	V
FLOOD ZONE	X
NATURAL GAS SIGNOFF	N
OCCUPANCY TYPE	Residential

REQUIRED INSPECTIONS

Final

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Issued By: 

Contractor or Authorized Agent:  Date: 6/24/19



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

MC2019-179	MECHANICAL
PROJECT NAME:	ISSUED: 06/10/2019
SITE ADDRESS: 1727 SOBLE DR KILL DEVIL HILLS	EXPIRES: 12/07/2019

APPLICANT: Blondin, Dave 6510 Bluebill LN ALEXANDRIA, VA 22307 571-214-9464	OWNER: Blondin, Dave 6510 Bluebill LN ALEXANDRIA, VA 22307 571-214-9464
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MECHANICAL, H-2, H-3:	ATLANTIC HEATING AND COOLING P.O. Box 132 Kill Devil Hills, NC 27948 441-7642	License: 11618 Expires: 12/31/2019
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PARCEL:

PIN: 988410472412	Parcel Number: 002921000
Address: 1727 SOBLE DR KILL DEVIL HILLS	Zoning:
Addition: HEDRICKS ADD-PAR B CROATAN SH	Block: 0 Lot(s): 5
Legal Description:	

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

PROJECT DESCRIPTION: HVAC changout

JUN 10 2019



Town of Kill Devil Hills

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

Planning and Inspection Department

MC2018-362	MECHANICAL
PROJECT NAME: Gans HVAC	ISSUED: 12/17/2018
SITE ADDRESS: 500 HOLLY ST W KILL DEVIL HILLS	EXPIRES: 06/15/2019

APPLICANT: MR. STUART M GANS
39422 Glenn Glade Ct
Chapel Hill, NC 27517

OWNER: MR. STUART M GANS
39422 Glenn Glade Ct
Chapel Hill, NC 27517

MECHANICAL: ALL IN ONE MECHANICAL
PO BOX 3392
KITTY HAWK, NC 27949
252-619-0049

License: 27675
Expires: 12/31/2018

PARCEL:

PIN: 988312856365

Parcel Number: 008221007

Address: 500 HOLLY ST W KILL DEVIL HILLS

Addition: KILL DEVIL BEACH EXTENDED

Zoning:

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

Legal Description:

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

PROJECT DESCRIPTION: Replace heat pump system

JUN 11 2019

MC2018-362

PROJECT NAME: Gans HVAC

SITE ADDRESS: 500 HOLLY ST W KILL DEVIL HILLS

MECHANICAL

ISSUED: 12/17/2018

EXPIRES: 06/15/2019

DETAILS

Permit

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

REQUIRED INSPECTIONS

Final

CONDITIONS

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Issued By: 

Contractor or Authorized Agent: W. W. Franer

Date: 3-12-19



Town of Kill Devil Hills

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

PAID

JUN 6 2019

Planning and Inspection Department

TOWN OF
KILL DEVIL HILLS

MC2019-168

PROJECT NAME: CHORY HVAC
SITE ADDRESS: 901 MEMORIAL BLVD N KILL DEVIL HILLS

MECHANICAL

ISSUED: 06/06/2019

EXPIRES: 12/03/2019

APPLICANT: CHORY, JOSEPH & CYNTHIA
307 DANCES BAY RD
ELIZABETH CITY, NC 27909

OWNER: CHORY, JOSEPH & CYNTHIA
307 DANCES BAY RD
ELIZABETH CITY, NC 27909

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

License: 13056
Expires: 12/31/2019

PARCEL:

PIN: 988415720656

Parcel Number: 028387000

Address: 901 MEMORIAL BLVD N KILL DEVIL HILLS

Addition: KITTY HAWK SHORES - REVISED

Zoning:
Block: 19 **Lot(s):** 8

Legal Description:

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

PROJECT DESCRIPTION: HVAC CHANGE OUT

MC2019-168

PROJECT NAME: CHORY HVAC

SITE ADDRESS: 901 MEMORIAL BLVD N KILL DEVIL HILLS

MECHANICAL

ISSUED: 06/06/2019

EXPIRES: 12/03/2019

DETAILS

Permit

Name	Value
PURPOSE	Residential Repair/Remodel
CONSTRUCTION COST	6500.00
CONSTRUCTION TYPE	V
FLOOD ZONE	AE
BASE FLOOD ELEVATION	8.00
NATURAL GAS SIGNOFF	N
OCCUPANCY TYPE	One & Two Family Dwelling

REQUIRED INSPECTIONS

Final

CONDITIONS

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Issued By: 

Contractor or Authorized Agent: 

Date: 6/6/19



Town of Kill Devil Hills

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

PAID

JUN 6 2019

Planning and Inspection Department

TOWN OF
KILL DEVIL HILLS

MC2019-167	MECHANICAL
PROJECT NAME: BIRDSONG HVAC	ISSUED: 06/06/2019
SITE ADDRESS: 3006 VA DARE TRL N KILL DEVIL HILLS	EXPIRES: 12/03/2019

APPLICANT: BIRDSONG, SANDRA FOSTER 520 RIVERVIEW DRIVE SUFFOLK, VA 23434	OWNER: BIRDSONG, SANDRA FOSTER 520 RIVERVIEW DRIVE SUFFOLK, VA 23434
---	---

MECHANICAL:	R A HOY PO Box 265 Kitty Hawk, NC 27949	License: 13056 Expires: 12/31/2019
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PARCEL:

PIN: 988513134401	Parcel Number: 002983001
Address: 3006 VA DARE TRL N KILL DEVIL HILLS	Zoning:
Addition: VIRGINIA DARE SHORES	Block: 9 Lot(s): 1
Legal Description:	

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

PROJECT DESCRIPTION: HVAC CHANGE OUT

MC2019-167**PROJECT NAME:** BIRDSONG HVAC**SITE ADDRESS:** 3006 VA DARE TRL N KILL DEVIL HILLS**MECHANICAL****ISSUED:** 06/06/2019**EXPIRES:** 12/03/2019**DETAILS****Permit**

Name	Value
PURPOSE	Residential Repair/Remodel
CONSTRUCTION COST	14115.00
CONSTRUCTION TYPE	V
FLOOD ZONE	VE
BASE FLOOD ELEVATION	11.00
NATURAL GAS SIGNOFF	N
OCCUPANCY TYPE	One & Two Family Dwelling

REQUIRED INSPECTIONS

Final

CONDITIONS

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Issued By: _____

Contractor or Authorized Agent: _____

Date: _____

6/6/19



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

MC2019-171

PROJECT NAME: GREGG HVAC
SITE ADDRESS: 332 EDEN ST ST W KILL DEVIL HILLS

MECHANICAL

ISSUED: 06/06/2019

EXPIRES: 12/03/2019

APPLICANT: MS. JENNIFER L GREGG
210 1/2 Adams Ave
Alexandria, Va 22301

OWNER: MS. JENNIFER L GREGG
210 1/2 Adams Ave
Alexandria, Va 22301

MECHANICAL H-3 CLASS 1: HARCO AIR
PO BOX 3156
KITTY HAWK, NC 27949
207-1371

License: 30194
Expires: 12/31/2019

PARCEL:

PIN: 988517004849

Parcel Number: 010213000

Address: 332 EDEN ST ST W KILL DEVIL HILLS

Addition: VIRGINIA DARE SHORES

Zoning:

Block: 47

Lot(s): 37-38

Legal Description:

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

PROJECT DESCRIPTION: HVAC CHANGE OUT

JUN 6 2019

MC2019-171

PROJECT NAME: GREGG HVAC

SITE ADDRESS: 332 EDEN ST ST W KILL DEVIL HILLS

MECHANICAL

ISSUED: 06/06/2019

EXPIRES: 12/03/2019

DETAILS

Permit

Name	Value
PURPOSE	Residential Repair/Remodel
CONSTRUCTION COST	5600.00
CONSTRUCTION TYPE	V
FLOOD ZONE	AE
BASE FLOOD ELEVATION	8.00
NATURAL GAS SIGNOFF	N
OCCUPANCY TYPE	One & Two Family Dwelling

REQUIRED INSPECTIONS

Final

CONDITIONS

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

Issued By: 

Contractor or Authorized Agent: 

Date: 6-6-19



Town of Kill Devil Hills

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

PAID
JUN 6 2019

Planning and Inspection Department

MC2019-169	MECHANICAL
PROJECT NAME: MAX'S PIZZA HVAC	ISSUED: 06/06/2019
SITE ADDRESS: 1722 N. Croatan Hwy UNKNOWN	EXPIRES: 12/03/2019

APPLICANT: OLIVOLA, DONALD J P O BOX 364 KILL DEVIL HILLS, NC 27948	OWNER: OLIVOLA, DONALD J P O BOX 364 KILL DEVIL HILLS, NC 27948
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MECHANICAL:	Trademark Heating & Cooling PO Box 2554 Kill Devil Hills, NC 27948	License: 31311 Expires: 12/31/2019
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PARCEL:

PIN: 988410373044-7288	Parcel Number:	
Address: 1722 N. Croatan Hwy UNKNOWN	Zoning:	
Addition:	Block:	Lot(s):
Legal Description:		

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

PROJECT DESCRIPTION: REPLACEMENT OF 3 ROOFTOP UNITS

MC2019-169

PROJECT NAME: MAX'S PIZZA HVAC
SITE ADDRESS: 1722 N. Croatan Hwy UNKNOWN

MECHANICAL

ISSUED: 06/06/2019

EXPIRES: 12/03/2019

DETAILS

Permit

Name	Value
PURPOSE	Commercial Repair/Remodel
CONSTRUCTION COST	27496.00
CONSTRUCTION TYPE	IV
FLOOD ZONE	AE
BASE FLOOD ELEVATION	9.00
NATURAL GAS SIGNOFF	N
OCCUPANCY TYPE	Business

REQUIRED INSPECTIONS

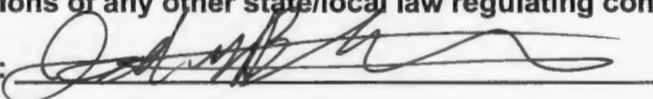
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CONDITIONS

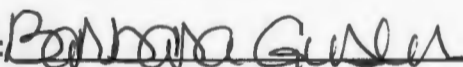
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Issued By:



Contractor or Authorized Agent:



Date:

6/6/19



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

MC2019-170	MECHANICAL
PROJECT NAME: 303 ARCHDALE LLC. HVAC CHANGE OUT	ISSUED: 06/06/2019
SITE ADDRESS: 303 ARCHDALE ST W KILL DEVIL HILLS	EXPIRES: 12/03/2019

APPLICANT: 303 W ARCHDALE LLC 5008 LUNAR DR kitty hawk, nc 27949	OWNER: 303 W ARCHDALE LLC 5008 LUNAR DR kitty hawk, nc 27949
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MECHANICAL H-3 CLASS 1:	HARCO AIR PO BOX 3156 KITTY HAWK, NC 27949 207-1371	License: 30194 Expires: 12/31/2019
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PARCEL:

PIN: 988517014683	Parcel Number: 000585000
Address: 303 ARCHDALE ST W KILL DEVIL HILLS	Zoning:
Addition: VIRGINIA DARE SHORES	Block: 45 Lot(s): 19-20
Legal Description:	

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

PROJECT DESCRIPTION: HVAC CHANGE OUT

PAID
JUN 6 2019
TOWN OF
KILL DEVIL HILLS

MC2019-170

PROJECT NAME: 303 ARCHDALE LLC. HVAC CHANGE OUT
SITE ADDRESS: 303 ARCHDALE ST W KILL DEVIL HILLS

MECHANICAL

ISSUED: 06/06/2019

EXPIRES: 12/03/2019

DETAILS

Permit

Name	Value
PURPOSE	Residential Repair/Remodel
CONSTRUCTION COST	7300.00
CONSTRUCTION TYPE	V
FLOOD ZONE	AE
BASE FLOOD ELEVATION	8.00
NATURAL GAS SIGNOFF	N
OCCUPANCY TYPE	One & Two Family Dwelling

REQUIRED INSPECTIONS

Final

CONDITIONS

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Issued By: 

Contractor or Authorized Agent: 

Date: 6-6-19



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

MC2019-174	MECHANICAL
PROJECT NAME: CAPT. GEORGE'S HVAC	ISSUED: 06/06/2019
SITE ADDRESS: 705 CROATAN HWY S KILL DEVIL HILLS	EXPIRES: 12/03/2019

APPLICANT: PITCO 1, LLC 1956 Laskin Road Va. Beach, Va 23454	OWNER: PITCO 1, LLC 1956 Laskin Road Va. Beach, Va 23454
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MECHANICAL:	R A HOY PO Box 265 Kitty Hawk, NC 27949	License: 13056 Expires: 12/31/2019
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PARCEL:

PIN: 988308892096	Parcel Number: 004309000
Address: 705 CROATAN HWY S KILL DEVIL HILLS	Zoning:
Addition: KILL DEVIL HILLS REALTY CORP	Block: 1 Lot(s): 5 & 6
Legal Description:	

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

PROJECT DESCRIPTION: C/O 20TON COMM GAS W/AC

PAID
JUN 6 2019
TOWN OF
KILL DEVIL HILLS

MC2019-174

PROJECT NAME: CAPT. GEORGE'S HVAC
SITE ADDRESS: 705 CROATAN HWY S KILL DEVIL HILLS

MECHANICAL

ISSUED: 06/06/2019

EXPIRES: 12/03/2019

DETAILS

Permit

Name	Value
PURPOSE	Commercial Repair/Remodel
CONSTRUCTION COST	29569.00
CONSTRUCTION TYPE	V
FLOOD ZONE	AE
BASE FLOOD ELEVATION	8
NATURAL GAS SIGNOFF	N

REQUIRED INSPECTIONS

Final

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Issued By: _____

Contractor or Authorized Agent: _____

Date: _____

6/6/19



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

MC2019-173

PROJECT NAME: HOLLISTER HVAC
SITE ADDRESS: 204 SHILOH ST KILL DEVIL HILLS

MECHANICAL

ISSUED: 06/06/2019

EXPIRES: 12/03/2019

APPLICANT: DAVID HOLLISTER
204 SHILOH ST
Kill Devil Hills, NC 27948
252-619-0077

OWNER: DAVID HOLLISTER
204 SHILOH ST
Kill Devil Hills, NC 27948
252-619-0077

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

License: 13056
Expires: 12/31/2019

PARCEL:

PIN: 988513030081

Parcel Number: 000992000

Address: 204 SHILOH ST KILL DEVIL HILLS

Addition: MOOR SHORES

Zoning:
Block: 0 **Lot(s):** 27

Legal Description:

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

PROJECT DESCRIPTION: HVAC CHANGE OUT

PAID
JUN 6 2019

MC2019-173

PROJECT NAME: HOLLISTER HVAC
SITE ADDRESS: 204 SHILOH ST KILL DEVIL HILLS

MECHANICAL

ISSUED: 06/06/2019

EXPIRES: 12/03/2019

DETAILS

Permit

Name	Value
PURPOSE	Residential Repair/Remodel
CONSTRUCTION COST	6912.00
CONSTRUCTION TYPE	V
FLOOD ZONE	AE
BASE FLOOD ELEVATION	8.00
NATURAL GAS SIGNOFF	N
OCCUPANCY TYPE	One & Two Family Dwelling

REQUIRED INSPECTIONS

Final

CONDITIONS

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Issued By: _____

Contractor or Authorized Agent: _____

Date: _____



Town of Kill Devil Hills

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

Planning and Inspection Department

MC2019-172

PROJECT NAME: Curcio HVAC
SITE ADDRESS: 1408 VA DARE TRL N KILL DEVIL HILLS

MECHANICAL

ISSUED: 06/06/2019

EXPIRES: 12/03/2019

APPLICANT: VICENT CURCIO
2111 Galloping Way
Vienna, VA 22181

OWNER: VICENT CURCIO
2111 Galloping Way
Vienna, VA 22181

BUILDING UNLIMITED: R A Hoy Heating & Air
PO Box 235
kitty hawk, nc 27949
252-261-2008

License: 18132
Expires: 12/31/2019

PARCEL:

PIN: 988411559102

Parcel Number: 002760000

Address: 1408 VA DARE TRL N KILL DEVIL HILLS

Zoning:

Addition: SUBDIVISION - NONE

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

Legal Description:

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

PROJECT DESCRIPTION: C/O 2 Ton HVAC System

PAID
JUN 6 2019
TOWN OF KILL DEVIL HILLS

MC2019-172

PROJECT NAME: Curcio HVAC

SITE ADDRESS: 1408 VA DARE TRL N KILL DEVIL HILLS

MECHANICAL

ISSUED: 06/06/2019

EXPIRES: 12/03/2019

DETAILS

Permit

Name	Value
PURPOSE	Residential Repair/Remodel
CONSTRUCTION COST	7067.00
CONSTRUCTION TYPE	V
FLOOD ZONE	AE
BASE FLOOD ELEVATION	8
NATURAL GAS SIGNOFF	N

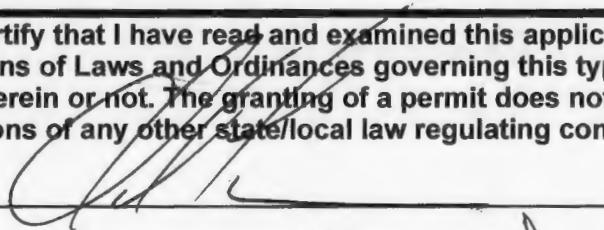
REQUIRED INSPECTIONS

Final

CONDITIONS

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Issued By: 

Contractor or Authorized Agent: 

Date: 6/6/19

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

C/O HVAC
601 AVALON DR W KILL DEVIL HILLS

MECHANICAL
ISSUED: 10/19/2018
EXPIRES: 04/17/2019

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

OWNER: JOURNEE, RICHARD C III
309 THELMAR LANE
PORTSMOUTH, VA 23701

H-3: GEORGE & CO. License: 31510
105 Beau Pkwy Expires: 12/31/2018
Elizabeth City, NC 27909
335-2596

PARCEL:

PIN: 988405098838 **Parcel Number:** 003058000
Address: 601 AVALON DR W KILL DEVIL HILLS
Addition: AVALON BEACH **Zoning:**
Legal Description: **Block:** 0 **Lot(s):** 160

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

PROJECT DESCRIPTION: C/O HVAC system including duct work.

DETAILS

Permit Name	Value
PURPOSE	Residential Repair/Remodel
CONSTRUCTION COST	9250.00
FLOOD ZONE	AE
BASE FLOOD ELEVATION	8
NATURAL GAS SIGNOFF	N

Printed by : CTHUMAN on: 10/19/2018 08:34 AM

JUN 6 2019

MC2018-331

PROJECT NAME: Journee HVAC

SITE ADDRESS: 601 AVALON DR W KILL DEVIL HILLS

MECHANICAL

ISSUED: 10/19/2018

EXPIRES: 04/17/2019

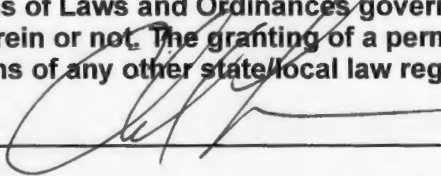
REQUIRED INSPECTIONS

Final

CONDITIONS

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Issued By: 

Contractor or Authorized Agent: Michael Spivey Date: 6.6.19



Town of Kill Devil Hills

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

PAID

JUN 5 2019

Planning and Inspection Department

MC2019-157	MECHANICAL
PROJECT NAME:	ISSUED: 06/03/2019
SITE ADDRESS: 201 FOURTH ST W KILL DEVIL HILLS	EXPIRES: 11/30/2019

APPLICANT: Huggins, Haley
201 WEST Fourth ST
Kill Devil Hills, NC 27948

OWNER: Huggins, Haley
201 WEST Fourth ST
Kill Devil Hills, NC 27948

MECHANICAL: ALL SEASONS HEATING & COOLING
P.O. Box 244
Point Harbor, NC 27964
491-9232

License: 19091
Expires: 12/31/2019

PARCEL:

PIN: 988406288233

Parcel Number: 002210000

Address: 201 FOURTH ST W KILL DEVIL HILLS

Zoning:

Addition: WRIGHT'S SHORES SEC 2

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

Legal Description:

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

PROJECT DESCRIPTION: HVAC REPLACEMENT

MC2019-157

PROJECT NAME:

SITE ADDRESS: 201 FOURTH ST W KILL DEVIL HILLS

MECHANICAL

ISSUED: 06/03/2019

EXPIRES: 11/30/2019

DETAILS

Permit

Name	Value
PURPOSE	Residential Repair/Remodel
CONSTRUCTION COST	4700.00
CONSTRUCTION TYPE	V
FLOOD ZONE	AE
BASE FLOOD ELEVATION	8
NATURAL GAS SIGNOFF	N
OCCUPANCY TYPE	One & Two Family Dwelling

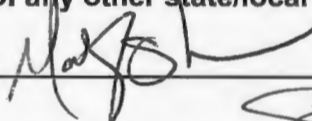
REQUIRED INSPECTIONS

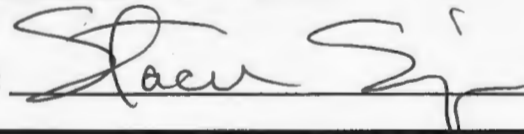
Final

CONDITIONS

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Issued By: 

Contractor or Authorized Agent:  Date: 6-5-19



Town of Kill Devil Hills

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

PAID

Planning and Inspection Department

JUN 5 2019

MC2019-165	MECHANICAL
PROJECT NAME: FISHER HVAC	ISSUED: 06/05/2019
SITE ADDRESS: 538 ARCHDALE ST W KILL DEVIL HILLS	EXPIRES: 12/02/2019

APPLICANT: KARIN FISHER 21 VILLAGE SQ HARRISONBURG, VA 22802	OWNER: KARIN FISHER 21 VILLAGE SQ HARRISONBURG, VA 22802
---	---

MECHANICAL H-3:	AMERICAN HOME SERVICE, INC P.O. Box 2703 Kill Devil Hills, NC 27948 252-480-3400	License: 27257 Expires: 12/31/2019
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PARCEL:

PIN: 987520900947	Parcel Number: 000715000
Address: 538 ARCHDALE ST W KILL DEVIL HILLS	Zoning:
Addition: VIRGINIA DARE SHORES	Block: 70 Lot(s): 31-36
Legal Description:	

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

PROJECT DESCRIPTION: HVAC CHANGE OUT

MC2019-165

PROJECT NAME: FISHER HVAC

SITE ADDRESS: 538 ARCHDALE ST W KILL DEVIL HILLS

MECHANICAL

ISSUED: 06/05/2019

EXPIRES: 12/02/2019

DETAILS

Permit

Name	Value
PURPOSE	Residential Repair/Remodel
CONSTRUCTION COST	5300.00
CONSTRUCTION TYPE	V
FLOOD ZONE	AE
BASE FLOOD ELEVATION	8.00
NATURAL GAS SIGNOFF	N
OCCUPANCY TYPE	One & Two Family Dwelling

REQUIRED INSPECTIONS

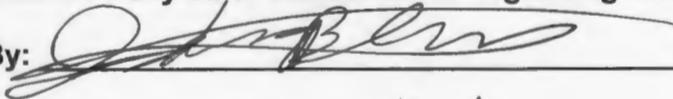
Final

CONDITIONS

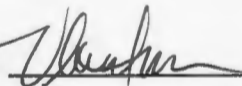
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Issued By:



Contractor or Authorized Agent:



Date:

6-5-2019



Town of Kill Devil Hills

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

Planning and Inspection Department

MC2019-166	MECHANICAL
PROJECT NAME: Beckford HVAC	ISSUED: 06/05/2019
SITE ADDRESS: 108 VEELEE DR KILL DEVIL HILLS	EXPIRES: 12/02/2019

APPLICANT: BECKFORD, ANDREW J 2600 LACYWOOD LANE SANDSTON, VA 23150	OWNER: BECKFORD, ANDREW J 2600 LACYWOOD LANE SANDSTON, VA 23150
--	--

MECHANICAL:	American Refrigeration P.O. Box 835 nags head, nc 27959 252-305-5320	License: 29031 Expires: 12/31/2019
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PARCEL:

PIN: 988415539905	Parcel Number: 003491000
Address: 108 VEELEE DR KILL DEVIL HILLS	Zoning:
Addition: MEMORIAL OVERLOOK	Block: 0 Lot(s): 32
Legal Description:	

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

PROJECT DESCRIPTION: C/O 2 Ton HVAC System

PAID
JUN 5 2019

MC2019-166

PROJECT NAME: Beckford HVAC
SITE ADDRESS: 108 VEELEE DR KILL DEVIL HILLS

MECHANICAL

ISSUED: 06/05/2019

EXPIRES: 12/02/2019

DETAILS

Permit

Name	Value
PURPOSE	Residential Repair/Remodel
CONSTRUCTION COST	5671.00
CONSTRUCTION TYPE	V
FLOOD ZONE	AE
BASE FLOOD ELEVATION	8
NATURAL GAS SIGNOFF	N

REQUIRED INSPECTIONS

Final

CONDITIONS

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Issued By: _____

Contractor or Authorized Agent: _____ Date: 6/5/19



Town of Kill Devil Hills

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

PAID

JUN 5 2019

Planning and Inspection Department

TOWN OF
KILL DEVIL HILLS

MC2019-164	MECHANICAL
PROJECT NAME: PRICE HVAC	ISSUED: 06/05/2019
SITE ADDRESS: 105 SPORTSMAN DR W KILL DEVIL HILLS	EXPIRES: 12/02/2019

APPLICANT: Barry Price P. O. Box 1252 Kill Devil Hills, NC 27948	OWNER: Barry Price P. O. Box 1252 Kill Devil Hills, NC 27948
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PLUMBING, MECHANICAL:	NORRIS MECHANICAL P.O. Box 217 HARBINGER, NC 27941 252-491-2673	License: 11100 Expires: 12/31/2019
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PARCEL:

PIN: 988517107607	Parcel Number: 001733000
Address: 105 SPORTSMAN DR W KILL DEVIL HILLS	Zoning:
Addition: AVALON BEACH	Block: 0 Lot(s): 97
Legal Description:	

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

PROJECT DESCRIPTION: HVAC CHANGE OUT

MC2019-164

PROJECT NAME: PRICE HVAC

SITE ADDRESS: 105 SPORTSMAN DR W KILL DEVIL HILLS

MECHANICAL

ISSUED: 06/05/2019

EXPIRES: 12/02/2019

DETAILS

Permit

Name	Value
PURPOSE	Residential Repair/Remodel
CONSTRUCTION COST	7200.00
CONSTRUCTION TYPE	V
FLOOD ZONE	AE
BASE FLOOD ELEVATION	9.00
NATURAL GAS SIGNOFF	N
OCCUPANCY TYPE	One & Two Family Dwelling

REQUIRED INSPECTIONS

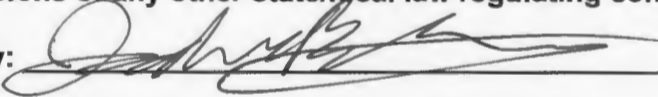
Final

CONDITIONS

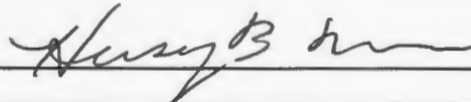
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Issued By:



Contractor or Authorized Agent:



Date: 6-5-19



Town of Kill Devil Hills

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

PAID
JUN 5 2019

Planning and Inspection Department

MC2019-162	MECHANICAL
PROJECT NAME: OBX Baptist HVAC	ISSUED: 06/05/2019
SITE ADDRESS: 216 FIRST ST W KILL DEVIL HILLS	EXPIRES: 12/02/2019

APPLICANT: OUTER BANKS BAPTIST MISSION J H ROBB JR, R J PIERCE, FIRST STREET KILL DEVIL HILLS, NC 27948	OWNER: OUTER BANKS BAPTIST MISSION J H ROBB JR, R J PIERCE, FIRST STREET KILL DEVIL HILLS, NC 27948
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MECHANICAL H-3:	AMERICAN HOME SERVICE, INC P.O. Box 2703 Kill Devil Hills, NC 27948 252-480-3400	License: 27257 Expires: 12/31/2019
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PARCEL:

PIN: 988410359600	Parcel Number: 002743000
Address: 216 FIRST ST W KILL DEVIL HILLS	Zoning:
Addition: SUBDIVISION - NONE	Block: 0 Lot(s): 0
Legal Description:	

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

PROJECT DESCRIPTION: C/O 5 Ton HVAC System

MC2019-162

PROJECT NAME: OBX Baptist HVAC
SITE ADDRESS: 216 FIRST ST W KILL DEVIL HILLS

MECHANICAL

ISSUED: 06/05/2019

EXPIRES: 12/02/2019

DETAILS

Permit

Name	Value
PURPOSE	Commercial Repair/Remodel
CONSTRUCTION COST	6500.00
CONSTRUCTION TYPE	III
FLOOD ZONE	AE
BASE FLOOD ELEVATION	9
NATURAL GAS SIGNOFF	N

REQUIRED INSPECTIONS

Final

CONDITIONS

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

Issued By: _____

Contractor or Authorized Agent: _____

Date: 6-5-2019



Town of Kill Devil Hills

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

JUN 5 2019

Planning and Inspection Department

MC2019-163	MECHANICAL
PROJECT NAME: ETHERIDGE HVAC	ISSUED: 06/05/2019
SITE ADDRESS: 101 AIRSTRIP RD W KILL DEVIL HILLS	EXPIRES: 12/02/2019

APPLICANT: ETHERIDGE, ROY
P O BOX 185
POWELLS POINT, NC 27966

OWNER: ETHERIDGE, ROY
P O BOX 185
POWELLS POINT, NC 27966

PLUMBING, MECHANICAL: NORRIS MECHANICAL
P.O. Box 217
HARBINGER, NC 27941
252-491-2673

License: 11100
Expires: 12/31/2019

PARCEL:

PIN: 988312878337

Parcel Number: 004337005

Address: 101 AIRSTRIP RD W KILL DEVIL HILLS

Addition: KILL DEVIL HILLS REALTY CORP

Zoning:

Block: 8 **Lot(s):** 5 & PT 4

Legal Description:

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

PROJECT DESCRIPTION: HVAC CHANGE OUT

MC2019-163

PROJECT NAME: ETHERIDGE HVAC

SITE ADDRESS: 101 AIRSTRIP RD W KILL DEVIL HILLS

MECHANICAL

ISSUED: 06/05/2019

EXPIRES: 12/02/2019

DETAILS

Permit	
Name	Value
PURPOSE	Residential Repair/Remodel
CONSTRUCTION COST	5800.00
CONSTRUCTION TYPE	V
FLOOD ZONE	AE
BASE FLOOD ELEVATION	9.00
NATURAL GAS SIGNOFF	N
OCCUPANCY TYPE	Residential

REQUIRED INSPECTIONS

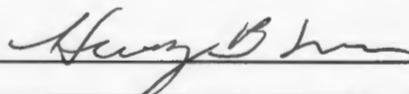
Final

CONDITIONS

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Issued By: 

Contractor or Authorized Agent:  **Date:** 6-5-19



Town of Kill Devil Hills

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

JUN 4 2019

Planning and Inspection Department

MC2019-160	MECHANICAL
PROJECT NAME: Coleman HVAC	ISSUED: 06/04/2019
SITE ADDRESS: 3210 VA DARE TRL N KILL DEVIL HILLS	EXPIRES: 12/01/2019

APPLICANT: Coleman, Bob & Glenda 9358 Tartan View DR Fairfax, VA 22032 703-625-3670	OWNER: Coleman, Bob & Glenda 9358 Tartan View DR Fairfax, VA 22032 703-625-3670
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H-3, CLASS I:	AIR-O-SMITH 330 North Dogwood Trail Southern Shores, NC 27949 252-261-5238	License: 30070 Expires: 12/31/2019
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PARCEL:

PIN: 988513046792	Parcel Number: 000080001
Address: 3210 VA DARE TRL N KILL DEVIL HILLS	Zoning:
Addition: ORVILLE BEACH BLK 5	Block: 5 Lot(s): 3
Legal Description:	

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

PROJECT DESCRIPTION: C/O 2Ton HVAC System

MC2019-160

PROJECT NAME: Coleman HVAC

SITE ADDRESS: 3210 VA DARE TRL N KILL DEVIL HILLS

MECHANICAL

ISSUED: 06/04/2019

EXPIRES: 12/01/2019

DETAILS

Permit

Name	Value
PURPOSE	Residential Repair/Remodel
CONSTRUCTION COST	7400.00
CONSTRUCTION TYPE	V
FLOOD ZONE	VE
BASE FLOOD ELEVATION	11
NATURAL GAS SIGNOFF	N

REQUIRED INSPECTIONS

Final

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Issued By: _____

Contractor or Authorized Agent: _____ Date: 6/4/19



Town of Kill Devil Hills

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

JUN 4 2019

Planning and Inspection Department

MC2019-161	MECHANICAL
PROJECT NAME:	ISSUED: 06/04/2019
SITE ADDRESS: 102 VEELEE DR KILL DEVIL HILLS	EXPIRES: 12/01/2019

APPLICANT: JONES, WILBUR L 5450 SOAP STONE RD JETERSVILLE, VA 23083	OWNER: JONES, WILBUR L 5450 SOAP STONE RD JETERSVILLE, VA 23083
--	--

MECHANICAL:	R A HOY PO Box 265 Kitty Hawk, NC 27949	License: 13056 Expires: 12/31/2019
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PARCEL:

PIN: 988415537836	Parcel Number: 003494000
Address: 102 VEELEE DR KILL DEVIL HILLS	Zoning:
Addition: MEMORIAL OVERLOOK	Block: 0 Lot(s): 35
Legal Description:	

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

PROJECT DESCRIPTION: HVAC changout

MC2019-161

PROJECT NAME:

SITE ADDRESS: 102 VEELEE DR KILL DEVIL HILLS

MECHANICAL

ISSUED: 06/04/2019

EXPIRES: 12/01/2019

DETAILS

Permit

Name	Value
PURPOSE	Residential Repair/Remodel
CONSTRUCTION COST	6598.00
CONSTRUCTION TYPE	V
FLOOD ZONE	AE
BASE FLOOD ELEVATION	8
NATURAL GAS SIGNOFF	N
OCCUPANCY TYPE	One & Two Family Dwelling

REQUIRED INSPECTIONS

Final

CONDITIONS

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Issued By: Marty Shaw

Contractor or Authorized Agent: Rate Gallagher Date: 6/4/19



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

MC2019-155	MECHANICAL
PROJECT NAME:	ISSUED: 06/03/2019
SITE ADDRESS: 1517 NORTH VIRGINIA DARE TRAIL KILL DEVIL HILLS	EXPIRES: 11/30/2019

APPLICANT: BILL-MAR PROPERTIES, LLC 1824 RIVERSHORE RD ELIZABETH CITY, NC 27909 252-333-5666	OWNER: BILL-MAR PROPERTIES, LLC 1824 RIVERSHORE RD ELIZABETH CITY, NC 27909 252-333-5666
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MECHANICAL, H-2, H-3:	ATLANTIC HEATING AND COOLING P.O. Box 132 Kill Devil Hills, NC 27948 441-7642	License: 11618 Expires: 12/31/2019
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PARCEL:

PIN: 002768000	Parcel Number:
Address: 1517 NORTH VIRGINIA DARE TRAIL KILL DEVIL HILLS	Zoning:
Addition:	Block: Lot(s):
Legal Description: CROATAN SHORES, LOT: 12-13 BLK: A SEC 1	

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

PROJECT DESCRIPTION: HVAC CHANGOUT

JUN 3 2019

MC2019-155

PROJECT NAME:

SITE ADDRESS: 1517 NORTH VIRGINIA DARE TRAIL KILL DEVIL HILLS

MECHANICAL

ISSUED: 06/03/2019

EXPIRES: 11/30/2019

DETAILS

Permit

Name	Value
PURPOSE	Residential Repair/Remodel
CONSTRUCTION COST	5300.00
CONSTRUCTION TYPE	V
FLOOD ZONE	VE
BASE FLOOD ELEVATION	11
NATURAL GAS SIGNOFF	N
OCCUPANCY TYPE	One & Two Family Dwelling

REQUIRED INSPECTIONS

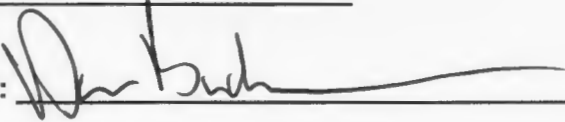
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Issued By: 

Contractor or Authorized Agent:  Date: 6/3/19



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

MC2019-156	MECHANICAL
PROJECT NAME:	ISSUED: 06/03/2019
SITE ADDRESS: 305 DURHAM ST W KILL DEVIL HILLS	EXPIRES: 11/30/2019

APPLICANT: Lent, Johnathan 67045 Country Club Rd SAINT CLAIRSVILLE, OH 43950	OWNER: Lent, Johnathan 67045 Country Club Rd SAINT CLAIRSVILLE, OH 43950
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MECHANICAL, H-2, H-3:	ATLANTIC HEATING AND COOLING P.O. Box 132 Kill Devil Hills, NC 27948 441-7642	License: 11618 Expires: 12/31/2019
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PARCEL:

PIN: 988405281904	Parcel Number: 001338000
Address: 305 DURHAM ST W KILL DEVIL HILLS	Zoning:
Addition: AVALON BEACH ANNEX 2 & 3	Block: 0 Lot(s): 622
Legal Description:	

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

PROJECT DESCRIPTION: HVAC CHANGEOUT

JUN 3 2019

MC2019-156

PROJECT NAME:

SITE ADDRESS: 305 DURHAM ST W KILL DEVIL HILLS

MECHANICAL

ISSUED: 06/03/2019

EXPIRES: 11/30/2019

DETAILS

Permit

Name	Value
PURPOSE	Residential Repair/Remodel
CONSTRUCTION COST	7300.00
CONSTRUCTION TYPE	V
FLOOD ZONE	AE
BASE FLOOD ELEVATION	8
NATURAL GAS SIGNOFF	N
OCCUPANCY TYPE	One & Two Family Dwelling

REQUIRED INSPECTIONS

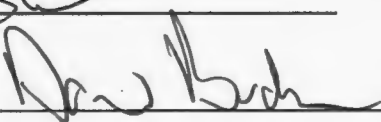
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Issued By: 

Contractor or Authorized Agent: 

Date: 6/3/19



Town of Kill Devil Hills

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

JUN 4 2019

Planning and Inspection Department

MC2019-158	MECHANICAL
PROJECT NAME: Catlett HVAC	ISSUED: 06/04/2019
SITE ADDRESS: 507 Archdale St. Kill Devil Hills	EXPIRES: 12/01/2019

APPLICANT: Catlett, Carter
640 Holly Grove Dr
RANDLEMAN, NC 27317

OWNER: Catlett, Carter
640 Holly Grove Dr
RANDLEMAN, NC 27317

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

License: 13056
Expires: 12/31/2019

PARCEL:

PIN: 987520914065

Parcel Number: 029917000

Address: 507 Archdale St. Kill Devil Hills

Zoning:

Addition: VIRGINIA DARE SHORES

Block: 71 **Lot(s):** 17 and 18

Legal Description:

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

PROJECT DESCRIPTION: C/O 2Ton HVAC System

MC2019-158

PROJECT NAME: Catlett HVAC

SITE ADDRESS: 507 Archdale St. Kill Devil Hills

MECHANICAL

ISSUED: 06/04/2019

EXPIRES: 12/01/2019

DETAILS

Permit

Name	Value
PURPOSE	Residential Repair/Remodel
CONSTRUCTION COST	6361.00
CONSTRUCTION TYPE	V
FLOOD ZONE	AE
BASE FLOOD ELEVATION	8
NATURAL GAS SIGNOFF	N

REQUIRED INSPECTIONS

Final

CONDITIONS

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Issued By: 

Contractor or Authorized Agent: 

Date: 6/4/19



Town of Kill Devil Hills

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

JUN 4 2019

Planning and Inspection Department

MC2019-159

PROJECT NAME:
SITE ADDRESS: 607 DURHAM ST W KILL DEVIL HILLS

MECHANICAL

ISSUED: 06/04/2019

EXPIRES: 12/01/2019

APPLICANT: MR. EDWARD W MUMMA
607 W DURHAM ST
KILL DEVIL HILLS, NC 27948

OWNER: MR. EDWARD W MUMMA
607 W DURHAM ST
KILL DEVIL HILLS, NC 27948

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

License: 13056
Expires: 12/31/2019

PARCEL:

PIN: 988405184505

Parcel Number: 001366000

Address: 607 DURHAM ST W KILL DEVIL HILLS

Addition: AVALON BEACH ANNEX 2 & 3

Zoning:
Block: 0 **Lot(s):** 654

Legal Description:

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

PROJECT DESCRIPTION: HVAC changout

MC2019-159

PROJECT NAME:

SITE ADDRESS: 607 DURHAM ST W KILL DEVIL HILLS

MECHANICAL

ISSUED: 06/04/2019

EXPIRES: 12/01/2019

DETAILS

Permit

Name	Value
PURPOSE	Residential Repair/Remodel
CONSTRUCTION COST	6918.00
CONSTRUCTION TYPE	V
FLOOD ZONE	X
NATURAL GAS SIGNOFF	N
OCCUPANCY TYPE	One & Two Family Dwelling

REQUIRED INSPECTIONS

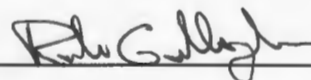
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Issued By: 

Contractor or Authorized Agent:  Date: 6/4/19



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

MC2019-154	MECHANICAL
PROJECT NAME:	ISSUED: 06/03/2019
SITE ADDRESS: 518 PARKWOOD DR KILL DEVIL HILLS	EXPIRES: 11/30/2019

APPLICANT: Delo, Howland
518 Parkwood DR
Kill Devil Hills, NC 27948
252-305-4809

OWNER: Delo, Howland
518 Parkwood DR
Kill Devil Hills, NC 27948
252-305-4809

MECHANICAL, H-2, H-3:

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

License: 11618
Expires: 12/31/2019

PARCEL:

PIN: 988414228563

Parcel Number: 004046010

Address: 518 PARKWOOD DR KILL DEVIL HILLS

Zoning:

Addition: WRIGHT WOODS

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

Legal Description:

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

PROJECT DESCRIPTION: HVAC CHANGEOUT

JUN 3 2019

MC2019-154

PROJECT NAME:

SITE ADDRESS: 518 PARKWOOD DR KILL DEVIL HILLS

MECHANICAL

ISSUED: 06/03/2019

EXPIRES: 11/30/2019

DETAILS

Permit

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

REQUIRED INSPECTIONS

Final

CONDITIONS

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Issued By: 

Contractor or Authorized Agent: 

Date: 6/3/19



Town of Kill Devil Hills

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

JUN 6 2019

Planning and Inspection Department

BJ2019-099	BUILDING JOINT
PROJECT NAME: Kies new SFD	ISSUED: 06/06/2019
SITE ADDRESS: 503 VA DARE TRL S KILL DEVIL HILLS	EXPIRES: 05/29/2020

APPLICANT: Kies, Kenneth & Kathleen
6109 RD
MCLEAN, VA 22101

OWNER: Kies, Kenneth & Kathleen
6109 RD
MCLEAN, VA 22101

CONTRACTOR: RM SAUNDERS GENERAL CONTRACTORS
PO Box 1922
Kill Devil Hills, NC 27948
480-9477

GENERAL BUILDING - UNLIMITED: SAUNDERS, R.M.
P.O. box 1922
Kill Devil Hills, NC 27948

License: 32380
Expires: 12/31/2019

PARCEL:

PIN: 988308990919

Parcel Number: 004232000

Address: 503 VA DARE TRL S KILL DEVIL HILLS

Zoning:

Addition: KILL DEVIL HILLS SEC 1

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

Legal Description:

FEES:	<u>Paid</u>	<u>Due</u>	BUILDING AREA:	
Open Deck Fee	\$450.00	\$0.00	Open Decks	3 EA
Covered Porch Residential	\$2,643.00	\$0.00	Covered Porches/Decks	3524 SQFT
Res. Building Permit Fee	\$11,316.00	\$0.00	Residential Heated Space	15088 sq. Ft.
Pool/Hot Tub	\$200.00	\$0.00	(.75)	
Pool/Hot Tub	\$200.00	\$0.00	# of Temporary Poles	1 EA
Pool/Hot Tub	\$200.00	\$0.00	Residential Accessory	66 Sq. Ft
T-Pole	\$50.00	\$0.00	Structure	
Accessory Structure	\$100.00	\$0.00		
Totals :	\$15,159.00	\$0.00		

PROJECT DESCRIPTION: New 27 Bedroom Single Family Dwelling

Town of Kill Devil Hills
Water Charges

PAID

Water Tap #: T23507

BJ2019-099

PROJECT NAME: Kies new SFD

SITE ADDRESS: 503 VA DARE TRL S KILL DEVIL HILLS

BUILDING JOINT

ISSUED: 06/06/2019

EXPIRES: 05/29/2020

DETAILS**Permit**

Name	Value
ZONING DISTRICT	OIR
FRONT YARD SETBACK	30
REAR YARD SETBACK	CAMA
SIDE YARD SETBACK	12
# PARKING SPACES/BEDROOM	27
CAMA PERMIT	Y
CAMA EXEMPTION	N
FLOOD ZONE	VE
BASE FLOOD ELEVATION	11.0
Proposed First Floor Elevation	13.10
PURPOSE	Residential New
CONSTRUCTION COST	2675000.00
LOT COVERAGE	36.90
SURVEYOR NAME AND NUMBER	Mike Robinson 18994
ENGINEER AND LICENSE NUMBER	Raymond Pate 13018
ARCHITECT NAME AND LICENSE NUMBER	Michael A Florez 14163
CULVERT	N
DRIVEWAY INVERT 2	N
OCCUPANCY TYPE	One & Two Family Dwelling

REQUIRED INSPECTIONS

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

CONDITIONS

BJ2019-099

PROJECT NAME: Kies new SFD

SITE ADDRESS: 503 VA DARE TRL S KILL DEVIL HILLS

BUILDING JOINT

ISSUED: 06/06/2019

EXPIRES: 05/29/2020

- * 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.
- * 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).
- * **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.
- * 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.
- * Beach walkway and dune deck eastward of proposed pool will be constructed under separate permit.

