

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

1)

PROJECT NAME: SITE ADDRESS: 1006 AVALON DR W KILL DEVIL HILLS MECHANICAL ISSUED: 06/24/2019

EXPIRES: 12/21/2019

APPLICANT:	Wisecarver, Courtne 1006 W Avalon St Kill Devil Hills, NC 23		OWNER: AIR-O-SMITH 330 North Dogwood Trail Southern Shores, NC 27949 252-261-5238			Wisecarver, Courtney 1006 W Avalon St Kill Devil Hills, NC 27948 License: 30070 Expires: 12/31/2019			
H-3, CLASS I:		330 North I Southern S							
PARCEL:									
PIN:	987408997466	6		Parcel Number:	001636	000			
Address:	1006 AVALON	DR W KILL DE	VIL HILLS						
				Zonin	ig:				
Addition:	AVALON BEA	CH		Block	.: 0	Lot(s):	283		
Legal Desc	cription:								
FEES:		Paid	Due						
Mechanical Per	mit Fee	\$150.00	\$0.00						
80-101	Totals :	\$150.00	\$0.00						

PROJECT DESCRIPTION: HVAC changout

JUN 2 4 2019

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Town of Kill Devil Hills

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

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Planning and Inspection Department

JUN 26 2019

MC2019-1	94		MECHANICAL
PROJECT NA	ME: Leonard HVAC		ISSUED: 06/25/2019
SITE ADDRES	SS: 201 WALKER ST E KILL DEVIL HILLS		EXPIRES: 12/22/2019
APPLICANT:	Leonard, Charles	OWNER:	Leonard, Charles

	Carson, VA 23830	Carson, VA 23830					
MECHANICAL:	R A HOY PO Box 265 Kitty Hawk, NC 27949					icense: 1305 xpires: 12/3	
PARCEL:							
PIN:	988517127024	4		Parcel Number:	0003770	000	
Address:	201 WALKER	STE KILL DEV	IL HILLS				
				Zoning:			
Addition:	VIRGINIA DAF	RE SHORES		Block:	4	Lot(s):	PT 15-18
Legal Descrip	ption:						
FEES:		Paid	Due				
Mechanical Permi	it Fee	\$150.00	\$0.00				
	Totals :	\$150.00	\$0.00				

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

Printed by : CTHUMAN on: 06/25/2019 02:26 PM

MC2019-194 PROJECT NAME: Leonard HVAC SITE ADDRESS: 201 WALKER ST E KILL DEVIL HILLS

MECHANICAL ISSUED: 06/25/2019

EXPIRES: 12/22/2019

	D	E					
Permit							
Name	Value	-					
PURPOSE	Residential Repair/Remodel						
CONSTRUCTION COST	11539.00						
CONSTRUCTION TYPE	V						
FLOOD ZONE	AE						
BASE FLOOD ELEVATION	9						
NATURAL GAS SIGNOFF	Ν						

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.

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

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Contractor or Authorized Agent:

Issued By:

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Page 2 of 2

Date: 6-26-19

DETAILS





Town of Kill Devil Hills

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

JUN 26 _09

Planning and Inspection Department

MC2019-195 PROJECT NAME: Ma SITE ADDRESS: 161	aloney HVA(1 VA DARE	C E TRL N KILL DEN	/IL HILLS			ISSUE	CHANICAL ED: 06/25/2019 RES: 12/22/2019
2960	DNEY, FREDE River Reach IAMSBURG, V			OWNER:	MALONEY, FI 2960 River Re WILLIAMSBU		
MECHANICAL:		R A HOY PO Box 269 Kitty Hawk,	5 , NC 27949			License: 1305 Expires: 12/3	
PARCEL:							
PIN: 9	8841156567	7102		Parcel Number:	0027800	002	
Address: 1	611 VA DA	RE TRL N KILL D	EVIL HILLS				
				Zoni	ing:		
Addition:				Bloc	ck: B	Lot(s):	UNIT 2 LOT 14,15
Legal Description:							
FEES:		Paid	Due				
Mechanical Permit Fee	3	\$150.00	\$0.00				
	Totals :	\$150.00	\$0.00				
PROJECT DESCRIPTIO	DN: C/O 3	Ton Heat Pump					
			DETAI	S			
Permit			DETAI				
Name	v	/alue					
PURPOSE		Residential Repair/Remodel					
CONSTRUCTION CO		237.00					
FLOOD ZONE	V	/E					
BASE FLOOD ELEVA		2					
NATURAL GAS SIGN	NOFF N	1					

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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

Date: 6 26 19

REQUIRED INSPECTIONS

Final

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CONDITIONS

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Contractor or Authorized Agent:

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

MC2019-197

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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

MECHANICAL

ISSUED: 06/26/2019

EXPIRES: 12/23/2019

44	SHORT, DONALD B 4404 POINT WEST DRIVE PORTSMOUTH, VA 23703		(OWNER: SHORT, DONALD B 4404 POINT WEST DRIV PORTSMOUTH, VA 237				
P.O. Box 1		Head, NC 27959			License: 12643 Expires: 12/31/2019			
PARCEL:								
PIN:	9875169404	29		Parcel Number:	000182	2000		
Address:	306 ST LOU	IS ST KILL DEVIL	HILLS					
				Zoning	g:			
Addition:	ORVILLE BE	ACH WEST		Block	0	Lot(s): 75		
Legal Descript	tion:							
FEES:		Paid	Due					
Mechanical Permit	Fee	\$150.00	\$0.00					
	Totals :	\$150.00	\$0.00					
PROJECT DESCRI	PTION: C/O 2	5 Ton HVAC Syst	em					
			DETAIL	S				
Permit								
Name		alue						
PURPOSE		Residential Repair/Remodel						
CONSTRUCTION	COST 5	115.00						
CONCTRUCTION	TYPE \	/						
CONSTRUCTION		,						
FLOOD ZONE	>							

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PROJECT NAME: SITE ADDRESS: 3000 VA DARE TRL N KILL DEVIL HILLS

MC2019-196

Town of Kill Devil Hills

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

JUN 26 2019

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Planning and Inspection Department

Thirds In Link Hills

> MECHANICAL ISSUED: 06/26/2019

> EXPIRES: 12/23/2019

APPLICANT:	DRAKE, RAYMOND 29071 NORTH MAIN NEWSOMS, VA 238	c	WNER:	DRAKE, RAYMOND E 29071 NORTH MAIN STREET NEWSOMS, VA 23874			
MECHANICAL, H-2, H-3:		P.O. Box 1:	ATLANTIC HEATING AND COOLING P.O. Box 132 Kill Devil Hills, NC 27948 441-7642		License: 11618 Expires: 12/31/2019		
PARCEL:							
PIN:	988513134278	3		Parcel Number:	008357	000	
Address:	3000 VA DAR	E TRL N KILL D	EVIL HILLS				
				Zonir	ng:		
Addition:	VIRGINIA DAF	RE SHORES		Block	c: 9	Lot(s):	4
Legal Desc	cription:						
FEES:		Paid	Due				
Mechanical Permit Fee		\$150.00	\$0.00				
	Totals :	\$150.00	\$0.00				

PROJECT DESCRIPTION: HVAC changout

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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	Ν	
OCCUPANCY TYPE	One & Two Family Dwelling	

REQUIRED INSPECTIONS

Final

CONDITIONS

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Issued By: Magg
Contractor or Authorized Agent: 125/19 Date: 6/25/19

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	285672	2		Receipt #
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11=21	61/92/90	1		Date / Time
				PLANNING
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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

MC2019-198 PROJECT NAME: SITE ADDRESS: 1725 VIRGINIA AVE KILL DEVIL HILLS

MECHANICAL ISSUED: 06/28/2019

EXPIRES: 12/25/2019

APPLICANT:	MORGAN, MICHAEL PAUL 2404 SOUTH VA DARE TR Kill Devil Hillsl, NC 27948 R A HOY PO Box 265 Kitty Hawk, NC 27949			OWNER:	MORGAN, MICHAEL PAUL 2404 SOUTH VA DARE TR Kill Devil Hillsl, NC 27948			
MECHANICAL:						License: 13050 Expires: 12/31		
PARCEL:								
PIN:	988409160149	9		Parcel Number:	0284490	000		
Address:	1725 VIRGINI	A AVE KILL DE	VIL HILLS					
				Zon	ing:			
Addition:	CROATAN SH	ORES SUBDIV		Bloc	k: 16	Lot(s):	6	
Legal Desc	ription:							
EES:		Paid	Due					
Mechanical Perr	nit Fee	\$150.00	\$0.00					
47.944	Totals :	\$150.00	\$0.00					

PROJECT DESCRIPTION: HVAC changout

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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

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

APPLICANT:	Solomon, Gloria 213 Chapel Drive LAKE JUNALUSKA, NC 28745		(OWNER:	Solomon, Gloria 213 Chapel Drive LAKE JUNALUSKA, NC 28745		
H-3, CLASS I:		Beach Air F PO Box 10 Manteo, No 252-216-75	27954	ooling	License: 29768 Expires: 12/31/2019		
PARCEL:							
PIN:	987516739	705		Parcel Number:	000321000		
Address:	3302 BAY I	OR KILL DEVIL HIL	LS				
				Zon	ing:		
Addition:	ORVILLE B	EACH WEST		Blog	ck: 0 Lot(s): 243		
Legal Descr	ription:						
FEES:		Paid	Due				
Mechanical Pern	nit Fee	\$150.00	\$0.00				
	Totals :	\$150.00	\$0.00				
PROJECT DESC	RIPTION: C/O	2 Ton HVAC System	n				
			DETAIL	S			
Permit							
Name		Value					
PURPOSE		Residential Repair/Remodel			215-		
CONSTRUCTIO		6449.00					
CONSTRUCTIO		V		JUN 1	2 2019		
FLOOD ZONE		X					
NATURAL GAS	SIGNOFF	N		100	H17		

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MC2019-182 PROJECT NAME: Solomon HVAC SITE ADDRESS: 3302 BAY DR KILL DEVIL HILLS

MECHANICAL ISSUED: 06/12/2019

EXPIRES: 12/09/2019

Date: 6-12-19

REQUIRED INSPECTIONS

Final

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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:

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Contractor or Authorized Agent: ____

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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

MECHANICAL MC2019-187 ISSUED: 06/13/2019 **PROJECT NAME:** SITE ADDRESS: 907 CROATAN HWY S KILL DEVIL HILLS EXPIRES: 12/10/2019 APPLICANT: OUTER BANKS PRESBYTERIAN OWNER: OUTER BANKS PRESBYTERIAN PO BOX 2199 PO BOX 2199 **KILL DEVIL HILLS, NC 27948** KILL DEVIL HILLS, NC 27948 License: 12643 Expires: 12/31/2019 OUTER BANKS HEATING AND COOLING H3, CLASS 1: P.O. Box 1415 Nags Head, NC 27959 441-1740 PARCEL: Parcel PIN: 988308886310 008529000 Number: 907 CROATAN HWY S KILL DEVIL HILLS Address: Zoning: 1-4 & 7-10 KILL DEVIL HILLS REALTY CORP Addition: Lot(s): Block: 3 PT OF 5 Legal Description: FEES: Paid Due Mechanical Permit Fee \$150.00 \$0.00 Totals : \$150.00 \$0.00

PROJECT DESCRIPTION: HVAC changout

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JUN 1 3 2019 2.

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MC2019-187 PROJECT NAME: SITE ADDRESS: 907 CROATAN HWY S KILL DEVIL HILLS

MECHANICAL ISSUED: 06/13/2019

EXPIRES: 12/10/2019

Permit	
Name	Value
PURPOSE	Commercial Repair/Remodel
CONSTRUCTION COST	6590.64
CONSTRUCTION TYPE	111
FLOOD ZONE	AE
BASE FLOOD ELEVATION	8
NATURAL GAS SIGNOFF	Ν
OCCUPANCY TYPE	Assembly

REQUIRED INSPECTIONS

Final

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CONDITIONS

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All provisions of Laws and Ordinan specified herein or not. The grantin	nces governing this type of ng of a permit does not pre	and know the same to be true and correct. work will be complied with whether sume to give authority to violate or cancel ction or the performance of construction.
Contractor or Authorized Agent:	Jonah	Date: 4-13-19

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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

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

EXPIRES: 12/10/2019

APPLICANT:	Mauck, Douglas 8308 University PL Henrico, VA 23229 804-441-3892			OWNER:	Mauck, Dougl 8308 Universi Henrico, VA 2 804-441-3892	ty PL 3229	
MECHANICAL	H-3, CLASS 1:	8788 Cara	DLERS OBX atoke Hwy , NC 27941 3945			license: 2659 Expires: 12/3	-
PARCEL:							
PIN:	98930907332	3B4		Parcel Number:	0029750	000	
Address:	1219 VA DAR	E TRL S KILL	DEVIL HILLS				
				Zonii	ng:		
Addition:				Block	k: 5	Lot(s):	UNIT B-4 LT 11-12
Legal Desc	ription:						
FEES:		Paid	Due				
Mechanical Perr	nit Fee	\$150.00	\$0.00				
mennes militarialitinature on takestellitin ann otherholmerenge	Totals :	\$150.00	\$0.00				

PROJECT DESCRIPTION: Replace air handler only

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JUN 1 3 2019

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MC2019-186

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PROJECT NAME: SITE ADDRESS: 1219 VA DARE TRL S KILL DEVIL HILLS

MECHANICAL ISSUED: 06/13/2019

EXPIRES: 12/10/2019

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

Final

CONDITIONS

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

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

EXPIRES: 12/09/2019

APPLICANT:	JOHN PETERS 509 W WILKINSON S Kill Devil Hills, NC 279			OWNER:	JOHN PETER 509 W WILKII Kill Devil Hills	NSON ST	
MECHANICAL:		R A HOY PO Box 26 Kitty Hawk,				License: 1305 Expires: 12/3	
PARCEL:							
PIN:	987520819929			Parcel Number:	0006960	000	
Address:	509 WILKINSON	N ST W KILL	EVIL HILLS				
				Zoni	ng:		
Addition:	VIRGINIA DARE	E SHORES		Bloc	k: 67	Lot(s):	16-18
Legal Desci	ription:						
FEES:		Paid	Due				
Mechanical Perr	nit Fee	\$150.00	\$0.00				
	Totals :	\$150.00	\$0.00				
PROJECT DESC	RIPTION: HVAC CH	ANGE OUT					
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						-	. *
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JUN 1 2 2019

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MC2019-184

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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

Final

CONDITIONS

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All provisions of Laws and Ordinand specified herein or not. The granting	ces governing this type g of a permit does not pr	on and know the same to be true and correct. of work will be complied with whether resume to give authority to violate or cancel uction or the performance of construction.
Contractor or Authorized Agent:	RollGellfe	Date: 6/12/19

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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

MC2019-176 PROJECT NAME:	Lewis HVA	c				MECHANICAL ISSUED: 06/06/2019
SITE ADDRESS:	1718 WYAN	IDOTTE ST KILL D	EVIL HILLS			EXPIRES: 12/03/2019
93	wis, Mary 15 Penshurs			OWNER:		ny shurst Trce TTE, NC 28210
CF	ARLOTTE,	NC 28210			CHARLO	TTE, NG 20210
H3, CLASS 1:		P.O. Box	d, NC 27959	G AND COOLING	3	License: 12643 Expires: 12/31/2019
PARCEL:						
PIN:	98840926	60409		Parcel Number:	0027	715000
Address:	1718 WY	ANDOTTE ST KILL	DEVIL HILLS	Zoniz		
Addition:	HIGH VIE	W - HEDRICKS AD	D	Zonir Block	-	Lot(s): 23
Legal Descripti			-			
FEES:		Paid	Due			
Mechanical Permit I	Fee	\$150.00	\$0.00			
	Totals	: \$150.00	\$0.00			
PROJECT DESCRIP	TION: C/C	0 2.5 Ton HVAC He	at Pump			
			DETAIL	S		
Permit						FILE
Name		Value				1 2 4
PURPOSE		Residential Repair/Remodel				JUN 1 3 2019
CONSTRUCTION		3465.00				
CONSTRUCTION	TYPE	V				VC BILT
FLOOD ZONE		х				and the substant
NATURAL GAS SI	GNOFF	N				

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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

CONDITIONS

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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

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JUN 1 8 2019

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

EXPIRES: 12/07/2019

APPLICANT:	IT: Zawojski, Stephen 11388 Oak Grove Rd GRAND HAVEN, MI 49417			OWNER:	Zawojski, Stephen 11388 Oak Grove Rd GRAND HAVEN, MI 49417			
MECHANICAL:		American F P.O. Box 8 nags head, 252-305-53	nc 27959			License: 29031 Expires: 12/31/2019		
PARCEL:								
PIN:	988414236609	Э		Parcel Number:	026956	000		
Address:	1504 KETCH I	N KILL DEVIL	HILLS					
				Zon	ing:			
Addition:	FIRST FLIGH	TVLG PH A SEC	3	Bloc	ck: 0	Lot(s): 13		
Legal Desc	ription:							
FEES:		Paid	Due					
Mechanical Perr	mit Fee	\$150.00	\$0.00					
	Totals :	\$150.00	\$0.00					

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Page 1 of 2

PAID

MC2019-181 PROJECT NAME: Zawojski HVAC SITE ADDRESS: 1504 KETCH LN KILL DEVIL HILLS

EXPIRES: 12/07/2019

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

REQUIRED INSPECTIONS

DETAILS

Final

CONDITIONS

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Issued By: **Contractor or Authorized Agent:** Date:

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Birthplace Aviation	S. S.	Ki Phone: 252	PO BOX 171 Il Devil Hills, NC 2-449-5318 Fa	27948	4102	JUN 17 2019
20 AVIation	out	Planning	and Inspectio	on Depar	tment	
EL2019-056						ELECTRICAL ISSUED: 06/12/2019
	ROW 1811 S VA	DARE TRL Kill	Devil Hills			EXPIRES: 12/09/2019
:	CHARTER COMMUI 2400 S. Va. Dare Tr. KILL DEVIL HILLS, N		OW	NER:	P O BO 102 Tov	OF KILL DEVIL HILLS X 1719 wn Hall Drive EVIL HILLS, NC 27948
ELECTRICAL:		BEACON E UNKNOWN Wanchese, 489-5680	1			License: 28692-1 Expires: 03/03/2020
PARCEL:						-
PIN:	ROW 9893131	46939		Parcel Number:		
Address:	ROW 1811 S \	A DARE TRL K	ill Devil Hills			
Addition:				Zoni Bloc	-	
Legal Descrip	otion: ROW at 1	811 S VDT		BIOC	.	Lot(s):
FEES:		Paid	Due			
Electrical Permit F	ee	\$150.00	\$0.00			
	Totals :	\$150.00	\$0.00			
PROJECT DESCR	IPTION: INSTAL	L METER/DISCO	ONNECT/RISER	FOR POW	ER SUP	PLY CABINET
Permit			DETAILS			
Name	Va	lue				
ZONING DISTRI	CT OIF	२				
PURPOSE		mmercial New				
CONSTRUCTIO	N COST 500	0.00				

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BASE FLOOD ELEVATION 11

VE

FLOOD ZONE

Polk.

i

EL2019-056	
PROJECT NAME:	
SITE ADDRESS: ROW 1811 S VA DARE TRL	Kill Devil Hills

EXPIRES: 12/09/2019

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: 6/1 Date: **Contractor or Authorized Agent**

Printed by : Marty Shaw on: 06/12/2019 01:48 PM



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

MC2019-189

Town of Kill Devil Hills

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

JUN 1 9 2019

- 1 -

Planning and Inspection Department

x · _ . .

MECHANICAL ISSUED: 06/19/2019

EXPIRES: 12/16/2019

APPLICANT:	Dianne Webb P. O. Box 1037 BOWLING GREEN, 540-903-1100	VA 22427		OWNER:	Dianne Webb P. O. Box 103 BOWLING GI 540-903-1100	37 REEN, VA 22427	
MECHANICAL,	H-3, I:	P.O. Box 7	HEATING AND 07 , NC 27949	COOLING		License: 18066 Expires: 12/31/2019	
PARCEL:							
PIN:	987408991854	4		Parcel Number:	0007750	004	
Address:	2301 BAY DR	KILL DEVIL HIL	LS				
				Zoni	ng:		
Addition:	VIRGINIA DAI	RE SH BLK 77 R	H BLK 77 RECOMB BI		k: 77	Lot(s): 4	ŧ
Legal Des	cription:						
EES:		Paid	Due				
Mechanical Per	mit Fee	\$150.00	\$0.00				
	Totals :	\$150.00	\$0.00				

Printed by : Jordan Blythe on: 06/19/2019 09:42 AM

MC2019-189

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

EXPIRES: 12/16/2019

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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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:

Printed by : Jordan Blythe on: 06/19/2019 09:42 AM



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

	53 ME: MENENDEZ FE SS: 511 FIRST ST V		ILLS			ISSUE	IG PERMIT D: 06/19/2019 ES: 12/16/2019
APPLICANT:	Jillian Menedez 511 W First St KILL DEVIL HILLS, I 252-489-3294	NC 27948		OWNER:	Jillian Meneo 511 W First KILL DEVIL 252-489-329	St HILLS, NC 2794	8
GENERAL:		Self UNKNOWN UNKNOWN 917-862-90	N, XX 00000			License: Unlic Expires: 12/3	
PARCEL:							
PIN:	98840925103	7		Parcel Number:	003338	3000	
Address:	511 FIRST ST	W KILL DEVIL	HILLS				
				Zonii	ng:		
Addition:	FIRST FLIGH	T VILLAGE SEC	1	Block	k: 0	Lot(s):	56
Legal Des	cription:						
FEES:		Paid	Due				
Fence		\$100.00	\$0.00				
	Totals :	\$100.00	\$0.00				

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ZP2019-053

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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	Ν
CAMA EXEMPTION	Ν
FLOOD ZONE	AE
BASE FLOOD ELEVATION	8.3
PURPOSE	Residential Accessory
CONSTRUCTION COST	1000.00
LOT COVERAGE	32.60
CULVERT	Ν
DRIVEWAY INVERT 2	Ν
	REQUIRED INSPECTIONS
Stringline	Final
	CONDITIONS
This permit becomes null and	d void if work or construction authorized is not commenced within 6 months or if construction
r work is suspended for a period	od of 12 months at any time after work has started.

e provisions of any other state/local law regulating construction or the performance of construction	1.
sued By: And And	
ontractor or Authorized Agent 1.11 Dete: 4/19/19	
Autorized Agena Still Style States States	

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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

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JUN 19 2019

Tunner Milberghad

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

APPLICANT:	Cernetich, Greg 302 Woodmont Rd JOHNSTOWN, PA 1 814-659-8472	5905	O	WNER:	Cernetich, G 302 Woodm JOHNSTOV 814-659-847	ont Rd VN, PA 15905	
MECHANICAL	H-3 CLASS 1:	HARCO AI PO BOX 3 KITTY HAV 207-1371				License: 3019 Expires: 12/3	
PARCEL:							
PIN:	988419714174	ł		Parcel Number:	003903	3000	
Address:	112 AVIATION	AVE E KILL DI	EVIL HILLS				
				Zonii	ng:		
Addition:	KITTY HAWK	SHORES - REV	ISED	Block	c: 39	Lot(s):	6
Legal Desc	ription:						
FEES:		Paid	Due				
Mechanical Per	mit Fee	\$150.00	\$0.00				
	Totals :	\$150.00	\$0.00				

PROJECT DESCRIPTION: C/O 1.5 Ton HVAC System

Printed by : CTHUMAN on: 06/17/2019 04:16 PM

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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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 stateflocal law regulating construction or the performance of construction.

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Issued By:

Contractor or Authorized Agent:

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Page 2 of 2

Date: _ 6 - 19 - 19

TO PTH CA	ROLINP	Kill Phone: 252-	PO BOX 1 Devil Hills, N 449-5318		102	JUN 2	1 2019
MC2019-19 PROJECT NAM SITE ADDRES	90 ME: RUEBUSCH HVA S: 2018 EDENTON S	AC ST ST KILL DEV	'IL HILLS			ISSUE	CHANICAL ED: 06/21/2019 RES: 12/18/2019
APPLICANT:	MICHAEL RUEBUSCI 104 PINTAIL DR suffolk, va 23435 757-538-9498	4	0'	WNER:	MICHAEL R 104 PINTAII suffolk, va 2 757-538-949	L DR 3435	
H-3, CLASS I:		Beach Air He PO Box 1047 Manteo, NC 252-216-754	27954	bling		License: 2976 Expires: 12/3	
PARCEL:					001278		
PARCEL:	987408989337			Parcel Number:	001270	8000	
		I ST ST KILL DI	EVIL HILLS		001270	8000	
PIN:		I ST ST KILL DI	evil Hills			8000	
PIN:			EVIL HILLS	Number:	g:	8000 Lot(s):	833
PIN: Address:	2018 EDENTON AVALON BEAC		evil Hills	Number: Zonin	g:		833
PIN: Address: Addition: Legal Desc	2018 EDENTON AVALON BEAC		EVIL HILLS Due	Number: Zonin	g:		833
PIN: Address: Addition:	2018 EDENTON AVALON BEAC ription:	H ANNEX 2 & 3		Number: Zonin	g:		833

PROJECT DESCRIPTION: HVAC CHANGE OUT

Printed by : Jordan Blythe on: 06/21/2019 09:10 AM

MC2019-190

1.11

PROJECT NAME: RUEBUSCH HVAC SITE ADDRESS: 2018 EDENTON ST ST KILL DEVIL HILLS

MECHANICAL ISSUED: 06/21/2019

EXPIRES: 12/18/2019

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

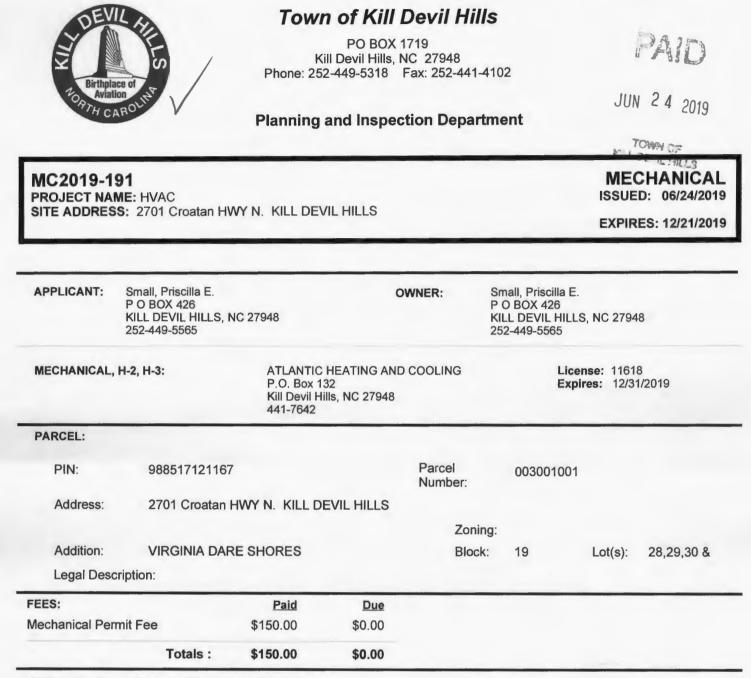
Final

CONDITIONS

* 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 All provisions of Laws and Ordinances governing this type of work will be co specified herein or not. The granting of a permit does not presume to give au the provisions of any other state/local law regulating construction or the per	omplied with whether uthority to violate or cancel
Issued By: the state of the sta	
Contractor or Authorized Agent:	Date: 6-21-19

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PROJECT DESCRIPTION: C/O 1.5 Ton HVAC System

Printed by : CTHUMAN on: 06/24/2019 08:53 AM

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MC2019-191 PROJECT NAME: HVAC SITE ADDRESS: 2701 Croatan HWY N. KILL DEVIL HILLS

EXPIRES: 12/21/2019

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

DETAILS

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.