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

Issued By: _____

Contractor or Authorized Agent: _____ **Date:** 6/6/19



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

BJ2019-100

PROJECT NAME: STASSIE BOATLIFT
SITE ADDRESS: 2042 BAY DR KILL DEVIL HILLS

BUILDING JOINT

ISSUED: 05/24/2019

EXPIRES: 11/20/2019

APPLICANT: Herb & Mary Stassie
777 Stinchcomb Rd.
SEVERNA PARK, MD 21146
410-703-5366

OWNER: Herb & Mary Stassie
777 Stinchcomb Rd.
SEVERNA PARK, MD 21146
410-703-5366

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: 987408984620

Parcel Number: 001989000

Address: 2042 BAY DR KILL DEVIL HILLS

Addition: AVALON BEACH ANNEX 2 & 3

Zoning:
Block: 0 **Lot(s):** 1014

Legal Description:

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

PROJECT DESCRIPTION: REPLACE BOATLIFT

JUN 5 2019

BJ2019-100**PROJECT NAME:** STASSIE BOATLIFT
SITE ADDRESS: 2042 BAY DR KILL DEVIL HILLS**BUILDING JOINT****ISSUED:** 05/24/2019**EXPIRES:** 11/20/2019

DETAILS**Permit**

Name	Value
ZONING DISTRICT	RL
FRONT YARD SETBACK	30
REAR YARD SETBACK	CAMA
SIDE YARD SETBACK	10
CAMA PERMIT	N
CAMA EXEMPTION	N
FLOOD ZONE	AE
BASE FLOOD ELEVATION	9.00
PURPOSE	Residential Repair/Remodel
CONSTRUCTION TYPE	V
CONSTRUCTION COST	12666.00
CULVERT	N
DRIVEWAY INVERT 2	N
OCCUPANCY TYPE	Residential

REQUIRED INSPECTIONS

Final

Electrical

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.

BJ2019-100

PROJECT NAME: STASSIE BOATLIFT
SITE ADDRESS: 2042 BAY DR KILL DEVIL HILLS

BUILDING JOINT

ISSUED: 05/24/2019

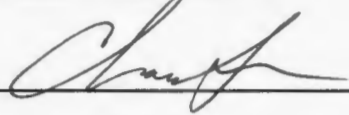
EXPIRES: 11/20/2019

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: _____

6/5/19



Town of Kill Devil Hills

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

JUN 5 2019

Planning and Inspection Department

BJ2019-103

PROJECT NAME: Faison Remodel
SITE ADDRESS: 1202 FOX ST KILL DEVIL HILLS

BUILDING JOINT

ISSUED: 06/05/2019

EXPIRES: 12/02/2019

APPLICANT: FAISON, GENE
1202 FOX STREET
Kill Devil Hills, NC 27948

OWNER: FAISON, GENE
1202 FOX STREET
Kill Devil Hills, NC 27948

CONTRACTOR: TYLERBUILT CUSTOM BUILDERS INC.
2906 South Pamlico Ave
nags head, nc 27959
252-202-2080

GENERAL BUILDING, LIMITED: TYLERBUILT CUSTOM BUILDERS INC.
2906 South Pamlico Ave
nags head, nc 27959
252-202-2080

License: 46649
Expires: 12/31/2019

PARCEL:

PIN: 988312866403

Parcel Number: 004419000

Address: 1202 FOX ST KILL DEVIL HILLS

Addition: KILL DEVIL HILLS REALTY CORP

Zoning:

Block: 24 **Lot(s):** 2

Legal Description:

FEES:	Paid	Due	BUILDING AREA:	
Renovation/Remodel/Relocate	\$45.00	\$0.00	Remodel/Renovation	100 SQFT
Res. Building Permit Fee	\$216.00	\$0.00	Residential Heated Space	288 sq. Ft.
Totals :	\$261.00	\$0.00	(.75)	

PROJECT DESCRIPTION: Demo rear deck and provide 12x24 new bedroom addition. Rebuild side stair and landing. Remodel existing bedroom into new laundry room. Structure to remain 3 bedrooms.

BJ2019-103

PROJECT NAME: Faison Remodel

SITE ADDRESS: 1202 FOX ST KILL DEVIL HILLS

BUILDING JOINT

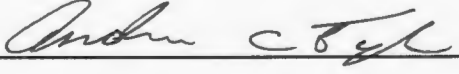
ISSUED: 06/05/2019

EXPIRES: 12/02/2019

- * This permit becomes null and void if work or construction authorized is not commenced within 6 months or if construction or work is suspended for a period of 12 months at any time after work has started.
- * As-built survey will be required prior to Certificate of Occupancy or Certificate of Compliance.
- * Development must meet all aspects of Chapter 151 Flood Damage Prevention Ordinance including use and elevation.
- * 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.
- * If driveway is to be constructed with gravel, a minimum of four inches of compacted Aggregate Base Course (ABC) with one inch of pea gravel as an approved surface. Loose surface stone shall be bordered by concrete or salt-treated timbers in a manner which retains the stone in the driveway or parking area. Per 153.076(A)(7)(c).

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

Issued By: 

Contractor or Authorized Agent:  Date: 6-5-19



Town of Kill Devil Hills

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

JUN 21 2019

Planning and Inspection Department

BJ2019-105	BUILDING JOINT
PROJECT NAME: SAGA New SFD	ISSUED: 06/18/2019
SITE ADDRESS: 701 ZEN LANE Kill Devil Hills	EXPIRES: 12/15/2019

APPLICANT: Water Oak Residential, LLC 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
---	---

CONTRACTOR: SAGA CONSTRUCTION
1314 S Croatan Hwy, Suite 301
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
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PARCEL:

PIN: 988417222496	Parcel Number:
Address: 701 ZEN LANE Kill Devil Hills	Zoning:
Addition:	Block: Lot(s):
Legal Description: Lot 57, Water Oak Subdivision	

FEES:	<u>Paid</u>	<u>Due</u>	BUILDING AREA:	
Covered Porch Residential	\$252.00	\$0.00	Covered Porches/Decks	336 SQFT
Res. Building Permit Fee	\$1,721.05	\$0.00	Residential Unheated (.40)	397 Sq. Ft
T-Pole	\$50.00	\$0.00	Residential Heated Space	2083 sq. Ft.
			(.75)	
Totals :	\$2,023.05	\$0.00	# of Temporary Poles	1 EA

PROJECT DESCRIPTION: New 3 Bedroom 2 bath single family dwelling

Town of Kill Devil Hills
Water Charges
PAID
Water Tap #: 123588

BJ2019-105

PROJECT NAME: SAGA New SFD
SITE ADDRESS: 701 ZEN LANE Kill Devil Hills

BUILDING JOINT

ISSUED: 06/18/2019

EXPIRES: 12/15/2019

- * As-built survey will be required prior to Certificate of Occupancy or Certificate of Compliance.
- * The developer shall be responsible for maintaining erosion and sediment control at the disturbed area.
- * Development must meet all aspects of Chapter 151 Flood Damage Prevention Ordinance including use and elevation.
- * Construction must meet all aspect of Chapter 153 Zoning including lot coverage and setbacks.
- * Elevation Certificate will be required 21 days after establishment of the reference level in accordance with 151.41(C).
- * Zoning Final Inspection is required.
- * 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).

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: Grace Mueck Date: 6.21.19



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

BJ2019-106 PROJECT NAME: Auten New SFD SITE ADDRESS: 211 E Archdale St Kill Devil Hills	BUILDING JOINT ISSUED: 06/05/2019 EXPIRES: 12/02/2019
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APPLICANT: Auten, John 225 Downing Drive CHESAPEAKE, VA 23323	OWNER: Auten, John 225 Downing Drive CHESAPEAKE, VA 23323
--	--

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

GENERAL BUILDING-LIMITED:	SANDY BOTTOM HOMES 400 DaVinci Lane kitty hawk, nc 27949 757-448-8162	License: 67524 Expires: 01/01/2020
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PARCEL:

PIN:	988517128318	Parcel Number:	000807000
Address:	211 E Archdale St Kill Devil Hills		
Addition:	VIRGINIA DARE SHORES AMD BLK 5	Zoning:	Block: 5 Lot(s): 13

Legal Description:

FEES:	Paid	Due	BUILDING AREA:	
T-Pole	\$50.00	\$0.00	Residential Heated Space	1757 sq. Ft.
Open Deck Fee	\$150.00	\$0.00	(.75)	
Res. Building Permit Fee	\$1,329.75	\$0.00	# of Temporary Poles	1 EA
Covered Porch Residential	\$56.25	\$0.00	Open Decks	1 EA
Totals :	\$1,586.00	\$0.00	Residential Unheated (.40)	30 Sq. Ft
			Covered Porches/Decks	75 SQFT

PROJECT DESCRIPTION: New 3 Bedroom 3 Bath Single Family Dwelling

TOWN OF KILL DEVIL HILLS
Water Charges
PAID

JUN 13 2019

Printed by : CTHUMAN on: 06/05/2019 09:19 AM

Water Tap #: T 23589

Page 1 of 3

BJ2019-106

PROJECT NAME: Auten New SFD
SITE ADDRESS: 211 E Archdale St Kill Devil Hills

BUILDING JOINT

ISSUED: 06/05/2019

EXPIRES: 12/02/2019

DETAILS**Permit**

Name	Value
ZONING DISTRICT	C
FRONT YARD SETBACK	15
REAR YARD SETBACK	20% Depth >30
SIDE YARD SETBACK	6
HEALTH DEPARTMENT PERMIT #	28694
# PARKING SPACES/BEDROOM	3
CAMA PERMIT	N
CAMA EXEMPTION	N
FLOOD ZONE	AE
BASE FLOOD ELEVATION	9.0
Proposed First Floor Elevation	13.00
PURPOSE	Residential New
CONSTRUCTION COST	185000.00
LOT COVERAGE	40.40
SURVEYOR NAME AND NUMBER	Manson Ray Meekins L-2592
ENGINEER AND LICENSE NUMBER	Michael Osteen 032628
CULVERT	N
ROLL OUT CAN	1
DRIVEWAY INVERT 2	Y
OCCUPANCY TYPE	One & Two Family Dwelling

REQUIRED INSPECTIONS

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

BJ2019-106

PROJECT NAME: Auten New SFD
SITE ADDRESS: 211 E Archdale St Kill Devil Hills

BUILDING JOINT

ISSUED: 06/05/2019

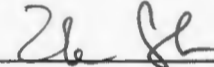
EXPIRES: 12/02/2019

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.
- * 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.

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

Issued By: 

Contractor or Authorized Agent:  Date: 6-13-19



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

BJ2019-107	BUILDING JOINT
PROJECT NAME: McCombs Pool	ISSUED: 06/05/2019
SITE ADDRESS: 3118 BAY DR KILL DEVIL HILLS	EXPIRES: 12/02/2019

APPLICANT: McCombs, Jack
3118 Bay Drive
Kill Devil Hills, NC 27948

OWNER: McCombs, Jack
3118 Bay Drive
Kill Devil Hills, NC 27948

CONTRACTOR: CARRIBEAN POOLS & SPAS
PO BOX 65
kitty hawk, nc 27949
252-207-1773

GENERAL: CARRIBEAN POOLS & SPAS
PO BOX 65
kitty hawk, nc 27949
252-207-1773

License: 48519
Expires: 12/30/2019

PARCEL:

PIN: 987520822153

Parcel Number: 001074000

Address: 3118 BAY DR KILL DEVIL HILLS

Addition: MOOR SHORES

Zoning:
Block: 0 **Lot(s):** 139

Legal Description:

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

PROJECT DESCRIPTION: 14x30 in-ground pool in rear yard

JUN 11 2019



Town of Kill Devil Hills

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

Planning and Inspection Department

BJ2019-108

PROJECT NAME: Oliver Pool
SITE ADDRESS: 314 TRUXTON ST KILL DEVIL HILLS

BUILDING JOINT

ISSUED: 06/05/2019

EXPIRES: 12/02/2019

APPLICANT: OLIVER, TIMOTHY
1228 ROSEBUD AVE
chesapeake, va 23322
614-557-1020

OWNER: OLIVER, TIMOTHY
1228 ROSEBUD AVE
chesapeake, va 23322
614-557-1020

CONTRACTOR: CARRIBEAN POOLS & SPAS
UNKNOWN
UNKNOWN, XX 00000

GENERAL: CARRIBEAN POOLS & SPAS
UNKNOWN
UNKNOWN, XX 00000

License: 48519
Expires: 12/30/2019

PARCEL:

PIN: 987516933323

Parcel Number: 028721000

Address: 314 TRUXTON ST KILL DEVIL HILLS

Addition: MOOR SHORES TWO

Zoning:

Block: 0 **Lot(s):** 159

Legal Description:

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

PROJECT DESCRIPTION: Installation of in ground 11x24 pool

JUN 11 2019

BJ2019-108

PROJECT NAME: Oliver Pool

SITE ADDRESS: 314 TRUXTON ST KILL DEVIL HILLS

BUILDING JOINT

ISSUED: 06/05/2019

EXPIRES: 12/02/2019

DETAILS**Permit**

Name	Value
ZONING DISTRICT	RL
FRONT YARD SETBACK	30
REAR YARD SETBACK	20% Depth >30
SIDE YARD SETBACK	10
HEALTH DEPARTMENT PERMIT #	28758
CAMA PERMIT	N
CAMA EXEMPTION	N
FLOOD ZONE	X
PURPOSE	Residential Accessory
CONSTRUCTION COST	34982.00
LOT COVERAGE	35.24
ENGINEER AND LICENSE NUMBER	Carlos F. Gomez 014071
CULVERT	N
DRIVEWAY INVERT 2	N
OCCUPANCY TYPE	One & Two Family Dwelling

REQUIRED INSPECTIONS

Final Pool Bonding
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.

* Zoning Final Inspection is required.

BJ2019-108

PROJECT NAME: Oliver Pool

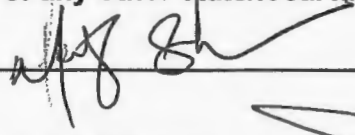
SITE ADDRESS: 314 TRUXTON ST KILL DEVIL HILLS

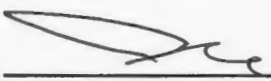
BUILDING JOINT

ISSUED: 06/05/2019

EXPIRES: 12/02/2019

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Issued By:  _____

Contractor or Authorized Agent:  _____ Date: 6-11-19



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

BJ2019-110	BUILDING JOINT
PROJECT NAME: Magee New Construction	ISSUED: 06/12/2019
SITE ADDRESS: 411 MITCHELL CT KILL DEVIL HILLS	EXPIRES: 12/09/2019

APPLICANT: MAGEE, JAMES F JR 4513 DAVIDS MILL DRIVE CHESAPEAKE, VA 23321	OWNER: MAGEE, JAMES F JR 4513 DAVIDS MILL DRIVE CHESAPEAKE, VA 23321
---	---

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

GENERAL BUILDING-LIMITED:	SANDY BOTTOM HOMES 400 DaVinci Lane kitty hawk, nc 27949 757-448-8162	License: 67524 Expires: 01/01/2020
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PARCEL:

PIN: 988405280364	Parcel Number: 002111000
Address: 411 MITCHELL CT KILL DEVIL HILLS	Zoning:
Addition: WRIGHT'S SHORES	Block: 0 Lot(s): 151
Legal Description:	

FEES:	<u>Paid</u>	<u>Due</u>	BUILDING AREA:	
Covered Porch Residential	\$52.50	\$0.00	Covered Porches/Decks	70 SQFT
Res. Building Permit Fee	\$1,311.95	\$0.00	Residential Heated Space	1641 sq. Ft.
T-Pole	\$50.00	\$0.00	(.75)	
Totals :	\$1,414.45	\$0.00	Residential Unheated (.40)	203 Sq. Ft
			# of Temporary Poles	1 EA

PROJECT DESCRIPTION: New 4 Bedroom SFD

Town of Kill Devil Hills
Water Charges

PAID

Water Tap #: T23590

JUN 12 2019

BJ2019-110**PROJECT NAME:** Magee New Construction
SITE ADDRESS: 411 MITCHELL CT KILL DEVIL HILLS**BUILDING JOINT****ISSUED:** 06/12/2019**EXPIRES:** 12/09/2019

DETAILS**Permit**

Name	Value
ZONING DISTRICT	RL
FRONT YARD SETBACK	30
REAR YARD SETBACK	20% Depth >30
SIDE YARD SETBACK	8
HEALTH DEPARTMENT PERMIT #	28781
# PARKING SPACES/BEDROOM	4
CAMA PERMIT	N
CAMA EXEMPTION	N
FLOOD ZONE	X
PURPOSE	Residential New
CONSTRUCTION TYPE	V
CONSTRUCTION COST	200000.00
LOT COVERAGE	35.40
LIVING SPACE (SQFT)	1641
COVERED PORCHES/DECKS (SQFT)	70
GARAGE (SQFT)	203
TOTAL SQUARE FOOTAGE	1914
SURVEYOR NAME AND NUMBER	Manson Ray Meekins L-2592
ENGINEER AND LICENSE NUMBER	Michael Osteen 032628
CULVERT	N
ROLL OUT CAN	1
DRIVEWAY INVERT 2	Y
OCCUPANCY TYPE	One & Two Family Dwelling

BJ2019-110

PROJECT NAME: Magee New Construction
SITE ADDRESS: 411 MITCHELL CT KILL DEVIL HILLS

BUILDING JOINT

ISSUED: 06/12/2019

EXPIRES: 12/09/2019

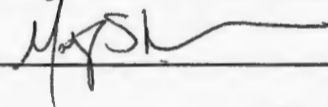
REQUIRED INSPECTIONS


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

CONDITIONS

- * NOTICE: Call Public Services Department (252) 480-4080 before pouring driveway!
- * This permit becomes null and void if work or construction authorized is not commenced within 6 months or if construction or work is suspended for a period of 12 months at any time after work has started.
- * 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.
- * Zoning Final Inspection is required.
- * 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: 6-12-19



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

BJ2019-111	BUILDING JOINT
PROJECT NAME: Thomas and Gayle Boothe	ISSUED: 06/13/2019
SITE ADDRESS: 604 PALMETTO ST W KILL DEVIL HILLS	EXPIRES: 12/10/2019

APPLICANT: Sandy Bottom Homes 400 DaVinci Lane kitty hawk, nc 27949 757-448-8162	OWNER: Boothe, Thomas 1047 Camera RD WAVERLY, VA 23890 804-731-5129
--	---

GENERAL BUILDING-LIMITED:	SANDY BOTTOM HOMES 400 DaVinci Lane kitty hawk, nc 27949 757-448-8162	License: 67524 Expires: 01/01/2020
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PARCEL:

PIN: 987408993926	Parcel Number: 000775006
Address: 604 PALMETTO ST W KILL DEVIL HILLS	Zoning:
Addition: VIRGINIA DARE SH BLK 77 RECOMB	Block: 77 Lot(s): 6
Legal Description:	

FEES:	Paid	Due	BUILDING AREA:	
T-Pole	\$50.00	\$0.00	# of Temporary Poles	1 EA
Covered Porch Residential	\$50.25	\$0.00	Covered Porches/Decks	67 SQFT
Res. Building Permit Fee	\$1,278.30	\$0.00	Residential Unheated (.40)	117 Sq. Ft
Open Deck Fee	\$150.00	\$0.00	Residential Heated Space (.75)	1642 sq. Ft.
Totals :	\$1,528.55	\$0.00	Open Decks	1 EA

PROJECT DESCRIPTION: Proposed 4 bedroom single family dwelling

Town of Kill Devil Hills
Water Charges

PAID

JUN 13 2019

Water Tap #: T23591

BJ2019-111

PROJECT NAME: Thomas and Gayle Boothe
SITE ADDRESS: 604 PALMETTO ST W KILL DEVIL HILLS

BUILDING JOINT

ISSUED: 06/13/2019

EXPIRES: 12/10/2019

DETAILS**Permit**

Name	Value
ZONING DISTRICT	RL
FRONT YARD SETBACK	30
REAR YARD SETBACK	20% Depth >30
SIDE YARD SETBACK	8
HEALTH DEPARTMENT PERMIT #	28748
# PARKING SPACES/BEDROOM	4
CAMA PERMIT	N
CAMA EXEMPTION	N
FLOOD ZONE	AE
BASE FLOOD ELEVATION	8.3
Proposed First Floor Elevation	7.00
CONSTRUCTION COST	190000.00
LOT COVERAGE	31.00
SURVEYOR NAME AND NUMBER	Seaboard Surveying
CULVERT	N
ROLL OUT CAN	1
DRIVEWAY INVERT 2	Y

REQUIRED INSPECTIONS

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

CONDITIONS

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

BJ2019-111

PROJECT NAME: Thomas and Gayle Boothe
SITE ADDRESS: 604 PALMETTO ST W KILL DEVIL HILLS

BUILDING JOINT

ISSUED: 06/13/2019

EXPIRES: 12/10/2019

- * 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.
- * Must submit a non-conversion agreement.

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: Th SL Date: 6-13-19



Town of Kill Devil Hills

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

JUN 26 2019

Planning and Inspection Department

BJ2019-112

PROJECT NAME: OBX Destinations LLC
SITE ADDRESS: 1507 VA DARE TRL N KILL DEVIL HILLS

BUILDING JOINT

ISSUED: 06/25/2019

EXPIRES: 06/05/2020

APPLICANT: RM SAUNDERS GENERAL CONTRACTORS
PO Box 1922
Kill Devil Hills, NC 27948
480-9477

OWNER: OBX Destinations LLC
905 NORTH VA Dare TR
Kill Devil Hills, NC 27948
252-441-2544

GENERAL - UNLIMITED:

SAUNDERS, RM / R M SAUNDERS GENERAL
CONTRACTORS INC
PO Box 1922
Kill Devil Hills, NC 27948
252-207-8710

License: 32380
Expires: 01/01/2020

PARCEL:

PIN: 988411651589

Parcel Number: 002770000

Address: 1507 VA DARE TRL N KILL DEVIL HILLS

Zoning:

Addition: CROATAN SHORES

Block: A **Lot(s):** 18-19

Legal Description:

FEES:	Paid	Due	BUILDING AREA:	
Covered Porch Residential	\$795.00	\$0.00	Covered Porches/Decks	1060 SQFT
Res. Building Permit Fee	\$8,755.50	\$0.00	Residential Heated Space	11674 sq. Ft.
T-Pole	\$50.00	\$0.00	(.75)	
Totals :	\$9,600.50	\$0.00	# of Temporary Poles	1 EA

PROJECT DESCRIPTION: 21 bedroom single family dwelling

Town of Kill Devil Hills
Water Charges

PAID

Water Tap #: T23633

BJ2019-112

PROJECT NAME: OBX Destinations LLC

SITE ADDRESS: 1507 VA DARE TRL N KILL DEVIL HILLS

BUILDING JOINT

ISSUED: 06/25/2019

EXPIRES: 06/05/2020

DETAILS**Permit**

Name	Value
ZONING DISTRICT	OIR
FRONT YARD SETBACK	30
REAR YARD SETBACK	CAMA
SIDE YARD SETBACK	10
HEALTH DEPARTMENT PERMIT #	KDHWWT
# PARKING SPACES/BEDROOM	21
CAMA PERMIT	Y
CAMA EXEMPTION	N
FLOOD ZONE	VE
BASE FLOOD ELEVATION	11
Proposed First Floor Elevation	13.00
PURPOSE	Residential New
CONSTRUCTION TYPE	V
CONSTRUCTION COST	2350000.00
LOT COVERAGE	53.13
LIVING SPACE (SQFT)	11674
COVERED PORCHES/DECKS (SQFT)	1060
TOTAL SQUARE FOOTAGE	12734
SURVEYOR NAME AND NUMBER	Coastal/Carlos Gomez
ENGINEER AND LICENSE NUMBER	RAYMOND G PATE 13018
ARCHITECT NAME AND LICENSE NUMBER	MICHAEL A FLOREZ 14163
CULVERT	N
DRIVEWAY INVERT 2	N
OCCUPANCY TYPE	One & Two Family Dwelling

BJ2019-112

PROJECT NAME: OBX Destinations LLC

SITE ADDRESS: 1507 VA DARE TRL N KILL DEVIL HILLS

BUILDING JOINT

ISSUED: 06/25/2019

EXPIRES: 06/05/2020

REQUIRED INSPECTIONS

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

CONDITIONS

- * This permit becomes null and void if work or construction authorized is not commenced within 6 months or if construction or work is suspended for a period of 12 months at any time after work has started.
- * NOTICE: Call Public Services Department (252) 480-4080 before pouring driveway!
- * Elevation Certificate will be required 21 days after establishment of the reference level in accordance with 151.41(C).
- * As-built survey will be required prior to Certificate of Occupancy or Certificate of Compliance.
- * The developer shall be responsible for maintaining erosion and sediment control at the disturbed area.
- * A final elevation certificate will be required prior to issuance of a Certificate of Occupancy or a Certificate of Compliance in accordance with 151.41(C).
- * Development must meet all aspects of Chapter 151 Flood Damage Prevention Ordinance including use and elevation.
- * 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.
- * Construction must meet all aspect of Chapter 153 Zoning including lot coverage and setbacks.
- * Zoning Final Inspection is required.
- * Make corrections noted on survey.
- * Developer shall provide copies of all engineering certifications, record drawings and approvals as required by NCDEQ, and the North Carolina Utilities Commission for the sewer extension prior to Final Inspection.

BJ2019-112

PROJECT NAME: OBX Destinations LLC

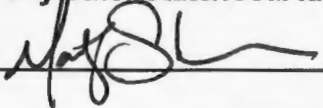
SITE ADDRESS: 1507 VA DARE TRL N KILL DEVIL HILLS

BUILDING JOINT

ISSUED: 06/25/2019

EXPIRES: 06/05/2020

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

Issued By:  _____

Contractor or Authorized Agent:  _____ Date: 6-25-19



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

BJ2019-113	BUILDING JOINT
PROJECT NAME: Maxs Restaurant	ISSUED: 06/11/2019
SITE ADDRESS: 1712 CROATAN HWY N KILL DEVIL HILLS	EXPIRES: 12/08/2019

APPLICANT: OLIVOLA, MARK
NANCY O WALTON
P O BOX 364
KILL DEVIL HILLS, NC 27948

OWNER: OLIVOLA, MARK
NANCY O WALTON
P O BOX 364
KILL DEVIL HILLS, NC 27948

CONTRACTOR: Sharp, Grant
po box 1181
kitty hawk, nc 27949

GENERAL: Self
UNKNOWN
UNKNOWN, XX 00000
917-862-9006

License: Unlicensed
Expires: 12/31/2020

PARCEL:

PIN: 988410374122

Parcel Number: 002739000

Address: 1712 CROATAN HWY N KILL DEVIL HILLS

Addition: HEDRICKS ADDITION - CROATAN SH

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

Legal Description:

FEES:	Paid	Due	BUILDING AREA:
Renovation/Remodel/Relocate	\$219.60	\$0.00	Remodel/Renovation 488 SQFT
Totals :	\$219.60	\$0.00	

PROJECT DESCRIPTION: Add booth, hostess stand, small partition wall with bench seating at front of restaurant. Remodel interior kitchen equipment layout.

JUN 11 2019

BJ2019-113

PROJECT NAME: Maxs Restaurant

SITE ADDRESS: 1712 CROATAN HWY N KILL DEVIL HILLS

BUILDING JOINT

ISSUED: 06/11/2019

EXPIRES: 12/08/2019

DETAILS**Permit**

Name	Value
ZONING DISTRICT	C
FRONT YARD SETBACK	30
REAR YARD SETBACK	20% Depth >30
SIDE YARD SETBACK	10
STREET SIDE SETBACK	15
CAMA PERMIT	N
CAMA EXEMPTION	N
FLOOD ZONE	AE
BASE FLOOD ELEVATION	9.0
PURPOSE	Commercial Repair/Remodel
CONSTRUCTION COST	10000.00
TOTAL SQUARE FOOTAGE	488
CULVERT	N
DRIVEWAY INVERT 2	N
OCCUPANCY TYPE	Business

REQUIRED INSPECTIONS

Rough In

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.

* Zoning Final Inspection is required.

* The fire hood suppression company certifies the new equipment will be covered by the fire suppression system. Occupancy load shall be posted.

BJ2019-113

PROJECT NAME: Maxs Restaurant

SITE ADDRESS: 1712 CROATAN HWY N KILL DEVIL HILLS

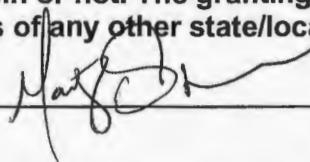
BUILDING JOINT

ISSUED: 06/11/2019

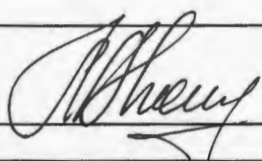
EXPIRES: 12/08/2019

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: _____

6/11/2019



Town of Kill Devil Hills

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

Planning and Inspection Department

BJ2019-114	BUILDING JOINT
PROJECT NAME: Dream Cream Ice Cream Parlor	ISSUED: 06/10/2019
SITE ADDRESS: 1722 N. Croatan Hwy UNKNOWN	EXPIRES: 12/07/2019

APPLICANT: OLIVOLA, DONALD J
P O BOX 364
KILL DEVIL HILLS, NC 27948

OWNER: OLIVOLA, DONALD J
P O BOX 364
KILL DEVIL HILLS, NC 27948

CONTRACTOR: GARLAND DUNSTAN
P.O. Box 402
Kitty Hawk, NC 27949
252-202-1100

GENERAL BUILDING, UNLIMITED: GARLAND DUNSTAN
P.O. Box 402
Kitty Hawk, NC 27949
252-202-1100

License: 19436
Expires: 12/31/2019

PARCEL:

PIN: 988410373044-7288
Address: 1722 N. Croatan Hwy UNKNOWN
Addition:
Legal Description:

Parcel Number:
Zoning:
Block: **Lot(s):**

FEES:	Paid	Due	BUILDING AREA:	
Renovation/Remodel/Relocate	\$603.00	\$0.00	Remodel/Renovation	1340 SQFT
Totals :	\$603.00	\$0.00		

PROJECT DESCRIPTION: installation of freezers, and refrigeration, moving electrical and plumbing to new locations to service equipment

JUN 10 2019

BJ2019-114**PROJECT NAME:** Dream Cream Ice Cream Parlor
SITE ADDRESS: 1722 N. Croatan Hwy UNKNOWN**BUILDING JOINT****ISSUED:** 06/10/2019**EXPIRES:** 12/07/2019

DETAILS**Permit**

Name	Value
ZONING DISTRICT	C
FRONT YARD SETBACK	30
REAR YARD SETBACK	20% Depth >30
SIDE YARD SETBACK	10
CAMA PERMIT	N
CAMA EXEMPTION	N
FLOOD ZONE	AE
BASE FLOOD ELEVATION	9.0
PURPOSE	Commercial Repair/Remodel
CONSTRUCTION COST	10000.00
ARCHITECT NAME AND LICENSE NUMBER	Christopher Nason 9789
CULVERT	N
DRIVEWAY INVERT 2	N
OCCUPANCY TYPE	Business

REQUIRED INSPECTIONS

In-Slab Plumbing	Insulation
Slab/Foundation	Final
Rough In	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.
- * Zoning Final Inspection is required.
- * Signage Approval for business must be obtained with a separate permit.
- * Double Check Valve Assembly must be approved by Public Services prior to issuance of Certificate of Occupancy.

BJ2019-114

PROJECT NAME: Dream Cream Ice Cream Parlor
SITE ADDRESS: 1722 N. Croatan Hwy UNKNOWN

BUILDING JOINT

ISSUED: 06/10/2019

EXPIRES: 12/07/2019

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: _____

Date: 6-10-2019



Town of Kill Devil Hills

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

Planning and Inspection Department

BJ2019-115	BUILDING JOINT
PROJECT NAME: Cortina wheel chair lift	ISSUED: 06/11/2019
SITE ADDRESS: 902 DURHAM ST W KILL DEVIL HILLS	EXPIRES: 12/08/2019

APPLICANT: Cortina, Cathy
1424 Norwood Crest Court
RALEIGH, NC 27614

OWNER: Cortina, Cathy
1424 Norwood Crest Court
RALEIGH, NC 27614

CONTRACTOR: Atlantic Elevators
P. O. Box 1521
Manteo, NC 27954
252-305-4465

ELECTRICAL - LIMITED: Atlantic Elevators
P. O. Box 1521
Manteo, NC 27954
252-305-4465

License: 06925-L
Expires:

PARCEL:

PIN: 988405087365

Parcel Number: 001384000

Address: 902 DURHAM ST W KILL DEVIL HILLS

Zoning:

Addition: AVALON BEACH ANNEX 2 & 3

Block: 0 **Lot(s):** 679

Legal Description:

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

PROJECT DESCRIPTION: Add platform lift and concrete walk.

JUN 11 2019

BJ2019-115

PROJECT NAME: Cortina wheel chair lift
SITE ADDRESS: 902 DURHAM ST W KILL DEVIL HILLS

BUILDING JOINT

ISSUED: 06/11/2019

EXPIRES: 12/08/2019

DETAILS**Permit**

Name	Value
ZONING DISTRICT	RL
FRONT YARD SETBACK	15
REAR YARD SETBACK	20% Depth >30
SIDE YARD SETBACK	6
CAMA PERMIT	N
CAMA EXEMPTION	N
FLOOD ZONE	AE
BASE FLOOD ELEVATION	8.3
PURPOSE	Residential Accessory
CONSTRUCTION COST	16500.00
LOT COVERAGE	38.00
SURVEYOR NAME AND NUMBER	M Douglas Styons L-3227
CULVERT	N
DRIVEWAY INVERT 2	N
OCCUPANCY TYPE	One & Two Family Dwelling

REQUIRED INSPECTIONS

Final

Zoning Final

CONDITIONS

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

BJ2019-115

PROJECT NAME: Cortina wheel chair lift
SITE ADDRESS: 902 DURHAM ST W KILL DEVIL HILLS

BUILDING JOINT

ISSUED: 06/11/2019

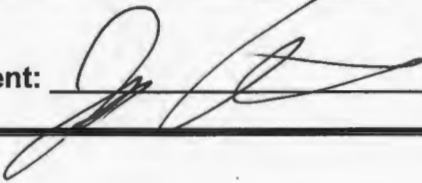
EXPIRES: 12/08/2019

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: _____

6-11-19



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

BJ2019-116

PROJECT NAME: Lowry Bathroom
SITE ADDRESS: 206 AVALON DR W KILL DEVIL HILLS

BUILDING JOINT

ISSUED: 06/11/2019

EXPIRES: 12/08/2019

APPLICANT: Lowry, Robert
79 Cunningham Ct.
PALMYRA, VA 22963

OWNER: Lowry, Robert
79 Cunningham Ct.
PALMYRA, VA 22963

UNLICENSED - REMODELING: Full House Ventures
PO Box 498
kitty hawk, nc 27949
919-608-2120

License: 00000000
Expires: 06/11/2024

PARCEL:

PIN: 988517104493

Parcel Number: 001754000

Address: 206 AVALON DR W KILL DEVIL HILLS

Addition: AVALON BEACH

Zoning:
Block: 0 **Lot(s):** 123

Legal Description:

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

PROJECT DESCRIPTION: Remove closet and construct a 1/2 bathroom and small closet.