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Date:

Contractor or Authorized Agent:

Issued By:

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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 PROJECT NAME: SITE ADDRESS: 301 WILBUR CT KILL DEVIL HILLS MECHANICAL ISSUED: 06/06/2019

EXPIRES: 12/03/2019

APPLICANT:	Caniglia, David 726 Rextur Dr. AKRON, OH 44319 330-414-9958		c	OWNER:	INER: Caniglia, David 726 Rextur Dr. AKRON, OH 44319 330-414-9958				
H-3, CLASS I:			Dogwood Trail hores, NC 2794	49	License: 30070 Expires: 12/31/2019				
PARCEL:									
PIN:	988405282722	2		Parcel Number:	002125	000			
Address:	301 WILBUR		HILLS						
				Zoni	ng:				
Addition:	WRIGHT'S SH	IORES		Bloc	k: 0	Lot(s): 166			
Legal Desc	cription:								
EES:		Paid	Due						
Mechanical Permit Fee		\$150.00	\$0.00						
. Bad nako ana kata kata kata kata kata kata kata	Totals :	\$150.00	\$0.00						

PROJECT DESCRIPTION: HVAC changout

JUN 2 4 2019

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3

SITE ADDRESS: 301 WILBUR CT KILL DEVIL HILLS

EXPIRES: 12/03/2019

DETAILS Permit Value Name PURPOSE Residential Repair/Remodel 6684.00 CONSTRUCTION COST V CONSTRUCTION TYPE FLOOD ZONE Х NATURAL GAS SIGNOFF N OCCUPANCY TYPE One & Two Family Dwelling **REQUIRED INSPECTIONS** Final CONDITIONS This permit becomes null and void if work or construction authorized is not commenced within 6 months or if construction or work is suspended for a period of 12 months at any time after work has started. I hereby certify that I have read and examined this application and know the same to be true and correct. All provisions of Laws and Ordinances governing this type of work will be complied with whether specified herein or not. The granting of a permit does not presume to give authority to violate or cancel the provisions of any other state/local law regulating construction or the performance of construction. Issued By:

Contractor or Authorized Agent

Printed by : Marty Shaw on: 06/06/2019 01:08 PM

Page 2 of 2

Date: 6 24 19



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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
PROJECT NAME:
SITE ADDRESS: 1102 Cambridge Rd 302-C Kill Devil Hills
EXPIRES: 12/07/2019
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-SMI 330 North I Southern S 252-261-52	49	License: 30070 Expires: 12/31/2019			
PARCEL:							
PIN:	98830648123811			Parcel Number:			
Address:	1102 Cambrid	ge Rd 302-C Kil	I Devil Hills				
				Zoni	ng:		
Addition:				Bloc	k:	Lot(s):	
Legal Desc	cription: 98830648	123811					
FEES:		Paid	Due				
Mechanical Permit Fee		\$150.00	\$0.00				
Revisión de active de active des sur de la desta de la desta de active de la desta de la desta de la desta de s	Totals :	\$150.00	\$0.00				

PROJECT DESCRIPTION: HVAC changout

JUN 2 4 2019

Printed by : Marty Shaw on: 06/10/2019 08:24 AM

MC2019-178 PROJECT NAME: SITE ADDRESS: 1102 Cambridge Rd 302-C Kill Devil Hills

EXPIRES: 12/07/2019

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

REQUIRED INSPECTIONS

Final

2

CONDITIONS

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Issued By: Contractor or Authorized Agent:

Printed by : Marty Shaw on: 06/10/2019 08:24 AM

Page 2 of 2

Date: 6/24/19



SITE ADDRESS: 1727 SOBLE DR KILL DEVIL HILLS

MC2019-179 PROJECT NAME:

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4

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

MECHANICAL ISSUED: 06/10/2019

EXPIRES: 12/07/2019

APPLICANT:	Blondin, Dave 6510 Bluebill LN ALEXANDRIA, VA 22 571-214-9464	307	C	OWNER:	Blondin, Dav 6510 Bluebill ALEXANDRI 571-214-946	LN A, VA 22307		
MECHANICAL, H-2, H-3:		P.O. Box 1:	ATLANTIC HEATING AND COOLING P.O. Box 132 Kill Devil Hills, NC 27948 441-7642			License: 11618 Expires: 12/31/2019		
PARCEL:								
PIN:	988410472412			Parcel Number:	002921	000		
Address:	1727 SOBLE D	R KILL DEVIL	HILLS					
				Zoni	ng:			
Addition:	HEDRICKS AD	D-PAR B CRO	ATAN SH	Bloc	k: 0	Lot(s): 5		
Legal Dese	cription:							
EES:		Paid	Due					
Mechanical Per	rmit Fee	\$150.00	\$0.00					
Autor was all strange adapted "Submitted about a large ad	Totals :	\$150.00	\$0.00					

PROJECT DESCRIPTION: HVAC changout

JUN 1 0 2019 ·

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Page 1 of 2

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

Planning and Inspection Department

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

EXPIRES: 06/15/2019

APPLICANT:	MR. STUART M GAI 39422 Glenn Glade Chapel Hill, NC 2751	Ct	c	OWNER:	MR. STUAR 39422 Glenn Chapel Hill, M	Glade Ct	
MECHANICAL:		PO BOX 33	VK, NC 27949	ιL		License: 27675 Expires: 12/31/	
PARCEL:							
PIN:	988312856365	5		Parcel Number:	008221	007	
Address:	500 HOLLY ST	TW KILL DEVIL	HILLS				
				Zoni	ng:		
Addition:	KILL DEVIL BE	EACH EXTENDE	Ð	Bloc	k: Y	Lot(s):	7
Legal Desc	ription:						
FEES:		Paid	Due				
Mechanical Per	mit Fee	\$150.00	\$0.00				
	Totals :	\$150.00	\$0.00				

PROJECT DESCRIPTION: Replace heat pump system

JUN 1 1 2019

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Printed by : Jordan Blythe on: 12/17/2018 03:32 PM

MC2018-362 PROJECT NAME: Gans HVAC SITE ADDRESS: 500 HOLLY ST W KILL DEVIL HILLS

EXPIRES: 06/15/2019

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

REQUIRED INSPECTIONS

Final

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CONDITIONS

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All provisions of Laws and Ordina specified herein or not. The granti	d examined this application and know the nces governing this type of work will be o ng of a permit does not presume to give a ocal law regulating construction or the pe	complied with whether authority to violate or cancel
-	N.W. 7 ramin	Date: 6 -12 - 19

P P P P P P P P P P P P P P P P P P P	ROLINA	K Phone: 25	PO BO) ill Devil Hills 2-449-5318	I Devil Hi x 1719 5, NC 27948 Fax: 252-441	-4102	JUI	PAID N 6 2019
	58 ME: CHORY HVAC S: 901 MEMORIAL	BLVD N KILL D	DEVIL HILLS	3		ISSUE	CHANICAL D: 06/06/2019 ES: 12/03/2019
APPLICANT:	CHORY, JOSEPH & 307 DANCES BAY R ELIZABETH CITY, N	D		OWNER:	307 DANCE	SEPH & CYNTH S BAY RD CITY, NC 27909	
MECHANICAL:		R A HOY PO Box 26 Kitty Hawk	5 NC 27949			License: 1305 Expires: 12/3	-
PARCEL:	· · · · · ·						
PIN:	988415720656	1		Parcel Number:	028387	7000	
Address:	901 MEMORIA	L BLVD N KILL	DEVIL HIL	LS			
				Zoni	ng:		
Addition:		SHORES - REV	ISED	Bloc	k: 19	Lot(s):	8
Legal Desci	ription:						
FEES:		Paid	Due				
Martin I D	nit Fee	\$150.00	\$0.00				
Mechanical Pern							

PROJECT DESCRIPTION: HVAC CHANGE OUT

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MC2019-168

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

MECHANICAL ISSUED: 06/06/2019

EXPIRES: 12/03/2019

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	Ν
OCCUPANCY TYPE	One & Two Family Dwelling

REQUIRED INSPECTIONS

Final

CONDITIONS

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

All provisions of Laws and Ordinand	es governing this type of wor of a permit does not presume	e to give authority to violate or cancel
Contractor or Authorized Agent:	Pakalla	Date: 6/6/19

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Y DEV	THE	Tow	Town of Kill Devil Hills PO BOX 1719				PAID		
Birthplan Aviati	N The to sa		ill Devil Hills		-4102		JUN	6 2019	
MTH CA	ROL	Planning	and Inspe	ection Depa	rtment			1010# 1017/101	
	67 ME: BIRDSONG HV S: 3006 VA DARE		VIL HILLS				ISSUE	CHANICAL D: 06/06/2019 ES: 12/03/2019	
APPLICANT:	BIRDSONG, SANDF 520 RIVERVIEW DF SUFFOLK, VA 2343	RIVE		OWNER:	BIRDSON 520 RIVEI SUFFOLK	RVIEW		ER	
MECHANICAL:		R A HOY PO Box 26 Kitty Hawk	5 , NC 27949				nse: 13050 ires: 12/31		
PARCEL:									
PIN:	988513134401	1		Parcel Number:	0029	83001			
Address:	3006 VA DAR	E TRL N KILL D	EVIL HILLS						
				Zon	ing:				
Addition:	VIRGINIA DAF	RE SHORES		Bloc	:k: 9		Lot(s):	1	
Legal Desc	ription:								
FEES:		Paid	Due						
Mechanical Perr	nit Fee	\$150.00	\$0.00						
	Totals :	\$150.00	\$0.00						

PROJECT DESCRIPTION: HVAC CHANGE OUT

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MC2019-167

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PROJECT NAME: BIRDSONG HVAC SITE ADDRESS: 3006 VA DARE TRL N KILL DEVIL HILLS

MECHANICAL ISSUED: 06/06/2019

EXPIRES: 12/03/2019

	I	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	Ν	
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 All provisions of Laws and Ordinances governing this type of work will be conspecified herein or not. The granting of a permit does not presume to give and the provisions of any other state/local law regulating construction or the per- Issued By:	omplied with whether uthority to violate or cancel
Contractor or Authorized Agent: Ratio	Date: 66619

Printed by : Jordan Blythe on: 06/06/2019 08:34 AM



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:	210 1/2 Adams Ave	MS. JENNIFER L GREGG 210 1/2 Adams Ave Alexandria, Va 22301			MS. JENNIFER L GREGG 210 1/2 Adams Ave Alexandria, Va 22301			
MECHANICAL	H-3 CLASS 1:	HARCO AII PO BOX 31 KITTY HAV 207-1371				License: 30194 Expires: 12/31/2	019	
PARCEL:								
PIN:	988517004849	9		Parcel Number:	010213	000		
Address:	332 EDEN ST	ST W KILL DEV	/IL HILLS					
				Zon	ning:			
Addition:	VIRGINIA DA	RE SHORES		Blo	ck: 47	Lot(s):	37-38	
Legal Desc	cription:							
EES:		Paid	Due					
Mechanical Per	mit Fee	\$150.00	\$0.00					
	Totals :	\$150.00	\$0.00					

PROJECT DESCRIPTION: HVAC CHANGE OUT

JUN 6 2019

Printed by : Jordan Blythe on: 06/06/2019 09:41 AM

MC2019-171 PROJECT NAME: GREGG HVAC

SITE ADDRESS: 332 EDEN ST ST W KILL DEVIL HILLS

EXPIRES: 12/03/2019

I

1

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

* 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: Afat & Hawark Date: 6-6-19

Printed by : Jordan Blythe on: 06/06/2019 09:41 AM



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

Planning and Inspection Department



JUN 6 2019

ANA DAVE TALS

Lot(s):

MECHANICAL MC2019-169 ISSUED: 06/06/2019 PROJECT NAME: MAX'S PIZZA HVAC SITE ADDRESS: 1722 N. Croatan Hwy UNKNOWN EXPIRES: 12/03/2019 OLIVOLA, DONALD J **APPLICANT:** OWNER: OLIVOLA, DONALD J P O BOX 364 P O BOX 364 KILL DEVIL HILLS, NC 27948 **KILL DEVIL HILLS, NC 27948 MECHANICAL:** Trademark Heating & Cooling License: 31311 Expires: 12/31/2019 PO Box 2554 Kill Devil Hills, NC 27948 PARCEL: Parcel PIN: 988410373044-7288 Number: Address: 1722 N. Croatan Hwy UNKNOWN Zoning:

Addition: Legal Description: FEES: Paid

FEES:		Paid	Due
Mechanical Permit Fe	Эе	\$150.00	\$0.00
	Totals :	\$150.00	\$0.00

Block:

PROJECT DESCRIPTION: REPLACEMENT OF 3 ROOFTOP UNITS

Printed by : Jordan Blythe on: 06/06/2019 09:19 AM

MC2019-169

5

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	Ν	
OCCUPANCY TYPE	Business	
	REQUIRED INSPECTIONS	
Final		
illinea "Allinea	CONDITIONS	

CONDITIONS

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Printed by : Jordan Blythe on: 06/06/2019 09:19 AM



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

Planning and Inspection Department

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		
APPLICANT:	303 W ARCHDALE L 5008 LUNAR DR kitty hawk, nc 27949	LC	C	WNER:	303 W ARCH 5008 LUNAR kitty hawk, nc	DR		
MECHANICAL	H-3 CLASS 1:	HARCO AII PO BOX 31 KITTY HAV 207-1371				.icense: 3019 E xpires: 12/31		
PARCEL:								
PIN:	988517014683	3		Parcel Number:	0005850	000		
Address:	303 ARCHDAL	ESTW KILL D	EVIL HILLS					
				Zonin	g:			
Addition:	VIRGINIA DAF	RE SHORES		Block	45	Lot(s):	19-20	
Legal Desc	cription:							
FEES:	4 (19.8)	Paid	Due					
Mechanical Per	mit Fee	\$150.00	\$0.00					
	Totals :	\$150.00	\$0.00					

P/41()

JUN 6 2019

Printed by : Jordan Blythe on: 06/06/2019 09:37 AM

MC2019-170

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

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	Ν
OCCUPANCY TYPE	One & Two Family Dwelling

REQUIRED INSPECTIONS

Final

CONDITIONS

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Issued By: Date: 6-6-19 3.7 Harwoo **Contractor or Authorized Agent**

Printed by : Jordan Blythe on: 06/06/2019 09:37 AM



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

Planning and Inspection Department

MC2019-174
PROJECT NAME: CAPT. GEORGE'S HVAC
PROJECT NAME: CAPT. GEORGE'S HVAC SITE ADDRESS: 705 CROATAN HWY S KILL DEVIL HILLS

MECHANICAL ISSUED: 06/06/2019

EXPIRES: 12/03/2019

APPLICANT:	PITCO 1, LLC OV 1956 Laskin Road Va. Beach, Va 23454			OWNER: PITCO 1, LLC 1956 Laskin Road Va. Beach, Va 23454				
MECHANICAL:		R A HOY PO Box 26 Kitty Hawk,				License: 1305 Expires: 12/3	-	
PARCEL:								
PIN:	988308892096	6		Parcel Number:	004309	000		
Address:	705 CROATA	NHWYS KILL D	DEVIL HILLS					
				Zoni	ing:			
Addition:	KILL DEVIL H	ILLS REALTY CO	ORP	Bloc	k: 1	Lot(s):	5 & 6	
Legal Desc	ription:							
FEES:		Paid	Due					
Mechanical Perr	mit Fee	\$150.00	\$0.00					
	Totals :	\$150.00	\$0.00					

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



Printed by : CTHUMAN on: 06/06/2019 12:40 PM

MC2019-174 PROJECT NAME: CAPT. GEORGE'S HVAC SITE ADDRESS: 705 CROATAN HWY S KILL DEVIL HILLS

EXPIRES: 12/03/2019

Permit		DETAILS	
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

- - -

CONDITIONS

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Contractor or Authorized Agent:

Issued By:

Printed by : CTHUMAN on: 06/06/2019 12:40 PM

Page 2 of 2

Date:



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 27 252-619-0077			OWNER:	DAVID HOLL 204 SHILOH Kill Devil Hills 252-619-007	l ST s, NC 27948			
MECHANICAL:		R A HOY PO Box 26 Kitty Hawk,	65 k, NC 27949			License: 13056 Expires: 12/31			
PARCEL:									
PIN:	988513030081	1		Parcel Number:	000992	2000			
Address:	204 SHILOH S	ST KILL DEVIL H	HILLS						
				Zoni	ing:				
Addition:	MOOR SHOR	ES		Bloc	ck: 0	Lot(s):	27		
Legal Desci	ription:								
EES:		Paid	Due						
Mechanical Perm	mit Fee	\$150.00	\$0.00						
	Totals :	\$150.00	\$0.00						

PROJECT DESCRIPTION: HVAC CHANGE OUT

JUN 6 2019

Printed by : Jordan Blythe on: 06/06/2019 12:32 PM

MC2019-173

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

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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Contractor or Authorized Agent:

ted by : Jordan Blythe on: 06/06/2019 12:32 PM

Page 2 of 2

Date: 6



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		o	WNER:	VICENT CURCIO 2111 Galloping Way Vienna, VA 22181			
BUILDING UNL	IMITED:	R A Hoy He PO Box 23 kitty hawk, 252-261-20	nc 27949			License: 18132 Expires: 12/31/2019		
PARCEL:								
PIN:	988411559102	2		Parcel Number:	00276	60000		
Address:	1408 VA DARI	TRLN KILL D	EVIL HILLS					
				Zoni	ng:			
Addition:	SUBDIVISION	- NONE		Bloc	k: 0	Lot(s): 0		
Legal Dese	cription:							
FEES:		Paid	Due					
Mechanical Per	mit Fee	\$150.00	\$0.00					
-	Totals :	\$150.00	\$0.00					

PROJECT DESCRIPTION: C/O 2 Ton HVAC System

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JUN 6 2019

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Printed by : CTHUMAN on: 06/06/2019 12:33 PM

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

Issued By:

CONDITIONS

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Contractor or Authorized Agent:

Printed by : CTHUMAN on: 06/06/2019 12:33 PM

Page 2 of 2

Date:

GEORGE & CO.	MECHAN ISSUED: 10/1 EXPIRES: 04/1
GEORGE & CO. OWNER: JOURNEE, RICHAR	EXPIRES: 04/1
105 Beau Pkwy309 THELMAR LANElizabeth City, NC 27909PORTSMOUTH, VA335-2596PORTSMOUTH, VA	IE
	se: 31510 s: 12/31/2018
PARCEL:	
PIN: 988405098838 Parcel 003058000	
Address: 601 AVALON DR W KILL DEVIL HILLS	
Zoning	
AVALON BEACH	.ot(s): 160
FEES: Paid Due Mechanical Permit Fee \$150.00	
\$0.00	
PROJECT DESCRIPTION: C/O HVAC sustant	
C/O HVAC system including duct work.	
Permit DETAILS	
Name Value	
Posid	
CONSTRUCTION COST 9250.00	
PASE FLOOR	
SIGNO-	
by : CTHUMAN ON: 10/19/2018 08:34 AM	
10/19/2018 08:34 AM	

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: Date: 6.6.19 Contractor or Authorized Agent: Michael



- 1

Town of Kill Devil Hills

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

JUN 5 2019

-12:0

Planning and Inspection Department

TOTAL SALE

MC2019-157 PROJECT NAME: SITE ADDRESS: 201 FOURTH ST W KILL DEVIL HILLS

MECHANICAL ISSUED: 06/03/2019

EXPIRES: 11/30/2019

APPLICANT:	Huggins, Haley 201 WEST Fourth S Kill Devil Hillsl, NC 2		c	OWNER:	Huggins, Hal 201 WEST Fi Kill Devil Hills	ourth ST	
MECHANICAL:		P.O. Box 24	ONS HEATING 44 pr, NC 27964	& COOLING		License: 19091 Expires: 12/31/2019	
PARCEL:							
PIN:	988406288233	3		Parcel Number:	002210	000	
Address:	201 FOURTH	ST W KILL DEV	IL HILLS				
				Zoni	ng:		
Addition:	WRIGHT'S SH	IORES SEC 2		Block	k: 0	Lot(s): 1	
Legal Descr	iption:						
FEES:		Paid	Due				
Mechanical Perm	nit Fee	\$150.00	\$0.00				
Annality of the first state of the state of	Totals :	\$150.00	\$0.00				

PROJECT DESCRIPTION: HVAC REPLACEMENT

Printed by : Marty Shaw on: 06/03/2019 01:16 PM

MC2019-157 PROJECT NAME: SITE ADDRESS: 201 FOURTH ST W KILL DEVIL HILLS

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

4

CONDITIONS

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Issued By: Moto
Contractor or Authorized Agent: Lacu Date: 0-5-19

Printed by : Marty Shaw on: 06/03/2019 01:16 PM



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



Planning and Inspection Department

JUN 5 2019

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

APPLICANT:	KARIN FISHER 21 VILLAGE SQ HARRISONBURG, V				WNER: KARIN FISHER 21 VILLAGE SQ HARRISONBURG, VA 22802			
MECHNICAL H	I-3:	P.O. Box 2	ills, NC 27948	ICE, INC		License: 27257 Expires: 12/31		
PARCEL:								
PIN:	987520900947	7		Parcel Number:	000715	000		
Address:	538 ARCHDAI	LE ST W KILL D	EVIL HILLS					
				Zoni	ng:			
Addition:	VIRGINIA DAF	RE SHORES		Bloc	k: 70	Lot(s):	31-36	
Legal Des	cription:							
EES:		Paid	Due					
Mechanical Per	rmit Fee	\$150.00	\$0.00					
	Totals :	\$150.00	\$0.00					

PROJECT DESCRIPTION: HVAC CHANGE OUT

Printed by : Jordan Blythe on: 06/05/2019 11:42 AM

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MC2019-165

PROJECT NAME: FISHER HVAC SITE ADDRESS: 538 ARCHDALE ST W KILL DEVIL HILLS

MECHANICAL ISSUED: 06/05/2019

EXPIRES: 12/02/2019

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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the provisions of any other state/local law regulating construction or the performance of construction.
the provisions of any other statehood at regulating construction of the performance of construction
Issued By:
Contractor or Authorized Agent: Muhan Date: 65-2019

Printed by : Jordan Blythe on: 06/05/2019 11:42 AM



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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

	66 ME: Beckford HVAC SS: 108 VEELEE DR KILL DEVIL HILLS		MECHANICAL ISSUED: 06/05/2019 EXPIRES: 12/02/2019
APPLICANT:	BECKFORD, ANDREW J 2600 LACYWOOD LANE	OWNER:	BECKFORD, ANDREW J 2600 LACYWOOD LANE

SANDSTON, VA 23150			SANDSTON, VA 23150				
MECHANICAL:		American F P.O. Box 8 nags head, 252-305-53	nc 27959			icense: 29031 xpires: 12/31/	2019
PARCEL:							
PIN:	988415539905	5		Parcel Number:	0034910	00	
Address:	108 VEELEE	OR KILL DEVIL	HILLS				
				Zoning:			
Addition:	MEMORIAL O	VERLOOK		Block:	0	Lot(s):	32
Legal Descrip	otion:						
FEES:		Paid	Due				
Mechanical Permi	t Fee	\$150.00	\$0.00				
	Totals :	\$150.00	\$0.00				

PROJECT DESCRIPTION: C/O 2 Ton HVAC System

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JUN 5 2019

Printed by : CTHUMAN on: 06/05/2019 12:15 PM

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:

F 1.

Contractor or Authorized Agent:

Printed by : CTHUMAN on: 06/05/2019 12:15 PM

Page 2 of 2

____ Date: 6/5/ 19

DEV	LAD	Tow	n of Kill	Devil Hill	s		- L -
Birthplace of			PO BOX ill Devil Hills, I 2-449-5318		102	6	
North CA	ion LINA					JUN	5 2019
THC	ано	Planning	and Inspec	tion Depart	ment		त्राम् स् इन्द्रे स्थिति
	64 ME: PRICE HVAC S: 105 SPORTSMA	N DR W KILL D	DEVIL HILLS			ISSU	CHANICAL ED: 06/05/2019 RES: 12/02/2019
APPLICANT:	Barry Price P. O. Box 1252 Kill Devil Hillsl, NC 2	7948	c		Barry Price P. O. Box 12 Kill Devil Hill	252 Isl, NC 27948	
PLUMBING, ME	CHANICAL:	P.O. Box 2	ER, NC 27941			License: 111 Expires: 12/	
PARCEL:							
PIN:	988517107607	,		Parcel Number:	00173	3000	
Address:	105 SPORTSM	MAN DR W KILL	DEVIL HILLS	6			
				Zoning	g:		
Addition:	AVALON BEA	СН		Block:	0	Lot(s):	97
Legal Desc	ription:						
FEES:		Paid	Due				
	1	\$150.00	\$0.00				
Mechanical Per	mit Fee						

PROJECT DESCRIPTION: HVAC CHANGE OUT

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Printed by : Jordan Blythe on: 06/05/2019 09:22 AM

MC2019-164

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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	Ν	
OCCUPANCY TYPE	One & Two Family Dwelling	

REQUIRED INSPECTIONS

Final

CONDITIONS

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the provisions of any other state/local law regulating construction or the performance of construction. Issued By:
Contractor or Authorized Agent: Kung Bh Date: 65-19

Printed by : Jordan Blythe on: 06/05/2019 09:22 AM



PO BOX 1719 Kill Devil Hills, NC 27948 Phone: 252-449-5318 Fax: 252-441-4102 210

JUN 5 2019

Planning and Inspection Department

	62 ME: OBX Baptist HV SS: 216 FIRST ST W		LLS			ISSUE	CHANICAL D: 06/05/2019 ES: 12/02/2019
APPLICANT:	OUTER BANKS BAN J H ROBB JR, R J P FIRST STREET KILL DEVIL HILLS, I	c	OWNER:	OUTER BANKS BAPTIST MISSION J H ROBB JR, R J PIERCE, FIRST STREET KILL DEVIL HILLS, NC 27948			
MECHNICAL H	-3:	P.O. Box 27	lls, NC 27948	ICE, INC		License: 27257 Expires: 12/31	
PARCEL:							
PIN:	988410359600	0		Parcel Number:	002743	3000	
Address:	216 FIRST ST	W KILL DEVIL	HILLS				
				Zoni	ng:		
Addition:	SUBDIVISION	- NONE		Bloc	k: 0	Lot(s):	0
Legal Des	cription:						
FEES:		Paid	Due				
Mechanical Per	rmit Fee	\$150.00	\$0.00				
	Totals :	\$150.00	\$0.00				

Printed by : CTHUMAN on: 06/05/2019 08:07 AM

MC2019-162 PROJECT NAME: OBX Baptist HVAC SITE ADDRESS: 216 FIRST ST W KILL DEVIL HILLS

EXPIRES: 12/02/2019

Permit Value Name PURPOSE Commercial Repair/Remodel CONSTRUCTION COST 6500.00 CONSTRUCTION TYPE 111 FLOOD ZONE AE BASE FLOOD ELEVATION 9 NATURAL GAS SIGNOFF N

REQUIRED INSPECTIONS

Final

Issued By:

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.

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Contractor or Authorized Agent:

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Page 2 of 2

Date: 6-5-2010

DETAILS



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

JUN 5 2019

Planning and Inspection Department

MECHANICAL MC2019-163 ISSUED: 06/05/2019 PROJECT NAME: ETHERIDGE HVAC SITE ADDRESS: 101 AIRSTRIP RD W KILL DEVIL HILLS EXPIRES: 12/02/2019 ETHERIDGE, ROY P O BOX 185 ETHERIDGE, ROY APPLICANT: **OWNER:** P O BOX 185 POWELLS POINT, NC 27966 POWELLS POINT, NC 27966 PLUMBING, MECHANICAL: NORRIS MECHANICAL License: 11100 P.O. Box 217 Expires: 12/31/2019 HARBINGER, NC 27941 252-491-2673 PARCEL: Parcel PIN: 988312878337 004337005 Number: 101 AIRSTRIP RD W KILL DEVIL HILLS Address: Zoning: Addition: KILL DEVIL HILLS REALTY CORP 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

Printed by : Jordan Blythe on: 06/05/2019 09:17 AM

MC2019-163 PROJECT NAME: ETHERIDGE HVAC

SITE ADDRESS: 101 AIRSTRIP RD W KILL DEVIL HILLS

EXPIRES: 12/02/2019

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: Humbhan Date: 6-5-19

Printed by : Jordan Blythe on: 06/05/2019 09:17 AM



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 PROJECT NAME: Coleman HVAC SITE ADDRESS: 3210 VA DARE TRL N KILL DEVIL HILLS				MECHANICAL ISSUED: 06/04/2019 EXPIRES: 12/01/2019				
APPLICANT:	Coleman, Bob & Gle 9358 Tartan View DF Fairfax, VA 22032 703-625-3670	c	OWNER:		Coleman, Bob & Glenda 9358 Tartan View DR Fairfax, VA 22032 703-625-3670			
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:	988513046792	2		Parcel Number:	000080	001		
Address:	3210 VA DAR	E TRL N KILL D	EVIL HILLS					
				Zon	ing:			
Addition:	ORVILLE BEA	CH BLK 5		Bloc	ck: 5	Lot(s):	3	
Legal Desc	cription:							
FEES:		Paid	Due					
Mechanical Per	mit Fee	\$150.00	\$0.00					
	Totals :	\$150.00	\$0.00					

PROJECT DESCRIPTION: C/O 2Ton HVAC System

Printed by : CTHUMAN on: 06/04/2019 11:51 AM

MC2019-160 PROJECT NAME: Coleman HVAC SITE ADDRESS: 3210 VA DARE TRL N KILL DEVIL HILLS

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	Ν
	REQUIRED INSPECTIONS
Final	
	CONDITIONS
	l void if work or construction authorized is not commenced within 6 months or if construction of 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.

Contractor or Authorized Agent:

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Page 2 of 2

Date: 6/4



PO BOX 1719 Kill Devil Hills, NC 27948 Phone: 252-449-5318 Fax: 252-441-4102 Fig. 1

JUN 1 2019

Planning and Inspection Department

The second

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

EXPIRES: 12/01/2019

APPLICANT:	JONES, WILBUR L 5450 SOAP STONE RD JETERSVILLE, VA 23083		OWNER:	JONES, WILE 5450 SOAP S JETERSVILL	STONE RD	
MECHANICAL:		R A HOY PO Box 26 Kitty Hawk,	5 NC 27949			License: 13056 Expires: 12/31/2019
PARCEL:						
PIN:	988415537836	6		Parcel Number:	003494	000
Address:	102 VEELEE	OR KILL DEVIL	HILLS			
				Zoni	ing:	
Addition:	MEMORIAL O	VERLOOK		Bloc	:k: 0	Lot(s): 35
Legal Desc	ription:					
FEES:		Paid	Due			
Mechanical Perr	mit Fee	\$150.00	\$0.00			
9.42 4. 5. 4° (1.26°) "antoinear"	Totals :	\$150.00	\$0.00	ani		

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		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	Ν		
OCCUPANCY TYPE	One & Two Family Dwelling		

REQUIRED INSPECTIONS

Final

1

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: Rob Gallen Date: 6/4/19

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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

MC2019-15 PROJECT NAME SITE ADDRESS: HILLS	Ξ:	RGINIA DARE T	RAIL KILL DEVIL		MECHANICAL ISSUED: 06/03/2019 EXPIRES: 11/30/2019
Ē	BILL-MAR PROPER 1824 RIVERSHORE ELIZABETH CITY, N 252-333-5666	RD	OWNER:	1824 R ELIZAE	AR PROPERTIES, LLC IVERSHORE RD BETH CITY, NC 27909 3-5666
MECHANICAL, H-	•2, H-3:	P.O. Box 13	HEATING AND COOLII 32 IIs, NC 27948	NG	License: 11618 Expires: 12/31/2019
PARCEL:					
PIN:	002768000		Parce		
Address:	1517 NORTH	IRGINIA DARE	TRAIL KILL DEVIL	HILLS	
				Zoning:	
Addition:				Block:	Lot(s):
Legal Descrip	otion: CROATAN	SHORES, LOT	: 12-13 BLK: A SEC 1		
FEES:		Paid	Due		
Mechanical Permi	t Fee	\$150.00	\$0.00		
	Totals :	\$150.00	\$0.00		

JUN 3 2019

Printed by : Marty Shaw on: 06/03/2019 09:19 AM

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

Final

2

CONDITIONS

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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 PROJECT NAME: SITE ADDRESS: 305 DURHAM ST W KILL DEVIL HILLS MECHANICAL ISSUED: 06/03/2019

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		
MECHANICAL,	H-2, H-3:	P.O. Box 1	HEATING AN 32 ills, NC 27948			License: 11618 Expires: 12/31/2019
PARCEL:						
PIN:	988405281904	4		Parcel Number:	001338	000
Address:	305 DURHAM	ST W KILL DEV	VIL HILLS			
				Zoni	ng:	
Addition:	AVALON BEA	CH ANNEX 2 &	3	Bloc	k: 0	Lot(s): 622
Legal Dese	cription:					
EES:		Paid	Due			
lechanical Per	mit Fee	\$150.00	\$0.00			
on, dale man, spinalahan, butak, akkakkanak sinalashin	Totals :	\$150.00	\$0.00			

PROJECT DESCRIPTION: HVAC CHANGEOUT

JUN 3 2019

Printed by : Marty Shaw on: 06/03/2019 09:28 AM

MC2019-156 PROJECT NAME:

1

SITE ADDRESS: 305 DURHAM ST W KILL DEVIL HILLS

MECHANICAL ISSUED: 06/03/2019

EXPIRES: 11/30/2019

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

Final

CONDITIONS

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Page 2 of 2

Date: 6/3/19



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

Planning and Inspection Department

JUN 4 2019

	58 ME: Catlett HVAC SS: 507 Archdale St.	Kill Devil Hills				ISSUE	CHANICAL ED: 06/04/2019 RES: 12/01/2019
APPLICANT:	Catlett, Carter 640 Holly Grove Dr RANDLEMAN, NC 2	7317		OWNER:	Catlett, Carter 640 Holly Gro RANDLEMAN	ove Dr	
MECHANICAL:		R A HOY PO Box 26 Kitty Hawk,	95 5, NC 27949			License: 1305 Expires: 12/3	
PARCEL:							
PIN:	987520914065	5		Parcel Number:	0299170	000	
Address:	507 Archdale S	St. Kill Devil Hills	5				
				Zon	ning:		
Addition:	VIRGINIA DAF	RE SHORES		Bloc	ck: 71	Lot(s):	17 and 18
Legal Desc	cription:						
FEES:		Paid	Due				
Mechanical Pen	mit Fee	\$150.00	\$0.00				
	Totals :	\$150.00	\$0.00				

Printed by : CTHUMAN on: 06/04/2019 09:08 AM

MC2019-158 PROJECT NAME: Catlett HVAC SITE ADDRESS: 507 Archdale St. Kill Devil Hills

EXPIRES: 12/01/2019

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

DETAILS

Final

Issued By:

CONDITIONS

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Sel Gill

Contractor or Authorized Agent:

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Page 2 of 2

Date: 6/4/19



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 MECHANICAL **PROJECT NAME:** ISSUED: 06/04/2019 SITE ADDRESS: 607 DURHAM ST W KILL DEVIL HILLS EXPIRES: 12/01/2019 APPLICANT: MR. EDWARD W MUMMA MR. EDWARD W MUMMA **OWNER:** 607 W DURHAM ST 607 W DURHAM ST KILL DEVIL HILLS, NC 27948 KILL DEVIL HILLS, NC 27948 License: 13056 Expires: 12/31/2019 **MECHANICAL: RAHOY** PO Box 265 Kitty Hawk, NC 27949 PARCEL: Parcel PIN: 988405184505 001366000 Number: 607 DURHAM ST W KILL DEVIL HILLS Address: Zoning: Addition: AVALON BEACH ANNEX 2 & 3 Block: 0 654 Lot(s): Legal Description: FEES: Paid Due **Mechanical Permit Fee** \$150.00 \$0.00 \$150.00 Totals : \$0.00 PROJECT DESCRIPTION: HVAC changout

Printed by : Marty Shaw on: 06/04/2019 09:22 AM

Page 1 of 2

3

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	х			
NATURAL GAS SIGNOFF	N			
OCCUPANCY TYPE	One & Two Family Dwelling			

REQUIRED INSPECTIONS

Final

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CONDITIONS

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hereby certify that I have read and examined this application and know the same to be true and correct.
Il provisions of Laws and Ordinances governing this type of work will be complied with whether
pecified herein or not, The granting of a permit does not presume to give authority to violate or cancel
ne provisions of any other state/local law regulating construction or the performance of construction.
ssued By:
contractor or Authorized Agent: Rhu Gallan Date: 6/4/19

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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 PROJECT NAME: SITE ADDRESS: 518 PARKWOOD DR KILL DEVIL HILLS MECHANICAL ISSUED: 06/03/2019

EXPIRES: 11/30/2019

APPLICANT:	Delo, Howland 518 Parkwood DR Kill Devil Hillsl, NC 2 252-305-4809	7948	C	OWNER:	Delo, Howlar 518 Parkwoo Kill Devil Hills 252-305-480	d DR sl, NC 27948	
MECHANICAL,	H-2, H-3:	P.O. Box 1	HEATING ANE 32 ills, NC 27948	D COOLING		License: 11618 Expires: 12/31/2019	
PARCEL:							
PIN:	988414228563	3		Parcel Number:	004046	010	
Address:	518 PARKWO	od dr kill de	VIL HILLS				
				Zonin	g:		
Addition:	WRIGHT WOO	DDS		Block	: 0	Lot(s): 10	
Legal Desci	ription:						
FEES:		Paid	Due				
Mechanical Perr	nit Fee	\$150.00	\$0.00				
for all and the set of	Totals :	\$150.00	\$0.00				

JUN 3 2019

Printed by : Marty Shaw on: 06/03/2019 09:07 AM

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	Ν			
OCCUPANCY TYPE	One & Two Family Dwelling			

REQUIRED INSPECTIONS

Final

1

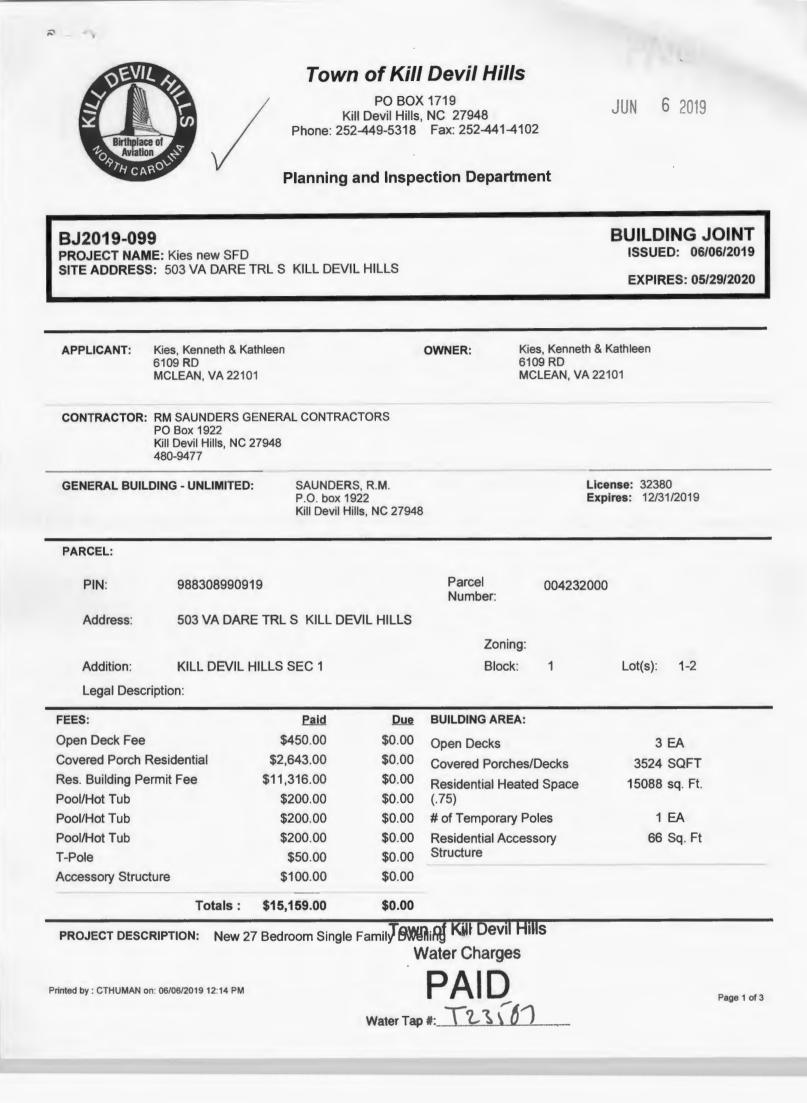
CONDITIONS

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Issued By: Date: 6/3/19 **Contractor or Authorized Agent:**

Printed by : Marty Shaw on: 06/03/2019 09:07 AM



BJ2019-099 PROJECT NAME: Kies new SFD SITE ADDRESS: 503 VA DARE TRL S KILL DEVIL HILLS

1 . 3

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

CONDITIONS

Printed by : CTHUMAN on: 06/06/2019 12:14 PM

BJ2019-099 PROJECT NAME: Kies new SFD SITE ADDRESS: 503 VA DARE TRL S KILL DEVIL HILLS

ISSUED: 06/06/2019 EXPIRES: 05/29/2020

BUILDING JOINT

* 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 stuctual 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 NECCESSARY 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 grapting 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:



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

Planning and Inspection Department

	0 IE: STASSIE BOA S: 2042 BAY DR H			BUILDING JOIN ISSUED: 05/24/20 EXPIRES: 11/20/20			
	Herb & Mary Stassie 777 Stinchcomb Rd. SEVERNA PARK, M 410-703-5366	d.		OWNER:	Herb & Mary 777 Stinchco SEVERNA P 410-703-536	omb Rd. PARK, MD 21146	3
RESIDENTIAL, LI	.IMITED:	6705 CRO	on and Dad ATAN HWY S roatan Hwy. I, nc 27959 215	SOUTH		License: 79801 Expires: 06/14	
PARCEL:							
PIN:	98740898462	?0		Parcel Number:	001989	9000	
Address:	2042 BAY DR	R KILL DEVIL HIL	LS				
				Zoni	ing:		
Addition:	AVALON BEA	ACH ANNEX 2 &	3	Bloc	ck: 0	Lot(s):	1014
Legal Descri	iption:						
EES:		Paid	Due				
Building Permit Fo	ee - Minimum	\$150.00	\$0.00				
	Totals :	\$150.00	\$0.00	-			

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JUN 5 2019

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BJ2019-100

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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	САМА	
SIDE YARD SETBACK	10	
CAMA PERMIT	Ν	
CAMA EXEMPTION	Ν	
FLOOD ZONE	AE	
BASE FLOOD ELEVATION	9.00	
PURPOSE	Residential Repair/Remodel	
CONSTRUCTION TYPE	V	
CONSTRUCTION COST	12666.00	
CULVERT	Ν	
DRIVEWAY INVERT 2	N	
OCCUPANCY TYPE	Residential	

REQUIRED INSPECTIONS

Final Zoning Final Electrical

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.

Printed by : Jordan Blythe on: 05/24/2019 02:20 PM

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

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; 19 Contractor or Authorized Agent: Date:

Printed by : Jordan Blythe on: 05/24/2019 02:20 PM



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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

BJ2019-10 PROJECT NA SITE ADDRES	BUILDING JOINT ISSUED: 06/05/2019 EXPIRES: 12/02/2019							
APPLICANT:	FAISON, GENE 1202 FOX STREET Kill Devil Hills, NC 27	7948			FAISON, GEN 1202 FOX STI Kill Devil Hills,	REET		
CONTRACTOR	: TYLERBUILT CUST 2906 South Pamlico nags head, nc 27959 252-202-2080	Ave	IC.					
			n Pamlico Ave nc 27959	BUILDERS INC.	License: 46649 Expires: 12/31/2019			
PARCEL:								
PIN:	988312866403	3		Parcel Number:	0044190	000		
Address:	1202 FOX ST	KILL DEVIL HIL	LS					
				Zoning	g:			
Addition:	KILL DEVIL H	LLS REALTY CO	ORP	Block:	24	Lot(s):	2	
Legal Desc	cription:							
FEES:		Paid	Due	BUILDING AREA	A:			
Renovation/Ren	model/Relocate	\$45.00	\$0.00	Remodel/Renovation 100 SQFT		SQFT		
Res. Building P	ermit Fee	\$216.00	\$0.00	Residential Hea		288	sq. Ft.	
$\mu^* \nabla \Theta_{\mu} = 2 \delta_{\mu\nu} \delta_{\mu\nu} + \delta_{\mu\nu} \partial_{\mu} \partial_{\mu} + \delta_{\mu\nu} \partial_{\mu} + \delta_{\mu\nu} \partial_{\mu} \partial$	Totals :	\$261.00	\$0.00	~ (.75)		anterest Martinet States - Variation - Jacobia - Jacobia		

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.

Printed by : Marty Shaw on: 06/05/2019 09:22 AM

EXPIRES: 12/02/2019

*	This permit becomes null and void if work or construction authorized is not commenced within 6 months or if construction
0	r 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.
1	Device the standard standard of the standard Device Proventier Ordinance including use and elevation

- * 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.

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* 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:		
M.Y.C.		
Contractor or Authorized Agent:	Cogl	Date: 6 - 5 - 19



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Town of Kill Devil Hills

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

JUN 2 1 2019

Sec. 1

Planning and Inspection Department

	5 E: SAGA New SF : 701 ZEN LANE		BUILDING JOINT ISSUED: 06/18/2019			
						EXPIRES: 12/15/2019
APPLICANT:	Water Oak Residen PO Box 90 Kill Devil Hills, NC 2 252-441-9003			PC	ater Oak Resident) Box 90 I Devil Hills, NC 2 2-441-9003	
CONTRACTOR:	SAGA CONSTRUC 1314 S Croatan Hw PO Box 90 Kill Devil Hills, NC 2 252-441-9003	ry, Suite 301				
GENERAL BUILI	DING - LIMITED:	1314 S Cro PO Box 90	ills, NC 27948	uite 301		e: 62306 s: 12/30/2019
PARCEL:						
PIN:	98841722249	6		Parcel Number:		
Address:	701 ZEN LAN	E Kill Devil Hills				
				Zoning:		
Addition:				Block:		Lot(s):
Legal Descri	iption: Lot 57, W	/ater Oak Subdivi	sion			
EES:		Paid	Due	BUILDING AREA:		
Covered Porch R	Residential	\$252.00	\$0.00	Covered Porches/	Decks	336 SQFT
Res. Building Per	rmit Fee	\$1,721.05	\$0.00	Resdiential Unhea	ted (.40)	397 Sq. Ft
I-Pole		\$50.00	\$0.00	Residential Heated	d Space	2083 sq. Ft.
NIL PARATONI COLUMNATION AND A COLUMN AND A COLUMN	Totals :	\$2,023.05	\$0.00	 (.75) # of Temporary Pc 	bles	1 EA
				Town	of Kill Devil I	Hills
PROJECT DESCR	RIPTION: New 3	Bedroom 2 bath s	ingle family	dwelling	ater Charges	
			gio ioniny		PAID	
					123588	
					a1100	
nted by : Marty Shaw or	n: 06/18/2019 08:56 AM					Page 1 o

BJ2019-105 PROJECT NAME: SAGA New SFD	BUILDING JOINT ISSUED: 06/18/2019
SITE ADDRESS: 701 ZEN LANE Kill Devil Hills	EXPIRES: 12/15/2019
 * As-built survey will be required prior to Certificate of Occupancy or Certificate * The developer shall be responsible for maintaining erosion and sediment co 	***
* Development must meet all aspects of Chapter 151 Flood Damage Preventi	"你爹爹爹爸爸" 计推动 医子宫 化化学 化学生 医二十十十十十十十十十十十十十十十十十十十十十十十十十十十十十十十十十十十十
* Construction must meet all aspect of Chapter 153 Zoning including lot cover	·····································
* Elevation Certificate will be required 21 days after establishment of the refer	人名马尔 有自己的 的第三人称单数 医自己的 医海绵 化乙基 化氯化 医皮肤 化化化
* Zoning Final Inspection is required.	
* A final elevation certificate will be required prior to issuance of a Certificate of accordance with 151.41(C).	of Occupancy or a Certificate of Compliance in
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 wor specified herein or not. The granting of a permit does not presum	k will be complied with whether
the provisions of any other state/local law regulating construction	
Issued By: NXSL	
Contractor or Authorized Agent: Tacen Mul	L Date: (0.21.19

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

Planning and Inspection Department

BJ2019-10	6 IE: Auten New SFI)			BUILDING J ISSUED: 06/	
SITE ADDRESS	S: 211 E Archdale	St Kill Devil Hills			EXPIRES: 12/	02/2019
APPLICANT:	Auten, John 225 Downing Drive CHESAPEAKE, VA	23323			ohn ning Drive EAKE, VA 23323	
CONTRACTOR:	SANDY BOTTOM H 400 DaVinci Lane kitty hawk, nc 2794 757-448-8162					
GENERAL BUIL	DING-LIMITED:	SANDY BC 400 DaVino kitty hawk, 757-448-81	nc 27949	ES	License: 67524 Expires: 01/01/2020	
PARCEL:						
PIN:	98851712831	8		Parcel 000 Number:	807000	
Address:	211 E Archda	le St Kill Devil Hi	lls			
				Zoning:		
Addition:	VIRGINIA DA	RE SHORES AM	D BLK 5	Block: 5	Lot(s): 13	
Legal Desci	ription:					
EES:		Paid	Due	BUILDING AREA:		
T-Pole		\$50.00	\$0.00	Residential Heated Spa	ce 1757 sq. Ft.	
Open Deck Fee		\$150.00	\$0.00	(.75)		
Res. Building Pe		\$1,329.75	\$0.00	# of Temporary Poles	1 EA	
Covered Porch F	Residential	\$56.25	\$0.00	Open Decks	1 EA	
	Totals :	\$1,586.00	\$0.00	Resdiential Unheated (. Covered Porches/Decks		
					-	
PROJECT DESC	RIPTION: New 3	Bedroom 3 Bath	Single Famil	y Dwelling		
			er Charge			
		•	PAID		N 1 3 2019	
inted by : CTHUMAN o	on: 06/05/2019 09:19 AM	Water Tap #:		A		Page 1 o
			and the second se	and an a state of the state of		, ago i o

BJ2019-106 PROJECT NAME: Auten New SFD SITE ADDRESS: 211 E Archdale St Kill Devil Hills

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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	Ν
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	

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

BJ2019-106 PROJECT NAME: Auten New SFD SITE ADDRESS: 211 E Archdale St Kill Devil Hills

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 statellocal law regulating construction or the performance of construction.

Issued By:

Contractor or Authorized Agent:

Date: 6-13-19

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



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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

	7 NE: McCombs Pool S: 3118 BAY DR KIL		BUILDING JOINT ISSUED: 06/05/2019 EXPIRES: 12/02/2019				
APPLICANT:	McCombs, Jack 3118 Bay Drive Kill Devil Hills, NC 279	48		OWNER:	McCombs, . 3118 Bay D Kill Devil Hil		
CONTRACTOR:	CARRIBEAN POOLS & PO BOX 65 kitty hawk, nc 27949 252-207-1773	& SPAS					
PO kitty		PO BOX 6 kitty hawk,	CARRIBEAN POOLS & SPAS PO BOX 65 kitty hawk, nc 27949 252-207-1773		License: 48519 Expires: 12/30/2019		
PARCEL:							
PIN:	987520822153			Parcel Number:	00107	4000	
Address:	3118 BAY DR K		LLS				
				Zon	ing:		
Addition:	MOOR SHORES	S		Bloc	: 0	Lot(s):	139
Legal Descr	ription:						
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 1 1 2019

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



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

Planning and Inspection Department

BJ2019-108 PROJECT NAM	E: Oliver Pool					BUILDING SISSUED: 06	
SITE ADDRESS	S: 314 TRUXTON S	ST KILL DEVIL I	HILLS			EXPIRES: 12	/02/2019
APPLICANT:	OLIVER, TIMOTHY 1228 ROSEBUD AVI chesapeake, va 2332 614-557-1020			OWNER:	OLIVER, TI 1228 ROSE chesapeake 614-557-10	EBUD AVE e, va 23322	
CONTRACTOR:	CARRIBEAN POOLS UNKNOWN UNKNOWN, XX 0000						
GENERAL:		UNKNOW	AN POOLS & S N N, XX 00000	PAS		License: 48519 Expires: 12/30/2019	
PARCEL:							
PIN:	987516933323	1		Parcel Number:	02872	21000	
Address:	314 TRUXTON	ST KILL DEVI	L HILLS				
Addition:	MOOR SHORE	ES TWO		Zoni Bloc	-	Lot(s): 159	
Legal Descr	iption:						
FEES:		Paid	Due				
Pool/Hot Tub		\$200.00	\$0.00				
	Totals :	\$200.00	\$0.00				
PROJECT DESC	RIPTION: Installati	on of in ground	11x24 pool				
	JUN 1 1 2019						
	1. ^{1.} 1. ;						
inted by : Marty Shaw o	on: 06/05/2019 08:55 AM						Page 1 of

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	Ν	
CAMA EXEMPTION	Ν	
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	Ν	
OCCUPANCY TYPE	One & Two Family Dwelling	

REQUIRED INSPECTIONS

Final

-4

Zoning Final

Pool Bonding

CONDITIONS

	This permit becomes null and void if work or construction authorized is not commenced within 6 months or if construction
0	r 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.
	* * * * * * * * * * * * * * * * * * * *

Printed by : Marty Shaw on: 06/05/2019 08:55 AM

BJ2019-108 PROJECT NAME: Oliver Pool SITE ADDRESS: 314 TRUXTON ST KILL DEVIL HILLS

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EXPIRES: 12/02/2019

I hereby certify that I have read and examined this application and know the s All provisions of Laws and Ordinances governing this type of work will be co specified herein or not. The granting of a permit does not presume to give au	mplied with whether
the provisions of any other state/local law regulating construction or the perf	ormance of construction.
Issued By: Bh	
Contractor or Authorized Agent:	Date: 6.11-19

Printed by : Marty Shaw on: 06/05/2019 08:55 AM



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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 PROJECT NAM SITE ADDRESS	U E: Magee New Co S: 411 MITCHELL	ONSTRUCTION CT KILL DEVIL	HILLS			BUILDING JOINT ISSUED: 06/12/2019 EXPIRES: 12/09/2019
APPLICANT:	MAGEE, JAMES F 4513 DAVIDS MILL			OWNER:	MAGEE, JAME 4513 DAVIDS	
	CHESAPEAKE, VA				CHESAPEAKE	
CONTRACTOR:	Sandy Bottom Hom 400 DaVinci Lane kitty hawk, nc 2794 757-448-8162					
GENERAL BUILI	DING-LIMITED:	SANDY BO 400 DaVin kitty hawk, 757-448-8	nc 27949	ES		cense: 67524 kpires: 01/01/2020
PARCEL:						
PIN:	98840528036	4		Parcel Number:	00211100	00
Address:	411 MITCHEI	L CT KILL DEV	IL HILLS			
Addition:	WRIGHT'S SI	HORES		Zonin Block	-	Lot(s): 151
Legal Descr						
FEES:		Paid	Due	BUILDING ARE	A:	
Covered Porch R	Residential	\$52.50	\$0.00	Covered Porch	es/Decks	70 SQFT
Res. Building Per	rmit Fee	\$1,311.95	\$0.00	Residential Hea	ated Space	1641 sq. Ft.
T-Pole	*****	\$50.00	\$0.00	(.75) ~ Resdiential Unl	heated (40)	203 Sq. Ft
	Totals :	\$1,414.45	\$0.00	# of Temporary		1 EA
				s unusprovedenseteren er en vergen geben er en geb	da maanifiksi normaaliaaniilaikseenkäpede sepäden maksapamuda se	and a second and a second
PROJECT DESCI	RIPTION: New 4	Bedroom SFD				· · · · · · · · · · · · · · · · · · ·
			of Kill Devil ter Charge			JUN 1 2 2019
		F	PAID			
	n: 06/12/2019 07:57 AM	Water Tap #:_	T720	91		

BJ2019-110

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

BUILDING JOINT

	DET	AILS	
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	Ν		
CAMA EXEMPTION	Ν		
FLOOD ZONE	Х		
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	Manson Ray Meekins L- 2592		
ENGINEER AND LICENSE	Michael Osteen 032628		
CULVERT	N		
ROLL OUT CAN	1		
DRIVEWAY INVERT 2	Y		
OCCUPANCY TYPE	One & Two Family Dwelling		

Printed by : Marty Shaw on: 06/12/2019 07:57 AM

BJ2019-110 PROJECT NAME: Magee New Construction SITE ADDRESS: 411 MITCHELL CT KILL DEVIL HILLS

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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
* As-built survey will be required prior t	o Certificate of Occupancy or Certificate of Compliance.
 * Per §153.082(B)(1)(c) Mechanical equininimum yard setback more than four (* Must comply with Wind Borne Debris * Zoning Final Inspection is required. * Construction must meet all aspect of 	requirements as defined in NCBC R301.2.1.2 and NCBC 1609.2. Chapter 153 Zoning including lot coverage and setbacks.
 * Per §153.082(B)(1)(c) Mechanical equininimum yard setback more than four (* Must comply with Wind Borne Debris * Zoning Final Inspection is required. * Construction must meet all aspect of I hereby certify that I have read a All provisions of Laws and Ordin specified herein or not. The gram 	uipment, including HVAC equipment and LP Gas equipment shall not project into a 4) feet. requirements as defined in NCBC R301.2.1.2 and NCBC 1609.2.

Printed by : Marty Shaw on: 06/12/2019 07:57 AM



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

Planning and Inspection Department

BUILDING JOINT BJ2019-111 ISSUED: 06/13/2019 **PROJECT NAME:** Thomas and Gayle Boothe SITE ADDRESS: 604 PALMETTO ST W KILL DEVIL HILLS EXPIRES: 12/10/2019 APPLICANT: Sandy Bottom Homes OWNER: Boothe, Thomas 1047 Camera RD WAVERLY, VA 23890 804-731-5129 400 DaVinci Lane kitty hawk, nc 27949 757-448-8162 License: 67524 Expires: 01/01/2020 SANDY BOTTOM HOMES **GENERAL BUILDING-LIMITED:** 400 DaVinci Lane kitty hawk, nc 27949 757-448-8162

PARCEL:							
PIN: 9874089939		26		Parcel Number:	000775006		
Address:	604 PALMETTO ST W KILL DEVIL HILLS						
				Zoning:			
Addition:	VIRGINIA DA	RE SH BLK 77 R	ECOMB	Block:	77	Lot(s): 6	6
Legal Descript	ion:						
FEES:		Paid	Due	BUILDING AREA:			
T-Pole		\$50.00 \$50.25	\$0.00	# of Temporary Poles Covered Porches/Decks		1 EA	
Covered Porch Res	sidential		\$0.00			67	SQFT
Res. Building Permit Fee		\$1,278.30	\$0.00	Resdiential Unheated (.40)		117 Sq. Ft	Sq. Ft
Open Deck Fee		\$150.00	\$0.00	Residential Heated Space			sq. Ft.
	Totals :	\$1,528.55	\$0.00	(.75) Open Decks		1	EA

PROJECT DESCRIPTION: Proposed 4 bedroom single family dwelling

Town of Kill Devil Hills Water Charges PAI

Water Tap #: 723591

JUN 1 3 2019

Printed by : CTHUMAN on: 06/13/2019 08:50 AM

BJ2019-111 PROJECT NAME: Thomas and Gayle Boothe SITE ADDRESS: 604 PALMETTO ST W KILL DEVIL HILLS

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EXPIRES: 12/10/2019

	DE	TAILS
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

CONDITIONS

Final

Zoning Final

* 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).