PAID
JUN 11 2019
TOWN OF
KILL DEVIL HILLS

BJ2019-116

PROJECT NAME: Lowry Bathroom
SITE ADDRESS: 206 AVALON DR W KILL DEVIL HILLS

BUILDING JOINT

ISSUED: 06/11/2019

EXPIRES: 12/08/2019

DETAILS

Permit

Name	Value
ZONING DISTRICT	RL
FRONT YARD SETBACK	15
REAR YARD SETBACK	20% Depth >30
SIDE YARD SETBACK	6
CAMA PERMIT	N
CAMA EXEMPTION	N
FLOOD ZONE	AE
BASE FLOOD ELEVATION	8
PURPOSE	Residential Repair/Remodel
CONSTRUCTION COST	3500.00
CULVERT	N
DRIVEWAY INVERT 2	N

REQUIRED INSPECTIONS

Rough In	Final
Insulation	Zoning Final

CONDITIONS

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

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

Issued By: _____

Contractor or Authorized Agent: Wagner Cole Date 6-11-19



Town of Kill Devil Hills

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

JUN 28 2019

Planning and Inspection Department

BJ2019-119	BUILDING JOINT
PROJECT NAME: Huddleston Covered Porch, partial ground floor enclosure	ISSUED: 06/27/2019
SITE ADDRESS: 110 SPORTSMAN DR E KILL DEVIL HILLS	EXPIRES: 12/24/2019

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

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

CONTRACTOR: 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: 01/01/2020

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 Permit Fee - Minimum Fee	\$150.00	\$0.00
Totals :	\$150.00	\$0.00

PROJECT DESCRIPTION: Add front covered porch and partial ground floor enclosure (FRONT WALL ONLY)

BJ2019-119

PROJECT NAME: Huddleston Covered Porch, partial ground floor enclosure

SITE ADDRESS: 110 SPORTSMAN DR E KILL DEVIL HILLS

BUILDING JOINT

ISSUED: 06/27/2019

EXPIRES: 12/24/2019

- * 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: 6/28/19



Town of Kill Devil Hills

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

JUL 26 2019

Planning and Inspection Department

BJ2019-120	BUILDING JOINT
PROJECT NAME: OBX Destinations New 25 Bedroom SFD	ISSUED: 06/25/2019
SITE ADDRESS: 1505 VA DARE TRL N KILL DEVIL HILLS	EXPIRES: 12/22/2019

APPLICANT: OBX Destinations LLC 905 NORTH VA Dare TR Kill Devil Hills, NC 27948 252-441-2544	OWNER: OBX Destinations LLC 905 NORTH VA Dare TR Kill Devil Hills, NC 27948 252-441-2544
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CONTRACTOR: RM SAUNDERS GENERAL CONTRACTORS
PO Box 1922
Kill Devil Hills, NC 27948
480-9477

GENERAL BUILDING - UNLIMITED:	SAUNDERS, R.M. P.O. box 1922 Kill Devil Hills, NC 27948 252-207-8710	License: 32380 Expires: 12/31/2019
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PARCEL:

PIN: 988411652507	Parcel Number:
Address: 1505 VA DARE TRL N KILL DEVIL HILLS	Zoning:
Addition:	Block: Lot(s):
Legal Description: Lot 19, Block A, Sec 1, Croatan Shores	

FEES:	Paid	Due	BUILDING AREA:	
Covered Porch Residential	\$795.00	\$0.00	Covered Porches/Decks	1060 SQFT
Res. Building Permit Fee	\$8,755.50	\$0.00	Residential Heated Space	11674 sq. Ft.
T-Pole	\$50.00	\$0.00	(.75)	
Totals :	\$9,600.50	\$0.00	# of Temporary Poles	1 EA

PROJECT DESCRIPTION: New 25 Bedroom SFD

Town of Kill Devil Hills
Water Charges

PAID

Water Tap #: T 23592

BJ2019-120**PROJECT NAME:** OBX Destinations New 25 Bedroom SFD
SITE ADDRESS: 1505 VA DARE TRL N KILL DEVIL HILLS**BUILDING JOINT****ISSUED:** 06/25/2019**EXPIRES:** 12/22/2019

DETAILS**Permit**

Name	Value
ZONING DISTRICT	OIR
FRONT YARD SETBACK	30
REAR YARD SETBACK	CAMA
SIDE YARD SETBACK	10
# PARKING SPACES/BEDROOM	25
CAMA PERMIT	Y
CAMA EXEMPTION	N
FLOOD ZONE	VE
BASE FLOOD ELEVATION	11.0
PURPOSE	Residential New
CONSTRUCTION TYPE	V
CONSTRUCTION COST	2300000.00
LOT COVERAGE	53.93
LIVING SPACE (SQFT)	11674
COVERED PORCHES/DECKS (SQFT)	1060
TOTAL SQUARE FOOTAGE	12734
SURVEYOR NAME AND NUMBER	Carlos F. Gomez
ENGINEER AND LICENSE NUMBER	Carlos F. Gomez 014071
ARCHITECT NAME AND LICENSE NUMBER	Michael A Florez 14163
CULVERT	N
DRIVEWAY INVERT 2	N
OCCUPANCY TYPE	One & Two Family Dwelling

BJ2019-120

PROJECT NAME: OBX Destinations New 25 Bedroom SFD
SITE ADDRESS: 1505 VA DARE TRL N KILL DEVIL HILLS

BUILDING JOINT

ISSUED: 06/25/2019

EXPIRES: 12/22/2019

REQUIRED INSPECTIONS

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

CONDITIONS

- * NOTICE: Call Public Services Department (252) 480-4080 before pouring driveway!
- * This permit becomes null and void if work or construction authorized is not commenced within 6 months or if construction or work is suspended for a period of 12 months at any time after work has started.
- * 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 §153.186(D)(1) Mechanical equipment shall not be visible from any right-of-way and (2) All Mechanical equipment and appurtenances shall be screened.
- * THIS PROPERTY IS LOCATED IN A SPECIAL FLOOD HAZARD AREA.
 1. All Special Flood Hazard Areas limit the use of enclosures below the lowest floor for parking, building access and limited storage only.
 2. In the VE Zone, there shall be no alteration of the sand dunes which would increase potential flood damage.
 3. In the VE Zone, there shall be no fill used for structural support.
 4. Elevation Certificate will be required at time of application, 21 days from the establishment of the lowest floor and at construction completion.

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

- * Must comply with Wind Borne Debris requirements as defined in NCBC R301.2.1.2 and NCBC 1609.2.
- * Zoning Final Inspection is required.
- * Construction must meet all aspect of Chapter 153 Zoning including lot coverage and setbacks.
- * Developer shall provide copies of all engineering certifications, record drawings and approvals as required by NCDEQ and the North Carolina Utilities Commission for the sewer extension prior to Final Inspection.

BJ2019-120

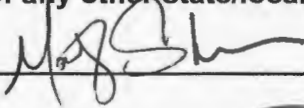
PROJECT NAME: OBX Destinations New 25 Bedroom SFD
SITE ADDRESS: 1505 VA DARE TRL N KILL DEVIL HILLS

BUILDING JOINT

ISSUED: 06/25/2019

EXPIRES: 12/22/2019

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: 6-25-19



Town of Kill Devil Hills

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

JUN 28 2019

Planning and Inspection Department

BJ2019-123	BUILDING JOINT
PROJECT NAME: Isabell Deck	ISSUED: 06/26/2019
SITE ADDRESS: 105 AVIATION AVE E KILL DEVIL HILLS	EXPIRES: 12/23/2019

APPLICANT: DAVID ISBELL
5507 Dawson Rd. B
VIRGINIA BEACH, VA 23451

OWNER: DAVID ISBELL
5507 Dawson Rd. B
VIRGINIA BEACH, VA 23451

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

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

License: 000000000
Expires:

PARCEL:

PIN: 988419703970

Parcel Number: 003894000

Address: 105 AVIATION AVE E KILL DEVIL HILLS

Addition: KITTY HAWK SHORES - REVISED

Zoning:

Block: 38 **Lot(s):** 15

Legal Description:

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

PROJECT DESCRIPTION: Add rear 17x20 deck and door from existing SFD to access rear deck, relocate HVAC heatpump

BJ2019-123

PROJECT NAME: Isabell Deck

SITE ADDRESS: 105 AVIATION AVE E KILL DEVIL HILLS

BUILDING JOINT

ISSUED: 06/26/2019

EXPIRES: 12/23/2019

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

JUN 27 2019

Planning and Inspection Department

BJ2019-124

PROJECT NAME: Menendez Enclosure
SITE ADDRESS: 511 FIRST ST W KILL DEVIL HILLS

BUILDING JOINT

ISSUED: 06/27/2019

EXPIRES: 12/24/2019

APPLICANT: Jillian Menedez
511 W First St
KILL DEVIL HILLS, NC 27948
252-489-3294

OWNER: Jillian Menedez
511 W First St
KILL DEVIL HILLS, NC 27948
252-489-3294

GENERAL: Self
UNKNOWN
UNKNOWN, XX 00000
917-862-9006

License: Unlicensed
Expires: 12/31/2020

PARCEL:

PIN: 988409251037

Parcel Number: 003338000

Address: 511 FIRST ST W KILL DEVIL HILLS

Addition: FIRST FLIGHT VILLAGE SEC 1

Zoning:

Block: 0 **Lot(s):** 56

Legal Description:

FEES:	Paid	Due	BUILDING AREA:	
Res. Building Permit Fee	\$407.25	\$0.00	Residential Heated Space	543 sq. Ft.
Totals :	\$407.25	\$0.00	(.75)	

PROJECT DESCRIPTION: enclose under existing house adding recording room and full bath

BJ2019-124**PROJECT NAME:** Menendez Enclosure
SITE ADDRESS: 511 FIRST ST W KILL DEVIL HILLS**BUILDING JOINT****ISSUED:** 06/27/2019**EXPIRES:** 12/24/2019

DETAILS**Permit**

Name	Value
ZONING DISTRICT	RL
FRONT YARD SETBACK	30
REAR YARD SETBACK	20% Depth >30
SIDE YARD SETBACK	10
HEALTH DEPARTMENT PERMIT #	28831
# PARKING SPACES/BEDROOM	4
CAMA PERMIT	N
CAMA EXEMPTION	N
FLOOD ZONE	AE
BASE FLOOD ELEVATION	8.3
Proposed First Floor Elevation	9.30
SUBSTANTIAL IMPROVEMENT	NO
PURPOSE	Residential Addition
CONSTRUCTION TYPE	V
CONSTRUCTION COST	10000.00
LOT COVERAGE	32.60
LIVING SPACE (SQFT)	543
TOTAL SQUARE FOOTAGE	543
SURVEYOR NAME AND NUMBER	Manson Ray Meekins L-2592
CULVERT	N
DRIVEWAY INVERT 2	N
OCCUPANCY TYPE	One & Two Family Dwelling

REQUIRED INSPECTIONS

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

BJ2019-124

PROJECT NAME: Menendez Enclosure
SITE ADDRESS: 511 FIRST ST W KILL DEVIL HILLS

BUILDING JOINT

ISSUED: 06/27/2019

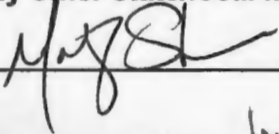
EXPIRES: 12/24/2019

CONDITIONS

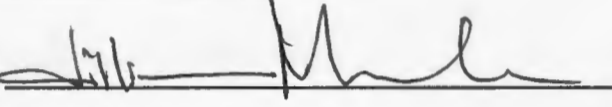
- * This permit becomes null and void if work or construction authorized is not commenced within 6 months or if construction or work is suspended for a period of 12 months at any time after work has started.
- * Development must meet all aspects of Chapter 151 Flood Damage Prevention Ordinance including use and elevation.
- * 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: _____

6/27/19



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

EL2019-052	ELECTRICAL
PROJECT NAME: BRAMWELL METER BASE	ISSUED: 06/06/2019
SITE ADDRESS: 112 MEADOWLARK ST E KILL DEVIL HILLS	EXPIRES: 12/03/2019

APPLICANT: Bramwell, David 112 E Meadowlark Street Kill Devil Hills, NC 27948	OWNER: Bramwell, David 112 E Meadowlark Street Kill Devil Hills, NC 27948
--	--

ELECTRICAL-UNLIMITED:	SUBURBAN ELECTRIC CONTRACTORS OF NC INC. PO Box 925 Manteo, NC 27954 252-475-1372	License: 30633-U Expires: 08/09/2019
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PARCEL:

PIN: 988308890986	Parcel Number: 003822000
Address: 112 MEADOWLARK ST E KILL DEVIL HILLS	
Addition: KITTY HAWK SHORES - REVISED	Zoning:
Legal Description:	Block: 34 Lot(s): 6

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

PROJECT DESCRIPTION: METER BASE CHANGE OUT, RELOCATE 200A PANEL

[Signature]
JUN 6 2019

EL2019-052

PROJECT NAME: BRAMWELL METER BASE
SITE ADDRESS: 112 MEADOWLARK ST E KILL DEVIL HILLS

ELECTRICAL

ISSUED: 06/06/2019

EXPIRES: 12/03/2019

DETAILS

Permit

Name	Value
ZONING DISTRICT	C
PURPOSE	Residential Repair/Remodel
CONSTRUCTION COST	2000.00
CONSTRUCTION TYPE	V
FLOOD ZONE	AE
BASE FLOOD ELEVATION	8.00
OCCUPANCY TYPE	One & Two Family Dwelling

REQUIRED INSPECTIONS

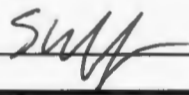
Final

CONDITIONS

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

Issued By: 

Contractor or Authorized Agent:  **Date:** 6/6/19



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

EL2019-053	ELECTRICAL
PROJECT NAME: Gatley Service Change	ISSUED: 06/10/2019
SITE ADDRESS: 213 RANDOM ST KILL DEVIL HILLS	EXPIRES: 12/07/2019

APPLICANT: Gatley, Kenneth 149 Racine Dr NEWPORT NEWS, VA 23608	OWNER: Gatley, Kenneth 149 Racine Dr NEWPORT NEWS, VA 23608
--	--

ELECTRICAL:	VUYOVICH ELECTRIC P.O. Box 191 Point Harbor, NC 27964 252-202-1407	License: 18077-U Expires: 03/31/2020
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PARCEL:

PIN: 988517211605	Parcel Number: 000765000
Address: 213 RANDOM ST KILL DEVIL HILLS	Zoning:
Addition: VIRGINIA DARE SHORES AMD BLK 2	Block: 2 Lot(s): 11-12
Legal Description:	

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

PROJECT DESCRIPTION: 200 AMP service change relocate panel box

JUN 10 2019

EL2019-053

PROJECT NAME: Gatley Service Change
SITE ADDRESS: 213 RANDOM ST KILL DEVIL HILLS

ELECTRICAL

ISSUED: 06/10/2019

EXPIRES: 12/07/2019

DETAILS

Permit

Name	Value
ZONING DISTRICT	C
PURPOSE	Residential Repair/Remodel
CONSTRUCTION COST	2500.00
CONSTRUCTION TYPE	V
FLOOD ZONE	AE
BASE FLOOD ELEVATION	9

REQUIRED INSPECTIONS

Final

CONDITIONS

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

Issued By: 

Contractor or Authorized Agent: Brent Vignol Date: 6-10-19



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

EL2019-054	ELECTRICAL
PROJECT NAME: Adams Meter BAse	ISSUED: 06/11/2019
SITE ADDRESS: 104 OCEAN BAY BLVD KILL DEVIL HILLS	EXPIRES: 12/08/2019

APPLICANT: Adams, Ann
5917 Farmwell RD
RALEIGH, NC 27610
919-235-2407

OWNER: Adams, Ann
5917 Farmwell RD
RALEIGH, NC 27610
919-235-2407

GENERAL: Self
UNKNOWN
UNKNOWN, XX 00000
917-862-9006

License: Unlicensed
Expires: 12/31/2020

PARCEL:

PIN: 988420705538

Parcel Number: 003873000

Address: 104 OCEAN BAY BLVD KILL DEVIL HILLS

Addition: KITTY HAWK SHORES - REVISED

Zoning:
Block: 37 **Lot(s):** 10

Legal Description:

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

PROJECT DESCRIPTION: C/O Meter base

Value \$2000.00

JUN 11 2019

EL2019-054

PROJECT NAME: Adams Meter BAsE

SITE ADDRESS: 104 OCEAN BAY BLVD KILL DEVIL HILLS

ELECTRICAL

ISSUED: 06/11/2019

EXPIRES: 12/08/2019

DETAILS

Permit

Name	Value
ZONING DISTRICT	RH
PURPOSE	Residential Repair/Remodel
FLOOD ZONE	AE
BASE FLOOD ELEVATION	8

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.
- * Property can not be rented or placed for sale for one year from final inspection.

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

Issued By: _____

Contractor or Authorized Agent: _____

Date: 6/11/2019



Town of Kill Devil Hills

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

JUN 24 2019

Planning and Inspection Department

EL2019-057	ELECTRICAL
PROJECT NAME:	ISSUED: 06/14/2019
SITE ADDRESS: 3209 RAYMOND AVE KILL DEVIL HILLS	EXPIRES: 12/11/2019

APPLICANT: Triple R Properties LLC 649 Fort Raleigh Dr. VIRGINIA BEACH, VA 23451 757-404-4349	OWNER: Triple R Properties LLC 649 Fort Raleigh Dr. VIRGINIA BEACH, VA 23451 757-404-4349
---	---

ELECTRICAL, UNLIMITED:	Outer Banks Electric 1210 Burnside Rd Manteo, NC 27954	License: 24451 Expires:
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PARCEL:

PIN: 988513045589	Parcel Number: 000090000
Address: 3209 RAYMOND AVE KILL DEVIL HILLS	Zoning:
Addition: ORVILLE BEACH BLK 5	Block: 5 Lot(s): 13
Legal Description:	

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

PROJECT DESCRIPTION: Replace overhead service cable.

EL2019-057

PROJECT NAME:

SITE ADDRESS: 3209 RAYMOND AVE KILL DEVIL HILLS

ELECTRICAL

ISSUED: 06/14/2019

EXPIRES: 12/11/2019

DETAILS

Permit

Name	Value
ZONING DISTRICT	C
PURPOSE	Residential Repair/Remodel
CONSTRUCTION COST	800.00
CONSTRUCTION TYPE	V
FLOOD ZONE	VE
BASE FLOOD ELEVATION	11
OCCUPANCY TYPE	One & Two Family Dwelling

REQUIRED INSPECTIONS

Final

CONDITIONS

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

Issued By: _____

Contractor or Authorized Agent: _____

Date: 6-24-2019



Town of Kill Devil Hills

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

JUN 19 2019

Planning and Inspection Department

EL2019-059	ELECTRICAL
PROJECT NAME:	ISSUED: 06/19/2019
SITE ADDRESS: 112 AVIATION AVE E KILL DEVIL HILLS	EXPIRES: 12/16/2019

APPLICANT: Cernetich, Greg 302 Woodmont Rd JOHNSTOWN, PA 15905 814-659-8472	OWNER: Cernetich, Greg 302 Woodmont Rd JOHNSTOWN, PA 15905 814-659-8472
---	---

ELECTRICAL - LIMITED:	J Pugh Services PO Box 204 Jarvisburg, NC 27947 252-202-4611	License: 29815 Expires: 07/26/2019
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PARCEL:

PIN: 988419714174	Parcel Number: 003903000
Address: 112 AVIATION AVE E KILL DEVIL HILLS	Zoning:
Addition: KITTY HAWK SHORES - REVISED	Block: 39 Lot(s): 6
Legal Description:	

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

PROJECT DESCRIPTION: Replace meter base & riser cable. Replace and relocate panel to exterior.

EL2019-059

PROJECT NAME:

SITE ADDRESS: 112 AVIATION AVE E KILL DEVIL HILLS

ELECTRICAL

ISSUED: 06/19/2019

EXPIRES: 12/16/2019

DETAILS

Permit

Name	Value
ZONING DISTRICT	RL
PURPOSE	Residential Repair/Remodel
CONSTRUCTION COST	3500.00
CONSTRUCTION TYPE	V
FLOOD ZONE	AE
BASE FLOOD ELEVATION	8
OCCUPANCY TYPE	One & Two Family Dwelling

REQUIRED INSPECTIONS

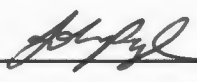
Final

CONDITIONS

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

Issued By: 

Contractor or Authorized Agent:  Date: 6-19-19



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

EL2019-058

PROJECT NAME:

SITE ADDRESS: 302 FRESH POND DR E KILL DEVIL HILLS

ELECTRICAL

ISSUED: 06/17/2019

EXPIRES: 12/14/2019

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

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

ELECTRICAL, UNLIMITED: LOWIRE TECHNOLOGIES
PO Box 2751
Kill Devil Hills, NC 27948
252-449-4690

License: 19403
Expires: 10/02/2019

PARCEL:

PIN: 989313142365

Parcel Number: 004957000

Address: 302 FRESH POND DR E KILL DEVIL HILLS

Zoning:

Addition: LAKE DRIVE DEVELOPMENT SEC 2

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

Legal Description:

FEE:	Paid	Due
Electrical Permit Fee	\$150.00	\$0.00
Totals :	\$150.00	\$0.00

PROJECT DESCRIPTION: Replace & Relocate meter base. Update service feeder & add hot tub circuit and 2 WP receptacles.

PAID
JUN 18 2019
TOWN OF KILL DEVIL HILLS

EL2019-058

PROJECT NAME:

SITE ADDRESS: 302 FRESH POND DR E KILL DEVIL HILLS

ELECTRICAL

ISSUED: 06/17/2019

EXPIRES: 12/14/2019

DETAILS

Permit

Name	Value
ZONING DISTRICT	C
PURPOSE	Residential Repair/Remodel
CONSTRUCTION COST	3325.00
CONSTRUCTION TYPE	V
FLOOD ZONE	AE
BASE FLOOD ELEVATION	9
OCCUPANCY TYPE	One & Two Family Dwelling

REQUIRED INSPECTIONS

Final

CONDITIONS

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

Issued By: 

Contractor or Authorized Agent: 

Date: 6-18-19



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

EL2019-055	ELECTRICAL
PROJECT NAME: Bermuda Bay HOA Pool fence lighting	ISSUED: 06/12/2019
SITE ADDRESS: 1101 Cambridge Rd. Kill Devil Hills	EXPIRES: 12/09/2019

APPLICANT: Bermuda Bay Homeowners Association PO Box 1807 Nags Head, NC 27959 480-4722	OWNER: Bermuda Bay Homeowners Association PO Box 1807 Nags Head, NC 27959 480-4722
--	--

CONTRACTOR: SEABREEZE ELECTRIC & LIGHTING INC
136 CAROLINA CT WEST
MANTEO, NC 27954
(252) 654-2094

ELECTRICAL - UNLIMITED:	SEABREEZE ELECTRIC & LIGHTING INC 136 CAROLINA CT WEST MANTEO, NC 27954 (252) 654-2094	License: 30079 Expires: 04/05/2020
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PARCEL:

PIN: 988306387222	Parcel Number:
Address: 1101 Cambridge Rd. Kill Devil Hills	Zoning:
Addition:	Block: Lot(s):
Legal Description: Lot 300 Recreation, Sunset Bay	

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

PROJECT DESCRIPTION: lighting attached to pool fence to light walkway surrounding pool

JUN 13 2019

EL2019-055

PROJECT NAME: Bermuda Bay HOA Pool fence lighting
SITE ADDRESS: 1101 Cambridge Rd. Kill Devil Hills

ELECTRICAL

ISSUED: 06/12/2019

EXPIRES: 12/09/2019

DETAILS

Permit

Name	Value
ZONING DISTRICT	G&I Private
PURPOSE	Commercial Repair/Remodel
CONSTRUCTION COST	3500.00
FLOOD ZONE	X

REQUIRED INSPECTIONS

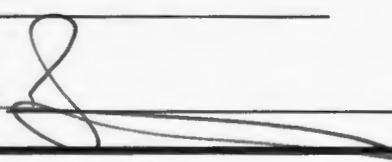
Final

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.
- * Per 153.074(E)(3) All light produced on-site shall be contained within the perimeter of the site by design, orientation or shielding of the light source.

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

Issued By: 

Contractor or Authorized Agent:  Date: 6/13/19



Town of Kill Devil Hills

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

JUN 7 2019

Planning and Inspection Department

BANNER2019-001

PROJECT NAME: Lowe's
SITE ADDRESS: 1500 CROATAN HWY N KILL DEVIL HILLS

BANNER

ISSUED: 01/30/2019

EXPIRES: 04/30/2019

APPLICANT: LOWES CORP.
P.O. Box 1111
1605 Curtis Bridge Rd.
Wilkesboro, NC 28697

OWNER: LOWES CORP.
P.O. Box 1111
1605 Curtis Bridge Rd.
Wilkesboro, NC 28697

CONTRACTOR: SAME AS OWNER
UNKNOWN
UNKNOWN, XX 00000

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

PARCEL:

PIN: 988410454012

Parcel Number: 002746000

Address: 1500 CROATAN HWY N KILL DEVIL HILLS

Addition: SUBDIVISION - NONE

Zoning:

Block: 0 Lot(s): 0

Legal Description:

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

PROJECT DESCRIPTION: 2 banners on building

DETAILS

Permit

Name	Value
# OF BANNERS	2
ZONING DISTRICT	C
PURPOSE	Commercial Accessory
CONSTRUCTION COST	300.00
FLOOD ZONE	AE

BANNNER2019-001

PROJECT NAME: Lowe's

SITE ADDRESS: 1500 CROATAN HWY N KILL DEVIL HILLS

BANNER

ISSUED: 01/30/2019

EXPIRES: 04/30/2019

REQUIRED INSPECTIONS

Final

CONDITIONS

* No such banner shall exceed 100 square feet. Banners shall be attached to a building. Banner may be displayed for a period not to exceed 90 days.

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

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

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

* 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: Donna Elliott

Contractor or Authorized Agent: [Signature]

Date: 4/6/19



Town of Kill Devil Hills

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

JUN 6 2019

TOWN OF
KILL DEVIL HILLS

Planning and Inspection Department

BANNER2019-002	BANNER
PROJECT NAME: Natalya Sharp/Max's Pizza	ISSUED: 06/05/2019
SITE ADDRESS: 1700 CROATAN HWY N KILL DEVIL HILLS	EXPIRES: 09/03/2019

APPLICANT: Sharp, Natalya PO Box 1181 kitty hawk, nc 27949 252-305-2828	OWNER: OLIVOLA, MARK NANCY O WALTON P O BOX 364 KILL DEVIL HILLS, NC 27948
---	--

CONTRACTOR:	SAME AS APPLICANT 0000000 00000000, nc 00000	License: 123456 Expires: 04/30/2020
--------------------	--	--

PARCEL:

PIN: 988410374122	Parcel Number: 002739000
Address: 1700 CROATAN HWY N KILL DEVIL HILLS	Zoning:
Addition: HEDRICKS ADDITION - CROATAN SH	Block: 0 Lot(s): 0
Legal Description:	

FEES:	Paid	Due
Banner Fee	\$50.00	\$0.00
Totals :	\$50.00	\$0.00

PROJECT DESCRIPTION: Banner on the building/Unit 1712

DETAILS

Permit	
Name	Value
# OF BANNERS	1
ZONING DISTRICT	C
PURPOSE	Commercial Accessory
CONSTRUCTION COST	500.00
FLOOD ZONE	AE

BANNNER2019-002

PROJECT NAME: Natalya Sharp/Max's Pizza
SITE ADDRESS: 1700 CROATAN HWY N KILL DEVIL HILLS

BANNER

ISSUED: 06/05/2019

EXPIRES: 09/03/2019

REQUIRED INSPECTIONS

Final

CONDITIONS

- * Proposed sign cannot be flashing or intermittently illuminated or appear to be flashing or glittering or moving.
- No exposed neon, argon, krypton or similar gas lighting allowed except as permitted in Section 153.077(B)(10).
- Lighting shall be shielded so as to prevent a direct view of the light from a residence or a street in a residential zone.
- * No such banner shall exceed 100 square feet. Banners shall be attached to a building. Banner may be displayed for a period not to exceed 90 days.
- * Window signs cannot exceed 25% of the gross glazing area of the building and cannot be separately illuminated or backlit by lighting installed for that purpose.
- * 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: Donna Elliott

Contractor or Authorized Agent: [Signature]

Date: 6/6/19



Town of Kill Devil Hills

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

JUN 4 2019

Planning and Inspection Department

Town of Kill Devil Hills

SG2019-007	SIGN
PROJECT NAME: LaLa Land	ISSUED: 04/09/2019
SITE ADDRESS: 1600 CROATAN HWY S KILL DEVIL HILLS	EXPIRES: 10/06/2019

APPLICANT: SUNSATION REALTY 353 Village Road Virginia Beach, VA 23451 757-822-8412	OWNER: SUNSATION REALTY 353 Village Road Virginia Beach, VA 23451 757-822-8412
--	--

CONTRACTOR:	SAME AS APPLICANT 0000000 00000000, nc 00000	License: 123456 Expires: 04/30/2020
--------------------	--	--

PARCEL:

PIN: 989313040879	Parcel Number: 008384000
Address: 1600 CROATAN HWY S KILL DEVIL HILLS	Zoning:
Addition: OCEAN ACRES TRACT 3 SEC 1	Block: A Lot(s): 27-28
Legal Description:	

FEES:	Paid	Due
Sign Permit Fee	\$1,100.00	\$0.00
Totals :	\$1,100.00	\$0.00

PROJECT DESCRIPTION: Free-standing sign and signs on the building

SG2019-007

PROJECT NAME: LaLa Land

SITE ADDRESS: 1600 CROATAN HWY S KILL DEVIL HILLS

SIGN

ISSUED: 04/09/2019

EXPIRES: 10/06/2019

DETAILS**Permit**

Name	Value
# OF SIGNS	11
SIGN - FREE STANDING PERMITTED (SQFT)	64.00
SIGN - FREE STANDING PROPOSED (SQ FT)	51.75
SIGN - WALL PERMITTED (SQFT)	234.00
SIGN- WALL PROPOSED (SQ FT)	233.62
ZONING DISTRICT	C
PURPOSE	Commercial Accessory
CONSTRUCTION COST	3500.00
FLOOD ZONE	AE

REQUIRED INSPECTIONS

Final

CONDITIONS

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

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

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

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

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

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

* Zoning Final Inspection is required.

SG2019-007

PROJECT NAME: LaLa Land

SITE ADDRESS: 1600 CROATAN HWY S KILL DEVIL HILLS

SIGN

ISSUED: 04/09/2019

EXPIRES: 10/06/2019

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: 6-4-19



Town of Kill Devil Hills

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

JUN 21 2019

Planning and Inspection Department

SG2019-014

PROJECT NAME: Dream Cream
SITE ADDRESS: 1722 N Croatan Hwy Kill Devil Hills

SIGN

ISSUED: 06/21/2019

EXPIRES: 12/18/2019

APPLICANT: Dream Cream
PO Box 3323
Kill Devil Hills, NC 27948
252-256-1473

OWNER: OLIVOLA, Mark
P O BOX 364
KILL DEVIL HILLS, NC 27948

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

License: LEGACY UNKNOWN
Expires: 12/31/2019

PARCEL:

PIN: 988410373044-7288
Address: 1722 N Croatan Hwy Kill Devil Hills
Addition:
Legal Description:

Parcel Number:
Zoning:
Block: **Lot(s):**

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

PROJECT DESCRIPTION: Sign on the building

SG2019-014

PROJECT NAME: Dream Cream

SITE ADDRESS: 1722 N Croatan Hwy Kill Devil Hills

SIGN

ISSUED: 06/21/2019

EXPIRES: 12/18/2019

DETAILS

Permit

Name	Value
# OF SIGNS	1
SIGN - WALL PERMITTED (SQFT)	36.00
SIGN- WALL PROPOSED (SQ FT)	25.33
ZONING DISTRICT	C
PURPOSE	Commercial Accessory
CONSTRUCTION COST	4000.00
FLOOD ZONE	AE

REQUIRED INSPECTIONS

Final

CONDITIONS

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

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

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

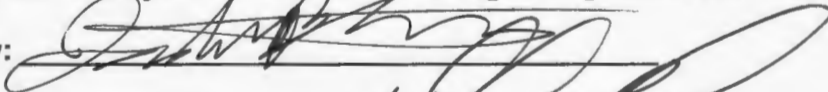
* This permit becomes null and void if work or construction authorized is not commenced within 6 months or if construction or work is suspended for a period of 12 months at any time after work has started.

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

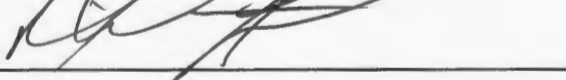
* Zoning Final Inspection is required.

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:

6-21-19



Town of Kill Devil Hills

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

JUN 28 2019

Planning and Inspection Department

SG2019-016

PROJECT NAME: Mom's Sweet Shop
SITE ADDRESS: 3213 CROATAN HWY N KILL DEVIL HILLS

SIGN

ISSUED: 06/24/2019

EXPIRES: 12/21/2019

APPLICANT: Wineland, Derik and Jessica
PO Box 466
Kill Devil Hills, NC 27948
252-261-8253

OWNER: Wineland, Derik and Jessica
PO Box 466
Kill Devil Hills, NC 27948
252-261-8253

CONTRACTOR: SAME AS OWNER
UNKNOWN
UNKNOWN, XX 00000

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

PARCEL:

PIN: 988513040400

Parcel Number: 000039000

Address: 3213 CROATAN HWY N KILL DEVIL HILLS

Addition:

Zoning:

Block: 11 **Lot(s):** 2

Legal Description:

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

PROJECT DESCRIPTION: Free-standing sign

SG2019-016

PROJECT NAME: Mom's Sweet Shop

SITE ADDRESS: 3213 CROATAN HWY N KILL DEVIL HILLS

SIGN

ISSUED: 06/24/2019

EXPIRES: 12/21/2019

DETAILS**Permit**

Name	Value
# OF SIGNS	1
SIGN - FREE STANDING PERMITTED (SQFT)	64.00
SIGN - FREE STANDING PROPOSED (SQ FT)	50.00
ZONING DISTRICT	C
PURPOSE	Commercial Accessory
CONSTRUCTION COST	100.00
FLOOD ZONE	AE

REQUIRED INSPECTIONS

Final

CONDITIONS

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

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

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

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

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

* Zoning Final Inspection is required.

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

Issued By:

Contractor or Authorized Agent:

Date:

6-28-19



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

DM2019-003

PROJECT NAME:

SITE ADDRESS: 1505 VA DARE TRL N KILL DEVIL HILLS

DEMOLITION

ISSUED: 05/31/2019

EXPIRES: 11/27/2019

APPLICANT: Ocean Estates LLC
905 NORTH VA Dare TR
Kill Devil Hills, NC 27948
252-207-8710

OWNER: Ocean Estates LLC
905 NORTH VA Dare TR
Kill Devil Hills, NC 27948
252-207-8710

GENERAL - UNLIMITED:

SAUNDERS, RM / R M SAUNDERS GENERAL
CONTRACTORS INC
PO Box 1922
Kill Devil Hills, NC 27948
252-207-8710

License: 32380
Expires: 01/01/2020

PARCEL:

PIN: 988411651589

Parcel Number: 002770000

Address: 1505 VA DARE TRL N KILL DEVIL HILLS

Addition: CROATAN SHORES

Zoning:
Block: A **Lot(s):** 18-19

Legal Description:

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

PROJECT DESCRIPTION: Demolition of existing structures.

DETAILS

Permit

Name	Value
ZONING DISTRICT	OIR
FLOOD ZONE	VE
CONSTRUCTION COST	18000.00

MAY 31 2019

DM2019-003

PROJECT NAME:

SITE ADDRESS: 1505 VA DARE TRL N KILL DEVIL HILLS

DEMOLITION

ISSUED: 05/31/2019

EXPIRES: 11/27/2019

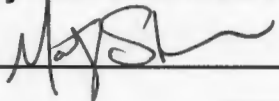
REQUIRED INSPECTIONS

Final

CONDITIONS

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

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

Issued By: 

Contractor or Authorized Agent:  Date: 5-31-19



Town of Kill Devil Hills

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

PAID

JUN 19 2019

Planning and Inspection Department

TOWN OF

DM2019-004	DEMOLITION
PROJECT NAME: Waste water demo	ISSUED: 06/19/2019
SITE ADDRESS: 1607 MEMORIAL BLVD S KILL DEVIL HILLS	EXPIRES: 12/16/2019

APPLICANT: COMFORT INN 1632 SPRING HOUSE TRAIL VIRGINIA BEACH, VA 23455 441-6333	OWNER: Neptune KDH LLC 249 Central Park Ave Suite 320 Virginia Beach, Va 23462 757-213-4380
--	--

UNLICENSED BUILDER: Landmark Hotel Group 249 Central Park Ave Suite 320 Virginia Beach, Va 23462 757-213-4380	License: 0000000000 Expires: 06/28/2029
--	--

PARCEL:

PIN: 989309058395	Parcel Number: 027066000
Address: 1607 MEMORIAL BLVD S KILL DEVIL HILLS	Zoning:
Addition: OCEAN ACRES INC	Block: 0 Lot(s): 138-141
Legal Description:	

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

PROJECT DESCRIPTION: Remove old existing waste water plant, brick building at NE to remain.

DETAILS

Permit	
Name	Value
ZONING DISTRICT	C
FLOOD ZONE	AE
CONSTRUCTION COST	10000.00

DM2019-004

PROJECT NAME: Waste water demo

SITE ADDRESS: 1607 MEMORIAL BLVD S KILL DEVIL HILLS

DEMOLITION

ISSUED: 06/19/2019

EXPIRES: 12/16/2019

REQUIRED INSPECTIONS

Final

CONDITIONS

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

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

Issued By: _____

Contractor or Authorized Agent: _____

Date: 6/19/2019



Town of Kill Devil Hills

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

Planning and Inspection Department

ZP2019-046	ZONING PERMIT
PROJECT NAME:	ISSUED: 06/05/2019
SITE ADDRESS: 634 CANAL DR KILL DEVIL HILLS	EXPIRES: 12/02/2019

APPLICANT: Miller, Ben and Emily 1102 Suite G Cambridge Road Kill Devil Hills, NC 27948 252-207-9395	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: 01/01/2020
---	---

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
Fence	\$100.00	\$0.00
Totals :	\$100.00	\$0.00

PROJECT DESCRIPTION: New fence in rear yard.

PAID

JUN 5 2019

ZP2019-046

PROJECT NAME:

SITE ADDRESS: 634 CANAL DR KILL DEVIL HILLS

ZONING PERMIT

ISSUED: 06/05/2019

EXPIRES: 12/02/2019

DETAILS

Permit

Name	Value
ZONING DISTRICT	RL
CAMA PERMIT	N
CAMA EXEMPTION	N
FLOOD ZONE	AE
BASE FLOOD ELEVATION	8
PURPOSE	Residential Repair/Remodel
CONSTRUCTION COST	6000.00
CULVERT	N
DRIVEWAY INVERT 2	N

REQUIRED INSPECTIONS

Final

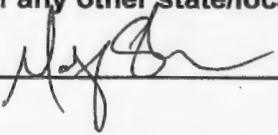
Stringline

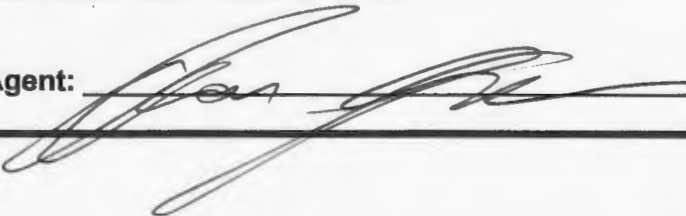
CONDITIONS

* 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:** 6-4-19



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

ZP2019-045	ZONING PERMIT
PROJECT NAME: William Stewart	ISSUED: 06/04/2019
SITE ADDRESS: 1511 DOGWOOD LN KILL DEVIL HILLS	EXPIRES: 12/01/2019

APPLICANT: STEWART, WILLIAM J 328 WEST EDEN STREET KILL DEVIL HILLS, NC 27948 252-202-8673	OWNER: STEWART, WILLIAM J 328 WEST EDEN STREET KILL DEVIL HILLS, NC 27948 252-202-8673
--	--

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

PARCEL:

PIN: 988413139920	Parcel Number: 027499000
Address: 1511 DOGWOOD LN KILL DEVIL HILLS	Zoning:
Addition: FIRST FLIGHT VLG PH A SEC 3	Block: 0 Lot(s): 56
Legal Description:	

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

PROJECT DESCRIPTION: Fence

JUN 4 2019

ZP2019-045

PROJECT NAME: William Stewart

SITE ADDRESS: 1511 DOGWOOD LN KILL DEVIL HILLS

ZONING PERMIT

ISSUED: 06/04/2019

EXPIRES: 12/01/2019

DETAILS

Permit

Name	Value
ZONING DISTRICT	RL
CAMA PERMIT	N
CAMA EXEMPTION	N
FLOOD ZONE	AE
CONSTRUCTION COST	400.00
SURVEYOR NAME AND NUMBER	Styons Surveying Services
CULVERT	N
DRIVEWAY INVERT 2	N

REQUIRED INSPECTIONS

Final

Zoning Final

CONDITIONS

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

* Zoning Final Inspection is required.

* Call Building Inspector for a string line inspection before building the fence.