Printed by : CTHUMAN on: 06/13/2019 08:50 AM

Slab/Foundation

Sheathing

BJ2019-111 PROJECT NAME: Thomas and Gayle Boothe SITE ADDRESS: 604 PALMETTO ST W KILL DEVIL HILLS

Date: 6-13-19

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 statel ocal law regulating construction or the performance of construction.

Issued By:

Contractor or Authorized Agent: _____ & &L

Printed by : CTHUMAN on: 06/13/2019 08:50 AM



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

JUN 26 2019

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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 GI PO Box 1922 Kill Devil Hills, NC 2 480-9477		CTORS	OWNER:	OBX Destinatio 905 NORTH V Kill Devil HillsI, 252-441-2544	A Dare TR	
GENERAL - UN	LIMITED:	CONTRAC PO Box 19	TORS INC 22 ills, NC 27948	SAUNDERS GENE		icense: 32380 xpires: 01/01/2020	
PARCEL:							
PIN:	98841165158	9		Parcel Number:	0027700	00	
Address:	1507 VA DAF	RE TRL N KILL D	EVIL HILLS				
				Zonin	g:		
Addition:	CROATAN S	HORES		Block	: A	Lot(s): 18-19	
Legal Desc	cription:						
FEES:		Paid	Due	BUILDING ARE	A:		
Covered Porch	Residential	\$795.00	\$0.00	Covered Porch	es/Decks	1060 SQFT	
Res. Building Pe	ermit Fee	\$8,755.50	\$0.00	Residential He	ated Space	11674 sq. Ft.	
T-Pole		\$50.00	\$0.00	(.75)			
***	Totals :	\$9,600.50	\$0.00	# of Temporary	Poles	1 EA	

Town of Kill Devil Hills Water Charges

Water Tap #: 723633

Printed by : Marty Shaw on: 06/25/2019 01:18 PM

BJ2019-112

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PROJECT NAME: OBX Destinations LLC SITE ADDRESS: 1507 VA DARE TRL N KILL DEVIL HILLS ISSUED: 06/25/2019 EXPIRES: 06/05/2020

BUILDING JOINT

DETAILS Permit Name Value ZONING DISTRICT OIR FRONT YARD SETBACK 30 REAR YARD SETBACK CAMA SIDE YARD SETBACK 10 HEALTH DEPARTMENT **KDHWWTP** PERMIT # **# PARKING** 21 SPACES/BEDROOM 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 1060 PORCHES/DECKS (SQFT) TOTAL SQUARE FOOTAGE 12734 SURVEYOR NAME AND Coastal/Carlos Gomez NUMBER ENGINEER AND LICENSE **RAYMOND G PATE** NUMBER 13018 ARCHITECT NAME AND MICHAEL A FLOREZ LICENSE NUMBER 14163 CULVERT N **DRIVEWAY INVERT 2** N OCCUPANCY TYPE One & Two Family Dwelling

Printed by : Marty Shaw on: 06/25/2019 01:18 PM

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

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 work is suspended for a period of 12 mo	k or construction authorized is not commenced within 6 months or if construction nths at any time after work has started.
* NOTICE: Call Public Services Department	nt (252) 480-4080 before pouring driveway!
* Elevation Certificate will be required 21 d	lays after establishment of the reference level in accordance with 151.41(C).
* As-built survey will be required prior to C	ertificate of Occupancy or Certificate of Compliance.
* The developer shall be responsible for m	aintaining erosion and sediment control at the disturbed area.
* A final elevation certificate will be require accordance with 151.41(C).	d prior to issuance of a Certificate of Occupancy or a Certificate of Compliance in
 Development must meet all aspects of C THIS PROPERTY IS LOCATED IN A SP 	hapter 151 Flood Damage Prevention Ordinance including use and elevation.
	use of enclosures below the lowest floor for parking, building access and limited
	tion of the sand dunes which would increase potential flood damage.
	ime of application, 21 days from the establishment of the lowest floor and at
DEVELOPER MUST OBTAIN ALL THE NE PERMIT CAN BE ISSUED.	ECCESSARY FEDERAL, STATE AND LOCAL PERMITS BEFORE THIS
minimum yard setback more than four (4) fe	
* Must as much used to Mind Damas Datais	

Must comply with Wind Borne Debris requirements as defined in NCBC R301.2.1.2 and NCBC 1609.2.

		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.

Printed by : Ryan Lang on: 06/26/2019 09:50 AM

Page 3 of 4

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REQUIRED INSPECTIONS

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EXPIRES: 06/05/2020

I hereby certify that I have read and examined this application and know the same to be true and corre	ect.
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	el
the provisions of any other state/local law regulating construction or the performance of construction	l.
Issued By:	
Contractor or Authorized Agent: Date: 62519	

Printed by : Marty Shaw on: 06/25/2019 01:18 PM

Page 4 of 4



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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

	3 E: Maxs Restaurant					BUILDING JOINT ISSUED: 06/11/201
SITE ADDRESS	: 1712 CROATAN	HWY N KILL D	DEVIL HILLS			EXPIRES: 12/08/201
	OLIVOLA, MARK NANCY O WALTON P O BOX 364 KILL DEVIL HILLS, N	IC 27948		OWNER:	NANCY P O BOX	A, MARK O WALTON X 364 WIL HILLS, NC 27948
	Sharp, Grant po box 1181 kitty hawk, nc 27949	ten Madridath distribution (so to		a, an		
GENERAL:		Self UNKNOWI UNKNOWI 917-862-90	N, XX 00000			License: Unlicensed Expires: 12/31/2020
PARCEL:						
PIN:	988410374122			Parcel Number:	002	2739000
Address:	1712 CROATA	N HWY N KILL	DEVIL HILL	.S		
Addition:	HEDRICKS AD			Zoni Bloc	-	
Addition: Legal Descri		DITION - CRO	ATAN SH	BIOC	J. U	Lot(s): 0
EES:		Paid	Due	BUILDING AR	EA:	
Renovation/Remo	odel/Relocate	\$219.60	\$0.00	Remodel/Ren	ovation	488 SQFT
	Totals :	\$219.60	\$0.00	and an	dhanadar phanahanardirdina is to fam	νδημήνα αυτόγκε 3 δημηροφορίαται και παιτοποίου ο 5 γ.υ. τη ποιοιργηθοποιοιστοποίο στο σύμουρο το προσφορικη και προδηλογι

Printed by : Marty Shaw on: 06/11/2019 01:16 PM

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	С		
FRONT YARD SETBACK	30		
REAR YARD SETBACK	20% Depth >30		
SIDE YARD SETBACK	10		
STREET SIDE SETBACK	15		
CAMA PERMIT	N		
CAMA EXEMPTION	Ν		
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	Ν		
OCCUPANCY TYPE	Business		

REQUIRED INSPECTIONS

Rough In Final

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

Printed by : Marty Shaw on: 06/11/2019 01:16 PM

BJ2019-113 PROJECT NAME: Maxs Restaurant SITE ADDRESS: 1712 CROATAN HWY N KILL DEVIL HILLS

ISSUED: 06/11/2019

BUILDING JOINT

Date: 6/11/2019

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.

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Contractor or Authorized Agent:

Issued By:

Printed by : Marty Shaw on: 06/11/2019 01:16 PM

Page 3 of 3



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

A, DONALD J X 364 VIL HILLS, NO ND DUNSTAN X 402 wk, NC 27949 -1100	C 27948		OWNER:	POBOX 3	DONALD J
x 402 wk, NC 27949	1			KILL DEVI	L HILLS, NC 27948
-1100					
NLIMITED:	P.O. Box 4 Kitty Hawk,	NC 27949			License: 19436 Expires: 12/31/2019
3410373044-	7288		Parcel Number:		
22 N. Croata	n Hwy UNKNO	WN			
			Zonin	g:	
			Block	:	Lot(s):
	Paid	Due	BUILDING ARE	A:	
locate	\$603.00	\$0.00	Remodel/Reno	vation	1340 SQFT
Totals :	\$603.00	\$0.00			
	8410373044- 22 N. Croatar elocate Totals :	P.O. Box 4 Kitty Hawk, 252-202-11 8410373044-7288 22 N. Croatan Hwy UNKNO Paid elocate \$603.00 Totals : \$603.00	P.O. Box 402 Kitty Hawk, NC 27949 252-202-1100 8410373044-7288 22 N. Croatan Hwy UNKNOWN Paid Due elocate \$603.00 \$0.00 Totals : \$603.00 \$0.00 I: installation of freezers, and refrigeration	P.O. Box 402 Kitty Hawk, NC 27949 252-202-1100 8410373044-7288 Parcel Number: 22 N. Croatan Hwy UNKNOWN Zonin Block Paid Due BUILDING ARE elocate \$603.00 \$0.00 Remodel/Reno Totals : \$603.00 \$0.00	P.O. Box 402 Kitty Hawk, NC 27949 252-202-1100 Parcel Number: 22 N. Croatan Hwy UNKNOWN Zoning: Block: Block: Paid Due BUILDING AREA: \$603.00 \$0.00 Remodel/Renovation Totals : \$603.00 \$0.00

JUN 1 0 2019

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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	С	
FRONT YARD SETBACK	30	
REAR YARD SETBACK	20% Depth >30	
SIDE YARD SETBACK	10	
CAMA PERMIT	Ν	
CAMA EXEMPTION	Ν	
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	

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.

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BJ2019-114 PROJECT NAME: Dream Cream Ice Cream Parlor SITE ADDRESS: 1722 N. Croatan Hwy UNKNOWN

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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 statellocal law regulating construction or the performance of construction.
Issued By:
Contractor or Authorized Agent: Date: 6-10.2019

Printed by : CTHUMAN on: 06/10/2019 08:59 AM

Page 3 of 3



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

APPLICANT:	1424 Norwood Crest RALEIGH, NC 2761			OWNER:	Contina, Cath 1424 Norwoo RALEIGH, N	d Crest Court	
CONTRACTOR:	Atlantic Elevators P. O. Box 1521 Manteo, NC 27954 252-305-4465						
ELECTRICAL - L	LIMITED:	Atlantic Ele P. O. Box 1 Manteo, NG 252-305-44	1521 C 27954			License: 06925-L Expires:	
PARCEL:						· · · · · · · · · · · · · · · · · · ·	
PIN:	98840508736	5		Parcel Number:	001384	000	
Address:	902 DURHAM	ST W KILL DEV	VIL HILLS				
				Zoni	ng:		
Addition:	AVALON BEA	CH ANNEX 2 &	3	Bloc	k: 0	Lot(s): 679	
Legal Descr	ription:						
FEES:		Paid	Due				
Building Permit F Fee	Fee - Minimum	\$150.00	\$0.00				
al annua anginingi panananya kunangkanangkananganangka	Totals :	\$150.00	\$0.00				

PROJECT DESCRIPTION: Add platform lift and concrete walk.

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JUN 1 1 2019

Printed by : Marty Shaw on: 06/11/2019 09:32 AM

BJ2019-115

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

BUILDING JOINT

	DETAILS	
Permit		
Name	Value	
ZONING DISTRICT	RL	
FRONT YARD SETBACK	15	
REAR YARD SETBACK	20% Depth >30	
SIDE YARD SETBACK	6	
CAMA PERMIT	Ν	
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.

Printed by : Marty Shaw on: 06/11/2019 09:32 AM

Date: 6-11-19

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:

Printed by : Marty Shaw on: 06/11/2019 09:32 AM

Page 3 of 3



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

BJ2019-11 PROJECT NA SITE ADDRES	ME: Lowry Bathroom SS: 206 AVALON DF	R W KILL DEVIL	HILLS		BUILDING JOINT ISSUED: 06/11/2019 EXPIRES: 12/08/2019			
APPLICANT:	Lowry, Robert 79 Cunningham Ct. PALMYRA, VA 2296	3		OWNER:	Lowry, Robe 79 Cunningh PALMYRA, V	am Ct.		
UNLICENSED	- REMODELING:	Full House PO Box 49 kitty hawk, 919-608-21	8 nc 27949			License: 00000 Expires: 06/11		
PARCEL:								
PIN:	988517104493	3		Parcel Number:	001754	1000		
Address:	206 AVALON	DR W KILL DEV	IL HILLS					
				Zoni	ng:			
Addition:	AVALON BEA	СН		Bloc	k: 0	Lot(s):	123	
Legal Des	cription:							
FEES:		Paid	Due					
Building Permit Fee	Fee - Minimum	\$150.00	\$0.00					
	Totals :	\$150.00	\$0.00					

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

4210

JUN 1 1 2019

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BJ2019-116 PROJECT NAME: Lowry Bathroom SITE ADDRESS: 206 AVALON DR W KILL DEVIL HILLS

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	

Rough In Insulation Final

Zoning Final

CONDITIONS

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

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

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

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Contractor or Authorized Agent:	Nameldo	Date @ 71-19

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DEV	LEI	Towr	PO BOX		lls		
Birthpla Z Aviati			Il Devil Hills, 1 2-449-5318	NC 27948	-4102		JUN 28 2019
NORTH CR	ROLIN	Planning	and Inspec	tion Depa	rtment		r
BJ2019-11 PROJECT NAM	9 ME: Huddleston Cov	ered Porch, part	tial ground floo	or			DING JOINT UED: 06/27/2019
enclosure SITE ADDRES	S: 110 SPORTSMA	N DR E KILL DI	EVIL HILLS			EXF	PIRES: 12/24/2019
APPLICANT:	Huddleston, Henry 137 Nautical Lane currituck, nc 27929		C	WNER:	Huddlesto 137 Nautio currituck, r	cal Lane	
CONTRACTOR	C & T CONTRACTIN 1700 Bell Ave. Kill Devil Hills, NC 27 252-202-9943						
BUILDING LIMI	TED:	1700 Bell A	lls, NC 27948			License: 45 Expires: 0	
PARCEL:							
PIN:	988517211016	3		Parcel Number:	0017	18000	
Address:	110 SPORTSM	MAN DR E KILL	DEVIL HILLS				
				Zon	ing:		
Addition:	AVALON BEA	СН		Blog	ck: 0	Lot(s): 66
Legal Desc	cription:						
EES:		Paid	Due				
Building Permit Fee	Fee - Minimum	\$150.00	\$0.00				
			\$0.00				

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

Printed by : CTHUMAN on: 06/27/2019 08:03 AM

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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.

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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 grapting 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: Date: 6 28/18 Contractor or Authorized Agent:

Page 3 of 3



Town of Kill Devil Hills

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

JH 26 119

Planning and Inspection Department

BUILDING JOINT **BJ2019-120** ISSUED: 06/25/2019 PROJECT NAME: OBX Destinations New 25 Bedroom SFD SITE ADDRESS: 1505 VA DARE TRL N KILL DEVIL HILLS EXPIRES: 12/22/2019 APPLICANT: **OBX Destinations LLC OBX** Destinations LLC OWNER: 905 NORTH VA Dare TR 905 NORTH VA Dare TR Kill Devil Hillsl, NC 27948 Kill Devil Hillsl, NC 27948 252-441-2544 252-441-2544 CONTRACTOR: RM SAUNDERS GENERAL CONTRACTORS PO Box 1922 Kill Devil Hills, NC 27948 480-9477 **GENERAL BUILDING - UNLIMITED:** SAUNDERS, R.M. License: 32380 P.O. box 1922 Expires: 12/31/2019 Kill Devil Hills, NC 27948 252-207-8710 PARCEL: Parcel PIN: 988411652507 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 **BUILDING AREA:** FEES: Paid Due **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)1 EA # of Temporary Poles Totals : \$9,600.50 \$0.00 PROJECT DESCRIPTION: New 25 Bedroom SFD Town of Kill Devil Hills Water Charges Water Tap #: 1 23592

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BJ2019-120 PROJECT NAME: OBX Destinations New 25 Bedroom SFD SITE ADDRESS: 1505 VA DARE TRL N KILL DEVIL HILLS

ISSUED: 06/25/2019 EXPIRES: 12/22/2019

BUILDING JOINT

	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	230000.00	
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	Ν	
OCCUPANCY TYPE	One & Two Family Dwelling	

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BJ2019-120

P . 4

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 Departme	ent (252) 480-4080 before pouring driveway!
* This permit becomes null and void if wo or work is suspended for a period of 12 m	rk or construction authorized is not commenced within 6 months or if construction on the at any time after work has started.
* As-built survey will be required prior to 0	Certificate of Occupancy or Certificate of Compliance.
* The developer shall be responsible for r	naintaining erosion and sediment control at the disturbed area.
* A final elevation certificate will be requir accordance with 151.41(C).	ed prior to issuance of a Certificate of Occupancy or a Certificate of Compliance in
* Development must meet all aspects of 0	Chapter 151 Flood Damage Prevention Ordinance including use and elevation.
* Per §153.186(D)(1) Mechanical equipment appurtenances shall be screened.	ent shall not be visible from any right-of-way and (2) All Mechanical equipment and
* THIS PROPERTY IS LOCATED IN A SI	
 All Special Flood Hazard Areas limit the storage only. 	e use of enclosures below the lowest floor for parking, building access and limited
	ation of the sand dunes which would increase potential flood damage.
	time of application, 21 days from the establishment of the lowest floor and at
DEVELOPER MUST OBTAIN ALL THE N PERMIT CAN BE ISSUED.	ECCESSARY FEDERAL, STATE AND LOCAL PERMITS BEFORE THIS
 * Must comply with Wind Borne Debris re * Zoning Final Inspection is required. 	quirements as defined in NCBC R301.2.1.2 and NCBC 1609.2.
* Construction must meet all aspect of Ch	napter 153 Zoning including lot coverage and setbacks.
	gineering certifications, record drawings and approvals as required by NCDEQ and r the sewer extension prior to Final Inspection.

Printed by : Ryan Lang on: 06/26/2019 09:51 AM

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BJ2019-120 PROJECT NAME: OBX Destinations New 25 Bedroom SFD SITE ADDRESS: 1505 VA DARE TRL N KILL DEVIL HILLS

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: Mage
710 5
Contractor or Authorized Agent: Date: 6-25-19

Printed by : Marty Shaw on: 06/25/2019 01:42 PM

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Town of Kill Devil Hills

PO BOX 1719 Kill Devil Hills, NC 27948 Phone: 252-449-5318 Fax: 252-441-4102 5 JAN

JUN 2 8 2019

Planning and Inspection Department

	3 ME: Isabell Deck S: 105 AVIATION A	BUILDING JOINT ISSUED: 06/26/2019 EXPIRES: 12/23/2019						
APPLICANT:	DAVID ISBELL 5507 Dawson Rd. B VIRGINIA BEACH, V	/A 23451		OWNER:	DAVID ISBEL 5507 Dawsor VIRGINIA BE		1	
CONTRACTOR	: Heath, Wayne 302 North Virginia Da Kill Devil Hills, NC 27 252-207-5468							
UNLICENSED - REMODELING:		302 North Kill Devil Hi	Heath, Wayne 302 North Virginia Dare Trail Kill Devil Hills, NC 27948 252-207-5468			License: 000000000 Expires:		
PARCEL:								
PIN:	988419703970)		Parcel Number:	003894	000		
Address:	105 AVIATION	AVE E KILL DE	EVIL HILLS					
				Zonin	g:			
Addition:	KITTY HAWK	SHORES - REV	ISED	Block	: 38	Lot(s):	15	
Legal Desc	ription:							
FEES:		Paid	Due	BUILDING ARE	A:			
Open Deck Fee		\$150.00	\$0.00	Open Decks		1	EA	
	Totals :	\$150.00	\$0.00					

Printed by : CTHUMAN on: 06/26/2019 09:28 AM

BJ2019-123 PROJECT NAME: Isabell Deck SITE ADDRESS: 105 AVIATION AVE E KILL DEVIL HILLS

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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:

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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

* * *

JUN 27 2019

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TELEVICE / DAU

BUILDING JOINT BJ2019-124 PROJECT NAME: Menendez Enclosure ISSUED: 06/27/2019 SITE ADDRESS: 511 FIRST ST W KILL DEVIL HILLS EXPIRES: 12/24/2019 APPLICANT: **Jillian Menedez** OWNER: **Jillian Menedez** 511 W First St 511 W First St KILL DEVIL HILLS, NC 27948 **KILL DEVIL HILLS, NC 27948** 252-489-3294 252-489-3294 License: Unlicensed Expires: 12/31/2020 **GENERAL:** Self UNKNOWN UNKNOWN, XX 00000 917-862-9006 PARCEL: Parcel PIN: 988409251037 003338000 Number: 511 FIRST ST W KILL DEVIL HILLS Address: Zoning: Addition: **FIRST FLIGHT VILLAGE SEC 1** 56 Block: 0 Lot(s): Legal Description: **BUILDING AREA:** FEES: Paid Due Res. Building Permit Fee \$407.25 \$0.00 **Residential Heated Space** 543 sq. Ft. (.75) Totals : \$407.25 \$0.00

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

Printed by : Marty Shaw on: 06/27/2019 01:36 PM

BJ2019-124

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3

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	

Insulation	
Final	
Zoning Final	
	Final

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BJ2019-124 PROJECT NAME: Menendez Enclosure SITE ADDRESS: 511 FIRST ST W KILL DEVIL HILLS

ISSUED: 06/27/2019 EXPIRES: 12/24/2019

BUILDING JOINT

CONDITIONS

	This permit becomes null and void if work or construction authorized is not commenced within 6 months or if construction r 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: Date: 6 27 19 Contractor or Authorized Agent:

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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 PROJECT NAME: BRAMWELL METER BASE SITE ADDRESS: 112 MEADOWLARK ST E KILL DEVIL HILLS ISSUED: 06/06/2019

APPLICANT:	Bramwell, David 112 E Meadowlark S Kill Devil Hills, NC 23		c	OWNER:	Bramwell, Da 112 E Meado Kill Devil Hills	wlark Street	
ELECTRICAL-	JNLIMITED:	SUBURBA PO Box 92 Manteo, No 252-475-13	5 C 27954	CONTRACTORS		License: 30633 Expires: 08/09	
PARCEL:							
PIN:	988308890986	6		Parcel Number:	003822	000	
Address:	112 MEADOW	LARK ST E KIL	L DEVIL HILL	S			
				Zoni	ng:		
Addition:	KITTY HAWK	SHORES - REV	ISED	Bloc	k: 34	Lot(s):	6
Legal Desc	cription:						
FEES:		Paid	Due				
Electrical Permi	it Fee	\$150.00	\$0.00				
	Totals :	\$150.00	\$0.00				

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

Mine.

JUN 6 2019 à

Printed by : Jordan Blythe on: 06/06/2019 09:56 AM

Page 1 of 2

ELECTRICAL

EXPIRES: 12/03/2019

EL2019-052

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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 All provisions of Laws and Ordinances governing this type of work will be c specified herein or not. The granting of a permit does not presume to give a the provisions of any other state/local law regulating construction or the per Issued By:	omplied with whether uthority to violate or cancel
Contractor or Authorized Agent:	Date: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 PROJECT NAM SITE ADDRESS	3 IE: Gatley Service (S: 213 RANDOM S			ELECTRICA ISSUED: 06/10/20 EXPIRES: 12/07/20			
APPLICANT:	Gatley, Kenneth 149 Racine Dr NEWPORT NEWS, VA 23608 VUYOVICH ELECTRIC P.O. Box 191 Point Harbor, NC 27964 252-202-1407			OWNER:	Gatley, Kenn 149 Racine I NEWPORT N	neth Dr NEWS, VA 2360)8
ELECTRICAL:						License: 1807 Expires: 03/3	
PARCEL:							
PIN:	98851721160	5		Parcel Number:	000765	000	
Address:	213 RANDOM	ST KILL DEVIL	HILLS				
				Zon	ing:		
Addition:	VIRGINIA DAI	RE SHORES AM	D BLK 2	Bloc	ck: 2	Lot(s):	11-12
Legal Descri	iption:						
EES:		Paid	Due				
Electrical Permit	Fee	\$150.00	\$0.00				
	Totals :	\$150.00	\$0.00				

JUN 1 0 2019

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In - - Th

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	С	
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:

light

Date: 6

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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

	4 ME: Adams Meter BA S: 104 OCEAN BA						ECTRICAL D: 06/11/2019
SHE ADDRES	C. TOP OCEAN DA					EXPIR	RES: 12/08/2019
APPLICANT:	Adams, Ann 5917 Farmwell RD RALEIGH, NC 27610 919-235-2407	0		OWNER:	Adams, Ann 5917 Farmwe RALEIGH, NC 919-235-2407	C 27610	
GENERAL:		Self UNKNOW UNKNOW 917-862-9	N, XX 00000			License: Unlic Expires: 12/3	
PARCEL:							
PIN:	988420705538	3		Parcel Number:	0038730	000	
Address:	104 OCEAN B	BAY BLVD KILL	DEVIL HILL	S			
				Zoni	ing:		
Addition:	KITTY HAWK	SHORES - REV	/ISED	Bloc	ck: 37	Lot(s):	10
Legal Desc	ription:						
FEES:		Paid	Due				
Electrical Permit	t Fee	\$150.00	\$0.00				
Temporary Elect (PreFinal)	tric Service Fee	\$0.00	\$0.00				
	Totals :	\$150.00	\$0.00				
PROJECT DESC	RIPTION: C/O Me	ter base	V NUU # 2001	N 5.00			
			1000				

JUN 1 1 2019

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EL2019-054

j,

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
Final	REQUIRED INSPECTIONS
	CONDITIONS
This permit becomes null and	d void if work or construction authorized is not commenced within 6 months or if construction
or work is suspended for a period	od 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:

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Page 2 of 2

Date: 6/11

2019



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Town of Kill Devil Hills

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

JUN 2 4 2019

Planning and Inspection Department

TUTION

ELECTRICAL

ISSUED: 06/14/2019

EXPIRES: 12/11/2019

EL2019-057 PROJECT NAME: SITE ADDRESS: 3209 RAYMOND AVE KILL DEVIL HILLS

APPLICANT: 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		(OWNER:	Triple R Propertie 649 Fort Raleigh I VIRGINIA BEACH 757-404-4349	Dr.			
		side Rd		Lice Expi	nse: 2445 res:	1		
PARCEL:								
PIN:	988513045589	9		Parcel Number:	000090000			
Address:	3209 RAYMON	ND AVE KILL DI	EVIL HILLS					
				Zonir	ng:			
Addition:	ORVILLE BEA	CH BLK 5		Block	c: 5	Lot(s):	13	
Legal Descripti	on:							
FEES:		Paid	Due					
Electrical Permit Fe	е	\$150.00	\$0.00					
Angenete de la de la constante, rederen de la constante de la constante de la constante de la constante de la c	Totals :	\$150.00	\$0.00					

PROJECT DESCRIPTION: Replace overhead service cable.