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

Issued By: Donna Elliott

Contractor or Authorized Agent: WJST

Date: 6/4/19



Town of Kill Devil Hills

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

PAID

JUN 24 2019

Planning and Inspection Department

TOWN OF
KILL DEVIL HILLS

ZP2019-054	ZONING PERMIT
PROJECT NAME: King Fence	ISSUED: 06/24/2019
SITE ADDRESS: 707 INDIAN DR KILL DEVIL HILLS	EXPIRES: 12/21/2019

APPLICANT: KING, DIANE
707 Indian Drive
Kill Devil Hills, NC 27948

OWNER: KING, DIANE
707 Indian Drive
Kill Devil Hills, NC 27948

GENERAL: Self
UNKNOWN
UNKNOWN, XX 00000
917-862-9006

License: Unlicensed
Expires: 12/31/2020

PARCEL:

PIN: 988409252802

Parcel Number: 002730000

Address: 707 INDIAN DR KILL DEVIL HILLS

Addition: HIGH VIEW - HEDRICKS ADD

Zoning:

Block: F **Lot(s):** 24

Legal Description:

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

PROJECT DESCRIPTION: Replace fence on rear of property

ZP2019-054

PROJECT NAME: King Fence

SITE ADDRESS: 707 INDIAN DR KILL DEVIL HILLS

ZONING PERMIT

ISSUED: 06/24/2019

EXPIRES: 12/21/2019

DETAILS

Permit

Name	Value
ZONING DISTRICT	RL
FRONT YARD SETBACK	30
REAR YARD SETBACK	20% Depth >30
SIDE YARD SETBACK	8
STREET SIDE SETBACK	15
CAMA PERMIT	N
CAMA EXEMPTION	N
FLOOD ZONE	X
PURPOSE	Residential Repair/Remodel
CONSTRUCTION COST	300.00
SURVEYOR NAME AND NUMBER	M Douglas Styons L-3227
CULVERT	N
DRIVEWAY INVERT 2	N

REQUIRED INSPECTIONS

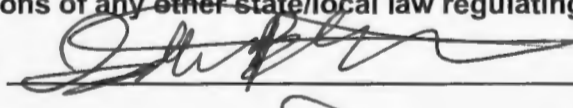
Stringline

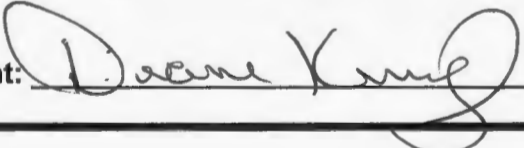
Final

CONDITIONS

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

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

Issued By: 

Contractor or Authorized Agent:  Date: 6-24-19



Town of Kill Devil Hills

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

PAID
JUN 20 2019

Planning and Inspection Department

Town of Kill Devil Hills

ZP2019-051	ZONING PERMIT
PROJECT NAME: Vigil Fence	ISSUED: 06/17/2019
SITE ADDRESS: 806 FIRST ST W KILL DEVIL HILLS	EXPIRES: 12/14/2019

APPLICANT: VIGIL, ALEX 806 W First Street Kill Devil Hills, NC 27948	OWNER: VIGIL, ALEX 806 W First Street Kill Devil Hills, NC 27948
---	---

GENERAL:	Self UNKNOWN UNKNOWN, XX 00000 917-862-9006	License: Unlicensed Expires: 12/31/2020
-----------------	--	--

PARCEL:

PIN: 988413135610	Parcel Number: 027546122
Address: 806 FIRST ST W KILL DEVIL HILLS	
Addition:	Zoning:
Legal Description:	Block: 0 Lot(s): 122

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

PROJECT DESCRIPTION: Fence around perimeter of back yard

#4000⁰⁰ value

ZP2019-051

PROJECT NAME: Vigil Fence

SITE ADDRESS: 806 FIRST ST W KILL DEVIL HILLS

ZONING PERMIT

ISSUED: 06/17/2019

EXPIRES: 12/14/2019

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	9.0
PURPOSE	Residential Accessory
SURVEYOR NAME AND NUMBER	William Yetzer L-5274
CULVERT	N
DRIVEWAY INVERT 2	N

REQUIRED INSPECTIONS

Stringline

Zoning Final

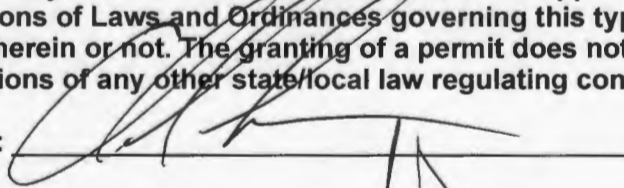
Final

CONDITIONS


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

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

Issued By:



Contractor or Authorized Agent:



Date:

6/20/19



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

ZP2019-052	ZONING PERMIT
PROJECT NAME:	ISSUED: 06/14/2019
SITE ADDRESS: 431 Palmetto St. Kill Devil Hills	EXPIRES: 12/11/2019

APPLICANT: Skinner, Brian & Megan 9019 Ribbon Falls Loop BRISTOW, VA 20136 703-869-2761	OWNER: Skinner, Brian & Megan 9019 Ribbon Falls Loop BRISTOW, VA 20136 703-869-2761
---	---

GENERAL:	AAA Lawn Enforcement 4227 Worthington Lane kitty hawk, nc 27949 252-207-6496	License: 123456 Expires: 10/31/2025
-----------------	---	--

PARCEL:			
PIN: 988517002147	Parcel Number:		
Address: 431 Palmetto St. Kill Devil Hills	Zoning:		
Addition:	Block:	Lot(s):	
Legal Description: Lot 10R, Blk 50, Virginia Dare Shores			

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

PROJECT DESCRIPTION: New fence in front yard.

PAID
JUN 14 2019
TOWN OF
KILL DEVIL HILLS

ZP2019-052

PROJECT NAME:

SITE ADDRESS: 431 Palmetto St. Kill Devil Hills

ZONING PERMIT

ISSUED: 06/14/2019

EXPIRES: 12/11/2019

DETAILS

Permit

Name	Value
CAMA PERMIT	N
CAMA EXEMPTION	N
FLOOD ZONE	AE
BASE FLOOD ELEVATION	9
PURPOSE	Residential Repair/Remodel
CONSTRUCTION COST	1900.00
CULVERT	N
DRIVEWAY INVERT 2	N

REQUIRED INSPECTIONS

Final

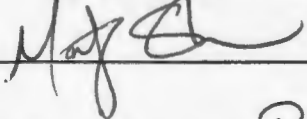
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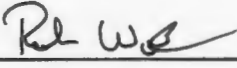
CONDITIONS

* 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: 6-14-19



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

ZP2019-049

PROJECT NAME: Riddick Fence
SITE ADDRESS: 1510 MONUMENT LN KILL DEVIL HILLS

ZONING PERMIT

ISSUED: 06/12/2019

EXPIRES: 12/09/2019

APPLICANT: Riddick, Jason
1510 Monument Lane
Kill Devil Hills, NC 27948

OWNER: Riddick, Jason
1510 Monument Lane
Kill Devil Hills, NC 27948

GENERAL: Self
UNKNOWN
UNKNOWN, XX 00000
917-862-9006

License: Unlicensed
Expires: 12/31/2020

PARCEL:

PIN: 988414343509

Parcel Number: 003391000

Address: 1510 MONUMENT LN KILL DEVIL HILLS

Addition: FIRST FLIGHT VILLAGE SEC 1

Zoning:
Block: 0 **Lot(s):** 123

Legal Description:

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

PROJECT DESCRIPTION: 6ft fence in the back yard

PAID
JUN 12 2019

ZP2019-049

PROJECT NAME: Riddick Fence

SITE ADDRESS: 1510 MONUMENT LN KILL DEVIL HILLS

ZONING PERMIT

ISSUED: 06/12/2019

EXPIRES: 12/09/2019

DETAILS

Permit

Name	Value
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	8.3
PURPOSE	Residential Accessory
CONSTRUCTION COST	3000.00
SURVEYOR NAME AND NUMBER	M Douglas Styons L-3227
CULVERT	N
DRIVEWAY INVERT 2	N

REQUIRED INSPECTIONS

Final

Zoning 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: _____

6-12-19



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

ZP2019-050	ZONING PERMIT
PROJECT NAME: WADDELL FENCE	ISSUED: 06/12/2019
SITE ADDRESS: 1409 PIRATES LOOP KILL DEVIL HILLS	EXPIRES: 12/09/2019

APPLICANT: Ryan Waddell 2604 S. Memorial Blvd. nags head, nc 27959 252-599-1611	OWNER: Ryan Waddell 2604 S. Memorial Blvd. nags head, nc 27959 252-599-1611
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GENERAL:	Self UNKNOWN UNKNOWN, XX 00000 917-862-9006	License: Unlicensed Expires: 12/31/2020
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PARCEL:

PIN: 988414440091	Parcel Number: 003558000
Address: 1409 PIRATES LOOP KILL DEVIL HILLS	Zoning:
Addition: LANDING SECTION 2, THE	Block: 0 Lot(s): 53
Legal Description:	

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

PROJECT DESCRIPTION: 6' FENCE ON SOUTHERN PROPERTY LINE

JUN 12 2019

ZP2019-050

PROJECT NAME: WADDELL FENCE

SITE ADDRESS: 1409 PIRATES LOOP KILL DEVIL HILLS

ZONING PERMIT

ISSUED: 06/12/2019

EXPIRES: 12/09/2019

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	9.00
PURPOSE	Residential Accessory
CONSTRUCTION COST	1000.00
CULVERT	N
DRIVEWAY INVERT 2	N

REQUIRED INSPECTIONS

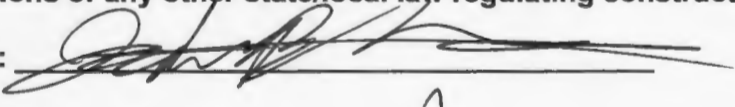
Stringline

Zoning Final

CONDITIONS

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Issued By: 

Contractor or Authorized Agent:  **Date:** 6-12-19



Town of Kill Devil Hills

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

PAD

JUN 11 2019

Planning and Inspection Department

ZP2019-048	ZONING PERMIT
PROJECT NAME: KOZAK FENCE	ISSUED: 06/11/2019
SITE ADDRESS: 2026 VA DARE TRL N KILL DEVIL HILLS	EXPIRES: 12/08/2019

APPLICANT: KOZAK, WARREN D 3133 Riveredge Dr PORTSMOUTH, VA 23703	OWNER: KOZAK, WARREN D 3133 Riveredge Dr PORTSMOUTH, VA 23703
--	--

BUILDER:	ALL ABOUT FENCES UNKNOWN UNKNOWN, XX 00000 252-473-2233	License: unlicensed Expires: 12/30/2019
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PARCEL:

PIN: 988518301286	Parcel Number: 030652000
Address: 2026 VA DARE TRL N KILL DEVIL HILLS	Zoning:
Addition:	Block: 0 Lot(s): 32 & 32A
Legal Description:	

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

PROJECT DESCRIPTION: FENCE ALONG REAR AND NORTH PROPERTY LINES

ZP2019-048

PROJECT NAME: KOZAK FENCE

SITE ADDRESS: 2026 VA DARE TRL N KILL DEVIL HILLS

ZONING PERMIT

ISSUED: 06/11/2019

EXPIRES: 12/08/2019

DETAILS

Permit

Name	Value
ZONING DISTRICT	C
FRONT YARD SETBACK	30
REAR YARD SETBACK	20% Depth >30
SIDE YARD SETBACK	10
CAMA PERMIT	N
CAMA EXEMPTION	N
FLOOD ZONE	AE
BASE FLOOD ELEVATION	9.00
PURPOSE	Residential Accessory
CONSTRUCTION COST	6815.99
CULVERT	N
DRIVEWAY INVERT 2	N

REQUIRED INSPECTIONS

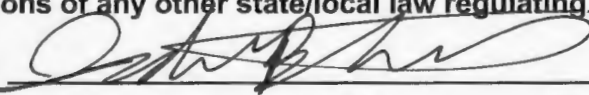
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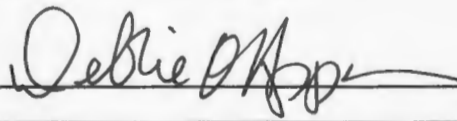
Final

CONDITIONS

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Issued By: 

Contractor or Authorized Agent:  Date: 06/11/19



Town of Kill Devil Hills

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

JUN 11 2019

Planning and Inspection Department

ZP2019-047	ZONING PERMIT
PROJECT NAME: APPLETON FENCE	ISSUED: 06/11/2019
SITE ADDRESS: 2024 VA DARE TRL N KILL DEVIL HILLS	EXPIRES: 12/08/2019

APPLICANT: Debbie & Randall Appleton 2024 N Va Dare Kill Devil Hills, NC 27948	OWNER: Debbie & Randall Appleton 2024 N Va Dare Kill Devil Hills, NC 27948
---	---

BUILDER:	ALL ABOUT FENCES UNKNOWN UNKNOWN, XX 00000 252-473-2233	License: unlicensed Expires: 12/30/2019
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PARCEL:

PIN: 988518302212	Parcel Number: 030653000
Address: 2024 VA DARE TRL N KILL DEVIL HILLS	Zoning:
Addition:	Block: 0 Lot(s): 34 & 34A
Legal Description:	

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

PROJECT DESCRIPTION: FENCE ON REAR AND SOUTH PROPERTY LINE

ZP2019-047

PROJECT NAME: APPLETON FENCE

SITE ADDRESS: 2024 VA DARE TRL N KILL DEVIL HILLS

ZONING PERMIT

ISSUED: 06/11/2019

EXPIRES: 12/08/2019

DETAILS

Permit

Name	Value
ZONING DISTRICT	C
FRONT YARD SETBACK	30
REAR YARD SETBACK	20% Depth >30
SIDE YARD SETBACK	10
CAMA PERMIT	N
CAMA EXEMPTION	N
FLOOD ZONE	AE
BASE FLOOD ELEVATION	9.00
PURPOSE	Residential Accessory
CONSTRUCTION COST	5791.19
CULVERT	N
DRIVEWAY INVERT 2	N

REQUIRED INSPECTIONS

Stringline

Final

CONDITIONS

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Issued By: 

Contractor or Authorized Agent: 

Date: 6/11/19



Town of Kill Devil Hills

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

JUN 27 2019

Planning and Inspection Department

TOWN OF
KILL DEVIL HILLS

DW2019-010	DRIVEWAY
PROJECT NAME: John Giglia	ISSUED: 06/27/2019
SITE ADDRESS: 815 CEDAR DR KILL DEVIL HILLS	EXPIRES: 12/24/2019

APPLICANT: JOHN GIGLIA
815 Cedar Dr.
KILL DEVIL HILLS, NC 27948
631-880-9843

OWNER: JOHN GIGLIA
815 Cedar Dr.
KILL DEVIL HILLS, NC 27948
631-880-9843

CONTRACTOR: SAME AS OWNER
UNKNOWN
UNKNOWN, XX 00000

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

PARCEL:

PIN: 988413130091

Parcel Number: 028479000

Address: 815 CEDAR DR KILL DEVIL HILLS

Zoning:

Addition:

Block: 0 **Lot(s):** 99

Legal Description:

FEES:	<u>Paid</u>	<u>Due</u>
Driveway Permit Fee	\$50.00	\$0.00
Totals :	\$50.00	\$0.00

PROJECT DESCRIPTION: Replace portion of driveway

DW2019-010

PROJECT NAME: John Giglia

SITE ADDRESS: 815 CEDAR DR KILL DEVIL HILLS

DRIVEWAY

ISSUED: 06/27/2019

EXPIRES: 12/24/2019

DETAILS

Permit

Name	Value
DRIVEWAY INVERT 2	N
CULVERT	N
SURVEYOR NAME AND NUMBER	Boundaries Surveying
ZONING DISTRICT	RL
CONSTRUCTION COST	1500.00
FLOOD ZONE	AE

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.

* 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: Donna Elliott

Contractor or Authorized Agent: [Signature]

Date: 27 June 19



Town of Kill Devil Hills

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

JUN 3 2019

Planning and Inspection Department

DW2019-009	DRIVEWAY
PROJECT NAME: Bunn Driveway Addition	ISSUED: 06/03/2019
SITE ADDRESS: 216 SOTHEL ST E KILL DEVIL HILLS	EXPIRES: 11/30/2019

APPLICANT: Bunn, Charles 22226 Old Chapel Road Newsomes, VA 23874	OWNER: Bunn, Charles 22226 Old Chapel Road Newsomes, VA 23874
--	--

GENERAL:	Self UNKNOWN UNKNOWN, XX 00000 917-862-9006	License: Unlicensed Expires: 12/31/2020
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PARCEL:

PIN: 988513134060	Parcel Number: 000416000
Address: 216 SOTHEL ST E KILL DEVIL HILLS	Zoning:
Addition: VIRGINIA DARE SHORES	Block: 8 Lot(s): 29-30
Legal Description:	

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

PROJECT DESCRIPTION: Expand driveway by 408 sq ft

DW2019-009

PROJECT NAME: Bunn Driveway Addtion
SITE ADDRESS: 216 SOTHEL ST E KILL DEVIL HILLS

DRIVEWAY

ISSUED: 06/03/2019

EXPIRES: 11/30/2019

DETAILS

Permit

Name	Value
DRIVEWAY INVERT 2	Y
CULVERT	N
SURVEYOR NAME AND NUMBER	William S Jones L-2532
ZONING DISTRICT	C
CONSTRUCTION COST	3000.00
FLOOD ZONE	AE
BASE FLOOD ELEVATION	9.0
LOT COVERAGE	42.00
TOTAL SQUARE FOOTAGE	408

REQUIRED INSPECTIONS

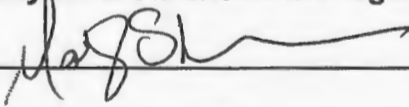
Zoning Final
Final

Slab/Foundation

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.

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: Carolyn at Bunn Date: 6-3-19



Town of Kill Devil Hills

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

JUN 26 2019

Planning and Inspection Department

EG2019-004	EXCAVATION AND GRADING
PROJECT NAME: Sinanaj Clearing	ISSUED: 06/19/2019
SITE ADDRESS: 0 FIFTH ST W KILL DEVIL HILLS	EXPIRES: 12/16/2019

APPLICANT: SINANAJ, ERMAL
205 W. Morning View Drive
nags head, nc 27959

OWNER: SINANAJ, ERMAL
205 W. Morning View Drive
nags head, nc 27959

CONTRACTOR: ALL COUNTY BUILDERS LLC
205 West Morning Dove
NAGS HEAD, NC 27959
252-475-4047

GENERAL-LIMITED: ALL COUNTY BUILDERS LLC
205 West Morning Dove
NAGS HEAD, NC 27959
252-475-4047

License: 59306
Expires: 01/11/2020

PARCEL:

PIN: 988405283945 **Parcel Number:** 002057000

Address: 0 FIFTH ST W KILL DEVIL HILLS

Addition: WRIGHT'S SHORES **Zoning:**

Legal Description: **Block:** 0 **Lot(s):** 3

FEES:	Paid	Due
Land Disturbing	\$100.00	\$0.00
Totals :	\$100.00	\$0.00

PROJECT DESCRIPTION: Clear lot and bring in fill as needed for future construction

EG2019-004

PROJECT NAME: Sinanaj Clearing
SITE ADDRESS: 0 FIFTH ST W KILL DEVIL HILLS

EXCAVATION AND GRADING

ISSUED: 06/19/2019

EXPIRES: 12/16/2019

DETAILS

Permit

Name	Value
ESTIMATED CONSTRUCTION COST	5000.00
ZONING DISTRICT	RL
CAMA PERMIT	N
FLOOD ZONE	AE
BASE FLOOD ELEVATION	8.3
SURVEYOR NAME AND NUMBER	Martin Barnette L-3740

REQUIRED INSPECTIONS

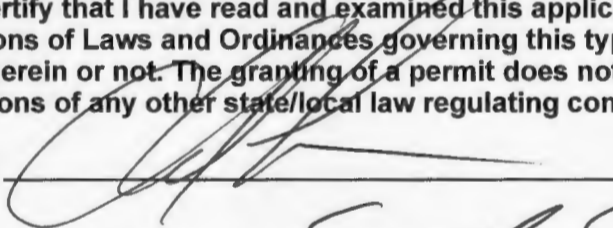
Final

CONDITIONS

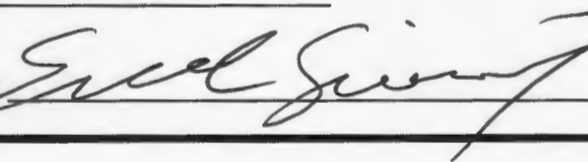
- * This permit becomes null and void if work or construction authorized is not commenced within 6 months or if construction or work is suspended for a period of 12 months at any time after work has started.
- * The developer shall be responsible for maintaining erosion and sediment control at the disturbed area.

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

Issued By:



Contractor or Authorized Agent:



Date:

6/26/2019



Town of Kill Devil Hills

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

JUN 3 2019

Planning and Inspection Department

BP2019-126	BUILDING
PROJECT NAME: Stephens Piling Replacement	ISSUED: 05/31/2019
SITE ADDRESS: 305 BURNS DR KILL DEVIL HILLS	EXPIRES: 11/27/2019

APPLICANT: STEPHENS, J ANTHONY
P O BOX 2475
KILL DEVIL HILLS, NC 27948

OWNER: STEPHENS, J ANTHONY
P O BOX 2475
KILL DEVIL HILLS, NC 27948

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

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: 988316941057

Parcel Number: 008463000

Address: 305 BURNS DR KILL DEVIL HILLS

Addition: OCEAN ACRES TRACT 3 SEC 1

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

Legal Description:

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

PROJECT DESCRIPTION: replace 6 deck piles, sister 9 piles and replace 4-8x8 piles



Town of Kill Devil Hills

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

JUN 4 2019

Planning and Inspection Department

BP2019-127

PROJECT NAME: DREAM TIME PILING REPAIR
SITE ADDRESS: 1209 WINDSONG WAY KILL DEVIL HILLS

BUILDING

ISSUED: 06/03/2019

EXPIRES: 11/30/2019

APPLICANT: DREAM TIME OBX LLC
319 WHITESTONE RD
CHARLOTTE, NC 28270
704-400-4871

OWNER: DREAM TIME OBX LLC
319 WHITESTONE RD
CHARLOTTE, NC 28270
704-400-4871

CONTRACTOR: BARRY TWIFORD
UNKNOWN
UNKNOWN, XX 00000
252-423-0568

License: LEGACY UNKNOWN
Expires: 12/30/2019

PARCEL:

PIN: 988415647321

Parcel Number: 004079000

Address: 1209 WINDSONG WAY KILL DEVIL HILLS

Zoning:

Addition:

Block: 0 **Lot(s):** 11

Legal Description:

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

PROJECT DESCRIPTION: REPLACE NW PILING

BP2019-127

PROJECT NAME: DREAM TIME PILING REPAIR
SITE ADDRESS: 1209 WINDSONG WAY KILL DEVIL HILLS

BUILDING

ISSUED: 06/03/2019

EXPIRES: 11/30/2019

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	20% Depth >30
FLOOD ZONE	VE
BASE FLOOD ELEVATION	11.00
FINAL ELEVATION CERTIFICATE	N
CONSTRUCTION COST	500.00
CONSTRUCTION TYPE	V
OCCUPANCY TYPE	One & Two Family Dwelling

REQUIRED INSPECTIONS

Zoning Final

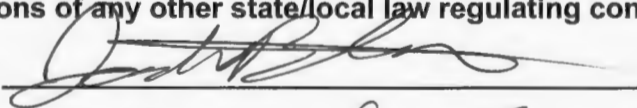
Final

CONDITIONS

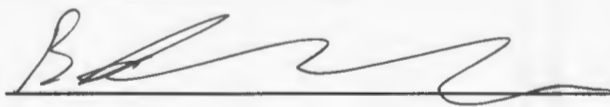
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I hereby certify that I have read and examined this application and know the same to be true and correct. All provisions of Laws and Ordinances governing this type of work will be complied with whether specified herein or not. The granting of a permit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

Issued By:



Contractor or Authorized Agent:



Date:

6-4-19



Town of Kill Devil Hills

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

JUN 4 2019

Planning and Inspection Department

BP2019-128	BUILDING
PROJECT NAME: Heaton Piling replacement	ISSUED: 06/03/2019
SITE ADDRESS: 411 SEAGULL CT KILL DEVIL HILLS	EXPIRES: 11/30/2019

APPLICANT: Heaton, Russell
193 Winnepeg Ave
EGG HARBOR TOWNSHIP, NJ 08234

OWNER: Heaton, Russell
193 Winnepeg Ave
EGG HARBOR TOWNSHIP, NJ 08234

GENERAL: Self
UNKNOWN
UNKNOWN, XX 00000
917-862-9006

License: Unlicensed
Expires: 12/31/2020

PARCEL:

PIN: 988414334670

Parcel Number: 003577000

Address: 411 SEAGULL CT KILL DEVIL HILLS

Addition: LANDING SECTION 2, THE

Zoning:
Block: 0 **Lot(s):** 72

Legal Description:

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

PROJECT DESCRIPTION: replace pilings on front deck landing

BP2019-128

PROJECT NAME: Heaton Piling replacement
SITE ADDRESS: 411 SEAGULL CT KILL DEVIL HILLS

BUILDING

ISSUED: 06/03/2019

EXPIRES: 11/30/2019

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
FLOOD ZONE	AE
BASE FLOOD ELEVATION	9.0
FINAL ELEVATION CERTIFICATE	N
CONSTRUCTION COST	500.00
SURVEYOR NAME AND NUMBER	William S Jones L-2532
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.

BP2019-128

PROJECT NAME: Heaton Piling replacement
SITE ADDRESS: 411 SEAGULL CT KILL DEVIL HILLS

BUILDING

ISSUED: 06/03/2019

EXPIRES: 11/30/2019

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
WITH
CASH

JUN 26 2019

Planning and Inspection Department

BP2019-147

PROJECT NAME: FITZGERALD STAIR REBUILD
SITE ADDRESS: 3130 VA DARE TRL N KILL DEVIL HILLS

BUILDING

ISSUED: 06/26/2019

EXPIRES: 12/23/2019

APPLICANT: FITZGERALD, AUBREY H
5 POINDEXTER PLACE
NEWPORT NEWS, VA 23606

OWNER: FITZGERALD, AUBREY H
5 POINDEXTER PLACE
NEWPORT NEWS, VA 23606

BUILDING LIMITED: EVANS HOMES LLC.
5121 WINDSOR PL
kitty hawk, nc 27949
252-207-8127

License: 49040
Expires: 12/31/2019

PARCEL:

PIN: 988513049237

Parcel Number: 000108000

Address: 3130 VA DARE TRL N KILL DEVIL HILLS

Addition: ORVILLE BEACH BLK 8

Zoning:
Block: 8 **Lot(s):** 4

Legal Description:

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

PROJECT DESCRIPTION: REBUILD STAIR AND RAILING

BP2019-147

PROJECT NAME: FITZGERALD STAIR REBUILD

SITE ADDRESS: 3130 VA DARE TRL N KILL DEVIL HILLS

BUILDING

ISSUED: 06/26/2019

EXPIRES: 12/23/2019

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: 6.26.19



Town of Kill Devil Hills

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

JUN 27 2019

Planning and Inspection Department

BP2019-148

PROJECT NAME:

SITE ADDRESS: 1523 SIR WALTER RD KILL DEVIL HILLS

BUILDING

ISSUED: 06/26/2019

EXPIRES: 12/23/2019

APPLICANT: Barry Prokop
1523 Sir Walter Rd.
Kill Devil Hills, NC 27948
703-426-8510

OWNER: Barry Prokop
1523 Sir Walter Rd.
Kill Devil Hills, NC 27948
703-426-8510

UNLICENSED - REMODELING: First Light Construction & Improvements.
P.O. Box 109
kitty hawk, nc 27949
804-690-8431

License: 1234
Expires:

PARCEL:

PIN: 988411554712

Parcel Number: 003184000

Address: 1523 SIR WALTER RD KILL DEVIL HILLS

Addition: W R DEATON - DELRAY BEACH

Zoning:

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

Legal Description:

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

PROJECT DESCRIPTION: Replace multiple windows and doors with like kind. Replace 2 exterior doors at bottom level. Install 7 new construction windows at bottom level only in unfinished space. Work does not include work at upper level or any of the other ongoing work on site.

BP2019-148

PROJECT NAME:

SITE ADDRESS: 1523 SIR WALTER RD KILL DEVIL HILLS

BUILDING

ISSUED: 06/26/2019

EXPIRES: 12/23/2019

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	11462.00
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: Marty Shaw

Contractor or Authorized Agent: [Signature] Date: 5-27-19

PLANNING
 Town of Kill Devil Hills
 4400
 Date / Time : 06/27/19 09:19
 Payment : \$ 150.00
 Receipt # : 579644
 CHECK/DEBIT CARD # (07/19)
 8915674
 06/27/19 09:19
 Issued By: Marty Shaw



Town of Kill Devil Hills

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

JUN 27 2019

Planning and Inspection Department

OP2019-032

PROJECT NAME: Susan B Miller
SITE ADDRESS: 2207 Bay Drive Kill Devil Hills

OCCUPANCY

ISSUED:

EXPIRES:

PARENT PERMIT #: BJ2018-229

APPLICANT: Miller, Susan B
3800 Elijah Baum
kitty hawk, nc 27949
252-489-7543

OWNER: Miller, Susan B
3800 Elijah Baum
kitty hawk, nc 27949
252-489-7543

GENERAL: Self
UNKNOWN
UNKNOWN, XX 00000
917-862-9006

License: Unlicensed
Expires: 12/31/2020

PARCEL:

PIN: 987408991771

Parcel Number:

Address: 2207 Bay Drive Kill Devil Hills

Addition:

Zoning:

Block:

Lot(s):

Legal Description: Lot 1 Block 76

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: New 4 Bedroom SFD

OP2019-032

PROJECT NAME: Susan B Miller

SITE ADDRESS: 2207 Bay Drive Kill Devil Hills

OCCUPANCY

ISSUED:

EXPIRES:

DETAILS

Permit

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

CONDITIONS

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

Issued By: _____

Contractor or Authorized Agent: _____

Date: _____

6/27/19



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

BP2019-151	BUILDING
PROJECT NAME: WILLIAMS STAIRS, DECKS, AND SHED	ISSUED: 06/28/2019
SITE ADDRESS: 214 SOTHEL ST E KILL DEVIL HILLS	EXPIRES: 12/25/2019

APPLICANT: WILLIAMS, CHARLES E JR RT 1 BOX 390-G FISHERSVILLE, VA 22939	OWNER: WILLIAMS, CHARLES E JR RT 1 BOX 390-G FISHERSVILLE, VA 22939
--	--

GENERAL:	Self UNKNOWN UNKNOWN, XX 00000 917-862-9006	License: Unlicensed Expires: 12/31/2020
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PARCEL:

PIN: 988513124928	Parcel Number: 000415000
Address: 214 SOTHEL ST E KILL DEVIL HILLS	Zoning:
Addition: VIRGINIA DARE SHORES	Block: 8 Lot(s): 27-28
Legal Description:	

FEES:	<u>Paid</u>	<u>Due</u>	BUILDING AREA:
Open Deck Fee	\$300.00	\$0.00	Open Decks 2 EA
Accessory Residential (MIN)	\$100.00	\$0.00	
Totals :	\$400.00	\$0.00	

PROJECT DESCRIPTION: EXTEND FRONT PORCH TO BE 9'X29', ADDING SET OF STEPS TO FRONT DECK, BUILD NEW 8'X8' REAR DECK AND STAIR, ADD 12'X12' STORAGE SHED IN REAR YARD

PAID

JUN 28 2019

BP2019-151

PROJECT NAME: WILLIAMS STAIRS, DECKS, AND SHED
SITE ADDRESS: 214 SOTHEL ST E KILL DEVIL HILLS

BUILDING**ISSUED:** 06/28/2019**EXPIRES:** 12/25/2019**DETAILS****Permit**

Name	Value
CAMA PERMIT	N
CAMA EXEMPTION	N
ZONING DISTRICT	C
PURPOSE	Residential Repair/Remodel
FRONT YARD SETBACK	15
SIDE YARD SETBACK	6
REAR YARD SETBACK	20% Depth >30
FLOOD ZONE	AE
BASE FLOOD ELEVATION	9.00
FINAL ELEVATION CERTIFICATE	N
CONSTRUCTION COST	8000.00
CONSTRUCTION TYPE	V
OCCUPANCY TYPE	One & Two Family Dwelling

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.
- * Development must meet all aspects of Chapter 151 Flood Damage Prevention Ordinance including use and elevation.
- * Shed must meet zoning requirements of 5' from side and rear property lines



Town of Kill Devil Hills

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

JUN 28 2019

Planning and Inspection Department

BP2019-150	BUILDING
PROJECT NAME: JENNINGS 8'X12' STORAGE ENCLOSURE	ISSUED: 06/28/2019
SITE ADDRESS: 601 West Sportsman Drive Kill Devil Hills	EXPIRES: 12/25/2019

APPLICANT: Jennings, Donald F. 515 W. Soundside Road nags head, nc 27959 252-207-4936	OWNER: Jennings, Donald F. 515 W. Soundside Road nags head, nc 27959 252-207-4936
---	---

RESIDENTIAL - INTERMEDIATE:	JENNINGS, DONALD P. O. Box 1102 nags head, nc 27959 252-207-4936	License: 32637 Expires: 01/01/2020
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PARCEL:

PIN: 988517007110	Parcel Number:	
Address: 601 West Sportsman Drive Kill Devil Hills	Zoning:	
Addition:	Block:	Lot(s):
Legal Description: Lot 180, Avalon Beach Subdivision		

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

PROJECT DESCRIPTION: 8'X12' STORAGE ENCLOSURE UNDER HOME

BP2019-150

PROJECT NAME: JENNINGS 8'X12' STORAGE ENCLOSURE
SITE ADDRESS: 601 West Sportsman Drive Kill Devil Hills

BUILDING

ISSUED: 06/28/2019

EXPIRES: 12/25/2019

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

Planning and Inspection Department

BP2019-149	BUILDING
PROJECT NAME: HOLLOWELL ROOF AND WINDOWS	ISSUED: 06/28/2019
SITE ADDRESS: 404 THIRD ST W KILL DEVIL HILLS	EXPIRES: 12/25/2019

APPLICANT: EDWARD HOLLOWELL 3226 CASTELOW RD COFIELD, NC 27922 252-209-2486	OWNER: EDWARD HOLLOWELL 3226 CASTELOW RD COFIELD, NC 27922 252-209-2486
---	---

GENERAL:	Self UNKNOWN UNKNOWN, XX 00000 917-862-9006	License: Unlicensed Expires: 12/31/2020
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PARCEL:			
PIN: 988409274285	Parcel Number:	002469000	
Address: 404 THIRD ST W KILL DEVIL HILLS	Zoning:		
Addition: SEA HOLLY RIDGE	Block: H	Lot(s): 16	
Legal Description:			

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

PROJECT DESCRIPTION: REPLACE SHINGLES WITH METAL ROOF, REPLACE WINDOWS

JUN 28 2019

BP2019-149**PROJECT NAME:** HOLLOWELL ROOF AND WINDOWS
SITE ADDRESS: 404 THIRD ST W KILL DEVIL HILLS**BUILDING****ISSUED:** 06/28/2019**EXPIRES:** 12/25/2019

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	X
FINAL ELEVATION CERTIFICATE	N
CONSTRUCTION COST	6000.00
CONSTRUCTION TYPE	V
OCCUPANCY TYPE	One & Two Family Dwelling

REQUIRED INSPECTIONS

Zoning Final

Final

CONDITIONS

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

* Must comply with Wind Borne Debris requirements as defined in NCBC R301.2.1.2 and NCBC 1609.2.

* Roof to be replaced in same footprint

* Windows to meet egress requirements.

BP2019-149

PROJECT NAME: HOLLOWELL ROOF AND WINDOWS
SITE ADDRESS: 404 THIRD ST W KILL DEVIL HILLS

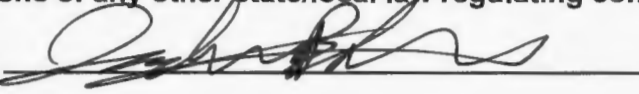
BUILDING

ISSUED: 06/28/2019

EXPIRES: 12/25/2019

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:

6-28-19



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

BP2019-133	BUILDING
PROJECT NAME: Holcomb Deck and Stairs	ISSUED: 06/10/2019
SITE ADDRESS: 308 TERN CT KILL DEVIL HILLS	EXPIRES: 12/07/2019

APPLICANT: Holcomb, Robert
499 Sandy Shores Rd
McHenry, MD 21541

OWNER: Holcomb, Robert
499 Sandy Shores Rd
McHenry, MD 21541

UNLICENSED - REMODELING: Set - Wave Construction
1400 Harrington Ave
Kill Devil Hills, NC 27948
252-996-0099

License: 0000000
Expires: 06/28/2024

PARCEL:

PIN: 988410350689

Parcel Number: 003225000

Address: 308 TERN CT KILL DEVIL HILLS

Addition: FIRST FLIGHT VILLAGE SEC 2

Zoning:
Block: 0 **Lot(s):** 236

Legal Description:

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

PROJECT DESCRIPTION: Decking, handrail and stair replacement "as is where is"

PAID
JUN 11 2019

BP2019-133PROJECT NAME: Holcomb Deck and Stairs
SITE ADDRESS: 308 TERN CT KILL DEVIL HILLS**BUILDING**

ISSUED: 06/10/2019

EXPIRES: 12/07/2019

DETAILS**Permit**

Name	Value
CAMA PERMIT	N
CAMA EXEMPTION	N
ZONING DISTRICT	RL
PURPOSE	Residential Repair/Remodel
FRONT YARD SETBACK	30
SIDE YARD SETBACK	10
REAR YARD SETBACK	20% Depth >30
FLOOD ZONE	X
FINAL ELEVATION CERTIFICATE	N
CONSTRUCTION COST	2000.00

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: 6.11.19



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

BP2019-139

PROJECT NAME: STANCIL STAIRS, HANDRAILS, AND DECKING

SITE ADDRESS: 2813 RAYMOND AVE KILL DEVIL HILLS

BUILDING

ISSUED: 06/11/2019

EXPIRES: 12/08/2019

APPLICANT: MARGARET STANCIL
2200 CRESENT AVE
CHARLOTTE, NC 28207
919-491-8213

OWNER: MARGARET STANCIL
2200 CRESENT AVE
CHARLOTTE, NC 28207
919-491-8213

GENERAL: WES LIVERMAN
UNKNOWN
UNKNOWN, XX 00000
252-619-2599

License: unlicensed
Expires: 12/31/2019

PARCEL:

PIN: 988513123737

Parcel Number: 000393000

Address: 2813 RAYMOND AVE KILL DEVIL HILLS

Addition: VIRGINIA DARE SHORES

Zoning:

Block: 7 **Lot(s):** 15-16

Legal Description:

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

PROJECT DESCRIPTION: REBUILD STAIRS IN SAME FOOTPRINT, DECKING AND RAILINGS

JUN 14 2019

BP2019-139

PROJECT NAME: STANCIL STAIRS, HANDRAILS, AND DECKING
SITE ADDRESS: 2813 RAYMOND AVE KILL DEVIL HILLS

BUILDING

ISSUED: 06/11/2019

EXPIRES: 12/08/2019

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: 6-14-19



Town of Kill Devil Hills

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

PAID

JUN 17 2019

Planning and Inspection Department

BP2019-141	BUILDING
PROJECT NAME: OUTER BANKS BEACH CLUB STAIRS AND LANDINGS	ISSUED: 06/17/2019
SITE ADDRESS: 1110 VA DARE TRL S KILL DEVIL HILLS	EXPIRES: 12/14/2019

APPLICANT: OUTER BANKS BEACH CLUB 1110 S. Va. Dare Tr. Kill Devil Hills, NC 27948	OWNER: OUTER BANKS BEACH CLUB 1110 S. Va. Dare Tr. Kill Devil Hills, NC 27948
--	--

GENERAL:	Self UNKNOWN UNKNOWN, XX 00000 917-862-9006	License: Unlicensed Expires: 12/31/2020
-----------------	--	--

PARCEL:			
PIN:	98930508005501	Parcel Number:	027867000
Address:	1110 VA DARE TRL S KILL DEVIL HILLS		
Addition:	KILL DEVIL HILLS SEC 1	Zoning:	
Legal Description:		Block:	4
		Lot(s):	1-8/CONDO-BLDGS 1-2

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

PROJECT DESCRIPTION: REPLACE STAIRS AND LANDINGS ON ONE CONDO BUILDING

BP2019-141**PROJECT NAME:** OUTER BANKS BEACH CLUB STAIRS AND
LANDINGS**SITE ADDRESS:** 1110 VA DARE TRL S KILL DEVIL HILLS**BUILDING****ISSUED:** 06/17/2019**EXPIRES:** 12/14/2019

DETAILS**Permit**

Name	Value
CAMA PERMIT	N
CAMA EXEMPTION	N
ZONING DISTRICT	OIR
PURPOSE	Residential Repair/Remodel
FRONT YARD SETBACK	30
SIDE YARD SETBACK	15
REAR YARD SETBACK	CAMA
FLOOD ZONE	VE
BASE FLOOD ELEVATION	11.00
FINAL ELEVATION CERTIFICATE	N
CONSTRUCTION COST	2500.00
CONSTRUCTION TYPE	V
OCCUPANCY TYPE	Residential

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

BP2019-141

PROJECT NAME: OUTER BANKS BEACH CLUB STAIRS AND
LANDINGS
SITE ADDRESS: 1110 VA DARE TRL S KILL DEVIL HILLS

BUILDING

ISSUED: 06/17/2019

EXPIRES: 12/14/2019

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:

6/17/19



Town of Kill Devil Hills

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

PAID
JUN 18 2019

Planning and Inspection Department

BP2019-140	BUILDING
PROJECT NAME:	ISSUED: 06/14/2019
SITE ADDRESS: 204 HELGA ST E KILL DEVIL HILLS	EXPIRES: 12/11/2019

APPLICANT: COLEMAN HOLLAND P.O. Box 3159 Kitty Hawk, NC 27949	OWNER: COLEMAN HOLLAND P.O. Box 3159 Kitty Hawk, NC 27949
--	--

UNLICENSED - REMODELING:	ACTION BUILDING AND REMODELING INC. 147 EARLY STATION RD Ahoskie, NC 27910	License: 00001111 Expires: 01/01/2025
---------------------------------	--	--

PARCEL:

PIN: 988513044364	Parcel Number: 000019000
Address: 204 HELGA ST E KILL DEVIL HILLS	Zoning:
Addition: ORVILLE BEACH AMENDED BLK 4	Block: 4 Lot(s): 5
Legal Description:	

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

PROJECT DESCRIPTION: Add 12'x12' shed to rear yard.

BP2019-140

PROJECT NAME:

SITE ADDRESS: 204 HELGA ST E KILL DEVIL HILLS

BUILDING

ISSUED: 06/14/2019

EXPIRES: 12/11/2019

DETAILS

Permit

Name	Value
CAMA PERMIT	N
CAMA EXEMPTION	N
ZONING DISTRICT	C
FLOOD ZONE	AE
BASE FLOOD ELEVATION	9
FINAL ELEVATION CERTIFICATE	N
CONSTRUCTION COST	4000.00
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.
- * As-built survey will be required prior to Certificate of Occupancy or Certificate of Compliance.

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

Issued By: _____

Contractor or Authorized Agent: _____ Date: 6-18-19



Town of Kill Devil Hills

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

JUN 21 2019

Planning and Inspection Department

BP2019-144	BUILDING
PROJECT NAME: Michelle Copeland	ISSUED: 06/21/2019
SITE ADDRESS: 402 WALLACE ST KILL DEVIL HILLS	EXPIRES: 12/18/2019

APPLICANT: A Team 402 Wallace Street Kill Devil Hills, NC 27948 252-599-2230	OWNER: Copeland, Michelle 402 Wallace Street Kill Devil Hills, NC 27948 252-599-2230
--	--

CONTRACTOR:	SAME AS APPLICANT 0000000 00000000, nc 00000	License: 123456 Expires: 04/30/2020
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PARCEL:

PIN: 987516836794	Parcel Number: 000242000
Address: 402 WALLACE ST KILL DEVIL HILLS	Zoning:
Addition: ORVILLE BEACH WEST	Block: 0 Lot(s): 150
Legal Description:	

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

PROJECT DESCRIPTION: Repair front deck, add 6X6 deck on rear of house, add 3' steps to side of house

BP2019-144

PROJECT NAME: Michelle Copeland

SITE ADDRESS: 402 WALLACE ST KILL DEVIL HILLS

BUILDING

ISSUED: 06/21/2019

EXPIRES: 12/18/2019

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
HEALTH DEPARTMENT PERMIT #	28805
FLOOD ZONE	X
FINAL ELEVATION CERTIFICATE	N
CONSTRUCTION COST	10000.00
LOT COVERAGE	30.70
SURVEYOR NAME AND NUMBER	Eastern Geomatics, PLLC

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.
- * Zoning Final Inspection is required.
- * If Simpson screws are used in place of through bolts for the deck to house connection, manufactures specifications shall apply.

BP2019-144

PROJECT NAME: Michelle Copeland

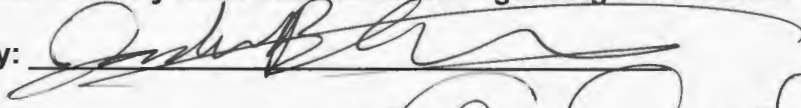
SITE ADDRESS: 402 WALLACE ST KILL DEVIL HILLS

BUILDING

ISSUED: 06/21/2019

EXPIRES: 12/18/2019

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: 6/21/19



Town of Kill Devil Hills

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

JUN 24 2019

Planning and Inspection Department

BP2019-136

PROJECT NAME: Cubine rebuild stairs
SITE ADDRESS: 1703 WYANDOTTE ST KILL DEVIL HILLS

BUILDING

ISSUED: 06/21/2019

EXPIRES: 12/18/2019

APPLICANT: CUBINE, CARRIE E
2029 NEWPORT NEWS ST
KILL DEVIL HILLS, NC 27948

OWNER: CUBINE, CARRIE E
2029 NEWPORT NEWS ST
KILL DEVIL HILLS, NC 27948

CONTRACTOR: SHANE CLARK
607 INDIAN DR
Kill Devil Hills, NC 27948
252-305-2477

UNLICENSED BUILDER: SHANE CLARK
607 INDIAN DR
Kill Devil Hills, NC 27948
252-305-2477

License: 000
Expires:

PARCEL:

PIN: 988409263185

Parcel Number: 002695000

Address: 1703 WYANDOTTE ST KILL DEVIL HILLS

Addition: HIGH VIEW - HEDRICKS ADD

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

Legal Description:

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

PROJECT DESCRIPTION: replace front stairs same footprint

BP2019-136

PROJECT NAME: Cubine rebuild stairs

SITE ADDRESS: 1703 WYANDOTTE ST KILL DEVIL HILLS

BUILDING

ISSUED: 06/21/2019

EXPIRES: 12/18/2019

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	X
FINAL ELEVATION CERTIFICATE	N
CONSTRUCTION COST	2000.00
LOT COVERAGE	25.00
SURVEYOR NAME AND NUMBER	Martin Barnette L-3740
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.
- * Zoning Final Inspection is required.

BP2019-136

PROJECT NAME: Cubine rebuild stairs

SITE ADDRESS: 1703 WYANDOTTE ST KILL DEVIL HILLS

BUILDING

ISSUED: 06/21/2019

EXPIRES: 12/18/2019

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
WITH
CASH

JUN 21 2019

Planning and Inspection Department

BP2019-145

PROJECT NAME: Brown top deck and stairs repair
SITE ADDRESS: 1630 VILLAGE LN KILL DEVIL HILLS

BUILDING

ISSUED: 06/21/2019

EXPIRES: 12/18/2019

APPLICANT: BROWN, GREG
6922 RUSKIN STREET
SPRINGFIELD, VA 22150

OWNER: BROWN, GREG
6922 RUSKIN STREET
SPRINGFIELD, VA 22150

CONTRACTOR: Full House Ventures
PO Box 498
kitty hawk, nc 27949
919-608-2120

UNLICENSED - REMODELING: Full House Ventures
PO Box 498
kitty hawk, nc 27949
919-608-2120

License: 00000000
Expires: 06/11/2024

PARCEL:

PIN: 988410267071

Parcel Number: 003243000

Address: 1630 VILLAGE LN KILL DEVIL HILLS

Addition: FIRST FLIGHT VILLAGE SEC 2

Zoning:

Block: 0 **Lot(s):** 263

Legal Description:

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

PROJECT DESCRIPTION: Remove and replace top crows nest and stairs

BP2019-145

PROJECT NAME: Brown top deck and stairs repair
SITE ADDRESS: 1630 VILLAGE LN KILL DEVIL HILLS

BUILDING

ISSUED: 06/21/2019

EXPIRES: 12/18/2019

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	X
FINAL ELEVATION CERTIFICATE	N
CONSTRUCTION COST	4500.00
SURVEYOR NAME AND NUMBER	F. Richard Quible L- 1157
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.
- * Zoning Final Inspection is required.

BP2019-145

PROJECT NAME: Brown top deck and stairs repair
SITE ADDRESS: 1630 VILLAGE LN KILL DEVIL HILLS

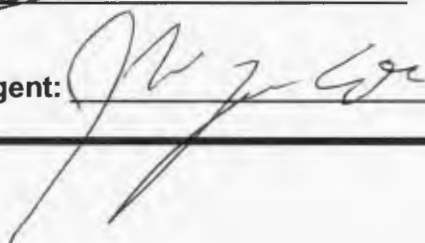
BUILDING

ISSUED: 06/21/2019

EXPIRES: 12/18/2019

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: 6-21-19



Town of Kill Devil Hills

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

JUN 25 2019

Planning and Inspection Department

BP2019-146	BUILDING
PROJECT NAME: RAAB STAIRS AND LANDING	ISSUED: 06/25/2019
SITE ADDRESS: 1101 VEELEE DR KILL DEVIL HILLS	EXPIRES: 12/22/2019

APPLICANT: CAROL RAAB 1101 VEELEE DR Kill Devil Hills, NC 27948 239-265-5508	OWNER: CAROL RAAB 1101 VEELEE DR Kill Devil Hills, NC 27948 239-265-5508
--	--

GENERAL:	Self UNKNOWN UNKNOWN, XX 00000 917-862-9006	License: Unlicensed Expires: 12/31/2020
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PARCEL:			
PIN:	988415635577	Parcel Number:	028343000
Address:	1101 VEELEE DR KILL DEVIL HILLS		
Addition:	KITTY HAWK SHORES - REVISED	Zoning:	
Legal Description:		Block:	15 Lot(s): 8

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

PROJECT DESCRIPTION: REBUILD STAIRS AND LANDING SAME FOOTPRINT

BP2019-146

PROJECT NAME: RAAB STAIRS AND LANDING
SITE ADDRESS: 1101 VEELEE DR KILL DEVIL HILLS

BUILDING

ISSUED: 06/25/2019

EXPIRES: 12/22/2019

DETAILS

Permit

Name	Value
CAMA PERMIT	N
CAMA EXEMPTION	N
ZONING DISTRICT	RL
PURPOSE	Residential Repair/Remodel
FRONT YARD SETBACK	15
SIDE YARD SETBACK	10
REAR YARD SETBACK	30
STREET SIDE SETBACK	15
FLOOD ZONE	AE
BASE FLOOD ELEVATION	8.00
FINAL ELEVATION CERTIFICATE	N
CONSTRUCTION COST	2000.00
CONSTRUCTION TYPE	V
OCCUPANCY TYPE	One & Two Family Dwelling

REQUIRED INSPECTIONS

Zoning Final

Final

CONDITIONS

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BP2019-146

PROJECT NAME: RAAB STAIRS AND LANDING
SITE ADDRESS: 1101 VEELEE DR KILL DEVIL HILLS

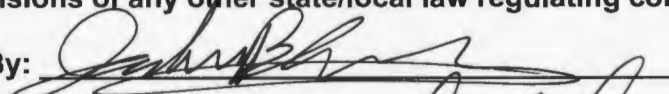
BUILDING

ISSUED: 06/25/2019

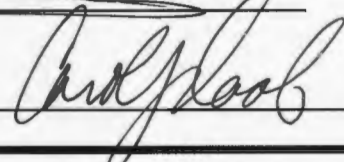
EXPIRES: 12/22/2019

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Issued By: _____



Contractor or Authorized Agent: _____



Date: _____

6/25/19



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

BP2019-094	BUILDING
PROJECT NAME: JONES STAIR REBUILD	ISSUED: 04/25/2019
SITE ADDRESS: 208 SEA VILLAGE LN KILL DEVIL HILLS	EXPIRES: 10/22/2019

APPLICANT: JONES, ROBERT L MARK A JONES 8700 GREYCLIFF ROAD RICHMOND, VA 23294	OWNER: JONES, ROBERT L MARK A JONES 8700 GREYCLIFF ROAD RICHMOND, VA 23294
---	---

GENERAL LIMITED:	B. R. Neier Construction 208 Barco Rd. Barco, NC 27917 207-8236	License: 60862 Expires:
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PARCEL:			
PIN:	988513131766	Parcel Number:	000963000
Address:	208 SEA VILLAGE LN KILL DEVIL HILLS		
Addition:		Zoning:	
Legal Description:		Block:	0 Lot(s): 6

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

PROJECT DESCRIPTION: REBUILD 2 SETS OF STAIRS ON EAST AND WEST SIDE OF PROPERTY

JUN 11 2019

BP2019-094

PROJECT NAME: JONES STAIR REBUILD

SITE ADDRESS: 208 SEA VILLAGE LN KILL DEVIL HILLS

BUILDING

ISSUED: 04/25/2019

EXPIRES: 10/22/2019

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	VE
BASE FLOOD ELEVATION	11.00
FINAL ELEVATION CERTIFICATE	N
CONSTRUCTION COST	700.00
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.

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

BP2019-094

PROJECT NAME: JONES STAIR REBUILD

SITE ADDRESS: 208 SEA VILLAGE LN KILL DEVIL HILLS

BUILDING

ISSUED: 04/25/2019

EXPIRES: 10/22/2019

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: _____

6-11-19



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

BP2019-095	BUILDING
PROJECT NAME: MARSHALL STAIR REBUILD	ISSUED: 04/25/2019
SITE ADDRESS: 205 SEA VILLAGE LN KILL DEVIL HILLS	EXPIRES: 10/22/2019

APPLICANT: MARSHALL, W RICHARD 2036 ORCHARD DRIVE POCOMOKE CITY, MD 21851-2873	OWNER: MARSHALL, W RICHARD 2036 ORCHARD DRIVE POCOMOKE CITY, MD 21851-2873
---	---

GENERAL LIMITED:	B. R. Neier Construction 208 Barco Rd. Barco, NC 27917 207-8236	License: 60862 Expires:
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PARCEL:

PIN: 988513130570	Parcel Number: 009121000
Address: 205 SEA VILLAGE LN KILL DEVIL HILLS	Zoning:
Addition:	Block: 0 Lot(s): 28
Legal Description:	

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

PROJECT DESCRIPTION: REBUILD SET OF EXTERIOR STAIRS ON WEST SIDE OF PROPERTY

JUN 11 2019

BP2019-095

PROJECT NAME: MARSHALL STAIR REBUILD
SITE ADDRESS: 205 SEA VILLAGE LN KILL DEVIL HILLS

BUILDING

ISSUED: 04/25/2019

EXPIRES: 10/22/2019

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: 6-11-19



Town of Kill Devil Hills

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

PAID
WITH
CASH

JUN 11 2019

Planning and Inspection Department

TOWN OF
KILL DEVIL HILLS

BP2019-131	BUILDING
PROJECT NAME: Miller Deck & Steps	ISSUED: 06/06/2019
SITE ADDRESS: 808 FOX ST KILL DEVIL HILLS	EXPIRES: 12/03/2019

APPLICANT: REBECCA MILLER 808 Fox St. K D H, NC 27948	OWNER: REBECCA MILLER 808 Fox St. K D H, NC 27948
--	--

GENERAL:	Self UNKNOWN UNKNOWN, XX 00000 917-862-9006	License: Unlicensed Expires: 12/31/2020
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PARCEL:

PIN: 988308778872	Parcel Number: 004395000
Address: 808 FOX ST KILL DEVIL HILLS	Zoning:
Addition: KILL DEVIL HILLS REALTY CORP	Block: 20 Lot(s): 5
Legal Description:	

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

PROJECT DESCRIPTION: Repair deck, steps and handrails as needed. "As is where is"

BP2019-131

PROJECT NAME: Miller Deck & Steps
SITE ADDRESS: 808 FOX ST KILL DEVIL HILLS

BUILDING

ISSUED: 06/06/2019

EXPIRES: 12/03/2019

DETAILS

Permit

Name	Value
CAMA PERMIT	N
CAMA EXEMPTION	N
PURPOSE	Residential Repair/Remodel
FRONT YARD SETBACK	30
SIDE YARD SETBACK	10
REAR YARD SETBACK	20% Depth >30
FLOOD ZONE	X
FINAL ELEVATION CERTIFICATE	N
CONSTRUCTION COST	5000.00

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: Rebecca Miller Date: 6/11/19



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

BP2019-137	BUILDING
PROJECT NAME: HILL SHEATHING	ISSUED: 06/11/2019
SITE ADDRESS: 207 ARCH ST E KILL DEVIL HILLS	EXPIRES: 12/08/2019

APPLICANT:	AMI HILL 207 E ARCH ST Kill Devil Hills, NC 27948 252-256-2091	OWNER:	AMI HILL 207 E ARCH ST Kill Devil Hills, NC 27948 252-256-2091
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GENERAL:	CHRIS GARDNER 105 ELIZABETH CT Kill Devil Hills, NC 27948 252-455-5868	License: 90909090909090 Expires: 05/31/2022
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PARCEL:

PIN:	988513043681	Parcel Number:	000015000
Address:	207 ARCH ST E KILL DEVIL HILLS		
Addition:	ORVILLE BEACH AMENDED BLK 4	Zoning:	
Legal Description:		Block:	4 Lot(s): 1

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

PROJECT DESCRIPTION: REPLACE T1-11 STRUCTURAL SHEATHING

JUN 11 2019

PAID
WITH
CASH



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

BP2019-135	BUILDING
PROJECT NAME: Solomon Rear Decks and Stairs	ISSUED: 06/11/2019
SITE ADDRESS: 3302 BAY DR KILL DEVIL HILLS	EXPIRES: 12/08/2019

APPLICANT: Solomon, Gloria 213 Chapel Drive LAKE JUNALUSKA, NC 28745	OWNER: Solomon, Gloria 213 Chapel Drive LAKE JUNALUSKA, NC 28745
---	---

CONTRACTOR: JB UTZ CONSTRUCTION
 2719 S Wrightsville Ave
 nags head, nc 27959
 252-475-4619

GENERAL:	JB UTZ CONSTRUCTION 2719 S Wrightsville Ave nags head, nc 27959 252-475-4619	License: none Expires: 12/31/2019
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PARCEL:

PIN:	987516739705	Parcel Number:	000321000
Address:	3302 BAY DR KILL DEVIL HILLS		
Addition:	ORVILLE BEACH WEST	Zoning:	Block: 0 Lot(s): 243
Legal Description:			

FEES:	Paid	Due	BUILDING AREA:
Covered Porch Residential	\$360.00	\$0.00	Open Decks 1 EA
Open Deck Fee	\$150.00	\$0.00	Covered Porches/Decks 480 SQFT
Totals :	\$510.00	\$0.00	

PROJECT DESCRIPTION: Replace 3 level rear decks and relocate stairs in rear yard

PAID
 JUN 11 2019

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

PROJECT DESCRIPTION: Replace existing front stairs. Same layout/location.



Town of Kill Devil Hills

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

JUN 7 2019

Planning and Inspection Department

BP2019-132

PROJECT NAME: MARTIN DECK AND STAIR REBUILD
SITE ADDRESS: 310 ST LOUIS ST KILL DEVIL HILLS

BUILDING

ISSUED: 06/06/2019

EXPIRES: 12/03/2019

APPLICANT: Al Martin
310 St. Louis St
Kill Devil Hills, NC 27948
252-449-8485

OWNER: BAKER, ROBERT L
POB 1611
310 ST LOUIS ST
KILL DEVIL HILLS, NC 27948

UNLICENSED BUILDER: SHANE CLARK
607 INDIAN DR
Kill Devil Hills, NC 27948
252-305-2477

License: 000
Expires:

PARCEL:

PIN: 987516849404

Parcel Number: 000180000

Address: 310 ST LOUIS ST KILL DEVIL HILLS

Addition: ORVILLE BEACH WEST

Zoning:

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

Legal Description:

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

PROJECT DESCRIPTION: REPLACE DECKING, RAILING, AND JOIST. REBUILD REAR SET OF STAIRS



Town of Kill Devil Hills

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

PAID

JUN 5 2019

Planning and Inspection Department

BP2019-129

PROJECT NAME: Gaither Office Building Repair
SITE ADDRESS: 2705 CROATAN HWY N KILL DEVIL HILLS

BUILDING

ISSUED: 06/05/2019

EXPIRES: 12/02/2019

APPLICANT: GAITHER, FRANCES A
108 Cobblestone Ct
Rocky Mount, NC 27804

OWNER: GAITHER, FRANCES A
108 Cobblestone Ct
Rocky Mount, NC 27804

CONTRACTOR: HASKETT, JEFFREY H.
P.O. Box 1024
4711 Lindberg Ave.
Kitty Hawk, NC 27949
267-1777

BUILDING LIMITED: Jeffrey H. Haskett Homes, Inc
4711 Lindberg Avenue
kitty hawk, nc 27949

License: 46718
Expires:

PARCEL:

PIN: 988517121361

Parcel Number: 003000000

Address: 2705 CROATAN HWY N KILL DEVIL HILLS

Addition: VIRGINIA DARE SHORES

Zoning:
Block: 19 **Lot(s):** 10-16

Legal Description:

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

PROJECT DESCRIPTION: repair interior wall along back of building, remove brick on rear of building and replace with LP Smart Horizontal Siding

BP2019-129

PROJECT NAME: Gaither Office Building Repair
SITE ADDRESS: 2705 CROATAN HWY N KILL DEVIL HILLS

BUILDING

ISSUED: 06/05/2019

EXPIRES: 12/02/2019

DETAILS

Permit

Name	Value
CAMA PERMIT	N
CAMA EXEMPTION	N
ZONING DISTRICT	C
PURPOSE	Commercial Repair/Remodel
FRONT YARD SETBACK	30
SIDE YARD SETBACK	10
FLOOD ZONE	AE
BASE FLOOD ELEVATION	9.0
FINAL ELEVATION CERTIFICATE	N
CONSTRUCTION COST	42000.00
OCCUPANCY TYPE	Business

REQUIRED INSPECTIONS

Sheathing	Zoning Final
Insulation	Final

CONDITIONS

- * This permit becomes null and void if work or construction authorized is not commenced within 6 months or if construction or work is suspended for a period of 12 months at any time after work has started.
- * Must comply with Wind Borne Debris requirements as defined in NCBC R301.2.1.2 and NCBC 1609.2.

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: JM Hunter Date: 6.5.19



Town of Kill Devil Hills

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

JUN 5 2019

Planning and Inspection Department

BP2019-130	BUILDING
PROJECT NAME: Anne Griffin Deck Repair/Replace	ISSUED: 06/05/2019
SITE ADDRESS: 329 PALMETTO ST W KILL DEVIL HILLS	EXPIRES: 12/02/2019

APPLICANT: Anne, Griffin 325 Palmetto St. Kill Devil Hills, NC 27948 252-599-1872	OWNER: Anne, Griffin 325 Palmetto St. Kill Devil Hills, NC 27948 252-599-1872
---	---

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

PARCEL:

PIN: 988517007527	Parcel Number: 003011000
Address: 329 PALMETTO ST W KILL DEVIL HILLS	Zoning:
Addition: VIRGINIA DARE SHORES	Block: 49 Lot(s): 6-8
Legal Description:	

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

PROJECT DESCRIPTION: Repair/Replace Decking, Handrails, Stair stringers.

BP2019-130**PROJECT NAME:** Anne Griffin Deck Repair/Replace
SITE ADDRESS: 329 PALMETTO ST W KILL DEVIL HILLS**BUILDING****ISSUED:** 06/05/2019**EXPIRES:** 12/02/2019

DETAILS**Permit**

Name	Value
CAMA PERMIT	N
CAMA EXEMPTION	N
ZONING DISTRICT	RL
PURPOSE	Residential Repair/Remodel
FRONT YARD SETBACK	30
SIDE YARD SETBACK	8
REAR YARD SETBACK	20% Depth >30
FLOOD ZONE	AE
BASE FLOOD ELEVATION	8.0
FINAL ELEVATION CERTIFICATE	N
CONSTRUCTION COST	12000.00
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.
- * Deck and Stairs approved to go back AS IS WHERE IS

BP2019-130

PROJECT NAME: Anne Griffin Deck Repair/Replace
SITE ADDRESS: 329 PALMETTO ST W KILL DEVIL HILLS

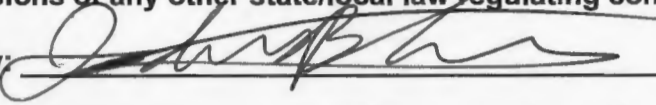
BUILDING

ISSUED: 06/05/2019

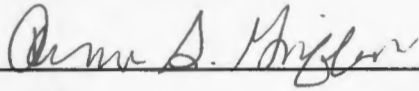
EXPIRES: 12/02/2019

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

Issued By:



Contractor or Authorized Agent:



Date:

6/5/19



Town of Kill Devil Hills

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

JUN 6 2019

Planning and Inspection Department

BJ2019-099	BUILDING JOINT
PROJECT NAME: Kies new SFD	ISSUED: 06/06/2019
SITE ADDRESS: 503 VA DARE TRL S KILL DEVIL HILLS	EXPIRES: 05/29/2020

APPLICANT: Kies, Kenneth & Kathleen
6109 RD
MCLEAN, VA 22101

OWNER: Kies, Kenneth & Kathleen
6109 RD
MCLEAN, VA 22101

CONTRACTOR: RM SAUNDERS GENERAL CONTRACTORS
PO Box 1922
Kill Devil Hills, NC 27948
480-9477

GENERAL BUILDING - UNLIMITED: SAUNDERS, R.M.
P.O. box 1922
Kill Devil Hills, NC 27948

License: 32380
Expires: 12/31/2019

PARCEL:

PIN: 988308990919

Parcel Number: 004232000

Address: 503 VA DARE TRL S KILL DEVIL HILLS

Addition: KILL DEVIL HILLS SEC 1

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

Legal Description:

FEES:	<u>Paid</u>	<u>Due</u>	BUILDING AREA:	
Open Deck Fee	\$450.00	\$0.00	Open Decks	3 EA
Covered Porch Residential	\$2,643.00	\$0.00	Covered Porches/Decks	3524 SQFT
Res. Building Permit Fee	\$11,316.00	\$0.00	Residential Heated Space	15088 sq. Ft.
Pool/Hot Tub	\$200.00	\$0.00	(.75)	
Pool/Hot Tub	\$200.00	\$0.00	# of Temporary Poles	1 EA
Pool/Hot Tub	\$200.00	\$0.00	Residential Accessory	66 Sq. Ft
T-Pole	\$50.00	\$0.00	Structure	
Accessory Structure	\$100.00	\$0.00		
Totals :	\$15,159.00	\$0.00		

PROJECT DESCRIPTION: New 27 Bedroom Single Family Dwelling

Town of Kill Devil Hills
Water Charges

PAID

Water Tap #: T23507

BJ2019-099

PROJECT NAME: Kies new SFD

SITE ADDRESS: 503 VA DARE TRL S KILL DEVIL HILLS

BUILDING JOINT

ISSUED: 06/06/2019

EXPIRES: 05/29/2020

DETAILS**Permit**

Name	Value
ZONING DISTRICT	OIR
FRONT YARD SETBACK	30
REAR YARD SETBACK	CAMA
SIDE YARD SETBACK	12
# PARKING SPACES/BEDROOM	27
CAMA PERMIT	Y
CAMA EXEMPTION	N
FLOOD ZONE	VE
BASE FLOOD ELEVATION	11.0
Proposed First Floor Elevation	13.10
PURPOSE	Residential New
CONSTRUCTION COST	2675000.00
LOT COVERAGE	36.90
SURVEYOR NAME AND NUMBER	Mike Robinson 18994
ENGINEER AND LICENSE NUMBER	Raymond Pate 13018
ARCHITECT NAME AND LICENSE NUMBER	Michael A Florez 14163
CULVERT	N
DRIVEWAY INVERT 2	N
OCCUPANCY TYPE	One & Two Family Dwelling

REQUIRED INSPECTIONS

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

CONDITIONS

BJ2019-099

PROJECT NAME: Kies new SFD

SITE ADDRESS: 503 VA DARE TRL S KILL DEVIL HILLS

BUILDING JOINT

ISSUED: 06/06/2019

EXPIRES: 05/29/2020

- * 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.
- * 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).
- * **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.
- * 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.
- * Beach walkway and dune deck eastward of proposed pool will be constructed under separate permit.

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

Issued By: _____

Contractor or Authorized Agent: _____ **Date:** 6/6/19



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

BJ2019-100

PROJECT NAME: STASSIE BOATLIFT
SITE ADDRESS: 2042 BAY DR KILL DEVIL HILLS

BUILDING JOINT

ISSUED: 05/24/2019

EXPIRES: 11/20/2019

APPLICANT: Herb & Mary Stassie
777 Stinchcomb Rd.
SEVERNA PARK, MD 21146
410-703-5366

OWNER: Herb & Mary Stassie
777 Stinchcomb Rd.
SEVERNA PARK, MD 21146
410-703-5366

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: 987408984620

Parcel Number: 001989000

Address: 2042 BAY DR KILL DEVIL HILLS

Addition: AVALON BEACH ANNEX 2 & 3

Zoning:

Block: 0 **Lot(s):** 1014

Legal Description:

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

PROJECT DESCRIPTION: REPLACE BOATLIFT

JUN 5 2019

BJ2019-100PROJECT NAME: STASSIE BOATLIFT
SITE ADDRESS: 2042 BAY DR KILL DEVIL HILLS**BUILDING JOINT**

ISSUED: 05/24/2019

EXPIRES: 11/20/2019

DETAILS**Permit**

Name	Value
ZONING DISTRICT	RL
FRONT YARD SETBACK	30
REAR YARD SETBACK	CAMA
SIDE YARD SETBACK	10
CAMA PERMIT	N
CAMA EXEMPTION	N
FLOOD ZONE	AE
BASE FLOOD ELEVATION	9.00
PURPOSE	Residential Repair/Remodel
CONSTRUCTION TYPE	V
CONSTRUCTION COST	12666.00
CULVERT	N
DRIVEWAY INVERT 2	N
OCCUPANCY TYPE	Residential

REQUIRED INSPECTIONS

Final

Electrical

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.

BJ2019-100

PROJECT NAME: STASSIE BOATLIFT
SITE ADDRESS: 2042 BAY DR KILL DEVIL HILLS

BUILDING JOINT

ISSUED: 05/24/2019

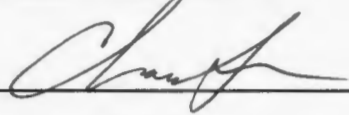
EXPIRES: 11/20/2019

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: _____

6/5/19



Town of Kill Devil Hills

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

JUN 5 2019

Planning and Inspection Department

BJ2019-103

PROJECT NAME: Faison Remodel
SITE ADDRESS: 1202 FOX ST KILL DEVIL HILLS

BUILDING JOINT

ISSUED: 06/05/2019

EXPIRES: 12/02/2019

APPLICANT: FAISON, GENE
1202 FOX STREET
Kill Devil Hills, NC 27948

OWNER: FAISON, GENE
1202 FOX STREET
Kill Devil Hills, NC 27948

CONTRACTOR: TYLERBUILT CUSTOM BUILDERS INC.
2906 South Pamlico Ave
nags head, nc 27959
252-202-2080

GENERAL BUILDING, LIMITED: TYLERBUILT CUSTOM BUILDERS INC.
2906 South Pamlico Ave
nags head, nc 27959
252-202-2080

License: 46649
Expires: 12/31/2019

PARCEL:

PIN: 988312866403

Parcel Number: 004419000

Address: 1202 FOX ST KILL DEVIL HILLS

Addition: KILL DEVIL HILLS REALTY CORP

Zoning:

Block: 24 **Lot(s):** 2

Legal Description:

FEES:	Paid	Due	BUILDING AREA:	
Renovation/Remodel/Relocate	\$45.00	\$0.00	Remodel/Renovation	100 SQFT
Res. Building Permit Fee	\$216.00	\$0.00	Residential Heated Space	288 sq. Ft.
Totals :	\$261.00	\$0.00	(.75)	

PROJECT DESCRIPTION: Demo rear deck and provide 12x24 new bedroom addition. Rebuild side stair and landing. Remodel existing bedroom into new laundry room. Structure to remain 3 bedrooms.

BJ2019-103

PROJECT NAME: Faison Remodel

SITE ADDRESS: 1202 FOX ST KILL DEVIL HILLS

BUILDING JOINT

ISSUED: 06/05/2019

EXPIRES: 12/02/2019

- * This permit becomes null and void if work or construction authorized is not commenced within 6 months or if construction or work is suspended for a period of 12 months at any time after work has started.
- * As-built survey will be required prior to Certificate of Occupancy or Certificate of Compliance.
- * Development must meet all aspects of Chapter 151 Flood Damage Prevention Ordinance including use and elevation.
- * 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.
- * If driveway is to be constructed with gravel, a minimum of four inches of compacted Aggregate Base Course (ABC) with one inch of pea gravel as an approved surface. Loose surface stone shall be bordered by concrete or salt-treated timbers in a manner which retains the stone in the driveway or parking area. Per 153.076(A)(7)(c).

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

Issued By: 

Contractor or Authorized Agent:  Date: 6-5-19



Town of Kill Devil Hills

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

JUN 21 2019

Planning and Inspection Department

BJ2019-105	BUILDING JOINT
PROJECT NAME: SAGA New SFD	ISSUED: 06/18/2019
SITE ADDRESS: 701 ZEN LANE Kill Devil Hills	EXPIRES: 12/15/2019

APPLICANT: Water Oak Residential, LLC 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
---	---

CONTRACTOR: SAGA CONSTRUCTION
1314 S Croatan Hwy, Suite 301
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: 988417222496	Parcel Number:
Address: 701 ZEN LANE Kill Devil Hills	Zoning:
Addition:	Block: Lot(s):
Legal Description: Lot 57, Water Oak Subdivision	

FEES:	<u>Paid</u>	<u>Due</u>	BUILDING AREA:	
Covered Porch Residential	\$252.00	\$0.00	Covered Porches/Decks	336 SQFT
Res. Building Permit Fee	\$1,721.05	\$0.00	Residential Unheated (.40)	397 Sq. Ft
T-Pole	\$50.00	\$0.00	Residential Heated Space	2083 sq. Ft.
			(.75)	
Totals :	\$2,023.05	\$0.00	# of Temporary Poles	1 EA

PROJECT DESCRIPTION: New 3 Bedroom 2 bath single family dwelling

Town of Kill Devil Hills
Water Charges
PAID
Water Tap #: 123588

BJ2019-105

PROJECT NAME: SAGA New SFD
SITE ADDRESS: 701 ZEN LANE Kill Devil Hills

BUILDING JOINT

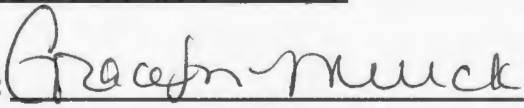
ISSUED: 06/18/2019

EXPIRES: 12/15/2019

- * As-built survey will be required prior to Certificate of Occupancy or Certificate of Compliance.
- * The developer shall be responsible for maintaining erosion and sediment control at the disturbed area.
- * Development must meet all aspects of Chapter 151 Flood Damage Prevention Ordinance including use and elevation.
- * Construction must meet all aspect of Chapter 153 Zoning including lot coverage and setbacks.
- * Elevation Certificate will be required 21 days after establishment of the reference level in accordance with 151.41(C).
- * Zoning Final Inspection is required.
- * 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).

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

Issued By: 

Contractor or Authorized Agent:  Date: 6.21.19



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

BJ2019-106	BUILDING JOINT
PROJECT NAME: Auten New SFD	ISSUED: 06/05/2019
SITE ADDRESS: 211 E Archdale St Kill Devil Hills	EXPIRES: 12/02/2019

APPLICANT: Auten, John
225 Downing Drive
CHESAPEAKE, VA 23323

OWNER: Auten, John
225 Downing Drive
CHESAPEAKE, VA 23323

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

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

License: 67524
Expires: 01/01/2020

PARCEL:

PIN: 988517128318

Parcel Number: 000807000

Address: 211 E Archdale St Kill Devil Hills

Addition: VIRGINIA DARE SHORES AMD BLK 5

Zoning:

Block: 5 **Lot(s):** 13

Legal Description:

FEES:	Paid	Due	BUILDING AREA:	
T-Pole	\$50.00	\$0.00	Residential Heated Space	1757 sq. Ft.
Open Deck Fee	\$150.00	\$0.00	(.75)	
Res. Building Permit Fee	\$1,329.75	\$0.00	# of Temporary Poles	1 EA
Covered Porch Residential	\$56.25	\$0.00	Open Decks	1 EA
Totals :	\$1,586.00	\$0.00	Residential Unheated (.40)	30 Sq. Ft
			Covered Porches/Decks	75 SQFT

PROJECT DESCRIPTION: New 3 Bedroom 3 Bath Single Family Dwelling

TOWN OF KILL DEVIL HILLS

Water Charges

PAID

JUN 13 2019

BJ2019-106

PROJECT NAME: Auten New SFD
SITE ADDRESS: 211 E Archdale St Kill Devil Hills

BUILDING JOINT

ISSUED: 06/05/2019

EXPIRES: 12/02/2019

DETAILS**Permit**

Name	Value
ZONING DISTRICT	C
FRONT YARD SETBACK	15
REAR YARD SETBACK	20% Depth >30
SIDE YARD SETBACK	6
HEALTH DEPARTMENT PERMIT #	28694
# PARKING SPACES/BEDROOM	3
CAMA PERMIT	N
CAMA EXEMPTION	N
FLOOD ZONE	AE
BASE FLOOD ELEVATION	9.0
Proposed First Floor Elevation	13.00
PURPOSE	Residential New
CONSTRUCTION COST	185000.00
LOT COVERAGE	40.40
SURVEYOR NAME AND NUMBER	Manson Ray Meekins L-2592
ENGINEER AND LICENSE NUMBER	Michael Osteen 032628
CULVERT	N
ROLL OUT CAN	1
DRIVEWAY INVERT 2	Y
OCCUPANCY TYPE	One & Two Family Dwelling

REQUIRED INSPECTIONS

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

BJ2019-106

PROJECT NAME: Auten New SFD
SITE ADDRESS: 211 E Archdale St Kill Devil Hills

BUILDING JOINT

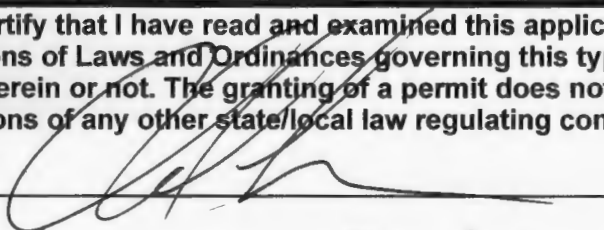
ISSUED: 06/05/2019

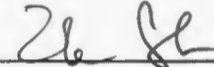
EXPIRES: 12/02/2019

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.
- * 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.

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

Issued By: 

Contractor or Authorized Agent:  Date: 6-13-19



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

BJ2019-107	BUILDING JOINT
PROJECT NAME: McCombs Pool	ISSUED: 06/05/2019
SITE ADDRESS: 3118 BAY DR KILL DEVIL HILLS	EXPIRES: 12/02/2019

APPLICANT: McCombs, Jack
3118 Bay Drive
Kill Devil Hills, NC 27948

OWNER: McCombs, Jack
3118 Bay Drive
Kill Devil Hills, NC 27948

CONTRACTOR: CARRIBEAN POOLS & SPAS
PO BOX 65
kitty hawk, nc 27949
252-207-1773

GENERAL:	CARRIBEAN POOLS & SPAS PO BOX 65 kitty hawk, nc 27949 252-207-1773	License: 48519 Expires: 12/30/2019
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PARCEL:

PIN: 987520822153

Parcel Number: 001074000

Address: 3118 BAY DR KILL DEVIL HILLS

Addition: MOOR SHORES

Zoning:
Block: 0 **Lot(s):** 139

Legal Description:

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

PROJECT DESCRIPTION: 14x30 in-ground pool in rear yard

JUN 11 2019



Town of Kill Devil Hills

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

Planning and Inspection Department

BJ2019-108

PROJECT NAME: Oliver Pool
SITE ADDRESS: 314 TRUXTON ST KILL DEVIL HILLS

BUILDING JOINT

ISSUED: 06/05/2019

EXPIRES: 12/02/2019

APPLICANT: OLIVER, TIMOTHY
1228 ROSEBUD AVE
chesapeake, va 23322
614-557-1020

OWNER: OLIVER, TIMOTHY
1228 ROSEBUD AVE
chesapeake, va 23322
614-557-1020

CONTRACTOR: CARRIBEAN POOLS & SPAS
UNKNOWN
UNKNOWN, XX 00000

GENERAL: CARRIBEAN POOLS & SPAS
UNKNOWN
UNKNOWN, XX 00000

License: 48519
Expires: 12/30/2019

PARCEL:

PIN: 987516933323

Parcel Number: 028721000

Address: 314 TRUXTON ST KILL DEVIL HILLS

Addition: MOOR SHORES TWO

Zoning:

Block: 0 **Lot(s):** 159

Legal Description:

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

PROJECT DESCRIPTION: Installation of in ground 11x24 pool

JUN 11 2019

BJ2019-108

PROJECT NAME: Oliver Pool

SITE ADDRESS: 314 TRUXTON ST KILL DEVIL HILLS

BUILDING JOINT

ISSUED: 06/05/2019

EXPIRES: 12/02/2019

DETAILS**Permit**

Name	Value
ZONING DISTRICT	RL
FRONT YARD SETBACK	30
REAR YARD SETBACK	20% Depth >30
SIDE YARD SETBACK	10
HEALTH DEPARTMENT PERMIT #	28758
CAMA PERMIT	N
CAMA EXEMPTION	N
FLOOD ZONE	X
PURPOSE	Residential Accessory
CONSTRUCTION COST	34982.00
LOT COVERAGE	35.24
ENGINEER AND LICENSE NUMBER	Carlos F. Gomez 014071
CULVERT	N
DRIVEWAY INVERT 2	N
OCCUPANCY TYPE	One & Two Family Dwelling

REQUIRED INSPECTIONS

Final Pool Bonding
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.

* Zoning Final Inspection is required.