Printed by : Marty Shaw on: 06/14/2019 01:05 PM

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SITE ADDRESS: 3209 RAYMOND AVE KILL DEVIL HILLS

EXPIRES: 12/11/2019

	DETAILS	
Permit		
Name	Value	
ZONING DISTRICT	С	
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: Bth Date: 6-24-204

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EL2019-059

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Town of Kill Devil Hills

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

JUN 1 9 2019

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Planning and Inspection Department

ELECTRICAL ISSUED: 06/19/2019

PROJECT NAME: SITE ADDRESS: 112 AVIATION AVE E KILL DEVIL HILLS

EXPIRES: 12/16/2019

APPLICANT:	Cernetich, Greg 302 Woodmont Rd JOHNSTOWN, PA 814-659-8472	15905		OWNER:	Cernetich, Gre 302 Woodmor JOHNSTOWN 814-659-8472	nt Rd I, PA 15905	
ELECTRICAL -	LIMITED:	J Pugh Ser PO Box 20 Jarvisburg, 252-202-46	4 NC 27947			icense: 29815 xpires: 07/26	
PARCEL:							
PIN:	98841971417	4		Parcel Number:	0039030	000	
Address:	112 AVIATIO	AVE E KILL DI	EVIL HILLS				
				Zoni	ing:		
Addition:	KITTY HAWK	SHORES - REV	ISED	Bloc	k: 39	Lot(s):	6
Legal Desc	cription:						
EES:		Paid	Due				
Electrical Permi	it Fee	\$150.00	\$0.00				
ut	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

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:

Printed by : Marty Shaw on: 06/19/2019 08:06 AM

Page 2 of 2

____ Date: <u>6-19-19</u>



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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

	Schenk, Francis T. 2710 Brockington Di LAS VEGAS, NV 89 702-468-5570		OW	i	chenk, Francis T. 710 Brockington Drive AS VEGAS, NV 89120 02-468-5570			
ELECTRICAL, UNLIMITED:		PO Box 27 Kill Devil H	LOWIRE TECHNOLOGIES PO Box 2751 Kill Devil Hills, NC 27948 252-449-4690		License: 19403 Expires: 10/02/2019			
PARCEL:								
PIN:	98931314236	5		Parcel Number:	004957000	1		
Address:	302 FRESH POND DR E KILL DEVIL HILLS							
				Zoning	:			
Addition:	LAKE DRIVE	DEVELOPMENT	ELOPMENT SEC 2		0	Lot(s):	31	
Legal Descrip	otion:							
FEES:		Paid	Due					
Electrical Permit F	ee	\$150.00	\$0.00				,	
and down and down the state of	Totals :	\$150.00	\$0.00				e.	

PROJECT DESCRIPTION: Replace & Relocate meter base. Update service feeder & add hot tub circuit and 2 WP receptacles. JUN 18 2019

Printed by : Marty Shaw on: 06/17/2019 01:35 PM

Page 1 of 2

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EXPIRES: 12/14/2019

	DI	TAILS	
Permit			
Name	Value		
ZONING DISTRICT	С		
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: Edlard Date: 6-18-19

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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

	55 ME: Bermuda Bay H SS: 1101 Cambridge				ELECTRICAL ISSUED: 06/12/2019 EXPIRES: 12/09/2019
APPLICANT:	Bermuda Bay Home PO Box 1807 Nags Head, NC 279 480-4722		on	OWNER:	Bermuda Bay Homeowners Association PO Box 1807 Nags Head, NC 27959 480-4722
CONTRACTOR	2: SEABREEZE ELEC 136 CAROLINA CT MANTEO, NC 27954 (252) 654-2094	WEST	G INC		
ELECTRICAL -	UNLIMITED:	136 CARC	OLINA CT WES , NC 27954	C & LIGHTING INC	C License: 30079 Expires: 04/05/2020
PARCEL:					
PIN:	988306387222	2		Parcel Number:	
Address:	1101 Cambrid	lge Rd. Kill Devi	il Hills		
				Zonir	ng:
Addition:				Block	k: Lot(s):
Legal Desc	ription: Lot 300 R	ecreation, Suns	et Bay		
EES:		Paid	Due		
Electrical Permi	it Fee	\$150.00	\$0.00		
	Totals :	\$150.00	\$0.00		

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

JUN 1 3 2019

Printed by : CTHUMAN on: 06/12/2019 08:54 AM

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

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

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: Date: (/13/19

Printed by : CTHUMAN on: 06/12/2019 08:54 AM

Contractor or Authorized Agent:



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

JUN 7 2019

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Planning and Inspection Department

I.S.

BANNNER2019-001

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

E	BANNER	
ISSUED:	01/30/2019)

EXPIRES: 04/30/2019

APPLICANT:	LOWES CORF P.O. Box 1111 1605 Curtis Bri Wilkesboro, NC	dge Rd.	c	OWNER:	LOWES P.O. Box 1605 Cur Wilkesbo		d. 7	
CONTRACTOR	:	SAME AS UNKNOWN UNKNOWN				License Expires		as Owner)/2019
PARCEL:								
PIN:	9884104	54012		Parcel Number:	002	746000		
Address:	1500 CR	OATAN HWY N KILL	DEVIL HILLS					
				Zo	ning:			
Addition:	SUBDIVI	SION - NONE		Blo	ock: 0	L	ot(s):	0
Legal Desc	ription:							
FEES:		Paid	Due					
Banner Fee		\$100.00	\$0.00					
9660000000000-0-0-0707000000000000000000	Totals	: \$100.00	\$0.00					
PROJECT DESC	RIPTION: 2 b	anners on building						
			DETAILS	3				
Permit								
Name		Value						
# OF BANNER	S	2						
ZONING DIST	RICT	С						
PURPOSE		Commercial Access	sory					
CONSTRUCTI	ON COST	300.00						
FLOOD ZONE		AE						

Printed by : Donna Elliott on: 01/30/2019 01:03 PM

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.

Date:

Telett Issued By: **Contractor or Authorized Agent:**

Printed by : Donna Elliott on: 01/30/2019 01:03 PM



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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

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JUN 6 2019

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BANNNER2019-002

BANNER

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

						•
ISSUED	: ()6/	05	/20	19	9

EXPIRES: 09/03/2019

	Sharp, Natalya PO Box 1181 kitty hawk, nc 27949 252-305-2828		c		olivola, ma Nancy o Wa P o Box 364 Kill Devil H	LTON	
CONTRACTOR:		SAME AS A 0000000 00000000, r				.icense: 123456 Expires: 04/30/2020	
PARCEL:							
PIN:	988410374122			Parcel Number:	0027390	000	
Address:	1700 CROATAN	HWY N KILL	DEVIL HILLS				
				Zoning	g:		
Addition:	HEDRICKS ADD	DITION - CROA	TAN SH	Block:	0	Lot(s): 0	
Legal Descri	ption:						
FEES:		Paid	Due				
Banner Fee		\$50.00	\$0.00				
	Totals :	\$50.00	\$0.00				
PROJECT DESCR	RIPTION: Banner or	n the building/Ur	nit 1712				
			DETAILS	3			
Permit							
Name	Valu	е					
# OF BANNERS	1						
	ст с						
ZONING DISTR		mercial Access	orv				
ZONING DISTR	Com	mercial Access	.,				
			.,				

BANNNER2019-002 PROJECT NAME: Natalya Sharp/Max's Pizza SITE ADDRESS: 1700 CROATAN HWY N KILL DEVIL HILLS

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 backli

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.

lint Issued By: Date: 6/6/19 **Contractor or Authorized Agent:**

Printed by : Donna Elliott on: 06/06/2019 12:19 PM



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

Planning and Inspection Department

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JUN 4 2019

ALL OT A LINES

SG2019-00 PROJECT NAM SITE ADDRESS		N HWY S KILL D	EVIL HILLS			ISSUE	SIGN D: 04/09/2019 ES: 10/06/2019
APPLICANT:	SUNSATION REAL 353 Village Road Virginia Beach, VA 757-822-8412			OWNER:	SUNSATION 353 Village R Virginia Beac 757-822-841	oad h, VA 23451	
CONTRACTOR:		SAME AS A 00000000 00000000,	APPLICANT			License: 12345 Expires: 04/30	
PARCEL:				0.0			
PIN:	98931304087	9		Parcel Number:	008384	000	
Address:	1600 CROAT	AN HWY S KILL	DEVIL HILL	S			
				Zon	ing:		
Addition:	OCEAN ACR	ES TRACT 3 SEC	01	Bloc	k: A	Lot(s):	27-28
Legal Desci	ription:						
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

Printed by : CTHUMAN on: 04/09/2019 12:10 PM

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SG2019-007 PROJECT NAME: LaLa Land SITE ADDRESS: 1600 CROATAN HWY S KILL DEVIL HILLS

	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	С	
PURPOSE	Commercial Accessory	
CONSTRUCTION COST	3500.00	
FLOOD ZONE	AE	

Final

. 77

REQUIRED INSPECTIONS

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.

Printed by : CTHUMAN on: 04/09/2019 12:10 PM

SG2019-007 PROJECT NAME: LaLa Land	SIGN ISSUED: 04/09/2019
SITE ADDRESS: 1600 CROATAN HWY S KILL DEVIL HILLS	EXPIRES: 10/06/2019
I hereby certify that I have read and example this application and know	ow the same to be true and correct
All provisions of Laws and Ordinances governing this type of work w specified herein or not. The granting of a permit does not presume to the provisions of any other state/local law regulating construction or	ill be complied with whether give authority to violate or cancel
Issued By:	
Contractor or Authorized Agent:	Date: 6.4-19

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Printed by : CTHUMAN on: 04/09/2019 12:10 PM

Page 3 of 3

	\$100.00	\$0.00			
	Paid	Due			
ription:					. ,
					Lot(s):
TZZ N Groate		I FIIIS	Zor	nina:	
1722 N Croots	n Hway Kill Dovi	l Hille	Number.		
988410373044	4-7288		Parcel		
	600 West I Kill Devil H	Boundry Street lills, NC 27948			License: LEGACY UNKNOW Expires: 12/31/2019
Dream Cream PO Box 3323 Kill Devil Hills, NC 2 252-256-1473	7948		OWNER:	POBO	LA, Mark DX 364 EVIL HILLS, NC 27948
					EXPIRES: 12/18/20
	Hwy Kill Devil H	lills			
					SIG ISSUED: 06/21/20
AROLI	Planning	and Inspe	ction Depa	rtment	
				1-4102	JUN 2 1 2019
L HILL	Tow			ills	•
	Dream Cream PO Box 3323 Kill Devil Hills, NC 2 252-256-1473 : 988410373044	Phone: 25 Phone: 25 Planning Planning ME: Dream Cream PO Box 3323 Kill Devil Hills, NC 27948 252-256-1473 MDLIGHT 600 West I Kill Devil H 252-449-21 988410373044-7288 1722 N Croatan Hwy Kill Devil Paid	PO BOX Kill Devil Hills, Phone: 252-449-5318 Planning and Insper Paint Po Box 323 Control Point Point Hills Pream Cream PO Box 3323 Control Hills, NC 27948 252-256-1473 Control Point Hills, NC 27948 252-449-2800 P88410373044-7288 1722 N Croatan Hwy Kill Devil Hills reption: Paid Due	PO BOX 1719 Kill Devil Hills, NC 27948 Phone: 252-449-5318 Fax: 252-44 Planning and Inspection Depa Planning and Inspection	Kill Devil Hills, NC 27948 Phone: 252-449-5318 Fax: 252-441-4102 Planning and Inspection Department Pole Pole Pole Pole Vill Devil Hills, NC 27948 Starter Plaid Paid

PROJECT DESCRIPTION: Sign on the building

Printed by : Jordan Blythe on: 06/21/2019 08:45 AM

SG2019-014

Y ... Y

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:	man		
	INA		1 21 10
Contractor or Authorized Agent:	14-1	_ Date:	6-01-17

Printed by : Jordan Blythe on: 06/21/2019 08:45 AM



PROJECT DESCRIPTION: Free-standing sign

Printed by : Jordan Blythe on: 06/24/2019 08:43 AM

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SG2019-016

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

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:	
10-11 AX 91	620 10
Contractor or Authorized Agent:	Date: 0-28-19

Printed by : Jordan Blythe on: 06/24/2019 08:43 AM



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

Planning and Inspection Department

DEMOLITION DM2019-003 ISSUED: 05/31/2019 **PROJECT NAME:** SITE ADDRESS: 1505 VA DARE TRL N KILL DEVIL HILLS EXPIRES: 11/27/2019 APPLICANT: Ocean Estates LLC OWNER: **Ocean Estates LLC** 905 NORTH VA Dare TR 905 NORTH VA Dare TR Kill Devil Hillsl, NC 27948 Kill Devil Hillsl, NC 27948 252-207-8710 252-207-8710 GENERAL - UNLIMITED: SAUNDERS, RM / R M SAUNDERS GENERAL License: 32380 CONTRACTORS INC Expires: 01/01/2020 PO Box 1922 Kill Devil Hills, NC 27948 252-207-8710 PARCEL: Parcel PIN: 988411651589 002770000 Number: 1505 VA DARE TRL N KILL DEVIL HILLS Address: Zoning: Addition: **CROATAN SHORES** 18-19 Block: Α Lot(s):

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 3 1 2019

Printed by : Marty Shaw on: 05/31/2019 01:19 PM

DM2019-003 PROJECT NAME: SITE ADDRESS: 1505 VA DARE TRL N KILL DEVIL HILLS

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

Printed by : Marty Shaw on: 05/31/2019 01:19 PM



Printed by : CTHUMAN on: 06/19/2019 12:38 PM

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

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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.

I hereby certify that I have read and examined this application and know the All provisions of Laws and Ordinances governing this type of work will be co specified herein or not. The granting of a permit does not presume to give and the provisions of any other stately cal law regulating construction or the per	omplied with whether uthority to violate or cancel
Issued By:	
Contractor or Authorized Agent:	Date: 10/19/2019



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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 PROJECT NAME: SITE ADDRESS: 634 CANAL DR KILL DEVIL HILLS EXPIRES: 43/03/2040

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, Jas PO Box 17 nags head 252-599-29	71 , nc 27959			License: 58400 Expires: 01/01	
PARCEL:							
PIN:	988413240955	5		Parcel Number:	00336	5000	
Address:	634 CANAL DI	R KILL DEVIL H	IILLS				
				Zoni	ing:		
Addition:	FIRST FLIGHT	VILLAGE SEC	1	Bloc	k: 0	Lot(s):	93
Legal Descr	iption:						
FEES:		Paid	Due				
Fence		\$100.00	\$0.00				
	Totals :	\$100.00	\$0.00				

PROJECT DESCRIPTION: New fence in rear yard.

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JUN 5 2019

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Printed by : Marty Shaw on: 06/05/2019 01:52 PM

EXPIRES: 12/02/2019

		DETAILS
Permit		
Name	Value	
ZONING DISTRICT	RL	
CAMA PERMIT	N	
CAMA EXEMPTION	Ν	
FLOOD ZONE	AE	
BASE FLOOD ELEVATION	8	
PURPOSE	Residential Repair/Remodel	
CONSTRUCTION COST	6000.00	
CULVERT	Ν	
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!

No not. Gai Fubic Services Department (252) 400-4000 belore 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 Date: 6-4-19 **Contractor or Authorized Agent:**

Printed by : Marty Shaw on: 06/05/2019 01:52 PM



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

Planning and Inspection Department

	ME: William Stewart		ZONING PERMIT ISSUED: 06/04/2019
SITE ADDRES	SS: 1511 DOGWOOD LN KILL DEVIL	. HILLS	EXPIRES: 12/01/2019
APPLICANT:	STEWART, WILLIAM J	OWNER:	STEWART, WILLIAM J

	328 WEST EDEN S KILL DEVIL HILLS, I 252-202-8673	TREET		OWNER.		DEN STREET HILLS, NC 2794	8
CONTRACTOR		SAME AS UNKNOW				License: Same Expires: 12/30	
PARCEL:							
PIN:	988413139920	D		Parcel Number:	027499	0000	
Address:	1511 DOGWC	OD LN KILL DE	EVIL HILLS				
				Zoni	ng:		
Addition:	FIRST FLIGH	T VLG PH A SEC	3	Bloc	k: 0	Lot(s):	56
Legal Desc	ription:						
FEES:		Paid	Due				
Fence		\$100.00	\$0.00				
	Totals :	\$100.00	\$0.00	No.44			

PROJECT DESCRIPTION: Fence

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JUN 4 2019

Printed by : Donna Elliott on: 06/04/2019 01:36 PM

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	Ν			
CAMA EXEMPTION	Ν			
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.

ornollino Issued By: Contractor or Authorized Agent:

Date: 6/4/19

Printed by : Donna Elliott on: 06/04/2019 01:36 PM



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

Planning and Inspection Department

PAID

JUN 2 4 2019

TOWAY OF

 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 2794	8		OWNER:	KING, DIAN 707 Indian Kill Devil Hi		
GENERAL:		Self UNKNOWN UNKNOWN 917-862-90	N, XX 00000			License: Unlice Expires: 12/31	
PARCEL:							
PIN:	988409252802			Parcel Number:	00273	30000	
Address:	707 INDIAN DR	KILL DEVIL H	IILLS				
				Zon	ing:		
Addition:	HIGH VIEW - HE	DRICKS ADD)	Blog	ck: F	Lot(s):	24
Legal Des	cription:						
FEES:		Paid	Due				
Fence		\$100.00	\$0.00				
	Totals :	\$100.00	\$0.00				

PROJECT DESCRIPTION: Replace fence on rear of property

Printed by : Jordan Blythe on: 06/24/2019 08:52 AM

P .. 1

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	Ν .	

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: Date: 6-24-19

Printed by : Jordan Blythe on: 06/24/2019 08:52 AM

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Town of Kill Devil Hills

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

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JUN 2 0 2019

Planning and Inspection Department

Tourse Links

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

APPLICANT:	VIGIL, ALEX 806 W First Street Kill Devil Hills, NC 2794	8		OWNER:		ALEX First Street /il Hills, NC 279	948	
GENERAL:		Self UNKNOWN UNKNOWN 917-862-90	I, XX 00000			License: Expires:		
PARCEL:								
PIN:	988413135610			Parcel Number:	02	27546122		
Address:	806 FIRST ST W	KILL DEVIL	HILLS					
				Zon	ing:			
Addition:				Blog	ck: 0	Lo	ot(s):	122
Legal Desc	cription:							
FEES:		Paid	Due					
Fence		\$100.00	\$0.00					
	Totals :	\$100.00	\$0.00					

PROJECT DESCRIPTION: Fence around perimeter of back yard

4,060 alm

Printed by : CTHUMAN on: 06/17/2019 04:25 PM

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	
RONT YARD SETBACK	30	
REAR YARD SETBACK	20% Depth >30	
SIDE YARD SETBACK	10	
CAMA PERMIT	N	
CAMA EXEMPTION	N	
LOOD ZONE	AE	
BASE FLOOD ELEVATION	9.0	
URPOSE	Residential Accessory	
SURVEYOR NAME AND	William Yetzer L-5274	
CULVERT	N	
DRIVEWAY INVERT 2	N	

Stringline

Zoning Final

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.

I hereby certify that I have read and examined this application All provisions of Laws and Ordinances governing this type of specified herein or not. The granting of a permit does not pre- the provisions of any other state/local law regulating constru-	work will be complied with whether sume to give authority to violate or cancel
Issued By:	
Contractor or Authorized Agent:	Date: 20/19

Printed by : CTHUMAN on: 06/17/2019 04:25 PM



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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 PROJECT NAME: SITE ADDRESS: 431 Palmetto St. Kill Devil Hills					ZONING PERMIT ISSUED: 06/14/2019 EXPIRES: 12/11/2019				
APPLICANT:	Skinner, Brian & Mega 9019 Ribbon Falls Loo BRISTOW, VA 20136 703-869-2761			OWNER:	9019 R	r, Brian & Megan ibbon Falls Loop OW, VA 20136 9-2761			
GENERAL:			Enforcement hington Lane nc 27949 96			License: 12 Expires: 10			
PARCEL:							· · · · · · · · · · · · · · · · · · ·		
PIN:	988517002147			Parcel Number:					
Address:	431 Palmetto St	. Kill Devil Hills	6	•					
				Zon	ing:				
Addition:				Blog	ck:	Lot(s)):		
Legal Des	cription: Lot 10R, Bl	50, Virginia D	are Shores						
FEES:		Paid	Due						
Fence		\$100.00	\$0.00						
IL. INStructures products mate and an and an and a second second	Totals :	\$100.00	\$0.00	-					

PROJECT DESCRIPTION: New fence in front yard.

C.P.A

JUN 1 4 2019

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Printed by : Marty Shaw on: 06/14/2019 09:40 AM

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

Issued By:

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.

Contractor or Authorized Agent: RL We

Printed by : Marty Shaw on: 06/14/2019 09:40 AM

Page 2 of 2

Date: 6-14-19



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 SITE ADDRESS: 1510 MONUMENT LN KILL DEVIL HILLS

EXPIRES: 12/09/2019

APPLICANT:	Riddick, Jason 1510 Monument Lane Kill Devil Hills, NC 27948		OWNER:		dick, Jason 0 Monument Lane Devil Hills, NC 27948		
GENERAL:		Self UNKNOWN UNKNOWN 917-862-90	N, XX 00000			License: Unlicense Expires: 12/31/202	-
PARCEL:							
PIN:	988414343509			Parcel Number:	003391	000	
Address:	1510 MONUME	NT LN KILL D	EVIL HILLS				
				Zon	ing:		
Addition:	FIRST FLIGHT	VILLAGE SEC	1	Bloc	ck: 0	Lot(s): 12	23
Legal Desc	cription:						
EES:		Paid	Due				
Fence		\$100.00	\$0.00				
	Totals :	\$100.00	\$0.00	-			

PROJECT DESCRIPTION: 6ft fence in the back yard

JUN 1 2 2019

Printed by : Jordan Blythe on: 06/12/2019 03:36 PM

ZP2019-049

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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	Ν
CAMA EXEMPTION	Ν
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	Ν
	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.

specified herein or not. The granting of a permit does not presume to give the provisions of any other state/local law regulating construction or the	
Issued By:	
Contractor or Authorized Agent:	Date: 6-12-19

Printed by : Jordan Blythe on: 06/12/2019 03:17 PM



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

Planning and Inspection Department

	50 ME: WADDELL FENCE SS: 1409 PIRATES LOOI	P KILL DEV	IL HILLS			ISSUE	G PERMIT D: 06/12/2019 ES: 12/09/2019
APPLICANT:	Ryan Waddell 2604 S. Memorial Blvd. nags head, nc 27959 252-599-1611			OWNER:	Ryan Waddo 2604 S. Mer nags head, r 252-599-161	norial Blvd. nc 27959	
GENERAL:		Self UNKNOWN UNKNOWN 917-862-90	I, XX 00000			License: Unlice Expires: 12/31	
PARCEL:							
PIN:	988414440091			Parcel Number:	003558	8000	
Address:	1409 PIRATES LO	OP KILL DE	EVIL HILLS				
				Zon	ing:		
Addition:	LANDING SECTIO	N 2, THE		Blog	ck: 0	Lot(s):	53
Legal Des	cription:						
FEES:		Paid	Due				
Fence	9	5100.00	\$0.00				

\$0.00

PROJECT DESCRIPTION: 6' FENCE ON SOUTHERN PROPERTY LINE

\$100.00

17.1

Totals :

JUN 1 2 2019

. Londa

Printed by : Jordan Blythe on: 06/12/2019 02:51 PM

21 1- 1

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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	Ν	

REQUIRED INSPECTIONS

Stringline

Zoning Final

CONDITIONS

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

I hereby certify that I have read and examined this application and know the same to be true and correct. All provisions of Laws and Ordinances governing this type of work will be complied with whether specified herein or not. The granting of a permit does not presume to give authority to violate or cancel the provisions of any other state/local law regulating construction or the performance of construction. Issued By:						
Contractor or Authorized Agent:	Date:	6-12-19				

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DEV	ILA	Tow	n of Kil	l Devil Hi	lls		
X	LES ,			X 1719 5, NC 27948 Fax: 252-441	-4102	2	10
To Avia	AROLIN ^P					JUN 1	1 2019
· / C		Planning	and Inspe	ection Depar	rtment		-
	18 ME: KOZAK FENCE SS: 2026 VA DARE TF	rl n kill de	VIL HILLS			ISSUE	IG PERMIT D: 06/11/2019 ES: 12/08/2019
APPLICANT:	KOZAK, WARREN D 3133 Riveredge Dr PORTSMOUTH, VA 23	3703		OWNER:	KOZAK, WA 3133 Rivere PORTSMOU		
BUILDER:		UNKNOW	N, XX 00000			License: unlice Expires: 12/3	
PARCEL:							
PIN:	988518301286			Parcel Number:	030652	2000	
Address:	2026 VA DARE	TRL N KILL D	EVIL HILLS				
				Zoni	•		
Addition:				Bloc	k: 0	Lot(s):	32 & 32A
Legal Desc	cription:						
		Paid	Due				
			0000				
FEES: Fence		\$100.00	\$0.00				

PROJECT DESCRIPTION: FENCE ALONG REAR AND NORTH PROPERTY LINES

Printed by : Jordan Blythe on: 06/11/2019 02:26 PM

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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

F.

DETAILS

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

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: Date: 0 Contractor or Authorized Agent: _

Printed by : Jordan Blythe on: 06/11/2019 02:26 PM



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

JUN 1 1 2019

Planning and Inspection Department

ZP2019-047 PROJECT NAME: APPLETON FENCE 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:	2024 N Va D	ie & Randall Appleton N Va Dare evil Hills, NC 27948			
BUILDER:		UNKNOW	ALL ABOUT FENCES License: unlicensed JNKNOWN Expires: 12/30/201 JNKNOWN, XX 00000 252-473-2233					
PARCEL:								
PIN:	988518302212			Parcel Number:	030653	3000		
Address:	2024 VA DARE	TRL N KILL D	EVIL HILLS					
				Zoni	ng:			
Addition:				Block	k: 0	Lot(s):	34 & 34A	
Legal Des	cription:							
EES:		Paid	Due					
Fence		\$100.00	\$0.00					
	Totals :	\$100.00	\$0.00	-				

Printed by : Jordan Blythe on: 06/11/2019 02:21 PM

ZP2019-047

-1

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	Ν	
CAMA EXEMPTION	N	
FLOOD ZONE	AE	
BASE FLOOD ELEVATION	9.00	
PURPOSE	Residential Accessory	
CONSTRUCTION COST	5791.19	
CULVERT	Ν	
DRIVEWAY INVERT 2	Ν	
	REQUIRED INSPECTIONS	
Stringline	Final	
and the second	CONDITIONS	
	l void if work or construction authorized is not commenced within 6 months or if co od of 12 months at any time after work has started.	onstruction
Il provisions of Laws and pecified herein or not. Th	e read and examined this application and know the same to be true and d Ordinances governing this type of work will be complied with wheth he granting of a permit does not presume to give authority to violate of er state/local law regulating construction or the performance of const	her or cancel
contractor or Authorized	Agent: Dellie App Date: 10/11/1	19

Printed by : Jordan Blythe on: 06/11/2019 02:21 PM

Page 2 of 2



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

Planning and Inspection Department

JUN 27 2019

TC:MICS POLICE LINES

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

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 UNKNOWN UNKNOWN				License: Same Expires: 12/30		
PARCEL:								
PIN:	988413130091			Parcel Number:	02847	79000		
Address:	815 CEDAR DF		HILLS					
				Zoni	ng:			
Addition:				Bloc	k: 0	Lot(s):	99	
Legal Descrip	ption:							
FEES:		Paid	Due					
Driveway Permit F	ee	\$50.00	\$0.00					
	Totals :	\$50.00	\$0.00	-				

PROJECT DESCRIPTION: Replace portion of driveway

Printed by : Donna Elliott on: 06/27/2019 12:15 PM

DW2019-010 PROJECT NAME: John Giglia SITE ADDRESS: 815 CEDAR DR KILL DEVIL HILLS

EXPIRES: 12/24/2019

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

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.

int Issued By: Date 2 June 19 **Contractor or Authorized Agent:**

Printed by : Donna Elliott on: 06/27/2019 12:15 PM



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Town of Kill Devil Hills

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

JUN 3 2019

1 10 2 A

Planning and Inspection Department

DW2019-00 PROJECT NAM	Addtion			DRIVEWAY ISSUED: 06/03/2019				
SITE ADDRESS	: 216 SOTHEL S	T E KILL DEVIL	HILLS			EXPIRES: 11	/30/201	
	Duran Oberlan				Dung Charle			
	Bunn, Charles 22226 Old Chapel F Newsomes, VA 238	Road 74		OWNER:	Bunn, Charle 22226 Old C Newsomes, V	hapel Road		
GENERAL:	UNKNOW	Self UNKNOWN UNKNOWN, XX 00000 917-862-9006			License: Unlicensed Expires: 12/31/2020			
PARCEL:								
PIN:	98851313406	0		Parcel Number:	000416	0000		
Address:	216 SOTHEL	STE KILL DEV	IL HILLS					
				Zon	ing:			
Addition:	VIRGINIA DA	RE SHORES		Bloc	ck: 8	Lot(s): 29-30		
Legal Descri	ption:							
FEES:		Paid	Due					
Building Permit F	ee - Minimum	\$150.00	\$0.00					
sennitefilifiand recolligiolitearitiere admitterAroutseethi	Totals :	\$150.00	\$0.00					

Printed by : Marty Shaw on: 06/03/2019 02:04 PM

DW2019-009 PROJECT NAME: Bunn Driveway Addtion SITE ADDRESS: 216 SOTHEL ST E KILL DEVIL HILLS