BJ2019-108

PROJECT NAME: Oliver Pool

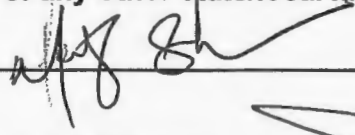
SITE ADDRESS: 314 TRUXTON ST KILL DEVIL HILLS

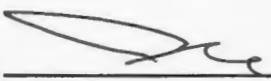
BUILDING JOINT

ISSUED: 06/05/2019

EXPIRES: 12/02/2019

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

Issued By:  _____

Contractor or Authorized Agent:  _____ Date: 6.11.19



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

BJ2019-110	BUILDING JOINT
PROJECT NAME: Magee New Construction	ISSUED: 06/12/2019
SITE ADDRESS: 411 MITCHELL CT KILL DEVIL HILLS	EXPIRES: 12/09/2019

APPLICANT: MAGEE, JAMES F JR 4513 DAVIDS MILL DRIVE CHESAPEAKE, VA 23321	OWNER: MAGEE, JAMES F JR 4513 DAVIDS MILL DRIVE CHESAPEAKE, VA 23321
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CONTRACTOR: Sandy Bottom Homes
400 DaVinci Lane
kitty hawk, nc 27949
757-448-8162

GENERAL BUILDING-LIMITED:	SANDY BOTTOM HOMES 400 DaVinci Lane kitty hawk, nc 27949 757-448-8162	License: 67524 Expires: 01/01/2020
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PARCEL:

PIN: 988405280364	Parcel Number: 002111000
Address: 411 MITCHELL CT KILL DEVIL HILLS	Zoning:
Addition: WRIGHT'S SHORES	Block: 0 Lot(s): 151
Legal Description:	

FEES:	<u>Paid</u>	<u>Due</u>	BUILDING AREA:	
Covered Porch Residential	\$52.50	\$0.00	Covered Porches/Decks	70 SQFT
Res. Building Permit Fee	\$1,311.95	\$0.00	Residential Heated Space	1641 sq. Ft.
T-Pole	\$50.00	\$0.00	(.75)	
Totals :	\$1,414.45	\$0.00	Residential Unheated (.40)	203 Sq. Ft
			# of Temporary Poles	1 EA

PROJECT DESCRIPTION: New 4 Bedroom SFD

Town of Kill Devil Hills
Water Charges

JUN 12 2019

PAID

Water Tap #: T23590

BJ2019-110**PROJECT NAME:** Magee New Construction
SITE ADDRESS: 411 MITCHELL CT KILL DEVIL HILLS**BUILDING JOINT****ISSUED:** 06/12/2019**EXPIRES:** 12/09/2019

DETAILS**Permit**

Name	Value
ZONING DISTRICT	RL
FRONT YARD SETBACK	30
REAR YARD SETBACK	20% Depth >30
SIDE YARD SETBACK	8
HEALTH DEPARTMENT PERMIT #	28781
# PARKING SPACES/BEDROOM	4
CAMA PERMIT	N
CAMA EXEMPTION	N
FLOOD ZONE	X
PURPOSE	Residential New
CONSTRUCTION TYPE	V
CONSTRUCTION COST	200000.00
LOT COVERAGE	35.40
LIVING SPACE (SQFT)	1641
COVERED PORCHES/DECKS (SQFT)	70
GARAGE (SQFT)	203
TOTAL SQUARE FOOTAGE	1914
SURVEYOR NAME AND NUMBER	Manson Ray Meekins L-2592
ENGINEER AND LICENSE NUMBER	Michael Osteen 032628
CULVERT	N
ROLL OUT CAN	1
DRIVEWAY INVERT 2	Y
OCCUPANCY TYPE	One & Two Family Dwelling

BJ2019-110

PROJECT NAME: Magee New Construction
SITE ADDRESS: 411 MITCHELL CT KILL DEVIL HILLS

BUILDING JOINT

ISSUED: 06/12/2019

EXPIRES: 12/09/2019

REQUIRED INSPECTIONS

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

CONDITIONS

- * NOTICE: Call Public Services Department (252) 480-4080 before pouring driveway!
- * This permit becomes null and void if work or construction authorized is not commenced within 6 months or if construction or work is suspended for a period of 12 months at any time after work has started.
- * 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.
- * Zoning Final Inspection is required.
- * 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:** 6-12-19



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

BJ2019-111	BUILDING JOINT
PROJECT NAME: Thomas and Gayle Boothe	ISSUED: 06/13/2019
SITE ADDRESS: 604 PALMETTO ST W KILL DEVIL HILLS	EXPIRES: 12/10/2019

APPLICANT: Sandy Bottom Homes 400 DaVinci Lane kitty hawk, nc 27949 757-448-8162	OWNER: Boothe, Thomas 1047 Camera RD WAVERLY, VA 23890 804-731-5129
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GENERAL BUILDING-LIMITED:	SANDY BOTTOM HOMES 400 DaVinci Lane kitty hawk, nc 27949 757-448-8162	License: 67524 Expires: 01/01/2020
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PARCEL:

PIN: 987408993926	Parcel Number: 000775006
Address: 604 PALMETTO ST W KILL DEVIL HILLS	Zoning:
Addition: VIRGINIA DARE SH BLK 77 RECOMB	Block: 77 Lot(s): 6
Legal Description:	

FEES:	Paid	Due	BUILDING AREA:	
T-Pole	\$50.00	\$0.00	# of Temporary Poles	1 EA
Covered Porch Residential	\$50.25	\$0.00	Covered Porches/Decks	67 SQFT
Res. Building Permit Fee	\$1,278.30	\$0.00	Residential Unheated (.40)	117 Sq. Ft
Open Deck Fee	\$150.00	\$0.00	Residential Heated Space (.75)	1642 sq. Ft.
Totals :	\$1,528.55	\$0.00	Open Decks	1 EA

PROJECT DESCRIPTION: Proposed 4 bedroom single family dwelling

Town of Kill Devil Hills
Water Charges

PAID

JUN 13 2019

Water Tap #: T23591

BJ2019-111

PROJECT NAME: Thomas and Gayle Boothe
SITE ADDRESS: 604 PALMETTO ST W KILL DEVIL HILLS

BUILDING JOINT

ISSUED: 06/13/2019

EXPIRES: 12/10/2019

DETAILS**Permit**

Name	Value
ZONING DISTRICT	RL
FRONT YARD SETBACK	30
REAR YARD SETBACK	20% Depth >30
SIDE YARD SETBACK	8
HEALTH DEPARTMENT PERMIT #	28748
# PARKING SPACES/BEDROOM	4
CAMA PERMIT	N
CAMA EXEMPTION	N
FLOOD ZONE	AE
BASE FLOOD ELEVATION	8.3
Proposed First Floor Elevation	7.00
CONSTRUCTION COST	190000.00
LOT COVERAGE	31.00
SURVEYOR NAME AND NUMBER	Seaboard Surveying
CULVERT	N
ROLL OUT CAN	1
DRIVEWAY INVERT 2	Y

REQUIRED INSPECTIONS

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

CONDITIONS

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

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

* Elevation Certificate will be required 21 days after establishment of the reference level in accordance with 151.41(C).

BJ2019-111

PROJECT NAME: Thomas and Gayle Boothe
SITE ADDRESS: 604 PALMETTO ST W KILL DEVIL HILLS

BUILDING JOINT

ISSUED: 06/13/2019

EXPIRES: 12/10/2019

- * 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.
- * Must submit a non-conversion agreement.

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: Th SL Date: 6-13-19



Town of Kill Devil Hills

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

JUN 26 2019

Planning and Inspection Department

BJ2019-112

PROJECT NAME: OBX Destinations LLC
SITE ADDRESS: 1507 VA DARE TRL N KILL DEVIL HILLS

BUILDING JOINT

ISSUED: 06/25/2019

EXPIRES: 06/05/2020

APPLICANT: RM SAUNDERS GENERAL CONTRACTORS
PO Box 1922
Kill Devil Hills, NC 27948
480-9477

OWNER: OBX Destinations LLC
905 NORTH VA Dare TR
Kill Devil Hills, NC 27948
252-441-2544

GENERAL - UNLIMITED:

SAUNDERS, RM / R M SAUNDERS GENERAL
CONTRACTORS INC
PO Box 1922
Kill Devil Hills, NC 27948
252-207-8710

License: 32380
Expires: 01/01/2020

PARCEL:

PIN: 988411651589

Parcel Number: 002770000

Address: 1507 VA DARE TRL N KILL DEVIL HILLS

Zoning:

Addition: CROATAN SHORES

Block: A **Lot(s):** 18-19

Legal Description:

FEES:	Paid	Due	BUILDING AREA:	
Covered Porch Residential	\$795.00	\$0.00	Covered Porches/Decks	1060 SQFT
Res. Building Permit Fee	\$8,755.50	\$0.00	Residential Heated Space	11674 sq. Ft.
T-Pole	\$50.00	\$0.00	(.75)	
Totals :	\$9,600.50	\$0.00	# of Temporary Poles	1 EA

PROJECT DESCRIPTION: 21 bedroom single family dwelling

Town of Kill Devil Hills
Water Charges

PAID

Water Tap #: T23633

BJ2019-112

PROJECT NAME: OBX Destinations LLC

SITE ADDRESS: 1507 VA DARE TRL N KILL DEVIL HILLS

BUILDING JOINT

ISSUED: 06/25/2019

EXPIRES: 06/05/2020

DETAILS**Permit**

Name	Value
ZONING DISTRICT	OIR
FRONT YARD SETBACK	30
REAR YARD SETBACK	CAMA
SIDE YARD SETBACK	10
HEALTH DEPARTMENT PERMIT #	KDHWWT
# PARKING SPACES/BEDROOM	21
CAMA PERMIT	Y
CAMA EXEMPTION	N
FLOOD ZONE	VE
BASE FLOOD ELEVATION	11
Proposed First Floor Elevation	13.00
PURPOSE	Residential New
CONSTRUCTION TYPE	V
CONSTRUCTION COST	2350000.00
LOT COVERAGE	53.13
LIVING SPACE (SQFT)	11674
COVERED PORCHES/DECKS (SQFT)	1060
TOTAL SQUARE FOOTAGE	12734
SURVEYOR NAME AND NUMBER	Coastal/Carlos Gomez
ENGINEER AND LICENSE NUMBER	RAYMOND G PATE 13018
ARCHITECT NAME AND LICENSE NUMBER	MICHAEL A FLOREZ 14163
CULVERT	N
DRIVEWAY INVERT 2	N
OCCUPANCY TYPE	One & Two Family Dwelling

BJ2019-112

PROJECT NAME: OBX Destinations LLC

SITE ADDRESS: 1507 VA DARE TRL N KILL DEVIL HILLS

BUILDING JOINT

ISSUED: 06/25/2019

EXPIRES: 06/05/2020

REQUIRED INSPECTIONS

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

CONDITIONS

- * This permit becomes null and void if work or construction authorized is not commenced within 6 months or if construction or work is suspended for a period of 12 months at any time after work has started.
- * NOTICE: Call Public Services Department (252) 480-4080 before pouring driveway!
- * Elevation Certificate will be required 21 days after establishment of the reference level in accordance with 151.41(C).
- * As-built survey will be required prior to Certificate of Occupancy or Certificate of Compliance.
- * The developer shall be responsible for maintaining erosion and sediment control at the disturbed area.
- * A final elevation certificate will be required prior to issuance of a Certificate of Occupancy or a Certificate of Compliance in accordance with 151.41(C).
- * Development must meet all aspects of Chapter 151 Flood Damage Prevention Ordinance including use and elevation.
- * 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.
- * Construction must meet all aspect of Chapter 153 Zoning including lot coverage and setbacks.
- * Zoning Final Inspection is required.
- * Make corrections noted on survey.
- * Developer shall provide copies of all engineering certifications, record drawings and approvals as required by NCDEQ, and the North Carolina Utilities Commission for the sewer extension prior to Final Inspection.

BJ2019-112

PROJECT NAME: OBX Destinations LLC

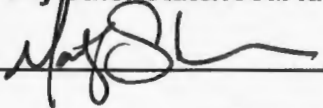
SITE ADDRESS: 1507 VA DARE TRL N KILL DEVIL HILLS

BUILDING JOINT

ISSUED: 06/25/2019

EXPIRES: 06/05/2020

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Issued By:  _____

Contractor or Authorized Agent:  _____ Date: 6-25-19



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

BJ2019-113	BUILDING JOINT
PROJECT NAME: Maxs Restaurant	ISSUED: 06/11/2019
SITE ADDRESS: 1712 CROATAN HWY N KILL DEVIL HILLS	EXPIRES: 12/08/2019

APPLICANT: OLIVOLA, MARK
NANCY O WALTON
P O BOX 364
KILL DEVIL HILLS, NC 27948

OWNER: OLIVOLA, MARK
NANCY O WALTON
P O BOX 364
KILL DEVIL HILLS, NC 27948

CONTRACTOR: Sharp, Grant
po box 1181
kitty hawk, nc 27949

GENERAL: Self
UNKNOWN
UNKNOWN, XX 00000
917-862-9006

License: Unlicensed
Expires: 12/31/2020

PARCEL:

PIN: 988410374122

Parcel Number: 002739000

Address: 1712 CROATAN HWY N KILL DEVIL HILLS

Addition: HEDRICKS ADDITION - CROATAN SH

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

Legal Description:

FEES:	Paid	Due	BUILDING AREA:
Renovation/Remodel/Relocate	\$219.60	\$0.00	Remodel/Renovation 488 SQFT
Totals :	\$219.60	\$0.00	

PROJECT DESCRIPTION: Add booth, hostess stand, small partition wall with bench seating at front of restaurant. Remodel interior kitchen equipment layout.

JUN 11 2019

BJ2019-113

PROJECT NAME: Maxs Restaurant

SITE ADDRESS: 1712 CROATAN HWY N KILL DEVIL HILLS

BUILDING JOINT

ISSUED: 06/11/2019

EXPIRES: 12/08/2019

DETAILS**Permit**

Name	Value
ZONING DISTRICT	C
FRONT YARD SETBACK	30
REAR YARD SETBACK	20% Depth >30
SIDE YARD SETBACK	10
STREET SIDE SETBACK	15
CAMA PERMIT	N
CAMA EXEMPTION	N
FLOOD ZONE	AE
BASE FLOOD ELEVATION	9.0
PURPOSE	Commercial Repair/Remodel
CONSTRUCTION COST	10000.00
TOTAL SQUARE FOOTAGE	488
CULVERT	N
DRIVEWAY INVERT 2	N
OCCUPANCY TYPE	Business

REQUIRED INSPECTIONS

Rough In

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.

* Zoning Final Inspection is required.

* The fire hood suppression company certifies the new equipment will be covered by the fire suppression system. Occupancy load shall be posted.

BJ2019-113

PROJECT NAME: Maxs Restaurant

SITE ADDRESS: 1712 CROATAN HWY N KILL DEVIL HILLS

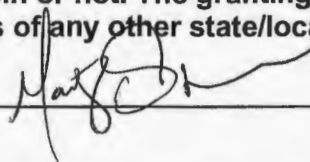
BUILDING JOINT

ISSUED: 06/11/2019

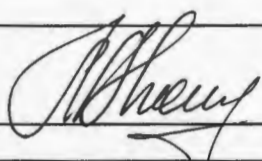
EXPIRES: 12/08/2019

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: _____

6/11/2019



Town of Kill Devil Hills

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

Planning and Inspection Department

BJ2019-114	BUILDING JOINT
PROJECT NAME: Dream Cream Ice Cream Parlor	ISSUED: 06/10/2019
SITE ADDRESS: 1722 N. Croatan Hwy UNKNOWN	EXPIRES: 12/07/2019

APPLICANT: OLIVOLA, DONALD J
P O BOX 364
KILL DEVIL HILLS, NC 27948

OWNER: OLIVOLA, DONALD J
P O BOX 364
KILL DEVIL HILLS, NC 27948

CONTRACTOR: GARLAND DUNSTAN
P.O. Box 402
Kitty Hawk, NC 27949
252-202-1100

GENERAL BUILDING, UNLIMITED: GARLAND DUNSTAN
P.O. Box 402
Kitty Hawk, NC 27949
252-202-1100

License: 19436
Expires: 12/31/2019

PARCEL:

PIN: 988410373044-7288
Address: 1722 N. Croatan Hwy UNKNOWN

Parcel Number:

Addition:
Legal Description:

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

FEES:	Paid	Due	BUILDING AREA:	
Renovation/Remodel/Relocate	\$603.00	\$0.00	Remodel/Renovation	1340 SQFT
Totals :	\$603.00	\$0.00		

PROJECT DESCRIPTION: installation of freezers, and refrigeration, moving electrical and plumbing to new locations to service equipment

JUN 10 2019

BJ2019-114**PROJECT NAME:** Dream Cream Ice Cream Parlor
SITE ADDRESS: 1722 N. Croatan Hwy UNKNOWN**BUILDING JOINT****ISSUED:** 06/10/2019**EXPIRES:** 12/07/2019

DETAILS**Permit**

Name	Value
ZONING DISTRICT	C
FRONT YARD SETBACK	30
REAR YARD SETBACK	20% Depth >30
SIDE YARD SETBACK	10
CAMA PERMIT	N
CAMA EXEMPTION	N
FLOOD ZONE	AE
BASE FLOOD ELEVATION	9.0
PURPOSE	Commercial Repair/Remodel
CONSTRUCTION COST	10000.00
ARCHITECT NAME AND LICENSE NUMBER	Christopher Nason 9789
CULVERT	N
DRIVEWAY INVERT 2	N
OCCUPANCY TYPE	Business

REQUIRED INSPECTIONS

In-Slab Plumbing	Insulation
Slab/Foundation	Final
Rough In	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.
- * Zoning Final Inspection is required.
- * Signage Approval for business must be obtained with a separate permit.
- * Double Check Valve Assembly must be approved by Public Services prior to issuance of Certificate of Occupancy.

BJ2019-114

PROJECT NAME: Dream Cream Ice Cream Parlor
SITE ADDRESS: 1722 N. Croatan Hwy UNKNOWN

BUILDING JOINT

ISSUED: 06/10/2019

EXPIRES: 12/07/2019

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: _____

Date: 6-10-2019



Town of Kill Devil Hills

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

Planning and Inspection Department

BJ2019-115	BUILDING JOINT
PROJECT NAME: Cortina wheel chair lift	ISSUED: 06/11/2019
SITE ADDRESS: 902 DURHAM ST W KILL DEVIL HILLS	EXPIRES: 12/08/2019

APPLICANT: Cortina, Cathy
1424 Norwood Crest Court
RALEIGH, NC 27614

OWNER: Cortina, Cathy
1424 Norwood Crest Court
RALEIGH, NC 27614

CONTRACTOR: Atlantic Elevators
P. O. Box 1521
Manteo, NC 27954
252-305-4465

ELECTRICAL - LIMITED: Atlantic Elevators
P. O. Box 1521
Manteo, NC 27954
252-305-4465

License: 06925-L
Expires:

PARCEL:

PIN: 988405087365

Parcel Number: 001384000

Address: 902 DURHAM ST W KILL DEVIL HILLS

Zoning:

Addition: AVALON BEACH ANNEX 2 & 3

Block: 0 **Lot(s):** 679

Legal Description:

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

PROJECT DESCRIPTION: Add platform lift and concrete walk.

JUN 11 2019

BJ2019-115

PROJECT NAME: Cortina wheel chair lift
SITE ADDRESS: 902 DURHAM ST W KILL DEVIL HILLS

BUILDING JOINT

ISSUED: 06/11/2019

EXPIRES: 12/08/2019

DETAILS**Permit**

Name	Value
ZONING DISTRICT	RL
FRONT YARD SETBACK	15
REAR YARD SETBACK	20% Depth >30
SIDE YARD SETBACK	6
CAMA PERMIT	N
CAMA EXEMPTION	N
FLOOD ZONE	AE
BASE FLOOD ELEVATION	8.3
PURPOSE	Residential Accessory
CONSTRUCTION COST	16500.00
LOT COVERAGE	38.00
SURVEYOR NAME AND NUMBER	M Douglas Styons L-3227
CULVERT	N
DRIVEWAY INVERT 2	N
OCCUPANCY TYPE	One & Two Family Dwelling

REQUIRED INSPECTIONS

Final

Zoning Final

CONDITIONS

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

BJ2019-115

PROJECT NAME: Cortina wheel chair lift
SITE ADDRESS: 902 DURHAM ST W KILL DEVIL HILLS

BUILDING JOINT

ISSUED: 06/11/2019

EXPIRES: 12/08/2019

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: Marty Shaw

Contractor or Authorized Agent: [Signature] Date: 6-11-19



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

BJ2019-116

PROJECT NAME: Lowry Bathroom
SITE ADDRESS: 206 AVALON DR W KILL DEVIL HILLS

BUILDING JOINT

ISSUED: 06/11/2019

EXPIRES: 12/08/2019

APPLICANT: Lowry, Robert
79 Cunningham Ct.
PALMYRA, VA 22963

OWNER: Lowry, Robert
79 Cunningham Ct.
PALMYRA, VA 22963

UNLICENSED - REMODELING: Full House Ventures
PO Box 498
kitty hawk, nc 27949
919-608-2120

License: 00000000
Expires: 06/11/2024

PARCEL:

PIN: 988517104493

Parcel Number: 001754000

Address: 206 AVALON DR W KILL DEVIL HILLS

Addition: AVALON BEACH

Zoning:
Block: 0 **Lot(s):** 123

Legal Description:

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

PROJECT DESCRIPTION: Remove closet and construct a 1/2 bathroom and small closet.

PAID
JUN 11 2019
TOWN OF
KILL DEVIL HILLS

BJ2019-116

PROJECT NAME: Lowry Bathroom
SITE ADDRESS: 206 AVALON DR W KILL DEVIL HILLS

BUILDING JOINT

ISSUED: 06/11/2019

EXPIRES: 12/08/2019

DETAILS

Permit

Name	Value
ZONING DISTRICT	RL
FRONT YARD SETBACK	15
REAR YARD SETBACK	20% Depth >30
SIDE YARD SETBACK	6
CAMA PERMIT	N
CAMA EXEMPTION	N
FLOOD ZONE	AE
BASE FLOOD ELEVATION	8
PURPOSE	Residential Repair/Remodel
CONSTRUCTION COST	3500.00
CULVERT	N
DRIVEWAY INVERT 2	N

REQUIRED INSPECTIONS

Rough In	Final
Insulation	Zoning Final

CONDITIONS

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

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

Issued By: _____

Contractor or Authorized Agent: Wagner Cole Date 6-11-19



Town of Kill Devil Hills

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

JUN 28 2019

Planning and Inspection Department

BJ2019-119	BUILDING JOINT
PROJECT NAME: Huddleston Covered Porch, partial ground floor enclosure	ISSUED: 06/27/2019
SITE ADDRESS: 110 SPORTSMAN DR E KILL DEVIL HILLS	EXPIRES: 12/24/2019

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

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

CONTRACTOR: 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: 01/01/2020

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 Permit Fee - Minimum Fee	\$150.00	\$0.00
Totals :	\$150.00	\$0.00

PROJECT DESCRIPTION: Add front covered porch and partial ground floor enclosure (FRONT WALL ONLY)

BJ2019-119

PROJECT NAME: Huddleston Covered Porch, partial ground floor enclosure

SITE ADDRESS: 110 SPORTSMAN DR E KILL DEVIL HILLS

BUILDING JOINT

ISSUED: 06/27/2019

EXPIRES: 12/24/2019

- * 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: 6/28/19



Town of Kill Devil Hills

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

JUL 26 2019

Planning and Inspection Department

BJ2019-120	BUILDING JOINT
PROJECT NAME: OBX Destinations New 25 Bedroom SFD	ISSUED: 06/25/2019
SITE ADDRESS: 1505 VA DARE TRL N KILL DEVIL HILLS	EXPIRES: 12/22/2019

APPLICANT: OBX Destinations LLC 905 NORTH VA Dare TR Kill Devil Hills, NC 27948 252-441-2544	OWNER: OBX Destinations LLC 905 NORTH VA Dare TR Kill Devil Hills, NC 27948 252-441-2544
--	--

CONTRACTOR: RM SAUNDERS GENERAL CONTRACTORS
PO Box 1922
Kill Devil Hills, NC 27948
480-9477

GENERAL BUILDING - UNLIMITED:	SAUNDERS, R.M. P.O. box 1922 Kill Devil Hills, NC 27948 252-207-8710	License: 32380 Expires: 12/31/2019
--------------------------------------	---	---

PARCEL:

PIN: 988411652507	Parcel Number:
Address: 1505 VA DARE TRL N KILL DEVIL HILLS	Zoning:
Addition:	Block: Lot(s):
Legal Description: Lot 19, Block A, Sec 1, Croatan Shores	

FEES:	Paid	Due	BUILDING AREA:	
Covered Porch Residential	\$795.00	\$0.00	Covered Porches/Decks	1060 SQFT
Res. Building Permit Fee	\$8,755.50	\$0.00	Residential Heated Space	11674 sq. Ft.
T-Pole	\$50.00	\$0.00	(.75)	
Totals :	\$9,600.50	\$0.00	# of Temporary Poles	1 EA

PROJECT DESCRIPTION: New 25 Bedroom SFD

Town of Kill Devil Hills
Water Charges
PAID
Water Tap #: T 23592

BJ2019-120**PROJECT NAME:** OBX Destinations New 25 Bedroom SFD
SITE ADDRESS: 1505 VA DARE TRL N KILL DEVIL HILLS**BUILDING JOINT****ISSUED:** 06/25/2019**EXPIRES:** 12/22/2019

DETAILS**Permit**

Name	Value
ZONING DISTRICT	OIR
FRONT YARD SETBACK	30
REAR YARD SETBACK	CAMA
SIDE YARD SETBACK	10
# PARKING SPACES/BEDROOM	25
CAMA PERMIT	Y
CAMA EXEMPTION	N
FLOOD ZONE	VE
BASE FLOOD ELEVATION	11.0
PURPOSE	Residential New
CONSTRUCTION TYPE	V
CONSTRUCTION COST	2300000.00
LOT COVERAGE	53.93
LIVING SPACE (SQFT)	11674
COVERED PORCHES/DECKS (SQFT)	1060
TOTAL SQUARE FOOTAGE	12734
SURVEYOR NAME AND NUMBER	Carlos F. Gomez
ENGINEER AND LICENSE NUMBER	Carlos F. Gomez 014071
ARCHITECT NAME AND LICENSE NUMBER	Michael A Florez 14163
CULVERT	N
DRIVEWAY INVERT 2	N
OCCUPANCY TYPE	One & Two Family Dwelling

BJ2019-120

PROJECT NAME: OBX Destinations New 25 Bedroom SFD
SITE ADDRESS: 1505 VA DARE TRL N KILL DEVIL HILLS

BUILDING JOINT

ISSUED: 06/25/2019

EXPIRES: 12/22/2019

REQUIRED INSPECTIONS

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

CONDITIONS

- * NOTICE: Call Public Services Department (252) 480-4080 before pouring driveway!
- * This permit becomes null and void if work or construction authorized is not commenced within 6 months or if construction or work is suspended for a period of 12 months at any time after work has started.
- * 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 §153.186(D)(1) Mechanical equipment shall not be visible from any right-of-way and (2) All Mechanical equipment and appurtenances shall be screened.
- * THIS PROPERTY IS LOCATED IN A SPECIAL FLOOD HAZARD AREA.
 1. All Special Flood Hazard Areas limit the use of enclosures below the lowest floor for parking, building access and limited storage only.
 2. In the VE Zone, there shall be no alteration of the sand dunes which would increase potential flood damage.
 3. In the VE Zone, there shall be no fill used for structural support.
 4. Elevation Certificate will be required at time of application, 21 days from the establishment of the lowest floor and at construction completion.

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

- * Must comply with Wind Borne Debris requirements as defined in NCBC R301.2.1.2 and NCBC 1609.2.
- * Zoning Final Inspection is required.
- * Construction must meet all aspect of Chapter 153 Zoning including lot coverage and setbacks.
- * Developer shall provide copies of all engineering certifications, record drawings and approvals as required by NCDEQ and the North Carolina Utilities Commission for the sewer extension prior to Final Inspection.

BJ2019-120

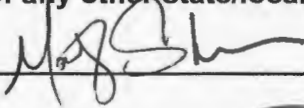
PROJECT NAME: OBX Destinations New 25 Bedroom SFD
SITE ADDRESS: 1505 VA DARE TRL N KILL DEVIL HILLS

BUILDING JOINT

ISSUED: 06/25/2019

EXPIRES: 12/22/2019

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: 6-25-19



Town of Kill Devil Hills

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

JUN 28 2019

Planning and Inspection Department

BJ2019-123	BUILDING JOINT
PROJECT NAME: Isabell Deck	ISSUED: 06/26/2019
SITE ADDRESS: 105 AVIATION AVE E KILL DEVIL HILLS	EXPIRES: 12/23/2019

APPLICANT: DAVID ISBELL
5507 Dawson Rd. B
VIRGINIA BEACH, VA 23451

OWNER: DAVID ISBELL
5507 Dawson Rd. B
VIRGINIA BEACH, VA 23451

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

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

License: 000000000
Expires:

PARCEL:

PIN: 988419703970

Parcel Number: 003894000

Address: 105 AVIATION AVE E KILL DEVIL HILLS

Addition: KITTY HAWK SHORES - REVISED

Zoning:

Block: 38 **Lot(s):** 15

Legal Description:

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

PROJECT DESCRIPTION: Add rear 17x20 deck and door from existing SFD to access rear deck, relocate HVAC heatpump

BJ2019-123

PROJECT NAME: Isabell Deck

SITE ADDRESS: 105 AVIATION AVE E KILL DEVIL HILLS

BUILDING JOINT

ISSUED: 06/26/2019

EXPIRES: 12/23/2019

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

JUN 27 2019

Planning and Inspection Department

BJ2019-124

PROJECT NAME: Menendez Enclosure
SITE ADDRESS: 511 FIRST ST W KILL DEVIL HILLS

BUILDING JOINT

ISSUED: 06/27/2019

EXPIRES: 12/24/2019

APPLICANT: Jillian Menedez
511 W First St
KILL DEVIL HILLS, NC 27948
252-489-3294

OWNER: Jillian Menedez
511 W First St
KILL DEVIL HILLS, NC 27948
252-489-3294

GENERAL: Self
UNKNOWN
UNKNOWN, XX 00000
917-862-9006

License: Unlicensed
Expires: 12/31/2020

PARCEL:

PIN: 988409251037

Parcel Number: 003338000

Address: 511 FIRST ST W KILL DEVIL HILLS

Addition: FIRST FLIGHT VILLAGE SEC 1

Zoning:
Block: 0 **Lot(s):** 56

Legal Description:

FEES:	Paid	Due	BUILDING AREA:	
Res. Building Permit Fee	\$407.25	\$0.00	Residential Heated Space	543 sq. Ft.
Totals :	\$407.25	\$0.00	(.75)	

PROJECT DESCRIPTION: enclose under existing house adding recording room and full bath

BJ2019-124**PROJECT NAME:** Menendez Enclosure
SITE ADDRESS: 511 FIRST ST W KILL DEVIL HILLS**BUILDING JOINT****ISSUED:** 06/27/2019**EXPIRES:** 12/24/2019

DETAILS**Permit**

Name	Value
ZONING DISTRICT	RL
FRONT YARD SETBACK	30
REAR YARD SETBACK	20% Depth >30
SIDE YARD SETBACK	10
HEALTH DEPARTMENT PERMIT #	28831
# PARKING SPACES/BEDROOM	4
CAMA PERMIT	N
CAMA EXEMPTION	N
FLOOD ZONE	AE
BASE FLOOD ELEVATION	8.3
Proposed First Floor Elevation	9.30
SUBSTANTIAL IMPROVEMENT	NO
PURPOSE	Residential Addition
CONSTRUCTION TYPE	V
CONSTRUCTION COST	10000.00
LOT COVERAGE	32.60
LIVING SPACE (SQFT)	543
TOTAL SQUARE FOOTAGE	543
SURVEYOR NAME AND NUMBER	Manson Ray Meekins L-2592
CULVERT	N
DRIVEWAY INVERT 2	N
OCCUPANCY TYPE	One & Two Family Dwelling

REQUIRED INSPECTIONS

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

BJ2019-124

PROJECT NAME: Menendez Enclosure
SITE ADDRESS: 511 FIRST ST W KILL DEVIL HILLS

BUILDING JOINT

ISSUED: 06/27/2019

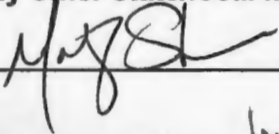
EXPIRES: 12/24/2019

CONDITIONS

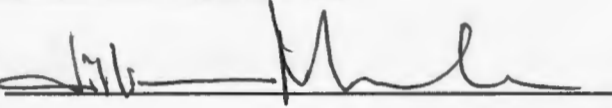
- * This permit becomes null and void if work or construction authorized is not commenced within 6 months or if construction or work is suspended for a period of 12 months at any time after work has started.
- * Development must meet all aspects of Chapter 151 Flood Damage Prevention Ordinance including use and elevation.
- * 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: _____

6/27/19



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

EL2019-052	ELECTRICAL
PROJECT NAME: BRAMWELL METER BASE	ISSUED: 06/06/2019
SITE ADDRESS: 112 MEADOWLARK ST E KILL DEVIL HILLS	EXPIRES: 12/03/2019

APPLICANT: Bramwell, David 112 E Meadowlark Street Kill Devil Hills, NC 27948	OWNER: Bramwell, David 112 E Meadowlark Street Kill Devil Hills, NC 27948
--	--

ELECTRICAL-UNLIMITED:	SUBURBAN ELECTRIC CONTRACTORS OF NC INC. PO Box 925 Manteo, NC 27954 252-475-1372	License: 30633-U Expires: 08/09/2019
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PARCEL:

PIN: 988308890986	Parcel Number: 003822000
Address: 112 MEADOWLARK ST E KILL DEVIL HILLS	
Addition: KITTY HAWK SHORES - REVISED	Zoning:
Legal Description:	Block: 34 Lot(s): 6

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

PROJECT DESCRIPTION: METER BASE CHANGE OUT, RELOCATE 200A PANEL

[Signature]
JUN 6 2019

EL2019-052

PROJECT NAME: BRAMWELL METER BASE
SITE ADDRESS: 112 MEADOWLARK ST E KILL DEVIL HILLS

ELECTRICAL

ISSUED: 06/06/2019

EXPIRES: 12/03/2019

DETAILS

Permit

Name	Value
ZONING DISTRICT	C
PURPOSE	Residential Repair/Remodel
CONSTRUCTION COST	2000.00
CONSTRUCTION TYPE	V
FLOOD ZONE	AE
BASE FLOOD ELEVATION	8.00
OCCUPANCY TYPE	One & Two Family Dwelling

REQUIRED INSPECTIONS

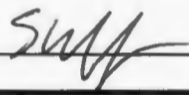
Final

CONDITIONS

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

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

Issued By: 

Contractor or Authorized Agent:  **Date:** 6/6/19



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

EL2019-053	ELECTRICAL
PROJECT NAME: Gatley Service Change	ISSUED: 06/10/2019
SITE ADDRESS: 213 RANDOM ST KILL DEVIL HILLS	EXPIRES: 12/07/2019

APPLICANT: Gatley, Kenneth 149 Racine Dr NEWPORT NEWS, VA 23608	OWNER: Gatley, Kenneth 149 Racine Dr NEWPORT NEWS, VA 23608
--	--

ELECTRICAL:	VUYOVICH ELECTRIC P.O. Box 191 Point Harbor, NC 27964 252-202-1407	License: 18077-U Expires: 03/31/2020
--------------------	---	---

PARCEL:

PIN: 988517211605	Parcel Number: 000765000
Address: 213 RANDOM ST KILL DEVIL HILLS	Zoning:
Addition: VIRGINIA DARE SHORES AMD BLK 2	Block: 2 Lot(s): 11-12
Legal Description:	

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

PROJECT DESCRIPTION: 200 AMP service change relocate panel box

JUN 10 2019

EL2019-053

PROJECT NAME: Gatley Service Change
SITE ADDRESS: 213 RANDOM ST KILL DEVIL HILLS

ELECTRICAL

ISSUED: 06/10/2019

EXPIRES: 12/07/2019

DETAILS

Permit

Name	Value
ZONING DISTRICT	C
PURPOSE	Residential Repair/Remodel
CONSTRUCTION COST	2500.00
CONSTRUCTION TYPE	V
FLOOD ZONE	AE
BASE FLOOD ELEVATION	9

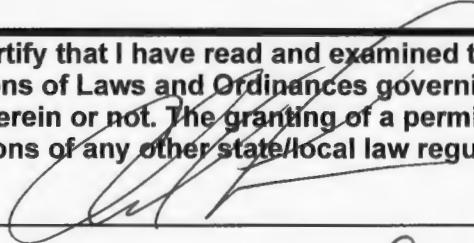
REQUIRED INSPECTIONS

Final

CONDITIONS

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

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: Brent Vignol Date: 6-10-19



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

EL2019-054	ELECTRICAL
PROJECT NAME: Adams Meter BAse	ISSUED: 06/11/2019
SITE ADDRESS: 104 OCEAN BAY BLVD KILL DEVIL HILLS	EXPIRES: 12/08/2019

APPLICANT: Adams, Ann
5917 Farmwell RD
RALEIGH, NC 27610
919-235-2407

OWNER: Adams, Ann
5917 Farmwell RD
RALEIGH, NC 27610
919-235-2407

GENERAL: Self
UNKNOWN
UNKNOWN, XX 00000
917-862-9006

License: Unlicensed
Expires: 12/31/2020

PARCEL:

PIN: 988420705538

Parcel Number: 003873000

Address: 104 OCEAN BAY BLVD KILL DEVIL HILLS

Addition: KITTY HAWK SHORES - REVISED

Zoning:
Block: 37 **Lot(s):** 10

Legal Description:

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

PROJECT DESCRIPTION: C/O Meter base

Value \$2000.00

JUN 11 2019

EL2019-054

PROJECT NAME: Adams Meter BAsE

SITE ADDRESS: 104 OCEAN BAY BLVD KILL DEVIL HILLS

ELECTRICAL

ISSUED: 06/11/2019

EXPIRES: 12/08/2019

DETAILS

Permit

Name	Value
ZONING DISTRICT	RH
PURPOSE	Residential Repair/Remodel
FLOOD ZONE	AE
BASE FLOOD ELEVATION	8

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.
- * Property can not be rented or placed for sale for one year from final inspection.

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

Issued By: _____

Contractor or Authorized Agent: _____

Date: 6/11/2019



Town of Kill Devil Hills

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

JUN 24 2019

Planning and Inspection Department

EL2019-057	ELECTRICAL
PROJECT NAME:	ISSUED: 06/14/2019
SITE ADDRESS: 3209 RAYMOND AVE KILL DEVIL HILLS	EXPIRES: 12/11/2019

APPLICANT: Triple R Properties LLC 649 Fort Raleigh Dr. VIRGINIA BEACH, VA 23451 757-404-4349	OWNER: Triple R Properties LLC 649 Fort Raleigh Dr. VIRGINIA BEACH, VA 23451 757-404-4349
---	---

ELECTRICAL, UNLIMITED:	Outer Banks Electric 1210 Burnside Rd Manteo, NC 27954	License: 24451 Expires:
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PARCEL:

PIN: 988513045589	Parcel Number: 000090000
Address: 3209 RAYMOND AVE KILL DEVIL HILLS	Zoning:
Addition: ORVILLE BEACH BLK 5	Block: 5 Lot(s): 13
Legal Description:	

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

PROJECT DESCRIPTION: Replace overhead service cable.

EL2019-057

PROJECT NAME:

SITE ADDRESS: 3209 RAYMOND AVE KILL DEVIL HILLS

ELECTRICAL

ISSUED: 06/14/2019

EXPIRES: 12/11/2019

DETAILS

Permit

Name	Value
ZONING DISTRICT	C
PURPOSE	Residential Repair/Remodel
CONSTRUCTION COST	800.00
CONSTRUCTION TYPE	V
FLOOD ZONE	VE
BASE FLOOD ELEVATION	11
OCCUPANCY TYPE	One & Two Family Dwelling

REQUIRED INSPECTIONS

Final

CONDITIONS

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

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

Issued By: _____

Contractor or Authorized Agent: _____

Date: 6-24-2019



Town of Kill Devil Hills

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

JUN 19 2019

Planning and Inspection Department

EL2019-059	ELECTRICAL
PROJECT NAME:	ISSUED: 06/19/2019
SITE ADDRESS: 112 AVIATION AVE E KILL DEVIL HILLS	EXPIRES: 12/16/2019

APPLICANT: Cernetich, Greg 302 Woodmont Rd JOHNSTOWN, PA 15905 814-659-8472	OWNER: Cernetich, Greg 302 Woodmont Rd JOHNSTOWN, PA 15905 814-659-8472
---	---

ELECTRICAL - LIMITED:	J Pugh Services PO Box 204 Jarvisburg, NC 27947 252-202-4611	License: 29815 Expires: 07/26/2019
------------------------------	---	---

PARCEL:

PIN: 988419714174	Parcel Number: 003903000
Address: 112 AVIATION AVE E KILL DEVIL HILLS	Zoning:
Addition: KITTY HAWK SHORES - REVISED	Block: 39 Lot(s): 6
Legal Description:	

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

PROJECT DESCRIPTION: Replace meter base & riser cable. Replace and relocate panel to exterior.

EL2019-059

PROJECT NAME:

SITE ADDRESS: 112 AVIATION AVE E KILL DEVIL HILLS

ELECTRICAL

ISSUED: 06/19/2019

EXPIRES: 12/16/2019

DETAILS

Permit

Name	Value
ZONING DISTRICT	RL
PURPOSE	Residential Repair/Remodel
CONSTRUCTION COST	3500.00
CONSTRUCTION TYPE	V
FLOOD ZONE	AE
BASE FLOOD ELEVATION	8
OCCUPANCY TYPE	One & Two Family Dwelling

REQUIRED INSPECTIONS


Final

CONDITIONS

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

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

Issued By: 

Contractor or Authorized Agent:  Date: 6-19-19



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

EL2019-058

PROJECT NAME:

SITE ADDRESS: 302 FRESH POND DR E KILL DEVIL HILLS

ELECTRICAL

ISSUED: 06/17/2019

EXPIRES: 12/14/2019

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

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

ELECTRICAL, UNLIMITED: LOWIRE TECHNOLOGIES
PO Box 2751
Kill Devil Hills, NC 27948
252-449-4690

License: 19403
Expires: 10/02/2019

PARCEL:

PIN: 989313142365

Parcel Number: 004957000

Address: 302 FRESH POND DR E KILL DEVIL HILLS

Addition: LAKE DRIVE DEVELOPMENT SEC 2

Zoning:
Block: 0 **Lot(s):** 31

Legal Description:

FEE:	Paid	Due
Electrical Permit Fee	\$150.00	\$0.00
Totals :	\$150.00	\$0.00

PROJECT DESCRIPTION: Replace & Relocate meter base. Update service feeder & add hot tub circuit and 2 WP receptacles.