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	Slab/Foundation	
0		
Final		
This permit becomes null and work is suspended for a perio NOTICE: Call Public Services	CONDITIONS void if work or construction authorized is not commenced within 6 months or if cons d of 12 months at any time after work has started. Department (252) 480-4080 before pouring driveway! d prior to Certificate of Occupancy or Certificate of Compliance.	truction
This permit becomes null and work is suspended for a perio NOTICE: Call Public Services As-built survey will be required hereby certify that I have Il provisions of Laws and pecified herein or not. The	void if work or construction authorized is not commenced within 6 months or if cons d of 12 months at any time after work has started. Department (252) 480-4080 before pouring driveway!	correc
This permit becomes null and work is suspended for a perio NOTICE: Call Public Services As-built survey will be required hereby certify that I have all provisions of Laws and pecified herein or not. The he provisions of any other	void if work or construction authorized is not commenced within 6 months or if const of of 12 months at any time after work has started. Department (252) 480-4080 before pouring driveway! d prior to Certificate of Occupancy or Certificate of Compliance. read and examined this application and know the same to be true and Ordinances governing this type of work will be complied with whether e granting of a permit does not presume to give authority to violate or or state/local law regulating construction or the performance of construct	correc

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Town of Kill Devil Hills

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

JUN 26 2019

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R_ "

Planning and Inspection Department

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				
APPLICANT:	SINANAJ, ERMAL 205 W. Morning View nags head, nc 27959	v Drive	c	OWNER:	: SINANAJ, ERMAL 205 W. Morning View Drive nags head, nc 27959				
CONTRACTOR:	ALL COUNTY BUILD 205 West Morning D NAGS HEAD, NC 27 252-475-4047	ove							
GENERAL-LIMIT	TED:	205 West M	TY BUILDERS Morning Dove AD, NC 27959 047	LLC		License: 59306 Expires: 01/11/2020			
PARCEL:									
PIN:	988405283945	5		Parcel Number:	002057	7000			
Address:	0 FIFTH ST W	KILL DEVIL HI	LS						
				Zoni	ng:				
Addition:	WRIGHT'S SH	IORES		Bloc	k: 0	Lot(s): 3			
Legal Descr	iption:								
EES:		Paid	Due						
and Disturbing		\$100.00	\$0.00						
	Totals :	\$100.00	\$0.00						

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

Printed by : CTHUMAN on: 06/19/2019 04:50 PM

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	Ν
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 grapting 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

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

JUN 3 2019

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Planning and Inspection Department

BP2019-126 PROJECT NAME: Stephens Piling Replacement SITE ADDRESS: 305 BURNS DR KILL DEVIL HILLS					BUILDING ISSUED: 05/31/2019 EXPIRES: 11/27/2019			
	STEPHENS, J ANTHONY P O BOX 2475 KILL DEVIL HILLS, NC 27948			OWNER:	STEPHENS, P O BOX 247 KILL DEVIL H			
	Emanuelson and Da 6705 CROATAN HV 6705 S. Croatan Hw nags head, nc 27959 252-261-2215	VY SOUTH y.						
RESIDENTIAL, LI	MITED:	Emanuelso 6705 CRO/ 6705 S. Cro nags head, 252-261-22	ATAN HWY So batan Hwy. nc 27959	OUTH		License: 79801 Expires: 06/14/2019		
PARCEL:								
PIN:	98831694105	7		Parcel Number:	008463	000		
Address:	305 BURNS D	R KILL DEVIL H	HILLS					
				Zoni	ng:			
Addition:	OCEAN ACRE	ES TRACT 3 SEC	01	Bloc	k: F	Lot(s): 5		
Legal Descri	ption:							
FEES:		Paid	Due					
Building Permit Fe Fee	ee - Minimum	\$150.00	\$0.00					
	Totals :	\$150.00	\$0.00					

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

Printed by : CTHUMAN on: 05/31/2019 09:09 AM



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

JUN 4 2019

s 41 - 1

Planning and Inspection Department

BP2019-127 PROJECT NAME: DREAM TIME PILING REPAIR SITE ADDRESS: 1209 WINDSONG WAY KILL DEVIL HILLS						BUILDING ISSUED: 06/03/201 EXPIRES: 11/30/201			
APPLICANT:	DREAM TIME OBX L 319 WHITESTONE F CHARLOTTE, NC 28 704-400-4871	RD			DREAM TIMI 319 WHITES CHARLOTTE 704-400-487	TONE RD E, NC 28270			
CONTRACTOR:		BARRY TV UNKNOWN UNKNOWN 252-423-05	N N, XX 00000			License: LEGACY UNKNOWN Expires: 12/30/2019			
PARCEL:									
PIN:	988415647321			Parcel Number:	004079	000			
Address:	1209 WINDSO	NG WAY KILL	DEVIL HILLS	5					
				Zoning	g:				
Addition:				Block:	0	Lot(s): 11			
Legal Desci	ription:								
FEES:		Paid	Due						
Building Permit I Fee	Fee - Minimum	\$150.00	\$0.00						
	Totals :	\$150.00	\$0.00						

PROJECT DESCRIPTION: REPLACE NW PILING

Printed by : Jordan Blythe on: 06/03/2019 08:44 AM

BP2019-127

4 - · · ·

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	Ν	
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:	time	
Contractor or Authorized Agent:	Barr	Date: 6-4-19

Printed by : Jordan Blythe on: 06/03/2019 08:44 AM



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

JUN 4 2019

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Planning and Inspection Department

BP2019-12 PROJECT NA SITE ADDRES	28 ME: Heaton Piling replacement SS: 411 SEAGULL CT KILL DE	BUILDING ISSUED: 06/03/2019 EXPIRES: 11/30/2019			
APPLICANT:	Heaton, Russell 193 Winnepeg Ave EGG HARBOR TOWNSHIP, NJ (OWNER: 08234	Heaton, Russell 193 Winnepeg Ave EGG HARBOR TOWNSHIP, NJ 08234		
GENERAL:	UNKI	NOWN NOWN, XX 00000 162-9006	License: Unlicensed Expires: 12/31/2020		

PARCEL:								
PIN: 988414334670			Parcel Number:	003577000				
Address:	411 SEAGULL CT KILL DEVIL HILLS							
				Zoning:				
Addition:	LANDING SE	CTION 2, THE		Block:	0	Lot(s):	72	
Legal Descri	ption:							
FEES:		Paid	Due					
Building Permit Fe Fee	ee - Minimum	\$150.00	\$0.00					
	Totals :	\$150.00	\$0.00					

PROJECT DESCRIPTION: replace pilings on front deck landing

Printed by : CTHUMAN on: 06/03/2019 02:08 PM

BP2019-128

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

EXPIRES: 11/30/2019

	DETAILS	
Permit		
Name	Value	
CAMA PERMIT	Ν	
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	Ν	
CONSTRUCTION COST	500.00	
SURVEYOR NAME AND NUMBER	William S Jones L-2532	
OCCUPANCY TYPE	One & Two Family Dwelling	

REQUIRED INSPECTIONS

Zoning	Fina	
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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.

Printed by : CTHUMAN on: 06/03/2019 02:08 PM

BP2019-128 PROJECT NAME: Heaton Piling replacement SITE ADDRESS: 411 SEAGULL CT KILL DEVIL HILLS

m ... 4

EXPIRES: 11/30/2019

I hereby certify that I have read and	xamined this	application and know	the same to	be true and correct.
All provisions of Laws and Ordinance	es governing	this type of work will b	e complied	with whether
specified herein or not. The granting	of a permit d	oes not presume to giv	e authority	to violate or cancel
the provisions of any other statelloca	I law regulat	ing construction or the	performanc	e of construction.
Issued By:				
Celi		· •		1 1
Contractor or Authorized Agent:	Russ	Deaton	Date:	6/4/19

Printed by : CTHUMAN on: 06/03/2019 02:08 PM

Page 3 of 3



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

JUN 26 2019

Planning and Inspection Department

BUILDING BP2019-147 ISSUED: 06/26/2019 PROJECT NAME: FITZGERALD STAIR REBUILD SITE ADDRESS: 3130 VA DARE TRL N KILL DEVIL HILLS EXPIRES: 12/23/2019 APPLICANT: FITZGERALD, AUBREY H FITZGERALD, AUBREY H OWNER: **5 POINDEXTER PLACE 5 POINDEXTER PLACE** NEWPORT NEWS, VA 23606 NEWPORT NEWS, VA 23606 **BUILDING LIMITED:** EVANS HOMES LLC. License: 49040 **5121 WINDSOR PL** Expires: 12/31/2019 kitty hawk, nc 27949 252-207-8127 PARCEL: Parcel PIN: 988513049237 000108000 Number: 3130 VA DARE TRL N KILL DEVIL HILLS Address: Zoning: Addition: **ORVILLE BEACH BLK 8** Block: 8 Lot(s): 4 Legal Description: FEES: Paid Due **Building Permit Fee - Minimum** \$150.00 \$0.00 Fee Totals : \$150.00 \$0.00 PROJECT DESCRIPTION: REBUILD STAIR AND RAILING

Printed by : Jordan Blythe on: 06/26/2019 09:51 AM

Contractor or Authorized Agent:

2.2

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. BAA Issued By: _ 4 Date: 6.26.19

Printed by : Jordan Blythe on: 06/26/2019 09:51 AM

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BP2019-148

Town of Kill Devil Hills

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

JUN 27 2019

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Planning and Inspection Department

BUILDING ISSUED: 06/26/2019

PROJECT NAME: SITE ADDRESS: 1523 SIR WALTER RD KILL DEVIL HILLS

EXPIRES: 12/23/2019

APPLICANT:	Barry Prokop 1523 Sir Walter Rd. Kill Devil Hillsl, NC 2 703-426-8510	7948	C		Barry Prokop 1523 Sir Walte Kill Devil Hillsl, 703-426-8510		
UNLICENSED -	REMODELING:	First Light (P.O. Box 1) kitty hawk, 804-690-84	09 nc 27949	Improvements.		icense: 1234 xpires:	
PARCEL:							
PIN:	988411554712	2		Parcel Number:	0031840	00	
Address:	1523 SIR WAL	TER RD KILL D	DEVIL HILLS				
				Zoning	g:		
Addition:	W R DEATON	- DELRAY BEA	СН	Block:	D	Lot(s):	29
Legal Desc	cription:						
EES:		Paid	Due				
Building Permit Fee	Fee - Minimum	\$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.

Printed by : Marty Shaw on: 06/26/2019 02:32 PM

		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	Ν	
CONSTRUCTION COST	11462.00	
CONSTRUCTION TYPE	V	
OCCUPANCY TYPE	One & Two Family Dwelling	

Final

REQUIRED INSPECTIONS

CONDITIONS

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

All provisions of specified herein	Laws and Ordin or not. The gran	ances governing this type of ting of a permit does not pres	and know the same to be true and correct. work will be complied with whether sume to give authority to violate or cancel ction or the performance of construction.
Issued By:	14912	The Sta	Date: 5-27-19
506773 *4 61 * 2267dd * \$ 120°00 * 60°51716 65176	PLAANING Date / Time Payment Receipt # Greenvorent		
이아바 STITH TIA Printed by : Marty Shaw on: 0	Town of Kill De		Page 2 of 2



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

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JUN 27 2019

Planning and Inspection Department

OP2019-032 PROJECT NAME: Susan B Miller SITE ADDRESS: 2207 Bay Drive Kill Devil Hills EXPIRES:

PARENT PERMIT #: BJ2018-229

APPLICANT:	Miller, Susan B 3800 Elijah Baum kitty hawk, nc 27949 252-489-7543			OWNER:	Miller, Susan 3800 Elijah B kitty hawk, no 252-489-754	aum : 27949
GENERAL:		Self UNKNOWN UNKNOWN 917-862-90	I, XX 00000			License: Unlicensed Expires: 12/31/2020
PARCEL:						
PIN:	987408991771			Parcel Number:		
Address:	2207 Bay Drive	e Kill Devil Hills				
				Zoni	ing:	
Addition:				Bloc	ck:	Lot(s):
Legal Desc	ription: Lot 1 Block	k 76				
FEES:		Paid	Due			
Certificate of Oc	cupancy Fee	\$50.00	\$0.00			
Residential Tras	h Can	\$106.75	\$0.00			
	Totals :	\$156.75	\$0.00			

PROJECT DESCRIPTION: New 4 Bedroom SFD

Printed by : Marty Shaw on: 06/26/2019 04:40 PM

OP2019-032 PROJECT NAME: Susan B Miller SITE ADDRESS: 2207 Bay Drive Kill Devil Hills

-

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	
Il provisions of Laws and pecified herein or not., Th	d Ordinances governing this type of ne granting of a permit does not pres	and know the same to be true and correct work will be complied with whether sume to give authority to violate or cancel ction or the performance of construction.

Printed by : Marty Shaw on: 06/26/2019 04:40 PM



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

Planning and Inspection Department

BUILDING BP2019-151 **PROJECT NAME:** WILLIAMS STAIRS, DECKS, AND SHED **SITE ADDRESS:** 214 SOTHEL ST E KILL DEVIL HILLS ISSUED: 06/28/2019 EXPIRES: 12/25/2019 **APPLICANT:** WILLIAMS, CHARLES E JR WILLIAMS, CHARLES E JR OWNER: RT 1 BOX 390-G RT 1 BOX 390-G **FISHERSVILLE, VA 22939** FISHERSVILLE, VA 22939 License: Unlicensed Expires: 12/31/2020 GENERAL: Self UNKNOWN UNKNOWN, XX 00000 917-862-9006 PARCEL: Parcel PIN: 988513124928 000415000 Number: 214 SOTHEL ST E KILL DEVIL HILLS Address: Zoning: Addition: **VIRGINIA DARE SHORES** Block: 8 27-28 Lot(s): Legal Description: FEES: Paid Due **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

JUN 28 2019

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Printed by : Jordan Blythe on: 06/28/2019 02:38 PM

BP2019-151

PROJECT NAME: WILLIAMS STAIRS, DECKS, AND SHED **SITE ADDRESS:** 214 SOTHEL ST E KILL DEVIL HILLS

EXPIRES: 12/25/2019

		DETAILS
Permit		
Name	Value	
CAMA PERMIT	N	
CAMA EXEMPTION	Ν	
ZONING DISTRICT	С	
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	Ν	
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

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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

	50 ME: JENNINGS 8'X ⁷ SS: 601 West Sports					BUILDING SSUED: 06/28/2019 EXPIRES: 12/25/2019
APPLICANT:	Jennings, Donald F. 515 W. Soundside R nags head, nc 27959 252-207-4936	Road	ov	VNER:	Jennings, Donald F. 515 W. Soundside Roa nags head, nc 27959 252-207-4936	ad
RESIDENTIAL -	- INTERMEDIATE:	JENNINGS P. O. Box 1 nags head, 252-207-49	102 nc 27959		License: Expires:	32637 01/01/2020
PARCEL:						
PIN:	988517007110	0		Parcel Number:		
Address:	601 West Spo	ortsman Drive Kill	Devil Hills			
				Zoni	ng:	
Addition:				Block	k: Lo	ot(s):
Legal Desc	cription: Lot 180, A	Avalon Beach Sub	odivision			
EES:		Paid	Due			
Building Permit Fee	Fee - Minimum	\$150.00	\$0.00			
	Totals :	\$150.00	\$0.00			

Printed by : Jordan Blythe on: 06/28/2019 10:32 AM

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PROJECT NAME: JENNINGS 8'X12' STORAGE ENCLOSURE **SITE ADDRESS:** 601 West Sportsman Drive Kill Devil Hills

EXPIRES: 12/25/2019

Date: 6-28-19

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:

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Page 3 of 3



1

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 PROJECT NAME: HOLLOWELL ROOF AND WINDOWS

SITE ADDRESS: 404 THIRD ST W KILL DEVIL HILLS

BUILDING ISSUED: 06/28/2019

EXPIRES: 12/25/2019

APPLICANT:	EDWARD HOLLOW 3226 CASTELOW R COFIELD, NC 27922 252-209-2486	D		OWNER:	EDWARD H 3226 CAST COFIELD, N 252-209-24	NC 27922
GENERAL:		Self UNKNOWN UNKNOWN 917-862-90	N, XX 00000			License: Unlicensed Expires: 12/31/2020
PARCEL:						
PIN:	98840927428	5		Parcel Number:	00246	9000
Address:	404 THIRD ST	W KILL DEVIL	HILLS			
				Zonir	ig:	
Addition:	SEA HOLLY F	RIDGE		Block	: Н	Lot(s): 16
Legal Desc	cription:					
FEES:		Paid	Due			
Building Permit Fee	Fee - Minimum	\$150.00	\$0.00			
	Totals :	\$150.00	\$0.00			

PROJECT DESCRIPTION: REPLACE SHINGLES WITH METAL ROOF, REPLACE WINDOWS

JUN 28 2019

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BP2019-149

2

PROJECT NAME: HOLLOWELL ROOF AND WINDOWS SITE ADDRESS: 404 THIRD ST W KILL DEVIL HILLS

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	х	
FINAL ELEVATION CERTIFICATE	Ν	
CONSTRUCTION COST	6000.00	
CONSTRUCTION TYPE	V	
OCCUPANCY TYPE	One & Two Family Dwelling	

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.

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BP2019-149

PROJECT NAME: HOLLOWELL ROOF AND WINDOWS SITE ADDRESS: 404 THIRD ST W KILL DEVIL HILLS

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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. 1 1

Issued By:

Contractor or Authorized Agent: Echan A Harman Date: 6-29-19

Printed by : Jordan Blythe on: 06/28/2019 09:18 AM

Page 3 of 3



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

Planning and Inspection Department

BUILDING BP2019-133 ISSUED: 06/10/2019 **PROJECT NAME:** Holcomb Deck and Stairs SITE ADDRESS: 308 TERN CT KILL DEVIL HILLS EXPIRES: 12/07/2019 APPLICANT: Holcomb, Robert OWNER: Holcomb, Robert 499 Sandy Shores Rd McHenry, MD 21541 499 Sandy Shores Rd McHenry, MD 21541 Set - Wave Construction 1400 Harrington Ave Kill Devil Hills, NC 27948 License: 0000000 Expires: 06/28/2024 UNLICENSED - REMODELING: 252-996-0099 PARCEL: Parcel PIN: 988410350689 003225000 Number: 308 TERN CT KILL DEVIL HILLS Address: Zoning: Addition: **FIRST FLIGHT VILLAGE SEC 2** Block: 0 Lot(s): 236 Legal Description: FEES: Paid Due **Building Permit Fee - Minimum** \$150.00 \$0.00 Fee \$0.00 Totals : \$150.00

PROJECT DESCRIPTION: Decking, handrail and stair replacement "as is where is"

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JUN 1 1 2019

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BP2019-133 PROJECT NAME: Holcomb Deck and Stairs SITE ADDRESS: 308 TERN CT KILL DEVIL HILLS

EXPIRES: 12/07/2019

	D	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	Х		
FINAL ELEVATION CERTIFICATE	N		
CONSTRUCTION COST	2000.00		
	REQUIRI	ED INSPECTIONS	
Zoning Final		Final	
		NDITIONS	
This permit becomes null an work is suspended for a per			nmenced within 6 months or if construction d.
hereby certify that I have	e read and examined th	is application and I	know the same to be true and correct
Il provisions of Laws an	d Ordinances gøvernin	g this type of work	will be complied with whether
pecified nergin or not. I	er state/local law regula	ating construction of	to give authority to violate or cancel or the performance of construction.
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PO BOX 1719 Kill Devil Hills, NC 27948 Phone: 252-449-5318 Fax: 252-441-4102

Planning and Inspection Department

BP2019-139

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PROJECT NAME: STANCIL STAIRS, HANDRAILS, AND DECKING **SITE ADDRESS:** 2813 RAYMOND AVE KILL DEVIL HILLS

BUILDING ISSUED: 06/11/2019

EXPIRES: 12/08/2019

	MARGARET STAN(2200 CRESENT AV CHARLOTTE, NC 2 919-491-8213	Έ		OWNER:	MARGARET 2200 CRESE CHARLOTTE 919-491-821	ENT AVE E, NC 28207	
GENERAL:		WES LIVE UNKNOWN UNKNOWN 252-619-25	N N, XX 00000			License: unlicensed Expires: 12/31/2019	
PARCEL:							
PIN:	98851312373	7		Parcel Number:	000393	3000	
Address:	2813 RAYMO	ND AVE KILL D	EVIL HILLS				
				Zonir	ig:		
Addition:	VIRGINIA DA	RE SHORES		Block	: 7	Lot(s): 15-16	
Legal Descrip	otion:						
EES:		Paid	Due				
Building Permit Fe Fee	ee - Minimum	\$150.00	\$0.00				
	Totals :	\$150.00	\$0.00				

JUN 1 4 2019

Printed by : Jordan Blythe on: 06/11/2019 09:37 AM

BP2019-139 PROJECT NAME: STANCIL STAIRS, HANDRAILS, AND DECKING **SITE ADDRESS:** 2813 RAYMOND AVE KILL DEVIL HILLS

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. 247 MC Issued By: Date: 6-14-**Contractor or Authorized Agent:**

Printed by : Jordan Blythe on: 06/11/2019 09:37 AM

Page 3 of 3

NOEV NOEV NORTH C	Town of Kill PO BOX Kill Devil Hills, Phone: 252-449-5318 Planning and Inspe	(1719 NC 27948 Fax: 252-441-410		i	
LANDINGS	41 ME: OUTER BANKS BEACH CLUB STAIRS AND SS: 1110 VA DARE TRL S KILL DEVIL HILLS)	,		BUILDING ED: 06/17/2019 RES: 12/14/2019
APPLICANT:	OUTER BANKS BEACH CLUB 1110 S. Va. Dare Tr. Kill Devil Hills, NC 27948	11	JTER BANKS B 10 S. Va. Dare I Devil Hills, NC	Tr.	UB
GENERAL:	Self UNKNOWN UNKNOWN, XX 00000 917-862-9006			nse: Unlic res: 12/3	
PARCEL:					
PIN:	98930508005501	Parcel Number:	027867000		
Address:	1110 VA DARE TRL S KILL DEVIL HILLS				
		Zoning:			1.0/00100
Addition:	KILL DEVIL HILLS SEC 1	Block:	4	Lot(s):	1-8/CONDO- BLDGS 1-2
Legal Dese	cription:				
EES: Building Permit	Paid Due Fee - Minimum \$150.00 \$0.00				

\$0.00

\$150.00 PROJECT DESCRIPTION: REPLACE STAIRS AND LANDINGS ON ONE CONDO BUILDING

Totals :

Printed by : Jordan Blythe on: 06/17/2019 08:45 AM

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	Ν	
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.

EXPIRES: 12/14/2019

9

Date

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:

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Page 3 of 3



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Town of Kill Devil Hills

PO BOX 1719 Kill Devil Hills, NC 27948 Phone: 252-449-5318 Fax: 252-441-4102 Provident 1

JUN 18 2019

Planning and Inspection Department

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P	OLEMAN HOLLAN .O. Box 3159 itty Hawk, NC 2794		C	P.C	LEMAN Ho), Box 3159 y Hawk, No	9	
UNLICENSED - RE	MODELING:		STATION RD	REMODELING INC.		icense: 0000° Expires: 01/01	
PARCEL:			11.22 11.12			1000	
PIN:	988513044364	ŧ.		Parcel Number:	0000190	000	
Address:	204 HELGA S	TE KILL DEVIL	HILLS				
				Zoning:			
Addition:	ORVILLE BEA	CH AMENDED	BLK 4	Block:	4	Lot(s):	5
Legal Descrip	tion:						
FEES:		Paid	Due				
Building Permit Fe Fee	e - Minimum	\$150.00	\$0.00				
	Totals :	\$150.00	\$0.00				

PROJECT DESCRIPTION: Add 12'x12' shed to rear yard.

Printed by : Marty Shaw on: 06/14/2019 08:08 AM

BP2019-140 PROJECT NAME:

SITE ADDRESS: 204 HELGA ST E KILL DEVIL HILLS

EXPIRES: 12/11/2019

		D
Permit		
Name	Value	
CAMA PERMIT	Ν	
CAMA EXEMPTION	Ν	
ZONING DISTRICT	С	
FLOOD ZONE	AE	
BASE FLOOD ELEVATION	9	
FINAL ELEVATION CERTIFICATE	Ν	
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: Date: 6-18-19 Contractor or Authorized Agent:

Printed by : Marty Shaw on: 06/14/2019 08:08 AM



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Town of Kill Devil Hills

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

JUN 21 2019

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Planning and Inspection Department

BUILDING BP2019-144 PROJECT NAME: Michelle Copeland ISSUED: 06/21/2019 SITE ADDRESS: 402 WALLACE ST KILL DEVIL HILLS EXPIRES: 12/18/2019 Copeland, Michelle **APPLICANT:** A Team OWNER: 402 Wallaace Street 402 Wallace Street Kill Devil Hills, NC 27948 Kill Devil Hills, NC 27948 252-599-2230 252-599-2230 CONTRACTOR: SAME AS APPLICANT License: 123456 0000000 Expires: 04/30/2020 00000000, nc 00000 PARCEL: Parcel PIN: 987516836794 000242000

Number: 402 WALLACE ST KILL DEVIL HILLS Address: Zoning: Addition: **ORVILLE BEACH WEST** Block: 0 Lot(s): 150 Legal Description: FEES: Paid Due \$0.00 **Building Permit Fee - Minimum** \$150.00 Fee Totals : \$150.00 \$0.00

PROJECT DESCRIPTION: Repair front deck, add 6X6 deck on rear of house, add 3' steps to side of house

Printed by : Jordan Blythe on: 06/21/2019 10:12 AM

BP2019-144

1. 5

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	Ν		
CAMA EXEMPTION	Ν		
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	Ν		
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.

Printed by : Jordan Blythe on: 06/21/2019 10:12 AM

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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:

Printed by : Jordan Blythe on: 06/21/2019 10:12 AM

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20 Aviati		Dianning	and Inchos	ction Departm	ont	JUN 2 4 2019
		Flanning	and inspec	cion Departin	ient	
	6 ME: Cubine rebuild s S: 1703 WYANDO		EVIL HILLS			BUILDING ISSUED: 06/21/2019 EXPIRES: 12/18/2019
APPLICANT:	CUBINE, CARRIE E 2029 NEWPORT NE KILL DEVIL HILLS, I	WS ST	c	2		RRIE E DRT NEWS ST HILLS, NC 27948
CONTRACTOR	SHANE CLARK 607 INDIAN DR Kill Devil Hills, NC 27 252-305-2477	7948				
UNLICENSED E	BUILDER:	SHANE CL 607 INDIA Kill Devil H 252-305-24	N DR ills, NC 27948			License: 000 Expires:
PARCEL:						and the same BPS
PIN:	988409263185	5		Parcel Number:	002695	000
Address:	1703 WYAND	OTTE ST KILL I	DEVIL HILLS	Zoning:		
Addition:	HIGH VIEW - I	HEDRICKS ADD)	Block:	D	Lot(s): 12
Legal Desc	ription:					
FEES:		Paid	Due			
Building Permit	Fee - Minimum	\$150.00	\$0.00			
100						

Printed by : Jordan Blythe on: 06/21/2019 04:22 PM

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Page 1 of 3

F

BP2019-136

F . . .

PROJECT NAME: Cubine rebuild stairs SITE ADDRESS: 1703 WYANDOTTE ST KILL DEVIL HILLS

EXPIRES: 12/18/2019

	DETAILS	
Permit		
Name	Value	
CAMA PERMIT	N	
CAMA EXEMPTION	Ν	
ZONING DISTRICT	RL	
PURPOSE	Residential Repair/Remodel	
FRONT YARD SETBACK	30	
SIDE YARD SETBACK	8	
REAR YARD SETBACK	20% Depth >30	
FLOOD ZONE	х	
FINAL ELEVATION CERTIFICATE	Ν	
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.

Printed by : Jordan Blythe on: 06/21/2019 04:22 PM

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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:** 9 Contractor or Authorized Agent; Date:

Printed by : Jordan Blythe on: 06/21/2019 04:22 PM



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Town of Kill Devil Hills

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

JUN 2 1 2019

Planning and Inspection Department

BUILDING **BP2019-145** PROJECT NAME: Brown top deck and stairs repair ISSUED: 06/21/2019 SITE ADDRESS: 1630 VILLAGE LN KILL DEVIL HILLS EXPIRES: 12/18/2019 APPLICANT: **BROWN, GREG BROWN, GREG OWNER:** 6922 RUSKIN STREET 6922 RUSKIN STREET SPRINGFIELD, VA 22150 SPRINGFIELD, VA 22150 **CONTRACTOR:** Full House Ventures **PO Box 498** kitty hawk, nc 27949 919-608-2120 License: 00000000 **UNLICENSED - REMODELING:** Full House Ventures Expires: 06/11/2024 PO Box 498 kitty hawk, nc 27949 919-608-2120 PARCEL: Parcel PIN: 988410267071 003243000 Number: 1630 VILLAGE LN KILL DEVIL HILLS Address: Zoning: Addition: **FIRST FLIGHT VILLAGE SEC 2** 263 Block: 0 Lot(s): Legal Description: FEES: Paid Due **Building Permit Fee - Minimum** \$150.00 \$0.00 Fee \$0.00 Totals : \$150.00 PROJECT DESCRIPTION: Remove and replace top crows nest and stairs

Printed by : Jordan Blythe on: 06/21/2019 04:36 PM

BP2019-145

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PROJECT NAME: Brown top deck and stairs repair SITE ADDRESS: 1630 VILLAGE LN KILL DEVIL HILLS

EXPIRES: 12/18/2019

meValueMA PERMITNMA EXEMPTIONNNING DISTRICTRLRPOSEResidential Repair/RemodelONT YARD SETBACK30DE YARD SETBACK8AR YARD SETBACK20% Depth >30OOD ZONEXVAL ELEVATION RTIFICATENSTRUCTION COST4500.00RVEYOR NAME AND IMBERF. Richard Quible L- 1157CUPANCY TYPEOne & Two Family			DETAILS	
MA PERMITNMA EXEMPTIONNNING DISTRICTRLRPOSEResidential Repair/RemodelONT YARD SETBACK30DE YARD SETBACK8COD ZONEXVAL ELEVATION RTIFICATENRVEYOR NAME AND MBERF. Richard Quible L- 1157CUPANCY TYPEOne & Two Family	Permit			
MA EXEMPTIONNNING DISTRICTRLRPOSEResidential Repair/RemodelONT YARD SETBACK30DE YARD SETBACK8AR YARD SETBACK20% Depth > 30OOD ZONEXNAL ELEVATION SETTIFICATENSETUCTION COST4500.00RVEYOR NAME AND IMBERF. Richard Quible L- 1157CUPANCY TYPEOne & Two Family	Name	Value		
NING DISTRICTRLRPOSEResidential Repair/RemodelONT YARD SETBACK30DE YARD SETBACK8CAR YARD SETBACK20% Depth >30OOD ZONEXNAL ELEVATION RTIFICATENSTRUCTION COST4500.00RVEYOR NAME AND MBERF. Richard Quible L- 1157CUPANCY TYPEOne & Two Family	CAMA PERMIT	Ν		
RPOSEResidential Repair/RemodelONT YARD SETBACK30DE YARD SETBACK8AR YARD SETBACK20% Depth >30OOD ZONEXVAL ELEVATION RTIFICATENONSTRUCTION COST4500.00RVEYOR NAME AND IMBERF. Richard Quible L- 1157CUPANCY TYPEOne & Two Family	CAMA EXEMPTION	Ν		
Repair/RemodelONT YARD SETBACK30DE YARD SETBACK8AR YARD SETBACK20% Depth >30OOD ZONEXNAL ELEVATION RTIFICATENNSTRUCTION COST4500.00RVEYOR NAME AND MBERF. Richard Quible L- 1157CUPANCY TYPEOne & Two Family	ZONING DISTRICT	RL		
DE YARD SETBACK8AR YARD SETBACK20% Depth >30OOD ZONEXNAL ELEVATIONNRTIFICATE4500.00RVEYOR NAME ANDF. Richard Quible L- 1157CUPANCY TYPEOne & Two Family	PURPOSE			
AR YARD SETBACK20% Depth >30OOD ZONEXNAL ELEVATION RTIFICATENINSTRUCTION COST4500.00RVEYOR NAME AND MBERF. Richard Quible L- 1157CUPANCY TYPEOne & Two Family	FRONT YARD SETBACK	30		
OOD ZONE X VAL ELEVATION RTIFICATE N ONSTRUCTION COST 4500.00 RVEYOR NAME AND MBER F. Richard Quible L- 1157 CCUPANCY TYPE One & Two Family	SIDE YARD SETBACK	8		
NAL ELEVATION N RTIFICATE NSTRUCTION COST 4500.00 RVEYOR NAME AND F. Richard Quible L- 1157 CCUPANCY TYPE One & Two Family	REAR YARD SETBACK	20% Depth >30		
RTIFICATE INSTRUCTION COST 4500.00 RVEYOR NAME AND F. Richard Quible L- IMBER 1157 CCUPANCY TYPE One & Two Family	FLOOD ZONE	Х		
RVEYOR NAME ANDF. Richard Quible L-IMBER1157CCUPANCY TYPEOne & Two Family	FINAL ELEVATION CERTIFICATE	Ν		
IMBER 1157 CCUPANCY TYPE One & Two Family	CONSTRUCTION COST	4500.00		
	SURVEYOR NAME AND NUMBER			
	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.

Printed by : Jordan Blythe on: 06/21/2019 04:36 PM

Issued By:

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PROJECT NAME: Brown top deck and stairs repair **SITE ADDRESS:** 1630 VILLAGE LN KILL DEVIL HILLS

EXPIRES: 12/18/2019

Date: 6-21-19

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.

- Gre

Contractor or Authorized Agent:

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

JUN 2 5 2019

Planning and Inspection Department

BUILDING **BP2019-146** ISSUED: 06/25/2019 PROJECT NAME: RAAB STAIRS AND LANDING SITE ADDRESS: 1101 VEELEE DR KILL DEVIL HILLS EXPIRES: 12/22/2019 APPLICANT: CAROL RAAB **OWNER:** CAROL RAAB 1101 VEELEE DR 1101 VEELEE DR Kill Devil Hills, NC 27948 Kill Devil Hills, NC 27948 239-265-5508 239-265-5508 License: Unlicensed **GENERAL:** Self UNKNOWN Expires: 12/31/2020 UNKNOWN, XX 00000 917-862-9006 PARCEL: Parcel PIN: 988415635577 028343000 Number: 1101 VEELEE DR KILL DEVIL HILLS Address: Zoning: Addition: **KITTY HAWK SHORES - REVISED** Block: 15 Lot(s): 8 Legal Description: FEES: Paid Due \$0.00 **Building Permit Fee - Minimum** \$150.00 Fee Totals : \$150.00 \$0.00 PROJECT DESCRIPTION: **REBUILD STAIRS AND LANDING SAME FOOTPRINT**

Printed by : Jordan Blythe on: 06/25/2019 01:54 PM

BP2019-146

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PROJECT NAME: RAAB STAIRS AND LANDING SITE ADDRESS: 1101 VEELEE DR KILL DEVIL HILLS

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	Ν		
CONSTRUCTION COST	2000.00		
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.

Printed by : Jordan Blythe on: 06/25/2019 01:54 PM

EXPIRES: 12/22/2019

Date:

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: 1

Contractor or Authorized Agent:

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Printed by : Jordan Blythe on: 06/25/2019 01:54 PM



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

Planning and Inspection Department

	94 ME: JONES STAIR F SS: 208 SEA VILLAG		/IL HILLS			ISSUE	BUILDING D: 04/25/2019 ES: 10/22/2019
APPLICANT:	JONES, ROBERT L MARK A JONES 8700 GREYCLIFF ROAD RICHMOND, VA 23294				JONES, ROBERT L MARK A JONES 8700 GREYCLIFF ROAD RICHMOND, VA 23294		
GENERAL LIM	ITED:	B. R. Neier 208 Barco Barco, NC 207-8236				License: 60862 Expires:	2
PARCEL:							
PIN:	988513131766	5		Parcel Number:	000963	000	
Address:	208 SEA VILL	AGE LN KILL D	EVIL HILLS				
				Zoning	g:		
Addition:				Block:	. 0	Lot(s):	6
Legal Desc	cription:						
FEES:		Paid	Due				
Building Permit Fee	Fee - Minimum	\$150.00	\$0.00				
	Totals :	\$150.00	\$0.00				

PROJECT DESCRIPTION: REBUILD 2 SETS OF STAIRS ON EAST AND WEST SIDE OF PROPERTY

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JUN 1 1 2019

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Printed by : Jordan Blythe on: 04/25/2019 09:39 AM

BP2019-094

1

1

PROJECT NAME: JONES STAIR REBUILD SITE ADDRESS: 208 SEA VILLAGE LN KILL DEVIL HILLS

EXPIRES: 10/22/2019

		DETAILS	
Permit			
Name	Value		
CAMA PERMIT	N		
CAMA EXEMPTION	Ν		
ZONING DISTRICT	С		
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.

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10 - 1 4

1

PROJECT NAME: JONES STAIR REBUILD SITE ADDRESS: 208 SEA VILLAGE LN KILL DEVIL HILLS

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

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

Planning and Inspection Department

	95 ME: MARSHALL ST SS: 205 SEA VILLAC		IL HILLS			BUILDIN ISSUED: 04/25/20 EXPIRES: 10/22/20	
APPLICANT:	MARSHALL, W RIC 2036 ORCHARD DF POCOMOKE CITY,	RIVE	(OWNER:	MARSHALL, W RICHARD 2036 ORCHARD DRIVE POCOMOKE CITY, MD 21851-287		
GENERAL LIM	ITED:	B. R. Neier 208 Barco I Barco, NC 207-8236				License: 60862 Expires:	
PARCEL:							
PIN:	988513130570	0		Parcel Number:	009121	000	
Address:	205 SEA VILL	AGE LN KILL DI	EVIL HILLS				
				Zonin	g:		
Addition:				Block	: 0	Lot(s): 28	
Legal Des	cription:						
FEES:		Paid	Due				
Building Permit Fee	t Fee - Minimum	\$150.00	\$0.00				
	Totals :	\$150.00	\$0.00				

· · · JUN 1 1 2019

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Page 1 of 3

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4

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. 2 Issued By: Date: 6-11-19 Contractor or Authorized Agent:

Printed by : Jordan Blythe on: 04/25/2019 09:50 AM



PROJECT NAME: Miller Deck & Steps SITE ADDRESS: 808 FOX ST KILL DEVIL HILLS

BP2019-131

Town of Kill Devil Hills

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

JUN 1 1 2019

TALIFIC & DALL

Planning and Inspection Department

BUILDING

ISSUED: 06/06/2019

EXPIRES: 12/03/2019

APPLICANT:	REBECCA MILLER 808 Fox St. K D H, NC 27948			OWNER:	REBECCA 808 Fox St K D H, NC		
GENERAL:		Self UNKNOVM UNKNOVM 917-862-90	00000 XX 0				Unlicensed 12/31/2020
PARCEL:		and the share of the					
PIN:	988308778872	2		Parcel Number:	00439	95000	
Address:	808 FOX ST	KILL DEVIL HILL	S				
				Zonir	ig:		
Addition:	KILL DEVIL H	LLS REALTY CO	ORP	Block	:: 20	Lot	(s): 5
Legal Desc	ription:						
FEES:		Paid	Due				
Building Permit I Fee	Fee - Minimum	\$150.00	\$0.00				
	Totals :	\$150.00	\$0.00				

PROJECT DESCRIPTION: Repair deck, steps and handrails as needed. "As is where is"

Printed by : CTHUMAN on: 06/06/2019 08:50 AM

BP2019-131 PROJECT NAME: Miller Deck & Steps SITE ADDRESS: 808 FOX ST KILL DEVIL HILLS

1 ... 2

EXPIRES: 12/03/2019

	DETAILS	
Permit		
Name	Value	
CAMA PERMIT	Ν	
CAMA EXEMPTION	Ν	
PURPOSE	Residential Repair/Remodel	
FRONT YARD SETBACK	30	
SIDE YARD SETBACK	10	
REAR YARD SETBACK	20% Depth >30	
FLOOD ZONE	х	
FINAL ELEVATION CERTIFICATE	Ν	
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: Level Contractor or Authorized Agent: Level Contractor Date: 6 11 19

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

Planning and Inspection Department

BP2019-137 PROJECT NAME: HILL SHEATHING SITE ADDRESS: 207 ARCH ST E KILL DEVIL HILLS BUILDING ISSUED: 06/11/2019

EXPIRES: 12/08/2019

					Kill Devil Hills, NC 2 252-256-2091	27940
GENERAL:		CHRIS GAI 105 ELIZA Kill Devil Hi 252-455-58	BETH CT IIsl, NC 27948			se: 9090909090909090 es: 05/31/2022
PARCEL:						
PIN:	988513043681			Parcel Number:	000015000	
Address:	207 ARCH ST E	KILL DEVIL H	HILLS			
				Zoning	g:	
Addition:	ORVILLE BEACH	AMENDED B	BLK 4	Block:	4	Lot(s): 1
Legal Descrip	tion:					
FEES:		Paid	Due			
Building Permit Fe Fee	e - Minimum	\$150.00	\$0.00			
	Totals :	\$150.00	\$0.00			
PROJECT DESCRI	PTION: REPLACE	Γ1-11 STRU(CTURAL SHE	ATHING		
		JUN 11	2019		QIA9 WITH	
					CASH	
		• , . •			2451	



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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

	5 ME: Solomon Rear S: 3302 BAY DR					BUIL ISSUED: 06/ EXPIRES: 12/	
APPLICANT:	Solomon, Gloria 213 Chapel Drive LAKE JUNALUSKA	A, NC 28745			Solomon, Glori 213 Chapel Dri LAKE JUNALU	a ive ISKA, NC 28745	
CONTRACTOR:	JB UTZ CONSTRU 2719 S Wrightsville nags head, nc 279 252-475-4619	Ave					
GENERAL:							
PARCEL:							
PIN:	9875167397	05		Parcel Number:	0003210	00	
Address:	3302 BAY DI	R KILL DEVIL HI	LS				
				Zoning	g:		
Addition:	ORVILLE BE	ACH WEST		Block:	0	Lot(s): 243	
Legal Desc	ription:						
FEES:		Paid	Due	BUILDING AREA	.:		
Covered Porch I Open Deck Fee		\$360.00 \$150.00	\$0.00 \$0.00	Open Decks		1 EA	
Open Deck ree				Covered Porche	es/Decks	480 SQFT	
	Totals :	\$510.00	\$0.00				
PROJECT DESC	, , , , , , , , , , , , , , , , , , ,			ate stairs in rear y	yen u		
	JUN 11	2013					
Printed by : CTHUMAN c	on: 06/11/2019 08:52 AM						Page 1 of
		Paid	Due				
ES: ilding Permit Fee e	e - Minimum	\$150.00	\$0.00				



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



JUN 7 2019

Planning and Inspection Department

	AND STAIR REI ST KILL DEVIL F		BUILDIN ISSUED: 06/06/20 EXPIRES: 12/03/20			
APPLICANT:	Al Martin 310 St. Louis St Kill Devil Hills, NC 27 252-449-8485	7948			BAKER, ROI POB 1611 310 ST LOU KILL DEVIL I	
UNLICENSED B	BUILDER:	SHANE CL 607 INDIAN Kill Devil H 252-305-24	N DR IIIs, NC 27948	3		License: 000 Expires:
PARCEL:						
PIN:	987516849404	4		Parcel Number:	000180	0000
Address:	310 ST LOUIS	ST KILL DEVIL	HILLS			
				Zoning	g:	
Addition:	ORVILLE BEA	CH WEST		Block:	0	Lot(s): 73
Legal Desc	ription:					
FEES:		Paid	Due	BUILDING AREA	A:	
Open Deck Fee		\$150.00	\$0.00	Open Decks		1 EA
	Totals :	\$150.00	\$0.00			

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16

BP2019-129 PROJECT NAME: Gaither Office Building Repair SITE ADDRESS: 2705 CROATAN HWY N KILL DEVIL HILLS

EXPIRES: 12/02/2019

	DETAILS	
Permit		
Name	Value	
CAMA PERMIT	N	
CAMA EXEMPTION	N	
ZONING DISTRICT	С	
PURPOSE	Commercial Repair/Remodel	
FRONT YARD SETBACK	30	
SIDE YARD SETBACK	10	
FLOOD ZONE	AE	
BASE FLOOD ELEVATION	9.0	
FINAL ELEVATION CERTIFICATE	Ν	
CONSTRUCTION COST	42000.00	
OCCUPANCY TYPE	Business	
	REQUIRED INSPECTIONS	
Sheathing	Zoning Final	
Insulation	Final	
Th.:	CONDITIONS	41.0.00
work is suspended for a peri-	d void if work or construction authorized is not commenced within 6 months or if construct iod of 12 months at any time after work has started.	lion
Contractor and the second s	e Debris requirements as defined in NCBC R301.2.1.2 and NCBC 1609.2.	
indet opnipij man rinde bonn		
	e read and examined this application and know the same to be true and corr	rect.
hereby certify that I have All provisions of Laws and specified herein or not Th	e read and examined this application and know the same to be true and corr of Ordinances governing this type of work will be complied with whether he granting of a permit does not presume to give authority to violate or can	cel
hereby certify that I have All provisions of Laws and specified herein or not Th	d Ordinarices governing this type of work will be complied with whether	cel
hereby certify that I have All provisions of Laws and specified herein or not Th	d Oreinances governing this type of work will be complied with whether he granting of a permit does not presume to give authority to violate or can	cel
hereby certify that I have All provisions of Laws and specified herein or not Th he provisions of any othe	er Oreinances governing this type of work will be complied with whether he granting of a permit does not presume to give authority to violate or can er state local law regulating construction or the performance of constructio	cel
hereby certify that I have All provisions of Laws and specified herein or not Th he provisions of any othe	er Orefinances governing this type of work will be complied with whether he granting of a permit does not presume to give authority to violate or can er state/local law regulating construction or the performance of constructio	cel
hereby certify that I have All provisions of Laws and pecified herein or not Th he provisions of any othe ssued By	er Oreinances governing this type of work will be complied with whether he granting of a permit does not presume to give authority to violate or can er state local law regulating construction or the performance of constructio	cel
hereby certify that I have All provisions of Laws and specified herein or not Th he provisions of any othe ssued By Contractor or Authorized	Agent: \underline{M}	cel
hereby certify that I have All provisions of Laws and pecified herein or not Th he provisions of any othe ssued By	Agent: Date: Date:	cel
hereby certify that I have All provisions of Laws and specified herein or not Th he provisions of any othe ssued By Contractor or Authorized	Agent: Date: Date:	cel m.



PROJECT NAME: Anne Griffin Deck Repair/Replace SITE ADDRESS: 329 PALMETTO ST W KILL DEVIL HILLS

BP2019-130

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

CLI III LI LI

BUILDING ISSUED: 06/05/2019

EXPIRES: 12/02/2019

APPLICANT:	Anne, Griffin 325 Palmetto St. Kill Devil Hillsl, NC 2 252-599-1872	7948			Anne, Griffin 325 Palmetto Kill Devil Hills 252-599-1872	I, NC 27948
CONTRACTOR:		SAME AS UNKNOWN UNKNOWN				License: Same as Owner Expires: 12/30/2019
PARCEL:						
PIN:	988517007527	7		Parcel Number:	0030110	000
Address:	329 PALMETT	O ST W KILL D	EVIL HILLS			
				Zoning	g:	
Addition:	VIRGINIA DAF	RE SHORES		Block:	49	Lot(s): 6-8
Legal Desc	ription:					
FEES:		Paid	Due			
Building Permit I Fee	Fee - Minimum	\$150.00	\$0.00			
	Totals :	\$150.00	\$0.00			

Printed by : Jordan Blythe on: 06/05/2019 10:59 AM

BP2019-130

PROJECT NAME: Anne Griffin Deck Repair/Replace **SITE ADDRESS:** 329 PALMETTO ST W KILL DEVIL HILLS

EXPIRES: 12/02/2019

		DETAILS
Permit		
Name	Value	
CAMA PERMIT	Ν	
CAMA EXEMPTION	Ν	
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	Ν	
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.
 Dock and Steirs approved to go back AS IS WILLERE IS

* Deck and Stairs approved to go back AS IS WHERE IS

Printed by : Jordan Blythe on: 06/05/2019 10:59 AM

EXPIRES: 12/02/2019

Date: 4/5

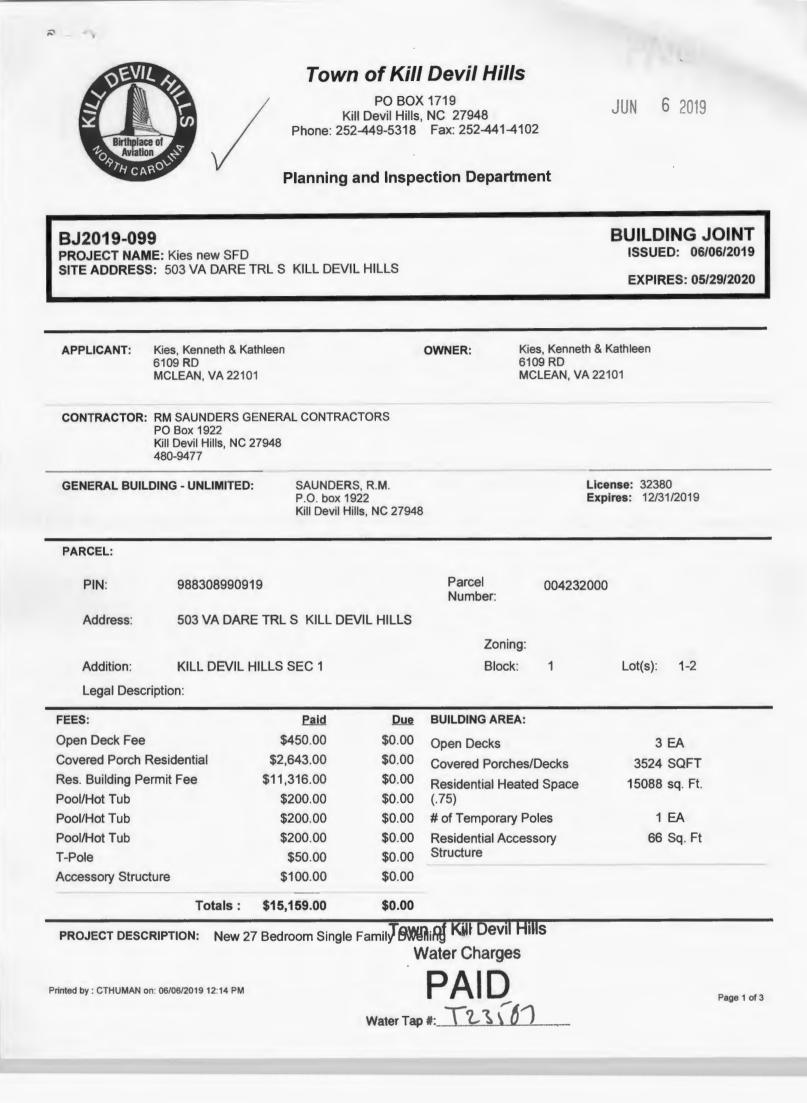
I hereby certify that I have read and examined this application and know the same to be true and correct. All provisions of Laws and Ordinances governing this type of work will be complied with whether specified herein or not. The granting of a permit does not presume to give authority to violate or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

Man

am

Contractor or Authorized Agent:

Printed by : Jordan Blythe on: 06/05/2019 10:59 AM



BJ2019-099 PROJECT NAME: Kies new SFD SITE ADDRESS: 503 VA DARE TRL S KILL DEVIL HILLS

1 . 3

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

CONDITIONS

Printed by : CTHUMAN on: 06/06/2019 12:14 PM

BJ2019-099 PROJECT NAME: Kies new SFD SITE ADDRESS: 503 VA DARE TRL S KILL DEVIL HILLS

ISSUED: 06/06/2019 EXPIRES: 05/29/2020

BUILDING JOINT

* 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 stuctual 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 NECCESSARY 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 grapting 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:



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

Planning and Inspection Department

	0 IE: STASSIE BOA S: 2042 BAY DR H			BUILDING JOIN ISSUED: 05/24/201 EXPIRES: 11/20/201			
	Herb & Mary Stassie 777 Stinchcomb Rd. SEVERNA PARK, M 410-703-5366	d.		OWNER:	Herb & Mary 777 Stinchco SEVERNA P 410-703-536	omb Rd. PARK, MD 21146	3
RESIDENTIAL, LI	.IMITED:	6705 CRO	on and Dad ATAN HWY S roatan Hwy. I, nc 27959 215	SOUTH		License: 79801 Expires: 06/14	
PARCEL:							
PIN:	98740898462	?0		Parcel Number:	001989	9000	
Address:	2042 BAY DR	R KILL DEVIL HIL	LS				
				Zoni	ing:		
Addition:	AVALON BEA	ACH ANNEX 2 &	3	Bloc	ck: 0	Lot(s):	1014
Legal Descri	iption:						
EES:		Paid	Due				
Building Permit Fo	ee - Minimum	\$150.00	\$0.00				
	Totals :	\$150.00	\$0.00	-			

A X

JUN 5 2019

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Printed by : Jordan Blythe on: 05/24/2019 02:20 PM

BJ2019-100

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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	САМА	
SIDE YARD SETBACK	10	
CAMA PERMIT	Ν	
CAMA EXEMPTION	Ν	
FLOOD ZONE	AE	
BASE FLOOD ELEVATION	9.00	
PURPOSE	Residential Repair/Remodel	
CONSTRUCTION TYPE	V	
CONSTRUCTION COST	12666.00	
CULVERT	Ν	
DRIVEWAY INVERT 2	N	
OCCUPANCY TYPE	Residential	

REQUIRED INSPECTIONS

Final Zoning Final Electrical

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.

Printed by : Jordan Blythe on: 05/24/2019 02:20 PM

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

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; 19 Contractor or Authorized Agent: Date:

Printed by : Jordan Blythe on: 05/24/2019 02:20 PM



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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

)3 ME: Faison Remode S: 1202 FOX ST K			ISSUE	ING JOINT D: 06/05/2019 ES: 12/02/2019		
APPLICANT:	FAISON, GENE 1202 FOX STREET Kill Devil Hills, NC 27	7948			FAISON, GEN 1202 FOX STI Kill Devil Hills,	REET	
CONTRACTOR	: TYLERBUILT CUST 2906 South Pamlico nags head, nc 27959 252-202-2080	Ave	IC.				
GENERAL BUI	LDING, LIMITED:		n Pamlico Ave nc 27959	BUILDERS INC.		icense: 4664 xpires: 12/3	
PARCEL:							
PIN:	988312866403	3		Parcel Number:	0044190	000	
Address:	1202 FOX ST	KILL DEVIL HIL	LS				
				Zoning	g:		
Addition:	KILL DEVIL H	LLS REALTY CO	ORP	Block:	24	Lot(s):	2
Legal Desc	cription:						
FEES:		Paid	Due	BUILDING AREA	A:		
Renovation/Ren	model/Relocate	\$45.00	\$0.00	Remodel/Renov	vation	100	SQFT
Res. Building P	ermit Fee	\$216.00	\$0.00	Residential Hea		288	sq. Ft.
$\mu^* \nabla \Theta_{\mu} = 2 \delta_{\mu\nu} \delta_{\mu\nu} + \alpha \delta_{\mu} \delta_{\mu\nu} + \delta \delta_{\mu\nu} \delta_{\mu\nu} + \delta \delta_{\mu\nu} + \delta \delta_{\mu\nu} \delta_{\mu\nu} \delta_{\mu\nu} \delta_{\mu\nu} + \delta \delta_{\mu\nu} \delta_{\mu\nu} \delta_{\mu\nu} + \delta \delta_{\mu\nu} \delta_{\mu\nu} \delta_{\mu\nu} + \delta \delta_{\mu\nu} \delta_{\mu\nu} \delta_{\mu\nu} \delta_{\mu\nu} + \delta \delta_{\mu\nu} \delta_$	Totals :	\$261.00	\$0.00	~ (.75)		anteria della socia in terretta di anteri anteria dalla della di anteria di anteria di anteria di anteria di a	

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.

Printed by : Marty Shaw on: 06/05/2019 09:22 AM

EXPIRES: 12/02/2019

*	This permit becomes null and void if work or construction authorized is not commenced within 6 months or if construction
0	r 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.
1	Device the standard standard of the standard Device Proventier Ordinance including use and elevation

- * 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.