PAID
JUN 18 2019
TOWN OF KILL DEVIL HILLS

EL2019-058

PROJECT NAME:

SITE ADDRESS: 302 FRESH POND DR E KILL DEVIL HILLS

ELECTRICAL

ISSUED: 06/17/2019

EXPIRES: 12/14/2019

DETAILS

Permit

Name	Value
ZONING DISTRICT	C
PURPOSE	Residential Repair/Remodel
CONSTRUCTION COST	3325.00
CONSTRUCTION TYPE	V
FLOOD ZONE	AE
BASE FLOOD ELEVATION	9
OCCUPANCY TYPE	One & Two Family Dwelling

REQUIRED INSPECTIONS

Final

CONDITIONS

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

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

Issued By: 

Contractor or Authorized Agent: 

Date: 6-18-19



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

EL2019-055	ELECTRICAL
PROJECT NAME: Bermuda Bay HOA Pool fence lighting	ISSUED: 06/12/2019
SITE ADDRESS: 1101 Cambridge Rd. Kill Devil Hills	EXPIRES: 12/09/2019

APPLICANT: Bermuda Bay Homeowners Association PO Box 1807 Nags Head, NC 27959 480-4722	OWNER: Bermuda Bay Homeowners Association PO Box 1807 Nags Head, NC 27959 480-4722
--	--

CONTRACTOR: SEABREEZE ELECTRIC & LIGHTING INC
136 CAROLINA CT WEST
MANTEO, NC 27954
(252) 654-2094

ELECTRICAL - UNLIMITED:	SEABREEZE ELECTRIC & LIGHTING INC 136 CAROLINA CT WEST MANTEO, NC 27954 (252) 654-2094	License: 30079 Expires: 04/05/2020
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PARCEL:

PIN: 988306387222	Parcel Number:
Address: 1101 Cambridge Rd. Kill Devil Hills	Zoning:
Addition:	Block: Lot(s):
Legal Description: Lot 300 Recreation, Sunset Bay	

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

PROJECT DESCRIPTION: lighting attached to pool fence to light walkway surrounding pool

JUN 13 2019

EL2019-055

PROJECT NAME: Bermuda Bay HOA Pool fence lighting
SITE ADDRESS: 1101 Cambridge Rd. Kill Devil Hills

ELECTRICAL

ISSUED: 06/12/2019

EXPIRES: 12/09/2019

DETAILS

Permit

Name	Value
ZONING DISTRICT	G&I Private
PURPOSE	Commercial Repair/Remodel
CONSTRUCTION COST	3500.00
FLOOD ZONE	X

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.
- * Per 153.074(E)(3) All light produced on-site shall be contained within the perimeter of the site by design, orientation or shielding of the light source.

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

Issued By: _____

Contractor or Authorized Agent: _____

Date: 6/13/19



Town of Kill Devil Hills

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

JUN 7 2019

Planning and Inspection Department

BANNER2019-001

PROJECT NAME: Lowe's
SITE ADDRESS: 1500 CROATAN HWY N KILL DEVIL HILLS

BANNER

ISSUED: 01/30/2019

EXPIRES: 04/30/2019

APPLICANT: LOWES CORP.
P.O. Box 1111
1605 Curtis Bridge Rd.
Wilkesboro, NC 28697

OWNER: LOWES CORP.
P.O. Box 1111
1605 Curtis Bridge Rd.
Wilkesboro, NC 28697

CONTRACTOR: SAME AS OWNER
UNKNOWN
UNKNOWN, XX 00000

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

PARCEL:

PIN: 988410454012

Parcel Number: 002746000

Address: 1500 CROATAN HWY N KILL DEVIL HILLS

Addition: SUBDIVISION - NONE

Zoning:

Block: 0 Lot(s): 0

Legal Description:

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

PROJECT DESCRIPTION: 2 banners on building

DETAILS

Permit

Name	Value
# OF BANNERS	2
ZONING DISTRICT	C
PURPOSE	Commercial Accessory
CONSTRUCTION COST	300.00
FLOOD ZONE	AE

BANNNER2019-001

PROJECT NAME: Lowe's

SITE ADDRESS: 1500 CROATAN HWY N KILL DEVIL HILLS

BANNER

ISSUED: 01/30/2019

EXPIRES: 04/30/2019

REQUIRED INSPECTIONS

Final

CONDITIONS

* No such banner shall exceed 100 square feet. Banners shall be attached to a building. Banner may be displayed for a period not to exceed 90 days.

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

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

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

* 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: Donna Elliott

Contractor or Authorized Agent: [Signature] Date: 4/6/19



Town of Kill Devil Hills

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

JUN 6 2019

TOWN OF
KILL DEVIL HILLS

Planning and Inspection Department

BANNER2019-002	BANNER
PROJECT NAME: Natalya Sharp/Max's Pizza	ISSUED: 06/05/2019
SITE ADDRESS: 1700 CROATAN HWY N KILL DEVIL HILLS	EXPIRES: 09/03/2019

APPLICANT: Sharp, Natalya PO Box 1181 kitty hawk, nc 27949 252-305-2828	OWNER: OLIVOLA, MARK NANCY O WALTON P O BOX 364 KILL DEVIL HILLS, NC 27948
---	--

CONTRACTOR:	SAME AS APPLICANT 0000000 00000000, nc 00000	License: 123456 Expires: 04/30/2020
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PARCEL:

PIN: 988410374122	Parcel Number: 002739000
Address: 1700 CROATAN HWY N KILL DEVIL HILLS	Zoning:
Addition: HEDRICKS ADDITION - CROATAN SH	Block: 0 Lot(s): 0
Legal Description:	

FEES:	Paid	Due
Banner Fee	\$50.00	\$0.00
Totals :	\$50.00	\$0.00

PROJECT DESCRIPTION: Banner on the building/Unit 1712

DETAILS

Permit	
Name	Value
# OF BANNERS	1
ZONING DISTRICT	C
PURPOSE	Commercial Accessory
CONSTRUCTION COST	500.00
FLOOD ZONE	AE

BANNNER2019-002

PROJECT NAME: Natalya Sharp/Max's Pizza
SITE ADDRESS: 1700 CROATAN HWY N KILL DEVIL HILLS

BANNER

ISSUED: 06/05/2019

EXPIRES: 09/03/2019

REQUIRED INSPECTIONS

Final

CONDITIONS

- * Proposed sign cannot be flashing or intermittently illuminated or appear to be flashing or glittering or moving.
- No exposed neon, argon, krypton or similar gas lighting allowed except as permitted in Section 153.077(B)(10).
- Lighting shall be shielded so as to prevent a direct view of the light from a residence or a street in a residential zone.
- * No such banner shall exceed 100 square feet. Banners shall be attached to a building. Banner may be displayed for a period not to exceed 90 days.
- * Window signs cannot exceed 25% of the gross glazing area of the building and cannot be separately illuminated or backlit by lighting installed for that purpose.
- * 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: Donna Elliott

Contractor or Authorized Agent: [Signature] Date: 6/6/19



Town of Kill Devil Hills

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

JUN 4 2019

Planning and Inspection Department

Town of Kill Devil Hills

SG2019-007	SIGN
PROJECT NAME: LaLa Land	ISSUED: 04/09/2019
SITE ADDRESS: 1600 CROATAN HWY S KILL DEVIL HILLS	EXPIRES: 10/06/2019

APPLICANT: SUNSATION REALTY 353 Village Road Virginia Beach, VA 23451 757-822-8412	OWNER: SUNSATION REALTY 353 Village Road Virginia Beach, VA 23451 757-822-8412
--	--

CONTRACTOR:	SAME AS APPLICANT 0000000 00000000, nc 00000	License: 123456 Expires: 04/30/2020
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PARCEL:

PIN: 989313040879	Parcel Number: 008384000
Address: 1600 CROATAN HWY S KILL DEVIL HILLS	Zoning:
Addition: OCEAN ACRES TRACT 3 SEC 1	Block: A Lot(s): 27-28
Legal Description:	

FEES:	Paid	Due
Sign Permit Fee	\$1,100.00	\$0.00
Totals :	\$1,100.00	\$0.00

PROJECT DESCRIPTION: Free-standing sign and signs on the building

SG2019-007

PROJECT NAME: LaLa Land

SITE ADDRESS: 1600 CROATAN HWY S KILL DEVIL HILLS

SIGN

ISSUED: 04/09/2019

EXPIRES: 10/06/2019

DETAILS**Permit**

Name	Value
# OF SIGNS	11
SIGN - FREE STANDING PERMITTED (SQFT)	64.00
SIGN - FREE STANDING PROPOSED (SQ FT)	51.75
SIGN - WALL PERMITTED (SQFT)	234.00
SIGN- WALL PROPOSED (SQ FT)	233.62
ZONING DISTRICT	C
PURPOSE	Commercial Accessory
CONSTRUCTION COST	3500.00
FLOOD ZONE	AE

REQUIRED INSPECTIONS

Final

CONDITIONS

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

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

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

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

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

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

* Zoning Final Inspection is required.

SG2019-007

PROJECT NAME: LaLa Land

SITE ADDRESS: 1600 CROATAN HWY S KILL DEVIL HILLS

SIGN

ISSUED: 04/09/2019

EXPIRES: 10/06/2019

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: 6-4-19



Town of Kill Devil Hills

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

JUN 21 2019

Planning and Inspection Department

SG2019-014

PROJECT NAME: Dream Cream
SITE ADDRESS: 1722 N Croatan Hwy Kill Devil Hills

SIGN

ISSUED: 06/21/2019

EXPIRES: 12/18/2019

APPLICANT: Dream Cream
PO Box 3323
Kill Devil Hills, NC 27948
252-256-1473

OWNER: OLIVOLA, Mark
P O BOX 364
KILL DEVIL HILLS, NC 27948

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

License: LEGACY UNKNOWN
Expires: 12/31/2019

PARCEL:

PIN: 988410373044-7288
Address: 1722 N Croatan Hwy Kill Devil Hills
Addition:
Legal Description:

Parcel Number:
Zoning:
Block: **Lot(s):**

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

PROJECT DESCRIPTION: Sign on the building

SG2019-014

PROJECT NAME: Dream Cream

SITE ADDRESS: 1722 N Croatan Hwy Kill Devil Hills

SIGN

ISSUED: 06/21/2019

EXPIRES: 12/18/2019

DETAILS

Permit

Name	Value
# OF SIGNS	1
SIGN - WALL PERMITTED (SQFT)	36.00
SIGN- WALL PROPOSED (SQ FT)	25.33
ZONING DISTRICT	C
PURPOSE	Commercial Accessory
CONSTRUCTION COST	4000.00
FLOOD ZONE	AE

REQUIRED INSPECTIONS

Final

CONDITIONS

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

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

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


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

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

* 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: 6.21.19



Town of Kill Devil Hills

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

JUN 28 2019

Planning and Inspection Department

SG2019-016

PROJECT NAME: Mom's Sweet Shop
SITE ADDRESS: 3213 CROATAN HWY N KILL DEVIL HILLS

SIGN

ISSUED: 06/24/2019

EXPIRES: 12/21/2019

APPLICANT: Wineland, Derik and Jessica
PO Box 466
Kill Devil Hills, NC 27948
252-261-8253

OWNER: Wineland, Derik and Jessica
PO Box 466
Kill Devil Hills, NC 27948
252-261-8253

CONTRACTOR: SAME AS OWNER
UNKNOWN
UNKNOWN, XX 00000

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

PARCEL:

PIN: 988513040400

Parcel Number: 000039000

Address: 3213 CROATAN HWY N KILL DEVIL HILLS

Addition:

Zoning:

Block: 11 **Lot(s):** 2

Legal Description:

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

PROJECT DESCRIPTION: Free-standing sign

SG2019-016

PROJECT NAME: Mom's Sweet Shop
SITE ADDRESS: 3213 CROATAN HWY N KILL DEVIL HILLS

SIGN
ISSUED: 06/24/2019
EXPIRES: 12/21/2019

DETAILS

Permit

Name	Value
# OF SIGNS	1
SIGN - FREE STANDING PERMITTED (SQFT)	64.00
SIGN - FREE STANDING PROPOSED (SQ FT)	50.00
ZONING DISTRICT	C
PURPOSE	Commercial Accessory
CONSTRUCTION COST	100.00
FLOOD ZONE	AE


REQUIRED INSPECTIONS

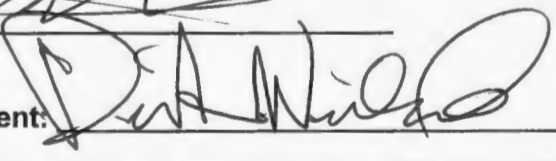
Final

CONDITIONS

- * Proposed sign cannot be flashing or intermittently illuminated or appear to be flashing or glittering or moving.
- No exposed neon, argon, krypton or similar gas lighting allowed except as permitted in Section 153.077(B)(10).
- Lighting shall be shielded so as to prevent a direct view of the light from a residence or a street in a residential zone.
- * This permit becomes null and void if work or construction authorized is not commenced within 6 months or if construction or work is suspended for a period of 12 months at any time after work has started.
- * Free-standing sign cannot exceed 20 feet in elevation above street grade measured from ground elevation to the top of the sign structure. Sign cannot overhang into the right of way.
- * Zoning Final Inspection is required.

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

Issued By: 

Contractor or Authorized Agent:  Date: 6-28-19



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

DM2019-003

PROJECT NAME:

SITE ADDRESS: 1505 VA DARE TRL N KILL DEVIL HILLS

DEMOLITION

ISSUED: 05/31/2019

EXPIRES: 11/27/2019

APPLICANT: Ocean Estates LLC
905 NORTH VA Dare TR
Kill Devil Hills, NC 27948
252-207-8710

OWNER: Ocean Estates LLC
905 NORTH VA Dare TR
Kill Devil Hills, NC 27948
252-207-8710

GENERAL - UNLIMITED:

SAUNDERS, RM / R M SAUNDERS GENERAL
CONTRACTORS INC
PO Box 1922
Kill Devil Hills, NC 27948
252-207-8710

License: 32380
Expires: 01/01/2020

PARCEL:

PIN: 988411651589

Parcel Number: 002770000

Address: 1505 VA DARE TRL N KILL DEVIL HILLS

Addition: CROATAN SHORES

Zoning:

Block: A

Lot(s): 18-19

Legal Description:

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

PROJECT DESCRIPTION: Demolition of existing structures.

DETAILS

Permit

Name	Value
ZONING DISTRICT	OIR
FLOOD ZONE	VE
CONSTRUCTION COST	18000.00

MAY 31 2019

DM2019-003

PROJECT NAME:

SITE ADDRESS: 1505 VA DARE TRL N KILL DEVIL HILLS

DEMOLITION

ISSUED: 05/31/2019

EXPIRES: 11/27/2019

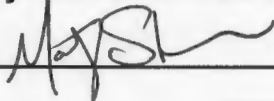
REQUIRED INSPECTIONS

Final

CONDITIONS

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

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

Issued By: 

Contractor or Authorized Agent:  **Date:** 5-31-19



Town of Kill Devil Hills

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

PAID

JUN 19 2019

Planning and Inspection Department

TOWN OF

DM2019-004	DEMOLITION
PROJECT NAME: Waste water demo	ISSUED: 06/19/2019
SITE ADDRESS: 1607 MEMORIAL BLVD S KILL DEVIL HILLS	EXPIRES: 12/16/2019

APPLICANT: COMFORT INN
1632 SPRING HOUSE TRAIL
VIRGINIA BEACH, VA 23455
441-6333

OWNER: Neptune KDH LLC
249 Central Park Ave
Suite 320
Virginia Beach, Va 23462
757-213-4380

UNLICENSED BUILDER: Landmark Hotel Group
249 Central Park Ave
Suite 320
Virginia Beach, Va 23462
757-213-4380

License: 0000000000
Expires: 06/28/2029

PARCEL:

PIN: 989309058395

Parcel Number: 027066000

Address: 1607 MEMORIAL BLVD S KILL DEVIL HILLS

Zoning:

Addition: OCEAN ACRES INC

Block: 0 **Lot(s):** 138-141

Legal Description:

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

PROJECT DESCRIPTION: Remove old existing waste water plant, brick building at NE to remain.

DETAILS

Permit

Name	Value
ZONING DISTRICT	C
FLOOD ZONE	AE
CONSTRUCTION COST	10000.00

DM2019-004

PROJECT NAME: Waste water demo

SITE ADDRESS: 1607 MEMORIAL BLVD S KILL DEVIL HILLS

DEMOLITION

ISSUED: 06/19/2019

EXPIRES: 12/16/2019

REQUIRED INSPECTIONS

Final

CONDITIONS

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

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

Issued By: _____

Contractor or Authorized Agent: _____

Date: 6/19/2019



Town of Kill Devil Hills

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

Planning and Inspection Department

ZP2019-046	ZONING PERMIT
PROJECT NAME:	ISSUED: 06/05/2019
SITE ADDRESS: 634 CANAL DR KILL DEVIL HILLS	EXPIRES: 12/02/2019

APPLICANT: Miller, Ben and Emily 1102 Suite G Cambridge Road Kill Devil Hills, NC 27948 252-207-9395	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: 01/01/2020
---	---

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
Fence	\$100.00	\$0.00
Totals :	\$100.00	\$0.00

PROJECT DESCRIPTION: New fence in rear yard.

PAID

JUN 5 2019

ZP2019-046

PROJECT NAME:

SITE ADDRESS: 634 CANAL DR KILL DEVIL HILLS

ZONING PERMIT

ISSUED: 06/05/2019

EXPIRES: 12/02/2019

DETAILS

Permit

Name	Value
ZONING DISTRICT	RL
CAMA PERMIT	N
CAMA EXEMPTION	N
FLOOD ZONE	AE
BASE FLOOD ELEVATION	8
PURPOSE	Residential Repair/Remodel
CONSTRUCTION COST	6000.00
CULVERT	N
DRIVEWAY INVERT 2	N

REQUIRED INSPECTIONS

Final

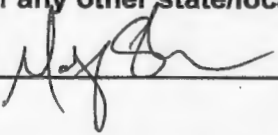
Stringline

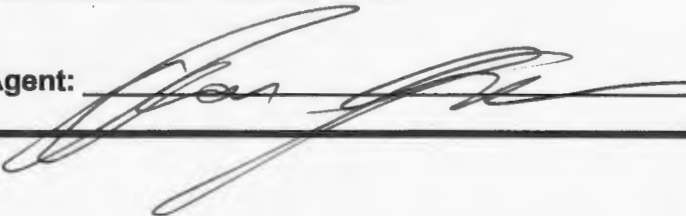
CONDITIONS

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* 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: 6-4-19



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

ZP2019-045	ZONING PERMIT
PROJECT NAME: William Stewart	ISSUED: 06/04/2019
SITE ADDRESS: 1511 DOGWOOD LN KILL DEVIL HILLS	EXPIRES: 12/01/2019

APPLICANT: STEWART, WILLIAM J 328 WEST EDEN STREET KILL DEVIL HILLS, NC 27948 252-202-8673	OWNER: STEWART, WILLIAM J 328 WEST EDEN STREET KILL DEVIL HILLS, NC 27948 252-202-8673
--	--

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

PARCEL:

PIN: 988413139920	Parcel Number: 027499000
Address: 1511 DOGWOOD LN KILL DEVIL HILLS	Zoning:
Addition: FIRST FLIGHT VLG PH A SEC 3	Block: 0 Lot(s): 56
Legal Description:	

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

PROJECT DESCRIPTION: Fence

JUN 4 2019

ZP2019-045

PROJECT NAME: William Stewart

SITE ADDRESS: 1511 DOGWOOD LN KILL DEVIL HILLS

ZONING PERMIT

ISSUED: 06/04/2019

EXPIRES: 12/01/2019

DETAILS

Permit

Name	Value
ZONING DISTRICT	RL
CAMA PERMIT	N
CAMA EXEMPTION	N
FLOOD ZONE	AE
CONSTRUCTION COST	400.00
SURVEYOR NAME AND NUMBER	Styons Surveying Services
CULVERT	N
DRIVEWAY INVERT 2	N

REQUIRED INSPECTIONS

Final

Zoning Final

CONDITIONS

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

* Zoning Final Inspection is required.

* Call Building Inspector for a string line inspection before building the fence.

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

Issued By: Donna Elliott

Contractor or Authorized Agent: WJST

Date: 6/4/19



Town of Kill Devil Hills

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

PAID

JUN 24 2019

Planning and Inspection Department

TOWN OF
KILL DEVIL HILLS

ZP2019-054	ZONING PERMIT
PROJECT NAME: King Fence	ISSUED: 06/24/2019
SITE ADDRESS: 707 INDIAN DR KILL DEVIL HILLS	EXPIRES: 12/21/2019

APPLICANT: KING, DIANE
707 Indian Drive
Kill Devil Hills, NC 27948

OWNER: KING, DIANE
707 Indian Drive
Kill Devil Hills, NC 27948

GENERAL: Self
UNKNOWN
UNKNOWN, XX 00000
917-862-9006

License: Unlicensed
Expires: 12/31/2020

PARCEL:

PIN: 988409252802

Parcel Number: 002730000

Address: 707 INDIAN DR KILL DEVIL HILLS

Addition: HIGH VIEW - HEDRICKS ADD

Zoning:

Block: F **Lot(s):** 24

Legal Description:

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

PROJECT DESCRIPTION: Replace fence on rear of property

ZP2019-054

PROJECT NAME: King Fence

SITE ADDRESS: 707 INDIAN DR KILL DEVIL HILLS

ZONING PERMIT

ISSUED: 06/24/2019

EXPIRES: 12/21/2019

DETAILS

Permit

Name	Value
ZONING DISTRICT	RL
FRONT YARD SETBACK	30
REAR YARD SETBACK	20% Depth >30
SIDE YARD SETBACK	8
STREET SIDE SETBACK	15
CAMA PERMIT	N
CAMA EXEMPTION	N
FLOOD ZONE	X
PURPOSE	Residential Repair/Remodel
CONSTRUCTION COST	300.00
SURVEYOR NAME AND NUMBER	M Douglas Styons L-3227
CULVERT	N
DRIVEWAY INVERT 2	N

REQUIRED INSPECTIONS

Stringline

Final

CONDITIONS

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Issued By: _____

Contractor or Authorized Agent: _____

Date: 6-24-19



Town of Kill Devil Hills

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

PAID
JUN 20 2019

Planning and Inspection Department

Town of Kill Devil Hills

ZP2019-051	ZONING PERMIT
PROJECT NAME: Vigil Fence	ISSUED: 06/17/2019
SITE ADDRESS: 806 FIRST ST W KILL DEVIL HILLS	EXPIRES: 12/14/2019

APPLICANT: VIGIL, ALEX
806 W First Street
Kill Devil Hills, NC 27948

OWNER: VIGIL, ALEX
806 W First Street
Kill Devil Hills, NC 27948

GENERAL: Self
UNKNOWN
UNKNOWN, XX 00000
917-862-9006

License: Unlicensed
Expires: 12/31/2020

PARCEL:

PIN: 988413135610

Parcel Number: 027546122

Address: 806 FIRST ST W KILL DEVIL HILLS

Zoning:

Addition:

Block: 0 **Lot(s):** 122

Legal Description:

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

PROJECT DESCRIPTION: Fence around perimeter of back yard

#4000⁰⁰ value

ZP2019-051

PROJECT NAME: Vigil Fence

SITE ADDRESS: 806 FIRST ST W KILL DEVIL HILLS

ZONING PERMIT

ISSUED: 06/17/2019

EXPIRES: 12/14/2019

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	9.0
PURPOSE	Residential Accessory
SURVEYOR NAME AND NUMBER	William Yetzer L-5274
CULVERT	N
DRIVEWAY INVERT 2	N

REQUIRED INSPECTIONS

Stringline

Zoning Final

Final

CONDITIONS

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Issued By:

Contractor or Authorized Agent:

Date:

6/20/19



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

ZP2019-052	ZONING PERMIT
PROJECT NAME:	ISSUED: 06/14/2019
SITE ADDRESS: 431 Palmetto St. Kill Devil Hills	EXPIRES: 12/11/2019

APPLICANT: Skinner, Brian & Megan 9019 Ribbon Falls Loop BRISTOW, VA 20136 703-869-2761	OWNER: Skinner, Brian & Megan 9019 Ribbon Falls Loop BRISTOW, VA 20136 703-869-2761
---	---

GENERAL:	AAA Lawn Enforcement 4227 Worthington Lane kitty hawk, nc 27949 252-207-6496	License: 123456 Expires: 10/31/2025
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PARCEL:

PIN: 988517002147	Parcel Number:	
Address: 431 Palmetto St. Kill Devil Hills	Zoning:	
Addition:	Block:	Lot(s):
Legal Description: Lot 10R, Blk 50, Virginia Dare Shores		

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

PROJECT DESCRIPTION: New fence in front yard.

PAID
JUN 14 2019
TOWN OF
KILL DEVIL HILLS

ZP2019-052

PROJECT NAME:

SITE ADDRESS: 431 Palmetto St. Kill Devil Hills

ZONING PERMIT

ISSUED: 06/14/2019

EXPIRES: 12/11/2019

DETAILS

Permit

Name	Value
CAMA PERMIT	N
CAMA EXEMPTION	N
FLOOD ZONE	AE
BASE FLOOD ELEVATION	9
PURPOSE	Residential Repair/Remodel
CONSTRUCTION COST	1900.00
CULVERT	N
DRIVEWAY INVERT 2	N

REQUIRED INSPECTIONS

Final

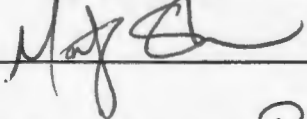
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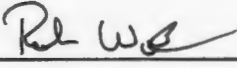
CONDITIONS

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

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Issued By: 

Contractor or Authorized Agent:  Date: 6-14-19



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

ZP2019-049

PROJECT NAME: Riddick Fence
SITE ADDRESS: 1510 MONUMENT LN KILL DEVIL HILLS

ZONING PERMIT

ISSUED: 06/12/2019

EXPIRES: 12/09/2019

APPLICANT: Riddick, Jason
1510 Monument Lane
Kill Devil Hills, NC 27948

OWNER: Riddick, Jason
1510 Monument Lane
Kill Devil Hills, NC 27948

GENERAL: Self
UNKNOWN
UNKNOWN, XX 00000
917-862-9006

License: Unlicensed
Expires: 12/31/2020

PARCEL:

PIN: 988414343509

Parcel Number: 003391000

Address: 1510 MONUMENT LN KILL DEVIL HILLS

Addition: FIRST FLIGHT VILLAGE SEC 1

Zoning:
Block: 0 **Lot(s):** 123

Legal Description:

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

PROJECT DESCRIPTION: 6ft fence in the back yard

PAID
JUN 12 2019

ZP2019-049

PROJECT NAME: Riddick Fence

SITE ADDRESS: 1510 MONUMENT LN KILL DEVIL HILLS

ZONING PERMIT

ISSUED: 06/12/2019

EXPIRES: 12/09/2019

DETAILS

Permit

Name	Value
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	8.3
PURPOSE	Residential Accessory
CONSTRUCTION COST	3000.00
SURVEYOR NAME AND NUMBER	M Douglas Styons L-3227
CULVERT	N
DRIVEWAY INVERT 2	N

REQUIRED INSPECTIONS

Final

Zoning Final

CONDITIONS

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Issued By: _____

Contractor or Authorized Agent: _____

Date: _____

6-12-19



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

ZP2019-050	ZONING PERMIT
PROJECT NAME: WADDELL FENCE	ISSUED: 06/12/2019
SITE ADDRESS: 1409 PIRATES LOOP KILL DEVIL HILLS	EXPIRES: 12/09/2019

APPLICANT: Ryan Waddell 2604 S. Memorial Blvd. nags head, nc 27959 252-599-1611	OWNER: Ryan Waddell 2604 S. Memorial Blvd. nags head, nc 27959 252-599-1611
---	---

GENERAL:	Self UNKNOWN UNKNOWN, XX 00000 917-862-9006	License: Unlicensed Expires: 12/31/2020
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PARCEL:

PIN: 988414440091	Parcel Number: 003558000
Address: 1409 PIRATES LOOP KILL DEVIL HILLS	Zoning:
Addition: LANDING SECTION 2, THE	Block: 0 Lot(s): 53
Legal Description:	

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

PROJECT DESCRIPTION: 6' FENCE ON SOUTHERN PROPERTY LINE

JUN 12 2019

ZP2019-050

PROJECT NAME: WADDELL FENCE

SITE ADDRESS: 1409 PIRATES LOOP KILL DEVIL HILLS

ZONING PERMIT

ISSUED: 06/12/2019

EXPIRES: 12/09/2019

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	9.00
PURPOSE	Residential Accessory
CONSTRUCTION COST	1000.00
CULVERT	N
DRIVEWAY INVERT 2	N

REQUIRED INSPECTIONS

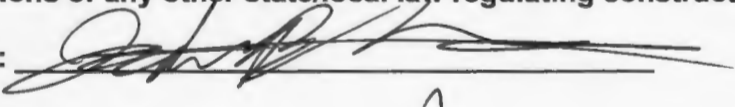
Stringline

Zoning Final

CONDITIONS

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Issued By: 

Contractor or Authorized Agent:  **Date:** 6-12-19



Town of Kill Devil Hills

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

PAD

JUN 11 2019

Planning and Inspection Department

ZP2019-048

PROJECT NAME: KOZAK FENCE
SITE ADDRESS: 2026 VA DARE TRL N KILL DEVIL HILLS

ZONING PERMIT

ISSUED: 06/11/2019

EXPIRES: 12/08/2019

APPLICANT: KOZAK, WARREN D
3133 Riveredge Dr
PORTSMOUTH, VA 23703

OWNER: KOZAK, WARREN D
3133 Riveredge Dr
PORTSMOUTH, VA 23703

BUILDER: ALL ABOUT FENCES
UNKNOWN
UNKNOWN, XX 00000
252-473-2233

License: unlicensed
Expires: 12/30/2019

PARCEL:

PIN: 988518301286

Parcel Number: 030652000

Address: 2026 VA DARE TRL N KILL DEVIL HILLS

Zoning:

Addition:

Block: 0 **Lot(s):** 32 & 32A

Legal Description:

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

PROJECT DESCRIPTION: FENCE ALONG REAR AND NORTH PROPERTY LINES

ZP2019-048

PROJECT NAME: KOZAK FENCE

SITE ADDRESS: 2026 VA DARE TRL N KILL DEVIL HILLS

ZONING PERMIT

ISSUED: 06/11/2019

EXPIRES: 12/08/2019

DETAILS

Permit

Name	Value
ZONING DISTRICT	C
FRONT YARD SETBACK	30
REAR YARD SETBACK	20% Depth >30
SIDE YARD SETBACK	10
CAMA PERMIT	N
CAMA EXEMPTION	N
FLOOD ZONE	AE
BASE FLOOD ELEVATION	9.00
PURPOSE	Residential Accessory
CONSTRUCTION COST	6815.99
CULVERT	N
DRIVEWAY INVERT 2	N

REQUIRED INSPECTIONS

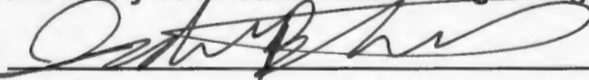
Stringline

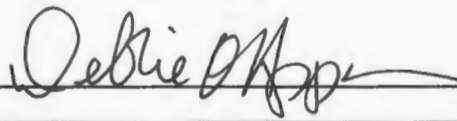
Final

CONDITIONS

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Issued By: 

Contractor or Authorized Agent:  Date: 06/11/19



Town of Kill Devil Hills

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

JUN 11 2019

Planning and Inspection Department

ZP2019-047	ZONING PERMIT
PROJECT NAME: APPLETON FENCE	ISSUED: 06/11/2019
SITE ADDRESS: 2024 VA DARE TRL N KILL DEVIL HILLS	EXPIRES: 12/08/2019

APPLICANT: Debbie & Randall Appleton 2024 N Va Dare Kill Devil Hills, NC 27948	OWNER: Debbie & Randall Appleton 2024 N Va Dare Kill Devil Hills, NC 27948
---	---

BUILDER:	ALL ABOUT FENCES UNKNOWN UNKNOWN, XX 00000 252-473-2233	License: unlicensed Expires: 12/30/2019
-----------------	--	--

PARCEL:

PIN: 988518302212	Parcel Number: 030653000
Address: 2024 VA DARE TRL N KILL DEVIL HILLS	Zoning:
Addition:	Block: 0 Lot(s): 34 & 34A
Legal Description:	

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

PROJECT DESCRIPTION: FENCE ON REAR AND SOUTH PROPERTY LINE

ZP2019-047

PROJECT NAME: APPLETON FENCE

SITE ADDRESS: 2024 VA DARE TRL N KILL DEVIL HILLS

ZONING PERMIT

ISSUED: 06/11/2019

EXPIRES: 12/08/2019

DETAILS

Permit

Name	Value
ZONING DISTRICT	C
FRONT YARD SETBACK	30
REAR YARD SETBACK	20% Depth >30
SIDE YARD SETBACK	10
CAMA PERMIT	N
CAMA EXEMPTION	N
FLOOD ZONE	AE
BASE FLOOD ELEVATION	9.00
PURPOSE	Residential Accessory
CONSTRUCTION COST	5791.19
CULVERT	N
DRIVEWAY INVERT 2	N

REQUIRED INSPECTIONS

Stringline

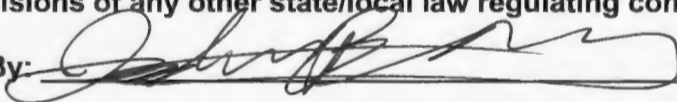
Final

CONDITIONS

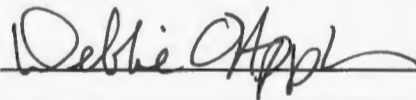
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Issued By:



Contractor or Authorized Agent:



Date:

6/11/19



Town of Kill Devil Hills

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

JUN 27 2019

Planning and Inspection Department

TOWN OF
KILL DEVIL HILLS

DW2019-010	DRIVEWAY
PROJECT NAME: John Giglia	ISSUED: 06/27/2019
SITE ADDRESS: 815 CEDAR DR KILL DEVIL HILLS	EXPIRES: 12/24/2019

APPLICANT: JOHN GIGLIA
815 Cedar Dr.
KILL DEVIL HILLS, NC 27948
631-880-9843

OWNER: JOHN GIGLIA
815 Cedar Dr.
KILL DEVIL HILLS, NC 27948
631-880-9843

CONTRACTOR: SAME AS OWNER
UNKNOWN
UNKNOWN, XX 00000

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

PARCEL:

PIN: 988413130091

Parcel Number: 028479000

Address: 815 CEDAR DR KILL DEVIL HILLS

Zoning:

Addition:

Block: 0 **Lot(s):** 99

Legal Description:

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

PROJECT DESCRIPTION: Replace portion of driveway

DW2019-010

PROJECT NAME: John Giglia

SITE ADDRESS: 815 CEDAR DR KILL DEVIL HILLS

DRIVEWAY

ISSUED: 06/27/2019

EXPIRES: 12/24/2019

DETAILS

Permit

Name	Value
DRIVEWAY INVERT 2	N
CULVERT	N
SURVEYOR NAME AND NUMBER	Boundaries Surveying
ZONING DISTRICT	RL
CONSTRUCTION COST	1500.00
FLOOD ZONE	AE

REQUIRED INSPECTIONS

Zoning Final

Final

CONDITIONS

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* 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: Donna Elliott

Contractor or Authorized Agent: [Signature] Date: 27 June 19



Town of Kill Devil Hills

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

JUN 3 2019

Planning and Inspection Department

DW2019-009	DRIVEWAY
PROJECT NAME: Bunn Driveway Addition	ISSUED: 06/03/2019
SITE ADDRESS: 216 SOTHEL ST E KILL DEVIL HILLS	EXPIRES: 11/30/2019

APPLICANT: Bunn, Charles 22226 Old Chapel Road Newsomes, VA 23874	OWNER: Bunn, Charles 22226 Old Chapel Road Newsomes, VA 23874
--	--

GENERAL:	Self UNKNOWN UNKNOWN, XX 00000 917-862-9006	License: Unlicensed Expires: 12/31/2020
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PARCEL:

PIN: 988513134060	Parcel Number: 000416000
Address: 216 SOTHEL ST E KILL DEVIL HILLS	Zoning:
Addition: VIRGINIA DARE SHORES	Block: 8 Lot(s): 29-30
Legal Description:	

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

PROJECT DESCRIPTION: Expand driveway by 408 sq ft

DW2019-009

PROJECT NAME: Bunn Driveway Addtion
SITE ADDRESS: 216 SOTHEL ST E KILL DEVIL HILLS

DRIVEWAY

ISSUED: 06/03/2019

EXPIRES: 11/30/2019

DETAILS

Permit

Name	Value
DRIVEWAY INVERT 2	Y
CULVERT	N
SURVEYOR NAME AND NUMBER	William S Jones L-2532
ZONING DISTRICT	C
CONSTRUCTION COST	3000.00
FLOOD ZONE	AE
BASE FLOOD ELEVATION	9.0
LOT COVERAGE	42.00
TOTAL SQUARE FOOTAGE	408

REQUIRED INSPECTIONS

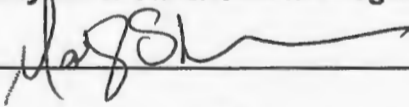
Zoning Final
Final

Slab/Foundation

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.

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: Carolyn at Bunn Date: 6-3-19



Town of Kill Devil Hills

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

JUN 26 2019

Planning and Inspection Department

EG2019-004	EXCAVATION AND GRADING
PROJECT NAME: Sinanaj Clearing	ISSUED: 06/19/2019
SITE ADDRESS: 0 FIFTH ST W KILL DEVIL HILLS	EXPIRES: 12/16/2019

APPLICANT: SINANAJ, ERMAL
205 W. Morning View Drive
nags head, nc 27959

OWNER: SINANAJ, ERMAL
205 W. Morning View Drive
nags head, nc 27959

CONTRACTOR: ALL COUNTY BUILDERS LLC
205 West Morning Dove
NAGS HEAD, NC 27959
252-475-4047

GENERAL-LIMITED: ALL COUNTY BUILDERS LLC
205 West Morning Dove
NAGS HEAD, NC 27959
252-475-4047

License: 59306
Expires: 01/11/2020

PARCEL:

PIN: 988405283945 **Parcel Number:** 002057000

Address: 0 FIFTH ST W KILL DEVIL HILLS

Addition: WRIGHT'S SHORES **Zoning:**

Legal Description: **Block:** 0 **Lot(s):** 3

FEES:	Paid	Due
Land Disturbing	\$100.00	\$0.00
Totals :	\$100.00	\$0.00

PROJECT DESCRIPTION: Clear lot and bring in fill as needed for future construction

EG2019-004

PROJECT NAME: Sinanaj Clearing
SITE ADDRESS: 0 FIFTH ST W KILL DEVIL HILLS

EXCAVATION AND GRADING

ISSUED: 06/19/2019

EXPIRES: 12/16/2019

DETAILS

Permit

Name	Value
ESTIMATED CONSTRUCTION COST	5000.00
ZONING DISTRICT	RL
CAMA PERMIT	N
FLOOD ZONE	AE
BASE FLOOD ELEVATION	8.3
SURVEYOR NAME AND NUMBER	Martin Barnette L-3740

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.
- * The developer shall be responsible for maintaining erosion and sediment control at the disturbed area.

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

JUN 3 2019

Planning and Inspection Department

BP2019-126	BUILDING
PROJECT NAME: Stephens Piling Replacement	ISSUED: 05/31/2019
SITE ADDRESS: 305 BURNS DR KILL DEVIL HILLS	EXPIRES: 11/27/2019

APPLICANT: STEPHENS, J ANTHONY
P O BOX 2475
KILL DEVIL HILLS, NC 27948

OWNER: STEPHENS, J ANTHONY
P O BOX 2475
KILL DEVIL HILLS, NC 27948

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

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: 988316941057

Parcel Number: 008463000

Address: 305 BURNS DR KILL DEVIL HILLS

Addition: OCEAN ACRES TRACT 3 SEC 1

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

Legal Description:

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

PROJECT DESCRIPTION: replace 6 deck piles, sister 9 piles and replace 4-8x8 piles



Town of Kill Devil Hills

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

JUN 4 2019

Planning and Inspection Department

BP2019-127

PROJECT NAME: DREAM TIME PILING REPAIR
SITE ADDRESS: 1209 WINDSONG WAY KILL DEVIL HILLS

BUILDING

ISSUED: 06/03/2019

EXPIRES: 11/30/2019

APPLICANT: DREAM TIME OBX LLC
319 WHITESTONE RD
CHARLOTTE, NC 28270
704-400-4871

OWNER: DREAM TIME OBX LLC
319 WHITESTONE RD
CHARLOTTE, NC 28270
704-400-4871

CONTRACTOR: BARRY TWIFORD
UNKNOWN
UNKNOWN, XX 00000
252-423-0568

License: LEGACY UNKNOWN
Expires: 12/30/2019

PARCEL:

PIN: 988415647321

Parcel Number: 004079000

Address: 1209 WINDSONG WAY KILL DEVIL HILLS

Addition:

Zoning:

Block: 0 **Lot(s):** 11

Legal Description:

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

PROJECT DESCRIPTION: REPLACE NW PILING

BP2019-127

PROJECT NAME: DREAM TIME PILING REPAIR
SITE ADDRESS: 1209 WINDSONG WAY KILL DEVIL HILLS

BUILDING

ISSUED: 06/03/2019

EXPIRES: 11/30/2019

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	20% Depth >30
FLOOD ZONE	VE
BASE FLOOD ELEVATION	11.00
FINAL ELEVATION CERTIFICATE	N
CONSTRUCTION COST	500.00
CONSTRUCTION TYPE	V
OCCUPANCY TYPE	One & Two Family Dwelling

REQUIRED INSPECTIONS

Zoning Final

Final

CONDITIONS

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

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

Issued By: 

Contractor or Authorized Agent: 

Date: 6-4-19



Town of Kill Devil Hills

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

JUN 4 2019

Planning and Inspection Department

BP2019-128	BUILDING
PROJECT NAME: Heaton Piling replacement	ISSUED: 06/03/2019
SITE ADDRESS: 411 SEAGULL CT KILL DEVIL HILLS	EXPIRES: 11/30/2019

APPLICANT: Heaton, Russell
193 Winnepeg Ave
EGG HARBOR TOWNSHIP, NJ 08234

OWNER: Heaton, Russell
193 Winnepeg Ave
EGG HARBOR TOWNSHIP, NJ 08234

GENERAL: Self
UNKNOWN
UNKNOWN, XX 00000
917-862-9006

License: Unlicensed
Expires: 12/31/2020

PARCEL:

PIN: 988414334670

Parcel Number: 003577000

Address: 411 SEAGULL CT KILL DEVIL HILLS

Addition: LANDING SECTION 2, THE

Zoning:
Block: 0 **Lot(s):** 72

Legal Description:

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

PROJECT DESCRIPTION: replace pilings on front deck landing

BP2019-128

PROJECT NAME: Heaton Piling replacement
SITE ADDRESS: 411 SEAGULL CT KILL DEVIL HILLS

BUILDING

ISSUED: 06/03/2019

EXPIRES: 11/30/2019

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
FLOOD ZONE	AE
BASE FLOOD ELEVATION	9.0
FINAL ELEVATION CERTIFICATE	N
CONSTRUCTION COST	500.00
SURVEYOR NAME AND NUMBER	William S Jones L-2532
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.

BP2019-128

PROJECT NAME: Heaton Piling replacement
SITE ADDRESS: 411 SEAGULL CT KILL DEVIL HILLS

BUILDING

ISSUED: 06/03/2019

EXPIRES: 11/30/2019

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
WITH
CASH

JUN 26 2019

Planning and Inspection Department

BP2019-147

PROJECT NAME: FITZGERALD STAIR REBUILD
SITE ADDRESS: 3130 VA DARE TRL N KILL DEVIL HILLS

BUILDING

ISSUED: 06/26/2019

EXPIRES: 12/23/2019

APPLICANT: FITZGERALD, AUBREY H
5 POINDEXTER PLACE
NEWPORT NEWS, VA 23606

OWNER: FITZGERALD, AUBREY H
5 POINDEXTER PLACE
NEWPORT NEWS, VA 23606

BUILDING LIMITED: EVANS HOMES LLC.
5121 WINDSOR PL
kitty hawk, nc 27949
252-207-8127

License: 49040
Expires: 12/31/2019

PARCEL:

PIN: 988513049237

Parcel Number: 000108000

Address: 3130 VA DARE TRL N KILL DEVIL HILLS

Addition: ORVILLE BEACH BLK 8

Zoning:
Block: 8 **Lot(s):** 4

Legal Description:

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

PROJECT DESCRIPTION: REBUILD STAIR AND RAILING

BP2019-147

PROJECT NAME: FITZGERALD STAIR REBUILD

SITE ADDRESS: 3130 VA DARE TRL N KILL DEVIL HILLS

BUILDING

ISSUED: 06/26/2019

EXPIRES: 12/23/2019

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: 6.26.19



Town of Kill Devil Hills

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

JUN 27 2019

Planning and Inspection Department

BP2019-148
PROJECT NAME:
SITE ADDRESS: 1523 SIR WALTER RD KILL DEVIL HILLS

BUILDING
ISSUED: 06/26/2019
EXPIRES: 12/23/2019

APPLICANT: Barry Prokop
1523 Sir Walter Rd.
Kill Devil Hills, NC 27948
703-426-8510

OWNER: Barry Prokop
1523 Sir Walter Rd.
Kill Devil Hills, NC 27948
703-426-8510

UNLICENSED - REMODELING: First Light Construction & Improvements.
P.O. Box 109
kitty hawk, nc 27949
804-690-8431

License: 1234
Expires:

PARCEL:

PIN: 988411554712

Parcel Number: 003184000

Address: 1523 SIR WALTER RD KILL DEVIL HILLS

Addition: W R DEATON - DELRAY BEACH

Zoning:

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

Legal Description:

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

PROJECT DESCRIPTION: Replace multiple windows and doors with like kind. Replace 2 exterior doors at bottom level. Install 7 new construction windows at bottom level only in unfinished space. Work does not include work at upper level or any of the other ongoing work on site.

BP2019-148

PROJECT NAME:

SITE ADDRESS: 1523 SIR WALTER RD KILL DEVIL HILLS

BUILDING

ISSUED: 06/26/2019

EXPIRES: 12/23/2019

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	11462.00
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: Marty Shaw

Contractor or Authorized Agent: [Signature] Date: 5-27-19

TOWN OF KILL DEVIL HILLS
 PLANNING
 DATE / TIME : 06/27/19 09:19
 PAYMENT : \$ 150.00
 RECEIPT # : 579644
 CHECK/DEBIT CARD # : 06/27/19
 ISSUED BY : MARTY SHAW



Town of Kill Devil Hills

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

JUN 27 2019

Planning and Inspection Department

OP2019-032

PROJECT NAME: Susan B Miller
SITE ADDRESS: 2207 Bay Drive Kill Devil Hills

OCCUPANCY

ISSUED:

EXPIRES:

PARENT PERMIT #: BJ2018-229

APPLICANT: Miller, Susan B
3800 Elijah Baum
kitty hawk, nc 27949
252-489-7543

OWNER: Miller, Susan B
3800 Elijah Baum
kitty hawk, nc 27949
252-489-7543

GENERAL: Self
UNKNOWN
UNKNOWN, XX 00000
917-862-9006

License: Unlicensed
Expires: 12/31/2020

PARCEL:

PIN: 987408991771

Parcel Number:

Address: 2207 Bay Drive Kill Devil Hills

Addition:

Zoning:

Block:

Lot(s):

Legal Description: Lot 1 Block 76

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: New 4 Bedroom SFD

OP2019-032

PROJECT NAME: Susan B Miller

SITE ADDRESS: 2207 Bay Drive Kill Devil Hills

OCCUPANCY

ISSUED:

EXPIRES:

DETAILS

Permit

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

CONDITIONS

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

Issued By: 

Contractor or Authorized Agent: 

Date: 6/27/19



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

BP2019-151	BUILDING
PROJECT NAME: WILLIAMS STAIRS, DECKS, AND SHED	ISSUED: 06/28/2019
SITE ADDRESS: 214 SOTHEL ST E KILL DEVIL HILLS	EXPIRES: 12/25/2019

APPLICANT: WILLIAMS, CHARLES E JR RT 1 BOX 390-G FISHERSVILLE, VA 22939	OWNER: WILLIAMS, CHARLES E JR RT 1 BOX 390-G FISHERSVILLE, VA 22939
--	--

GENERAL:	Self UNKNOWN UNKNOWN, XX 00000 917-862-9006	License: Unlicensed Expires: 12/31/2020
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PARCEL:

PIN: 988513124928	Parcel Number: 000415000
Address: 214 SOTHEL ST E KILL DEVIL HILLS	Zoning:
Addition: VIRGINIA DARE SHORES	Block: 8 Lot(s): 27-28
Legal Description:	

FEES:	<u>Paid</u>	<u>Due</u>	BUILDING AREA:
Open Deck Fee	\$300.00	\$0.00	Open Decks 2 EA
Accessory Residential (MIN)	\$100.00	\$0.00	
Totals :	\$400.00	\$0.00	

PROJECT DESCRIPTION: EXTEND FRONT PORCH TO BE 9'X29', ADDING SET OF STEPS TO FRONT DECK, BUILD NEW 8'X8' REAR DECK AND STAIR, ADD 12'X12' STORAGE SHED IN REAR YARD

PAID

JUN 28 2019

BP2019-151

PROJECT NAME: WILLIAMS STAIRS, DECKS, AND SHED
SITE ADDRESS: 214 SOTHEL ST E KILL DEVIL HILLS

BUILDING**ISSUED:** 06/28/2019**EXPIRES:** 12/25/2019**DETAILS****Permit**

Name	Value
CAMA PERMIT	N
CAMA EXEMPTION	N
ZONING DISTRICT	C
PURPOSE	Residential Repair/Remodel
FRONT YARD SETBACK	15
SIDE YARD SETBACK	6
REAR YARD SETBACK	20% Depth >30
FLOOD ZONE	AE
BASE FLOOD ELEVATION	9.00
FINAL ELEVATION CERTIFICATE	N
CONSTRUCTION COST	8000.00
CONSTRUCTION TYPE	V
OCCUPANCY TYPE	One & Two Family Dwelling

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.
- * Development must meet all aspects of Chapter 151 Flood Damage Prevention Ordinance including use and elevation.
- * Shed must meet zoning requirements of 5' from side and rear property lines



Town of Kill Devil Hills

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

JUN 28 2019

Planning and Inspection Department

BP2019-150	BUILDING
PROJECT NAME: JENNINGS 8'X12' STORAGE ENCLOSURE	ISSUED: 06/28/2019
SITE ADDRESS: 601 West Sportsman Drive Kill Devil Hills	EXPIRES: 12/25/2019

APPLICANT: Jennings, Donald F. 515 W. Soundside Road nags head, nc 27959 252-207-4936	OWNER: Jennings, Donald F. 515 W. Soundside Road nags head, nc 27959 252-207-4936
---	---

RESIDENTIAL - INTERMEDIATE:	JENNINGS, DONALD P. O. Box 1102 nags head, nc 27959 252-207-4936	License: 32637 Expires: 01/01/2020
------------------------------------	---	---

PARCEL:

PIN: 988517007110	Parcel Number:
Address: 601 West Sportsman Drive Kill Devil Hills	Zoning:
Addition:	Block: Lot(s):
Legal Description: Lot 180, Avalon Beach Subdivision	

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

PROJECT DESCRIPTION: 8'X12' STORAGE ENCLOSURE UNDER HOME

BP2019-150

PROJECT NAME: JENNINGS 8'X12' STORAGE ENCLOSURE
SITE ADDRESS: 601 West Sportsman Drive Kill Devil Hills

BUILDING

ISSUED: 06/28/2019

EXPIRES: 12/25/2019

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

Planning and Inspection Department

BP2019-149	BUILDING
PROJECT NAME: HOLLOWELL ROOF AND WINDOWS	ISSUED: 06/28/2019
SITE ADDRESS: 404 THIRD ST W KILL DEVIL HILLS	EXPIRES: 12/25/2019

APPLICANT: EDWARD HOLLOWELL 3226 CASTELOW RD COFIELD, NC 27922 252-209-2486	OWNER: EDWARD HOLLOWELL 3226 CASTELOW RD COFIELD, NC 27922 252-209-2486
---	---

GENERAL:	Self UNKNOWN UNKNOWN, XX 00000 917-862-9006	License: Unlicensed Expires: 12/31/2020
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PARCEL:			
PIN: 988409274285	Parcel Number:	002469000	
Address: 404 THIRD ST W KILL DEVIL HILLS	Zoning:		
Addition: SEA HOLLY RIDGE	Block: H	Lot(s): 16	
Legal Description:			

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

PROJECT DESCRIPTION: REPLACE SHINGLES WITH METAL ROOF, REPLACE WINDOWS

JUN 28 2019

BP2019-149**PROJECT NAME:** HOLLOWELL ROOF AND WINDOWS
SITE ADDRESS: 404 THIRD ST W KILL DEVIL HILLS**BUILDING****ISSUED:** 06/28/2019**EXPIRES:** 12/25/2019

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	X
FINAL ELEVATION CERTIFICATE	N
CONSTRUCTION COST	6000.00
CONSTRUCTION TYPE	V
OCCUPANCY TYPE	One & Two Family Dwelling

REQUIRED INSPECTIONS

Zoning Final

Final

CONDITIONS

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

* Must comply with Wind Borne Debris requirements as defined in NCBC R301.2.1.2 and NCBC 1609.2.

* Roof to be replaced in same footprint

* Windows to meet egress requirements.

BP2019-149

PROJECT NAME: HOLLOWELL ROOF AND WINDOWS
SITE ADDRESS: 404 THIRD ST W KILL DEVIL HILLS

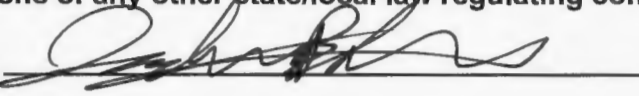
BUILDING

ISSUED: 06/28/2019

EXPIRES: 12/25/2019

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:

Edward H. Hammer

Date:

6-28-19



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

BP2019-133	BUILDING
PROJECT NAME: Holcomb Deck and Stairs	ISSUED: 06/10/2019
SITE ADDRESS: 308 TERN CT KILL DEVIL HILLS	EXPIRES: 12/07/2019

APPLICANT: Holcomb, Robert
499 Sandy Shores Rd
McHenry, MD 21541

OWNER: Holcomb, Robert
499 Sandy Shores Rd
McHenry, MD 21541

UNLICENSED - REMODELING: Set - Wave Construction
1400 Harrington Ave
Kill Devil Hills, NC 27948
252-996-0099

License: 0000000
Expires: 06/28/2024

PARCEL:

PIN: 988410350689

Parcel Number: 003225000

Address: 308 TERN CT KILL DEVIL HILLS

Addition: FIRST FLIGHT VILLAGE SEC 2

Zoning:
Block: 0 **Lot(s):** 236

Legal Description:

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

PROJECT DESCRIPTION: Decking, handrail and stair replacement "as is where is"

PAID
JUN 11 2019

BP2019-133PROJECT NAME: Holcomb Deck and Stairs
SITE ADDRESS: 308 TERN CT KILL DEVIL HILLS**BUILDING**

ISSUED: 06/10/2019

EXPIRES: 12/07/2019

DETAILS**Permit**

Name	Value
CAMA PERMIT	N
CAMA EXEMPTION	N
ZONING DISTRICT	RL
PURPOSE	Residential Repair/Remodel
FRONT YARD SETBACK	30
SIDE YARD SETBACK	10
REAR YARD SETBACK	20% Depth >30
FLOOD ZONE	X
FINAL ELEVATION CERTIFICATE	N
CONSTRUCTION COST	2000.00

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: 6.11.19



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

BP2019-139

PROJECT NAME: STANCIL STAIRS, HANDRAILS, AND DECKING

SITE ADDRESS: 2813 RAYMOND AVE KILL DEVIL HILLS

BUILDING

ISSUED: 06/11/2019

EXPIRES: 12/08/2019

APPLICANT: MARGARET STANCIL
2200 CRESENT AVE
CHARLOTTE, NC 28207
919-491-8213

OWNER: MARGARET STANCIL
2200 CRESENT AVE
CHARLOTTE, NC 28207
919-491-8213

GENERAL: WES LIVERMAN
UNKNOWN
UNKNOWN, XX 00000
252-619-2599

License: unlicensed
Expires: 12/31/2019

PARCEL:

PIN: 988513123737

Parcel Number: 000393000

Address: 2813 RAYMOND AVE KILL DEVIL HILLS

Addition: VIRGINIA DARE SHORES

Zoning:

Block: 7 **Lot(s):** 15-16

Legal Description:

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

PROJECT DESCRIPTION: REBUILD STAIRS IN SAME FOOTPRINT, DECKING AND RAILINGS

JUN 14 2019

BP2019-139

PROJECT NAME: STANCIL STAIRS, HANDRAILS, AND DECKING
SITE ADDRESS: 2813 RAYMOND AVE KILL DEVIL HILLS

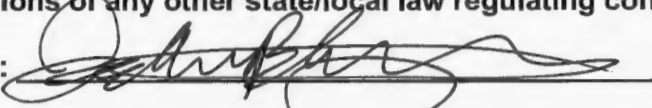
BUILDING

ISSUED: 06/11/2019

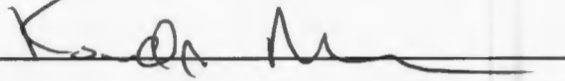
EXPIRES: 12/08/2019

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:

6-14-19



Town of Kill Devil Hills

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

PAID

JUN 17 2019

Planning and Inspection Department

BP2019-141	BUILDING
PROJECT NAME: OUTER BANKS BEACH CLUB STAIRS AND LANDINGS	ISSUED: 06/17/2019
SITE ADDRESS: 1110 VA DARE TRL S KILL DEVIL HILLS	EXPIRES: 12/14/2019

APPLICANT: OUTER BANKS BEACH CLUB 1110 S. Va. Dare Tr. Kill Devil Hills, NC 27948	OWNER: OUTER BANKS BEACH CLUB 1110 S. Va. Dare Tr. Kill Devil Hills, NC 27948
--	--

GENERAL:	Self UNKNOWN UNKNOWN, XX 00000 917-862-9006	License: Unlicensed Expires: 12/31/2020
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PARCEL:			
PIN:	98930508005501	Parcel Number:	027867000
Address:	1110 VA DARE TRL S KILL DEVIL HILLS		
Addition:	KILL DEVIL HILLS SEC 1	Zoning:	
Legal Description:		Block:	4
		Lot(s):	1-8/CONDO-BLDGS 1-2

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

PROJECT DESCRIPTION: REPLACE STAIRS AND LANDINGS ON ONE CONDO BUILDING

BP2019-141**PROJECT NAME:** OUTER BANKS BEACH CLUB STAIRS AND
LANDINGS**SITE ADDRESS:** 1110 VA DARE TRL S KILL DEVIL HILLS**BUILDING****ISSUED:** 06/17/2019**EXPIRES:** 12/14/2019

DETAILS**Permit**

Name	Value
CAMA PERMIT	N
CAMA EXEMPTION	N
ZONING DISTRICT	OIR
PURPOSE	Residential Repair/Remodel
FRONT YARD SETBACK	30
SIDE YARD SETBACK	15
REAR YARD SETBACK	CAMA
FLOOD ZONE	VE
BASE FLOOD ELEVATION	11.00
FINAL ELEVATION CERTIFICATE	N
CONSTRUCTION COST	2500.00
CONSTRUCTION TYPE	V
OCCUPANCY TYPE	Residential

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.

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

BP2019-141

PROJECT NAME: OUTER BANKS BEACH CLUB STAIRS AND
LANDINGS
SITE ADDRESS: 1110 VA DARE TRL S KILL DEVIL HILLS

BUILDING

ISSUED: 06/17/2019

EXPIRES: 12/14/2019

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:

6/17/19



Town of Kill Devil Hills

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

PAID
JUN 18 2019

Planning and Inspection Department

BP2019-140	BUILDING
PROJECT NAME:	ISSUED: 06/14/2019
SITE ADDRESS: 204 HELGA ST E KILL DEVIL HILLS	EXPIRES: 12/11/2019

APPLICANT: COLEMAN HOLLAND P.O. Box 3159 Kitty Hawk, NC 27949	OWNER: COLEMAN HOLLAND P.O. Box 3159 Kitty Hawk, NC 27949
--	--

UNLICENSED - REMODELING:	ACTION BUILDING AND REMODELING INC. 147 EARLY STATION RD Ahoskie, NC 27910	License: 00001111 Expires: 01/01/2025
---------------------------------	--	--

PARCEL:

PIN: 988513044364	Parcel Number: 000019000
Address: 204 HELGA ST E KILL DEVIL HILLS	
Addition: ORVILLE BEACH AMENDED BLK 4	Zoning: Block: 4 Lot(s): 5
Legal Description:	

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

PROJECT DESCRIPTION: Add 12'x12' shed to rear yard.

BP2019-140

PROJECT NAME:

SITE ADDRESS: 204 HELGA ST E KILL DEVIL HILLS

BUILDING

ISSUED: 06/14/2019

EXPIRES: 12/11/2019

DETAILS

Permit

Name	Value
CAMA PERMIT	N
CAMA EXEMPTION	N
ZONING DISTRICT	C
FLOOD ZONE	AE
BASE FLOOD ELEVATION	9
FINAL ELEVATION CERTIFICATE	N
CONSTRUCTION COST	4000.00
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.
- * As-built survey will be required prior to Certificate of Occupancy or Certificate of Compliance.

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

Issued By: _____

Contractor or Authorized Agent: _____ Date: 6-18-19



Town of Kill Devil Hills

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

JUN 21 2019

Planning and Inspection Department

BP2019-144	BUILDING
PROJECT NAME: Michelle Copeland	ISSUED: 06/21/2019
SITE ADDRESS: 402 WALLACE ST KILL DEVIL HILLS	EXPIRES: 12/18/2019

APPLICANT: A Team 402 Wallace Street Kill Devil Hills, NC 27948 252-599-2230	OWNER: Copeland, Michelle 402 Wallace Street Kill Devil Hills, NC 27948 252-599-2230
--	--

CONTRACTOR:	SAME AS APPLICANT 0000000 00000000, nc 00000	License: 123456 Expires: 04/30/2020
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PARCEL:

PIN: 987516836794	Parcel Number: 000242000
Address: 402 WALLACE ST KILL DEVIL HILLS	Zoning:
Addition: ORVILLE BEACH WEST	Block: 0 Lot(s): 150
Legal Description:	

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

PROJECT DESCRIPTION: Repair front deck, add 6X6 deck on rear of house, add 3' steps to side of house

BP2019-144

PROJECT NAME: Michelle Copeland

SITE ADDRESS: 402 WALLACE ST KILL DEVIL HILLS

BUILDING

ISSUED: 06/21/2019

EXPIRES: 12/18/2019

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
HEALTH DEPARTMENT PERMIT #	28805
FLOOD ZONE	X
FINAL ELEVATION CERTIFICATE	N
CONSTRUCTION COST	10000.00
LOT COVERAGE	30.70
SURVEYOR NAME AND NUMBER	Eastern Geomatics, PLLC

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.
- * Zoning Final Inspection is required.
- * If Simpson screws are used in place of through bolts for the deck to house connection, manufactures specifications shall apply.

BP2019-144

PROJECT NAME: Michelle Copeland

SITE ADDRESS: 402 WALLACE ST KILL DEVIL HILLS

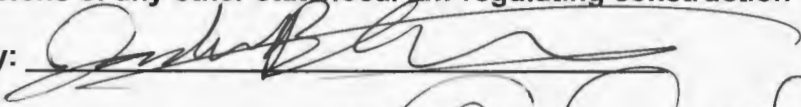
BUILDING

ISSUED: 06/21/2019

EXPIRES: 12/18/2019

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Issued By:



Contractor or Authorized Agent:



Date:

6/21/19



Town of Kill Devil Hills

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

JUN 24 2019

Planning and Inspection Department

BP2019-136

PROJECT NAME: Cubine rebuild stairs
SITE ADDRESS: 1703 WYANDOTTE ST KILL DEVIL HILLS

BUILDING

ISSUED: 06/21/2019
EXPIRES: 12/18/2019

APPLICANT: CUBINE, CARRIE E
2029 NEWPORT NEWS ST
KILL DEVIL HILLS, NC 27948

OWNER: CUBINE, CARRIE E
2029 NEWPORT NEWS ST
KILL DEVIL HILLS, NC 27948

CONTRACTOR: SHANE CLARK
607 INDIAN DR
Kill Devil Hills, NC 27948
252-305-2477

UNLICENSED BUILDER: SHANE CLARK
607 INDIAN DR
Kill Devil Hills, NC 27948
252-305-2477

License: 000
Expires:

PARCEL:

PIN: 988409263185

Parcel Number: 002695000

Address: 1703 WYANDOTTE ST KILL DEVIL HILLS

Addition: HIGH VIEW - HEDRICKS ADD

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

Legal Description:

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

PROJECT DESCRIPTION: replace front stairs same footprint

BP2019-136

PROJECT NAME: Cubine rebuild stairs

SITE ADDRESS: 1703 WYANDOTTE ST KILL DEVIL HILLS

BUILDING

ISSUED: 06/21/2019

EXPIRES: 12/18/2019

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	X
FINAL ELEVATION CERTIFICATE	N
CONSTRUCTION COST	2000.00
LOT COVERAGE	25.00
SURVEYOR NAME AND NUMBER	Martin Barnette L-3740
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.
- * Zoning Final Inspection is required.

BP2019-136

PROJECT NAME: Cubine rebuild stairs

SITE ADDRESS: 1703 WYANDOTTE ST KILL DEVIL HILLS

BUILDING

ISSUED: 06/21/2019

EXPIRES: 12/18/2019

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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
WITH
CASH

JUN 21 2019

Planning and Inspection Department

BP2019-145

PROJECT NAME: Brown top deck and stairs repair
SITE ADDRESS: 1630 VILLAGE LN KILL DEVIL HILLS

BUILDING

ISSUED: 06/21/2019

EXPIRES: 12/18/2019

APPLICANT: BROWN, GREG
6922 RUSKIN STREET
SPRINGFIELD, VA 22150

OWNER: BROWN, GREG
6922 RUSKIN STREET
SPRINGFIELD, VA 22150

CONTRACTOR: Full House Ventures
PO Box 498
kitty hawk, nc 27949
919-608-2120

UNLICENSED - REMODELING: Full House Ventures
PO Box 498
kitty hawk, nc 27949
919-608-2120

License: 00000000
Expires: 06/11/2024

PARCEL:

PIN: 988410267071

Parcel Number: 003243000

Address: 1630 VILLAGE LN KILL DEVIL HILLS

Addition: FIRST FLIGHT VILLAGE SEC 2

Zoning:

Block: 0 **Lot(s):** 263

Legal Description:

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

PROJECT DESCRIPTION: Remove and replace top crows nest and stairs

BP2019-145

PROJECT NAME: Brown top deck and stairs repair
SITE ADDRESS: 1630 VILLAGE LN KILL DEVIL HILLS

BUILDING

ISSUED: 06/21/2019

EXPIRES: 12/18/2019

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	X
FINAL ELEVATION CERTIFICATE	N
CONSTRUCTION COST	4500.00
SURVEYOR NAME AND NUMBER	F. Richard Quible L- 1157
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.
- * Zoning Final Inspection is required.

BP2019-145

PROJECT NAME: Brown top deck and stairs repair
SITE ADDRESS: 1630 VILLAGE LN KILL DEVIL HILLS

BUILDING

ISSUED: 06/21/2019

EXPIRES: 12/18/2019

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Issued By: 

Contractor or Authorized Agent: 

Date: 6-21-19



Town of Kill Devil Hills

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

JUN 25 2019

Planning and Inspection Department

BP2019-146	BUILDING
PROJECT NAME: RAAB STAIRS AND LANDING	ISSUED: 06/25/2019
SITE ADDRESS: 1101 VEELEE DR KILL DEVIL HILLS	EXPIRES: 12/22/2019

APPLICANT: CAROL RAAB 1101 VEELEE DR Kill Devil Hills, NC 27948 239-265-5508	OWNER: CAROL RAAB 1101 VEELEE DR Kill Devil Hills, NC 27948 239-265-5508
--	--

GENERAL:	Self UNKNOWN UNKNOWN, XX 00000 917-862-9006	License: Unlicensed Expires: 12/31/2020
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PARCEL:			
PIN:	988415635577	Parcel Number:	028343000
Address:	1101 VEELEE DR KILL DEVIL HILLS		
Addition:	KITTY HAWK SHORES - REVISED	Zoning:	
Legal Description:		Block:	15 Lot(s): 8

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

PROJECT DESCRIPTION: REBUILD STAIRS AND LANDING SAME FOOTPRINT

BP2019-146

PROJECT NAME: RAAB STAIRS AND LANDING
SITE ADDRESS: 1101 VEELEE DR KILL DEVIL HILLS

BUILDING

ISSUED: 06/25/2019

EXPIRES: 12/22/2019

DETAILS

Permit

Name	Value
CAMA PERMIT	N
CAMA EXEMPTION	N
ZONING DISTRICT	RL
PURPOSE	Residential Repair/Remodel
FRONT YARD SETBACK	15
SIDE YARD SETBACK	10
REAR YARD SETBACK	30
STREET SIDE SETBACK	15
FLOOD ZONE	AE
BASE FLOOD ELEVATION	8.00
FINAL ELEVATION CERTIFICATE	N
CONSTRUCTION COST	2000.00
CONSTRUCTION TYPE	V
OCCUPANCY TYPE	One & Two Family Dwelling

REQUIRED INSPECTIONS

Zoning Final

Final

CONDITIONS

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BP2019-146

PROJECT NAME: RAAB STAIRS AND LANDING
SITE ADDRESS: 1101 VEELEE DR KILL DEVIL HILLS

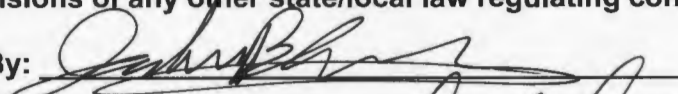
BUILDING

ISSUED: 06/25/2019

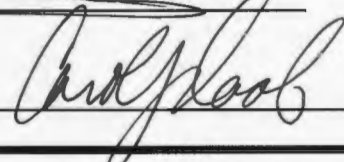
EXPIRES: 12/22/2019

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Issued By:



Contractor or Authorized Agent:



Date:

6/25/19



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

BP2019-094	BUILDING
PROJECT NAME: JONES STAIR REBUILD	ISSUED: 04/25/2019
SITE ADDRESS: 208 SEA VILLAGE LN KILL DEVIL HILLS	EXPIRES: 10/22/2019

APPLICANT: JONES, ROBERT L MARK A JONES 8700 GREYCLIFF ROAD RICHMOND, VA 23294	OWNER: JONES, ROBERT L MARK A JONES 8700 GREYCLIFF ROAD RICHMOND, VA 23294
---	---

GENERAL LIMITED:	B. R. Neier Construction 208 Barco Rd. Barco, NC 27917 207-8236	License: 60862 Expires:
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PARCEL:			
PIN:	988513131766	Parcel Number:	000963000
Address:	208 SEA VILLAGE LN KILL DEVIL HILLS		
Addition:		Zoning:	
Legal Description:		Block:	0 Lot(s): 6

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

PROJECT DESCRIPTION: REBUILD 2 SETS OF STAIRS ON EAST AND WEST SIDE OF PROPERTY

JUN 11 2019

BP2019-094

PROJECT NAME: JONES STAIR REBUILD

SITE ADDRESS: 208 SEA VILLAGE LN KILL DEVIL HILLS

BUILDING

ISSUED: 04/25/2019

EXPIRES: 10/22/2019

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	VE
BASE FLOOD ELEVATION	11.00
FINAL ELEVATION CERTIFICATE	N
CONSTRUCTION COST	700.00
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.

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

BP2019-094

PROJECT NAME: JONES STAIR REBUILD

SITE ADDRESS: 208 SEA VILLAGE LN KILL DEVIL HILLS

BUILDING

ISSUED: 04/25/2019

EXPIRES: 10/22/2019

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: _____

6-11-19



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

BP2019-095	BUILDING
PROJECT NAME: MARSHALL STAIR REBUILD	ISSUED: 04/25/2019
SITE ADDRESS: 205 SEA VILLAGE LN KILL DEVIL HILLS	EXPIRES: 10/22/2019

APPLICANT: MARSHALL, W RICHARD 2036 ORCHARD DRIVE POCOMOKE CITY, MD 21851-2873	OWNER: MARSHALL, W RICHARD 2036 ORCHARD DRIVE POCOMOKE CITY, MD 21851-2873
---	---

GENERAL LIMITED:	B. R. Neier Construction 208 Barco Rd. Barco, NC 27917 207-8236	License: 60862 Expires:
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PARCEL:

PIN: 988513130570	Parcel Number: 009121000
Address: 205 SEA VILLAGE LN KILL DEVIL HILLS	Zoning:
Addition:	Block: 0 Lot(s): 28
Legal Description:	

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

PROJECT DESCRIPTION: REBUILD SET OF EXTERIOR STAIRS ON WEST SIDE OF PROPERTY

JUN 11 2019

BP2019-095

PROJECT NAME: MARSHALL STAIR REBUILD
SITE ADDRESS: 205 SEA VILLAGE LN KILL DEVIL HILLS

BUILDING

ISSUED: 04/25/2019

EXPIRES: 10/22/2019

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: 6-11-19



Town of Kill Devil Hills

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

PAID
WITH
CASH

JUN 11 2019

Planning and Inspection Department

TOWN OF
KILL DEVIL HILLS

BP2019-131	BUILDING
PROJECT NAME: Miller Deck & Steps	ISSUED: 06/06/2019
SITE ADDRESS: 808 FOX ST KILL DEVIL HILLS	EXPIRES: 12/03/2019

APPLICANT: REBECCA MILLER 808 Fox St. K D H, NC 27948	OWNER: REBECCA MILLER 808 Fox St. K D H, NC 27948
--	--

GENERAL:	Self UNKNOWN UNKNOWN, XX 00000 917-862-9006	License: Unlicensed Expires: 12/31/2020
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PARCEL:

PIN: 988308778872	Parcel Number: 004395000
Address: 808 FOX ST KILL DEVIL HILLS	Zoning:
Addition: KILL DEVIL HILLS REALTY CORP	Block: 20 Lot(s): 5
Legal Description:	

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

PROJECT DESCRIPTION: Repair deck, steps and handrails as needed. "As is where is"

BP2019-131

PROJECT NAME: Miller Deck & Steps
SITE ADDRESS: 808 FOX ST KILL DEVIL HILLS

BUILDING

ISSUED: 06/06/2019

EXPIRES: 12/03/2019

DETAILS

Permit

Name	Value
CAMA PERMIT	N
CAMA EXEMPTION	N
PURPOSE	Residential Repair/Remodel
FRONT YARD SETBACK	30
SIDE YARD SETBACK	10
REAR YARD SETBACK	20% Depth >30
FLOOD ZONE	X
FINAL ELEVATION CERTIFICATE	N
CONSTRUCTION COST	5000.00

REQUIRED INSPECTIONS

Zoning Final

Final

CONDITIONS

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

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

Issued By: 

Contractor or Authorized Agent: Rebecca Miller Date: 6/11/19



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

BP2019-137	BUILDING
PROJECT NAME: HILL SHEATHING	ISSUED: 06/11/2019
SITE ADDRESS: 207 ARCH ST E KILL DEVIL HILLS	EXPIRES: 12/08/2019

APPLICANT: AMI HILL 207 E ARCH ST Kill Devil Hills, NC 27948 252-256-2091	OWNER: AMI HILL 207 E ARCH ST Kill Devil Hills, NC 27948 252-256-2091
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GENERAL:	CHRIS GARDNER 105 ELIZABETH CT Kill Devil Hills, NC 27948 252-455-5868	License: 90909090909090 Expires: 05/31/2022
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PARCEL:			
PIN:	988513043681	Parcel Number:	000015000
Address:	207 ARCH ST E KILL DEVIL HILLS		
Addition:	ORVILLE BEACH AMENDED BLK 4	Zoning:	
Legal Description:		Block:	4 Lot(s): 1

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

PROJECT DESCRIPTION: REPLACE T1-11 STRUCTURAL SHEATHING

JUN 11 2019

PAID
WITH
CASH



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

BP2019-135	BUILDING
PROJECT NAME: Solomon Rear Decks and Stairs	ISSUED: 06/11/2019
SITE ADDRESS: 3302 BAY DR KILL DEVIL HILLS	EXPIRES: 12/08/2019

APPLICANT: Solomon, Gloria 213 Chapel Drive LAKE JUNALUSKA, NC 28745	OWNER: Solomon, Gloria 213 Chapel Drive LAKE JUNALUSKA, NC 28745
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CONTRACTOR: JB UTZ CONSTRUCTION
 2719 S Wrightsville Ave
 nags head, nc 27959
 252-475-4619

GENERAL:	JB UTZ CONSTRUCTION 2719 S Wrightsville Ave nags head, nc 27959 252-475-4619	License: none Expires: 12/31/2019
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PARCEL:

PIN:	987516739705	Parcel Number:	000321000
Address:	3302 BAY DR KILL DEVIL HILLS		
Addition:	ORVILLE BEACH WEST	Zoning:	Block: 0 Lot(s): 243

Legal Description:

FEES:	Paid	Due	BUILDING AREA:
Covered Porch Residential	\$360.00	\$0.00	Open Decks 1 EA
Open Deck Fee	\$150.00	\$0.00	Covered Porches/Decks 480 SQFT
Totals :	\$510.00	\$0.00	

PROJECT DESCRIPTION: Replace 3 level rear decks and relocate stairs in rear yard

PAID
 JUN 11 2019

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

PROJECT DESCRIPTION: Replace existing front stairs. Same layout/location.



Town of Kill Devil Hills

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

JUN 7 2019

Planning and Inspection Department

BP2019-132

PROJECT NAME: MARTIN DECK AND STAIR REBUILD
SITE ADDRESS: 310 ST LOUIS ST KILL DEVIL HILLS

BUILDING

ISSUED: 06/06/2019

EXPIRES: 12/03/2019

APPLICANT: Al Martin
310 St. Louis St
Kill Devil Hills, NC 27948
252-449-8485

OWNER: BAKER, ROBERT L
POB 1611
310 ST LOUIS ST
KILL DEVIL HILLS, NC 27948

UNLICENSED BUILDER: SHANE CLARK
607 INDIAN DR
Kill Devil Hills, NC 27948
252-305-2477

License: 000
Expires:

PARCEL:

PIN: 987516849404

Parcel Number: 000180000

Address: 310 ST LOUIS ST KILL DEVIL HILLS

Addition: ORVILLE BEACH WEST

Zoning:

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

Legal Description:

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

PROJECT DESCRIPTION: REPLACE DECKING, RAILING, AND JOIST. REBUILD REAR SET OF STAIRS



Town of Kill Devil Hills

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

PAID

JUN 5 2019

Planning and Inspection Department

BP2019-129

PROJECT NAME: Gaither Office Building Repair
SITE ADDRESS: 2705 CROATAN HWY N KILL DEVIL HILLS

BUILDING

ISSUED: 06/05/2019

EXPIRES: 12/02/2019

APPLICANT: GAITHER, FRANCES A
108 Cobblestone Ct
Rocky Mount, NC 27804

OWNER: GAITHER, FRANCES A
108 Cobblestone Ct
Rocky Mount, NC 27804

CONTRACTOR: HASKETT, JEFFREY H.
P.O. Box 1024
4711 Lindberg Ave.
Kitty Hawk, NC 27949
267-1777

BUILDING LIMITED: Jeffrey H. Haskett Homes, Inc
4711 Lindberg Avenue
kitty hawk, nc 27949

License: 46718
Expires:

PARCEL:

PIN: 988517121361

Parcel Number: 003000000

Address: 2705 CROATAN HWY N KILL DEVIL HILLS

Addition: VIRGINIA DARE SHORES

Zoning:
Block: 19 **Lot(s):** 10-16

Legal Description:

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

PROJECT DESCRIPTION: repair interior wall along back of building, remove brick on rear of building and replace with LP Smart Horizontal Siding

BP2019-129PROJECT NAME: Gaither Office Building Repair
SITE ADDRESS: 2705 CROATAN HWY N KILL DEVIL HILLS**BUILDING**

ISSUED: 06/05/2019

EXPIRES: 12/02/2019

DETAILS**Permit**

Name	Value
CAMA PERMIT	N
CAMA EXEMPTION	N
ZONING DISTRICT	C
PURPOSE	Commercial Repair/Remodel
FRONT YARD SETBACK	30
SIDE YARD SETBACK	10
FLOOD ZONE	AE
BASE FLOOD ELEVATION	9.0
FINAL ELEVATION CERTIFICATE	N
CONSTRUCTION COST	42000.00
OCCUPANCY TYPE	Business

REQUIRED INSPECTIONS

Sheathing	Zoning Final
Insulation	Final

CONDITIONS

- * This permit becomes null and void if work or construction authorized is not commenced within 6 months or if construction or work is suspended for a period of 12 months at any time after work has started.
- * Must comply with Wind Borne Debris requirements as defined in NCBC R301.2.1.2 and NCBC 1609.2.

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: JM Hester Date: 6.5.19



Town of Kill Devil Hills

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

PAID
JUN 5 2019

Planning and Inspection Department

BP2019-130	BUILDING
PROJECT NAME: Anne Griffin Deck Repair/Replace	ISSUED: 06/05/2019
SITE ADDRESS: 329 PALMETTO ST W KILL DEVIL HILLS	EXPIRES: 12/02/2019

APPLICANT: Anne, Griffin 325 Palmetto St. Kill Devil Hills, NC 27948 252-599-1872	OWNER: Anne, Griffin 325 Palmetto St. Kill Devil Hills, NC 27948 252-599-1872
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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: 988517007527	Parcel Number: 003011000
Address: 329 PALMETTO ST W KILL DEVIL HILLS	Zoning:
Addition: VIRGINIA DARE SHORES	Block: 49 Lot(s): 6-8
Legal Description:	

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

PROJECT DESCRIPTION: Repair/Replace Decking, Handrails, Stair stringers.

BP2019-130**PROJECT NAME:** Anne Griffin Deck Repair/Replace
SITE ADDRESS: 329 PALMETTO ST W KILL DEVIL HILLS**BUILDING****ISSUED:** 06/05/2019**EXPIRES:** 12/02/2019

DETAILS**Permit**

Name	Value
CAMA PERMIT	N
CAMA EXEMPTION	N
ZONING DISTRICT	RL
PURPOSE	Residential Repair/Remodel
FRONT YARD SETBACK	30
SIDE YARD SETBACK	8
REAR YARD SETBACK	20% Depth >30
FLOOD ZONE	AE
BASE FLOOD ELEVATION	8.0
FINAL ELEVATION CERTIFICATE	N
CONSTRUCTION COST	12000.00
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.
- * Deck and Stairs approved to go back AS IS WHERE IS

BP2019-130

PROJECT NAME: Anne Griffin Deck Repair/Replace
SITE ADDRESS: 329 PALMETTO ST W KILL DEVIL HILLS

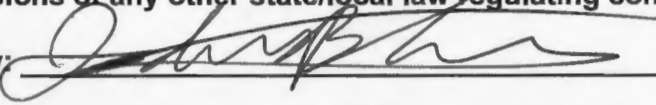
BUILDING

ISSUED: 06/05/2019

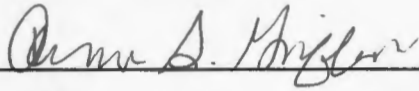
EXPIRES: 12/02/2019

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

Issued By:



Contractor or Authorized Agent:



Date:

6/5/19