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* 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:		
M.Y.C.		
Contractor or Authorized Agent:	Cogl	Date: 6 - 5 - 19



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Town of Kill Devil Hills

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

JUN 2 1 2019

Sec. 1

Planning and Inspection Department

	5 E: SAGA New SF : 701 ZEN LANE		BUILDING JOINT ISSUED: 06/18/2019			
						EXPIRES: 12/15/2019
APPLICANT:	Water Oak Residen PO Box 90 Kill Devil Hills, NC 2 252-441-9003			PC	ater Oak Resident) Box 90 I Devil Hills, NC 2 2-441-9003	
CONTRACTOR:	SAGA CONSTRUC 1314 S Croatan Hw PO Box 90 Kill Devil Hills, NC 2 252-441-9003	ry, Suite 301				
GENERAL BUILI	DING - LIMITED:	1314 S Cro PO Box 90	ills, NC 27948	uite 301		e: 62306 s: 12/30/2019
PARCEL:						
PIN:	98841722249	6		Parcel Number:		
Address:	701 ZEN LAN	E Kill Devil Hills				
				Zoning:		
Addition:				Block:		Lot(s):
Legal Descri	iption: Lot 57, W	/ater Oak Subdivi	sion			
EES:		Paid	Due	BUILDING AREA:		
Covered Porch R	Residential	\$252.00	\$0.00	Covered Porches/	Decks	336 SQFT
Res. Building Per	rmit Fee	\$1,721.05	\$0.00	Resdiential Unhea	ted (.40)	397 Sq. Ft
I-Pole		\$50.00	\$0.00	Residential Heated	d Space	2083 sq. Ft.
NIL PARATONI COLUMNATION AND A COLUMN AND A COLUMN	Totals :	\$2,023.05	\$0.00	 (.75) # of Temporary Pc 	bles	1 EA
				Town	of Kill Devil I	Hills
PROJECT DESCR	RIPTION: New 3	Bedroom 2 bath s	ingle family	dwelling W	ater Charges	
			gio ioniny		PAID	
					123588	
					a1100	
nted by : Marty Shaw or	n: 06/18/2019 08:56 AM					Page 1 o

BJ2019-105 PROJECT NAME: SAGA New SFD	BUILDING JOINT ISSUED: 06/18/2019
SITE ADDRESS: 701 ZEN LANE Kill Devil Hills	EXPIRES: 12/15/2019
 * As-built survey will be required prior to Certificate of Occupancy or Certificate * The developer shall be responsible for maintaining erosion and sediment contractions 	
* Development must meet all aspects of Chapter 151 Flood Damage Prevention	""""""""""""""""""""""""""""""""""""""
* Construction must meet all aspect of Chapter 153 Zoning including lot cover	化加加加加加加加加加加加加加加加加加加加加加加加加加加加加加加加加加加加加加
* Elevation Certificate will be required 21 days after establishment of the refere	人名马加克尔尔 第十十 化管接角 计显示字 的复数法法 医乳乳液 医马尔德 医含化 化化化化化 化化化化化化化化化化化化化化化化化化化化化化化化化化化化
* Zoning Final Inspection is required.	
* A final elevation certificate will be required prior to issuance of a Certificate of accordance with 151.41(C).	f Occupancy or a Certificate of Compliance in
I hereby certify that I have read and examined this application and	
All provisions of Laws and Ordinances governing this type of wor specified herein or not. The granting of a permit does not presume	
the provisions of any other state/local law regulating construction	
Issued By:	
Contractor or Authorized Agent: Tach Mulic	<u>k</u> Date: (0.21.19

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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					BUILDING JOINT ISSUED: 06/05/2019	
SITE ADDRESS	S: 211 E Archdale	St Kill Devil Hills			EXPIRES: 1	2/02/2019
APPLICANT:	Auten, John 225 Downing Drive CHESAPEAKE, VA	g Drive		225 Dow	Auten, John 225 Downing Drive CHESAPEAKE, VA 23323	
CONTRACTOR:	SANDY BOTTOM H 400 DaVinci Lane kitty hawk, nc 2794 757-448-8162					
GENERAL BUILDING-LIMITED: SANDY BOTTOM HOM 400 DaVinci Lane kitty hawk, nc 27949 757-448-8162		ES	License: 67524 Expires: 01/01/2020			
PARCEL:						
PIN:	98851712831	8		Parcel 000 Number:	0807000	
Address:	211 E Archda	le St Kill Devil Hi	lls			
				Zoning:		
Addition:	VIRGINIA DA	RE SHORES AM	D BLK 5	Block: 5	Lot(s): 13	
Legal Desci	ription:					
EES:		Paid	Due	BUILDING AREA:		
T-Pole		\$50.00	\$0.00	Residential Heated Spa	ace 1757 sq. Ft	
Open Deck Fee		\$150.00	\$0.00	(.75)		
Res. Building Pe		\$1,329.75	\$0.00	# of Temporary Poles	1 EA	
Covered Porch F	Residential	\$56.25	\$0.00	Open Decks	1 EA	
	Totals :	\$1,586.00	\$0.00	Resdiential Unheated (Covered Porches/Deck		
					-	
PROJECT DESC	RIPTION: New 3	Bedroom 3 Bath	Single Famil	y Dwelling		
			ter Charge			
			PAID		N 1 3 2019	
inted by : CTHUMAN o	on: 06/05/2019 09:19 AM	Water Tap #:	7235	309		Page 1 o
			and the second se	and and the second designed a second		, ago i o

BJ2019-106 PROJECT NAME: Auten New SFD SITE ADDRESS: 211 E Archdale St Kill Devil Hills

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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	Ν
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	

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

BJ2019-106 PROJECT NAME: Auten New SFD SITE ADDRESS: 211 E Archdale St Kill Devil Hills

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 statellocal law regulating construction or the performance of construction.

Issued By:

Contractor or Authorized Agent:

Date: 6-13-19

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



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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

	7 NE: McCombs Pool S: 3118 BAY DR KIL	L DEVIL HILL	.S			ISSUE	ING JOINT D: 06/05/2019 ES: 12/02/2019
APPLICANT:	McCombs, Jack 3118 Bay Drive Kill Devil Hills, NC 279	48		OWNER:	McCombs, . 3118 Bay D Kill Devil Hil		
CONTRACTOR:	CARRIBEAN POOLS & PO BOX 65 kitty hawk, nc 27949 252-207-1773	& SPAS					
GENERAL:		CARRIBE PO BOX 6 kitty hawk, 252-207-1	nc 27949	SPAS		License: 4851 Expires: 12/3	
PARCEL:							
PIN:	987520822153			Parcel Number:	00107	4000	
Address:	3118 BAY DR K		LLS				
				Zon	ing:		
Addition:	MOOR SHORES	S		Bloc	: 0	Lot(s):	139
Legal Descr	ription:						
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 1 1 2019

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



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 NAM	IE: Oliver Pool					BUILDING . ISSUED: 06	
SITE ADDRESS	5: 314 TRUXTON S	ST KILL DEVIL I	HILLS			EXPIRES: 12	/02/2019
APPLICANT:	OLIVER, TIMOTHY 1228 ROSEBUD AVI chesapeake, va 2332 614-557-1020			OWNER:	OLIVER, TI 1228 ROSE chesapeake 614-557-10	EBUD AVE e, va 23322	
CONTRACTOR:	CARRIBEAN POOLS UNKNOWN UNKNOWN, XX 0000						
GENERAL:		UNKNOW	AN POOLS & S N N, XX 00000	PAS		License: 48519 Expires: 12/30/2019	
PARCEL:							
PIN:	987516933323	1		Parcel Number:	02872	21000	
Address:	314 TRUXTON	ST KILL DEVI	L HILLS				
Addition:	MOOR SHORE	ES TWO		Zoni Bloc	-	Lot(s): 159	
Legal Descr	iption:						
FEES:	······	Paid	Due				
Pool/Hot Tub		\$200.00	\$0.00				
	Totals :	\$200.00	\$0.00				
PROJECT DESC	RIPTION: Installati	on of in ground	11x24 pool				
	JUN 1 1 2019						
	0 · · · · · ·						
rinted by : Marty Shaw o	on: 06/05/2019 08:55 AM						Page 1 of

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	Ν	
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	Ν	
OCCUPANCY TYPE	One & Two Family Dwelling	

REQUIRED INSPECTIONS

Final

-4

Zoning Final

Pool Bonding

CONDITIONS

	This permit becomes null and void if work or construction authorized is not commenced within 6 months or if construction
0	r 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.
	* * * * * * * * * * * * * * * * * * * *

Printed by : Marty Shaw on: 06/05/2019 08:55 AM

BJ2019-108 PROJECT NAME: Oliver Pool SITE ADDRESS: 314 TRUXTON ST KILL DEVIL HILLS

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EXPIRES: 12/02/2019

I hereby certify that I have read and examined this application and know the s All provisions of Laws and Ordinances governing this type of work will be co specified herein or not. The granting of a permit does not presume to give au	mplied with whether
the provisions of any other state/local law regulating construction or the perf	ormance of construction.
Issued By: Bh	
Contractor or Authorized Agent:	Date: 6.11-19

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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 PROJECT NAM SITE ADDRESS	D E: Magee New Co : 411 MITCHELL	ONSTRUCTION CT KILL DEVIL	HILLS			BUILDING JOINT ISSUED: 06/12/2019 EXPIRES: 12/09/2019
APPLICANT:	MAGEE, JAMES F 4513 DAVIDS MILL			OWNER:	MAGEE, JAME 4513 DAVIDS	
	CHESAPEAKE, VA				CHESAPEAKE	
CONTRACTOR:	Sandy Bottom Hom 400 DaVinci Lane kitty hawk, nc 2794 757-448-8162					
GENERAL BUILI	DING-LIMITED:	SANDY BO 400 DaVin kitty hawk, 757-448-8	nc 27949	ES		icense: 67524 xpires: 01/01/2020
PARCEL:		· · · · · · · · · · · · · · · · · · ·				
PIN:	98840528036	4		Parcel Number:	0021110	00
Address:	411 MITCHEI	L CT KILL DEV	IL HILLS			
Addition:	WRIGHT'S SI	HORES		Zonin Block	-	Lot(s): 151
Legal Descr						
FEES:		Paid	Due	BUILDING ARE	A:	anna 199 kan an ann
Covered Porch R	Residential	\$52.50	\$0.00	Covered Porch	es/Decks	70 SQFT
Res. Building Per	rmit Fee	\$1,311.95	\$0.00	Residential Hea	ated Space	1641 sq. Ft.
T-Pole		\$50.00	\$0.00	(.75) ~ Resdiential Unl	heated (40)	203 Sq. Ft
	Totals :	\$1,414.45	\$0.00	# of Temporary		1 EA
				*	ta nazotiku kratekan manunun kendera kender manus meter	
PROJECT DESCI	RIPTION: New 4	Bedroom SFD				
			of Kill Devil ter Charge			JUN 1 2 2019
		F	PAID			1
	n: 06/12/2019 07:57 AM	Water Tap #:_	T720	592		

BJ2019-110

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

BUILDING JOINT

	DEI	AILS	
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	Ν		
CAMA EXEMPTION	Ν		
FLOOD ZONE	Х		
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	Manson Ray Meekins L- 2592		
ENGINEER AND LICENSE	Michael Osteen 032628		
CULVERT	N		
ROLL OUT CAN	1		
DRIVEWAY INVERT 2	Y		
OCCUPANCY TYPE	One & Two Family Dwelling		

Printed by : Marty Shaw on: 06/12/2019 07:57 AM

BJ2019-110 PROJECT NAME: Magee New Construction SITE ADDRESS: 411 MITCHELL CT KILL DEVIL HILLS

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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
	o Certificate of Occupancy or Certificate of Compliance.
 * Per §153.082(B)(1)(c) Mechanical equininimum yard setback more than four (a Must comply with Wind Borne Debris * Zoning Final Inspection is required. * Construction must meet all aspect of a must meet all aspect aspect as must meet all aspect aspect as must meet all a must meet all aspect as must meet all a must meet all a must meet all aspect aspect as must meet all aspect as must meet as must meet all aspect as must meet all aspect as must meet as	requirements as defined in NCBC R301.2.1.2 and NCBC 1609.2. Chapter 153 Zoning including lot coverage and setbacks.
 * Per §153.082(B)(1)(c) Mechanical equininimum yard setback more than four (and the setback more than the setba	uipment, including HVAC equipment and LP Gas equipment shall not project into a 4) feet. requirements as defined in NCBC R301.2.1.2 and NCBC 1609.2.

Printed by : Marty Shaw on: 06/12/2019 07:57 AM



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

BUILDING JOINT BJ2019-111 ISSUED: 06/13/2019 **PROJECT NAME:** Thomas and Gayle Boothe SITE ADDRESS: 604 PALMETTO ST W KILL DEVIL HILLS EXPIRES: 12/10/2019 APPLICANT: Sandy Bottom Homes OWNER: Boothe, Thomas 1047 Camera RD WAVERLY, VA 23890 804-731-5129 400 DaVinci Lane kitty hawk, nc 27949 757-448-8162 License: 67524 Expires: 01/01/2020 SANDY BOTTOM HOMES GENERAL BUILDING-LIMITED: 400 DaVinci Lane kitty hawk, nc 27949 757-448-8162

PARCEL:							
PIN:	98740899392	26		Parcel Number:	000775006		
Address:	604 PALMET	TO ST W KILL D	EVIL HILLS				
				Zoning:			
Addition:	VIRGINIA DA	RE SH BLK 77 R	ECOMB	Block:	77	Lot(s):	6
Legal Descript	ion:						
FEES:		Paid	Due	BUILDING AREA:			
T-Pole		\$50.00	\$0.00	# of Temporary Po	oles	1	EA
Covered Porch Res	sidential	\$50.25	\$0.00	Covered Porches/		67	SQFT
Res. Building Perm	it Fee	\$1,278.30	\$0.00	Resdiential Unheated (.40)		117 Sq. Ft	Sq. Ft
Open Deck Fee		\$150.00 \$0.0		Residential Heated Space		1642 sq. Ft.	
	Totals :	\$1,528.55	\$0.00	(.75) Open Decks		1	EA

PROJECT DESCRIPTION: Proposed 4 bedroom single family dwelling

Town of Kill Devil Hills Water Charges PAI

Water Tap #: 723591

JUN 1 3 2019

Printed by : CTHUMAN on: 06/13/2019 08:50 AM

BJ2019-111 PROJECT NAME: Thomas and Gayle Boothe SITE ADDRESS: 604 PALMETTO ST W KILL DEVIL HILLS

.

EXPIRES: 12/10/2019

	DE	TAILS
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	Ν	
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	Ν	
ROLL OUT CAN	1	
DRIVEWAY INVERT 2	Y	
	REQUIRED	INSPECTIONS
T-Pole		Vapor Barrier
Piling		Rough In
In-Slab Plumbing		Insulation

CONDITIONS

Final

Zoning Final

* 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).

Printed by : CTHUMAN on: 06/13/2019 08:50 AM

Slab/Foundation

Sheathing

BJ2019-111 PROJECT NAME: Thomas and Gayle Boothe SITE ADDRESS: 604 PALMETTO ST W KILL DEVIL HILLS

Date: 6-13-19

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 statel ocal law regulating construction or the performance of construction.

Issued By:

Contractor or Authorized Agent: _____ & &L

Printed by : CTHUMAN on: 06/13/2019 08:50 AM



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

	2 ME: OBX Destination S: 1507 VA DARE		VIL HILLS			BUILDING JOIN ISSUED: 06/25/20 EXPIRES: 06/05/20
APPLICANT:	RM SAUNDERS GI PO Box 1922 Kill Devil Hills, NC 2 480-9477		CTORS	OWNER:	OBX Destinatio 905 NORTH V Kill Devil HillsI, 252-441-2544	A Dare TR
GENERAL - UN	LIMITED:	CONTRAC PO Box 19	TORS INC 22 ills, NC 27948	SAUNDERS GENE		icense: 32380 xpires: 01/01/2020
PARCEL:						
PIN:	98841165158	9		Parcel Number:	0027700	00
Address:	1507 VA DAF	RE TRL N KILL D	EVIL HILLS			
				Zonin	g:	
Addition:	CROATAN S	HORES		Block	: A	Lot(s): 18-19
Legal Desc	cription:					
FEES:		Paid	Due	BUILDING ARE	A:	
Covered Porch	Residential	\$795.00	\$0.00	Covered Porch	es/Decks	1060 SQFT
Res. Building Pe	ermit Fee	\$8,755.50	\$0.00	Residential He	ated Space	11674 sq. Ft.
T-Pole		\$50.00	\$0.00	(.75)		
	Totals :	\$9,600.50	\$0.00	# of Temporary	Poles	1 EA

Town of Kill Devil Hills Water Charges

Water Tap #: 723633

Printed by : Marty Shaw on: 06/25/2019 01:18 PM

BJ2019-112

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PROJECT NAME: OBX Destinations LLC SITE ADDRESS: 1507 VA DARE TRL N KILL DEVIL HILLS ISSUED: 06/25/2019 EXPIRES: 06/05/2020

BUILDING JOINT

DETAILS Permit Name Value ZONING DISTRICT OIR FRONT YARD SETBACK 30 REAR YARD SETBACK CAMA SIDE YARD SETBACK 10 HEALTH DEPARTMENT **KDHWWTP** PERMIT # **# PARKING** 21 SPACES/BEDROOM 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 1060 PORCHES/DECKS (SQFT) TOTAL SQUARE FOOTAGE 12734 SURVEYOR NAME AND Coastal/Carlos Gomez NUMBER ENGINEER AND LICENSE **RAYMOND G PATE** NUMBER 13018 ARCHITECT NAME AND MICHAEL A FLOREZ LICENSE NUMBER 14163 CULVERT N **DRIVEWAY INVERT 2** N OCCUPANCY TYPE One & Two Family Dwelling

Printed by : Marty Shaw on: 06/25/2019 01:18 PM

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

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 work is suspended for a period of 12 mo	k or construction authorized is not commenced within 6 months or if construction nths at any time after work has started.
* NOTICE: Call Public Services Department	nt (252) 480-4080 before pouring driveway!
* Elevation Certificate will be required 21 d	lays after establishment of the reference level in accordance with 151.41(C).
* As-built survey will be required prior to C	ertificate of Occupancy or Certificate of Compliance.
* The developer shall be responsible for m	aintaining erosion and sediment control at the disturbed area.
* A final elevation certificate will be require accordance with 151.41(C).	d prior to issuance of a Certificate of Occupancy or a Certificate of Compliance in
 Development must meet all aspects of C THIS PROPERTY IS LOCATED IN A SP 	hapter 151 Flood Damage Prevention Ordinance including use and elevation.
	use of enclosures below the lowest floor for parking, building access and limited
	tion of the sand dunes which would increase potential flood damage.
	ime of application, 21 days from the establishment of the lowest floor and at
DEVELOPER MUST OBTAIN ALL THE NE PERMIT CAN BE ISSUED.	ECCESSARY FEDERAL, STATE AND LOCAL PERMITS BEFORE THIS
minimum yard setback more than four (4) fe	
* Must as much used to Mind Damas Datais	

Must comply with Wind Borne Debris requirements as defined in NCBC R301.2.1.2 and NCBC 1609.2.

		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.

Printed by : Ryan Lang on: 06/26/2019 09:50 AM

Page 3 of 4

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REQUIRED INSPECTIONS

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EXPIRES: 06/05/2020

I hereby certify that I have read and examined this application and know the same to be true and corre	ect.
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	el
the provisions of any other state/local law regulating construction or the performance of construction	l.
Issued By:	
Contractor or Authorized Agent: Date: 62519	

Printed by : Marty Shaw on: 06/25/2019 01:18 PM

Page 4 of 4



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3

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

PROJECT NAM			BUILDING JOIN ISSUED: 06/11/201			
SITE ADDRESS	: 1712 CROATAN	HWY N KILL D	DEVIL HILLS			EXPIRES: 12/08/201
	OLIVOLA, MARK NANCY O WALTON P O BOX 364 KILL DEVIL HILLS, N	IC 27948		OWNER:	NANCY P O BOX	A, MARK O WALTON X 364 WIL HILLS, NC 27948
	Sharp, Grant po box 1181 kitty hawk, nc 27949	ten Madridath distribution (so to		a, an		
GENERAL:		Self UNKNOWI UNKNOWI 917-862-90	N, XX 00000			License: Unlicensed Expires: 12/31/2020
PARCEL:						
PIN:	988410374122			Parcel Number:	002	2739000
Address:	1712 CROATA	N HWY N KILL	DEVIL HILL	.S		
Addition:	HEDRICKS AD			Zoni Bloc	-	
Addition: Legal Descri		DITION - CRO	ATAN SH	BIOC	J. U	Lot(s): 0
EES:		Paid	Due	BUILDING AR	EA:	
Renovation/Remo	odel/Relocate	\$219.60	\$0.00	Remodel/Ren	ovation	488 SQFT
	Totals :	\$219.60	\$0.00	and an	dhanadar phanahanardirdina is to fam	νδημήνα αυτόγκε 3 δημηροφορίαται και παιτοποίου ο 5 γ.υ. τη ποιοιοργατία και προτοφορίο το προσφορικη που τροδηλογι

Printed by : Marty Shaw on: 06/11/2019 01:16 PM

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	С		
FRONT YARD SETBACK	30		
REAR YARD SETBACK	20% Depth >30		
SIDE YARD SETBACK	10		
STREET SIDE SETBACK	15		
CAMA PERMIT	N		
CAMA EXEMPTION	Ν		
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	Ν		
OCCUPANCY TYPE	Business		

REQUIRED INSPECTIONS

Rough In Final

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

Printed by : Marty Shaw on: 06/11/2019 01:16 PM

BJ2019-113 PROJECT NAME: Maxs Restaurant SITE ADDRESS: 1712 CROATAN HWY N KILL DEVIL HILLS

ISSUED: 06/11/2019

BUILDING JOINT

Date: 6/11/2019

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.

neu

Contractor or Authorized Agent:

Issued By:

Printed by : Marty Shaw on: 06/11/2019 01:16 PM



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

A, DONALD J X 364 VIL HILLS, NO ND DUNSTAN X 402 wk, NC 27949 -1100	C 27948		OWNER:	POBOX 3	DONALD J
x 402 wk, NC 27949	1			KILL DEVI	L HILLS, NC 27948
-1100					
NLIMITED:	P.O. Box 4 Kitty Hawk,	NC 27949			License: 19436 Expires: 12/31/2019
3410373044-	7288		Parcel Number:		
22 N. Croata	n Hwy UNKNO	WN			
			Zonin	g:	
			Block	:	Lot(s):
	Paid	Due	BUILDING ARE	A:	
locate	\$603.00	\$0.00	Remodel/Reno	vation	1340 SQFT
Totals :	\$603.00	\$0.00			
	8410373044- 22 N. Croatar elocate Totals :	P.O. Box 4 Kitty Hawk, 252-202-11 8410373044-7288 22 N. Croatan Hwy UNKNO Paid elocate \$603.00 Totals : \$603.00	P.O. Box 402 Kitty Hawk, NC 27949 252-202-1100 8410373044-7288 22 N. Croatan Hwy UNKNOWN Paid Due elocate \$603.00 \$0.00 Totals : \$603.00 \$0.00 I: installation of freezers, and refrigeration	P.O. Box 402 Kitty Hawk, NC 27949 252-202-1100 8410373044-7288 Parcel Number: 22 N. Croatan Hwy UNKNOWN Zonin Block Paid Due BUILDING ARE elocate \$603.00 \$0.00 Remodel/Reno Totals : \$603.00 \$0.00	P.O. Box 402 Kitty Hawk, NC 27949 252-202-1100 Parcel Number: 22 N. Croatan Hwy UNKNOWN Zoning: Block: Block: Paid Due BUILDING AREA: \$603.00 \$0.00 Remodel/Renovation Totals : \$603.00 \$0.00

JUN 1 0 2019

Printed by : CTHUMAN on: 06/10/2019 08:59 AM

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	С	
FRONT YARD SETBACK	30	
REAR YARD SETBACK	20% Depth >30	
SIDE YARD SETBACK	10	
CAMA PERMIT	Ν	
CAMA EXEMPTION	Ν	
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	

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.

Printed by : CTHUMAN on: 06/10/2019 08:59 A	1
---------------------------------------------	---

BJ2019-114 PROJECT NAME: Dream Cream Ice Cream Parlor SITE ADDRESS: 1722 N. Croatan Hwy UNKNOWN

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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 statellocal law regulating construction or the performance of construction.
Issued By:
Contractor or Authorized Agent: Date: 6-10.2019

Printed by : CTHUMAN on: 06/10/2019 08:59 AM



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

APPLICANT: Contina, Catny 1424 Norwood Crest Court RALEIGH, NC 27614			t		Cortina, Cathy 1424 Norwood Crest Court RALEIGH, NC 27614		
CONTRACTOR:	Atlantic Elevators P. O. Box 1521 Manteo, NC 27954 252-305-4465						
ELECTRICAL - L	LIMITED:	Atlantic Ele P. O. Box 1 Manteo, NG 252-305-44	1521 C 27954			License: 06925-L Expires:	
PARCEL:						· · · · · · · · · · · · · · · · · · ·	
PIN:	98840508736	5		Parcel Number:	001384	000	
Address:	902 DURHAM	ST W KILL DEV	VIL HILLS				
				Zoni	ng:		
Addition:	AVALON BEA	CH ANNEX 2 &	3	Bloc	k: 0	Lot(s): 679	
Legal Descr	ription:						
FEES:		Paid	Due				
Building Permit F Fee	Fee - Minimum	\$150.00	\$0.00				
al annua anginingi panananya kunangkanangkananganangka	Totals :	\$150.00	\$0.00				

PROJECT DESCRIPTION: Add platform lift and concrete walk.

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JUN 1 1 2019

Printed by : Marty Shaw on: 06/11/2019 09:32 AM

BJ2019-115

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

BUILDING JOINT

	DETAILS	
Permit		
Name	Value	
ZONING DISTRICT	RL	
FRONT YARD SETBACK	15	
REAR YARD SETBACK	20% Depth >30	
SIDE YARD SETBACK	6	
CAMA PERMIT	Ν	
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.

Printed by : Marty Shaw on: 06/11/2019 09:32 AM

Date: 6-11-19

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:

Printed by : Marty Shaw on: 06/11/2019 09:32 AM



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

BJ2019-11 PROJECT NA SITE ADDRES	ME: Lowry Bathroom SS: 206 AVALON DF	BUILDING J ISSUED: 06/ EXPIRES: 12/					
APPLICANT:	Lowry, Robert 79 Cunningham Ct. PALMYRA, VA 2296	3		OWNER:	Lowry, Robe 79 Cunningh PALMYRA, V	am Ct.	
UNLICENSED	- REMODELING:	Full House PO Box 49 kitty hawk, 919-608-21	8 nc 27949			License: 00000 Expires: 06/11.	
PARCEL:							
PIN:	988517104493	3		Parcel Number:	001754	1000	
Address:	206 AVALON	DR W KILL DEV	IL HILLS				
				Zoni	ng:		
Addition:	AVALON BEA	СН		Bloc	k: 0	Lot(s):	123
Legal Des	cription:						
FEES:		Paid	Due				
Building Permit Fee	Fee - Minimum	\$150.00	\$0.00				
	Totals :	\$150.00	\$0.00				

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

4210

JUN 1 1 2019

Printed by : CTHUMAN on: 06/11/2019 09:28 AM

BJ2019-116 PROJECT NAME: Lowry Bathroom SITE ADDRESS: 206 AVALON DR W KILL DEVIL HILLS

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	

Rough In Insulation Final

Zoning Final

CONDITIONS

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

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

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

Issued By:		
	A I	,
Contractor or Authorized Agent:	Namelle	Date @ 71-19

Printed by : CTHUMAN on: 06/11/2019 09:28 AM

DEV	LEI	Towr	Town of Kill Devil Hills PO BOX 1719						
Birthpla Z Aviati			Il Devil Hills, 1 2-449-5318	NC 27948	-4102		IUN 28 2019		
NORTH CR	ROLIN	Planning	and Inspec	tion Depa	rtment		¢		
BJ2019-11 PROJECT NAM	9 ME: Huddleston Cov	ered Porch, part	ial ground floo	or			DING JOINT UED: 06/27/2019		
enclosure SITE ADDRES	S: 110 SPORTSMA	N DR E KILL DI	EVIL HILLS			EXF	PIRES: 12/24/2019		
APPLICANT:	Huddleston, Henry 137 Nautical Lane currituck, nc 27929		C	WNER:	Huddlestor 137 Nautic currituck, r	cal Lane			
CONTRACTOR	C & T CONTRACTIN 1700 Bell Ave. Kill Devil Hills, NC 27 252-202-9943								
BUILDING LIMI	TED:	1700 Bell A	lls, NC 27948			License: 45 Expires: 07			
PARCEL:									
PIN:	988517211016	3		Parcel Number:	0017	18000			
Address:	110 SPORTSM	MAN DR E KILL	DEVIL HILLS						
				Zon	ing:				
Addition:	AVALON BEA	СН		Bloc	ck: 0	Lot(s): 66		
Legal Desc	cription:								
EES:		Paid	Due						
Building Permit Fee	Fee - Minimum	\$150.00	\$0.00						
			\$0.00						

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

Printed by : CTHUMAN on: 06/27/2019 08:03 AM

- -

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.

PIR

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 grapting 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: Date: 6 28/18 Contractor or Authorized Agent:



Town of Kill Devil Hills

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

JH 26 119

Planning and Inspection Department

BUILDING JOINT **BJ2019-120** ISSUED: 06/25/2019 PROJECT NAME: OBX Destinations New 25 Bedroom SFD SITE ADDRESS: 1505 VA DARE TRL N KILL DEVIL HILLS EXPIRES: 12/22/2019 APPLICANT: **OBX Destinations LLC OBX** Destinations LLC OWNER: 905 NORTH VA Dare TR 905 NORTH VA Dare TR Kill Devil Hillsl, NC 27948 Kill Devil Hillsl, NC 27948 252-441-2544 252-441-2544 CONTRACTOR: RM SAUNDERS GENERAL CONTRACTORS PO Box 1922 Kill Devil Hills, NC 27948 480-9477 **GENERAL BUILDING - UNLIMITED:** SAUNDERS, R.M. License: 32380 P.O. box 1922 Expires: 12/31/2019 Kill Devil Hills, NC 27948 252-207-8710 PARCEL: Parcel PIN: 988411652507 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 **BUILDING AREA:** FEES: Paid Due **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)1 EA # of Temporary Poles Totals : \$9,600.50 \$0.00 PROJECT DESCRIPTION: New 25 Bedroom SFD Town of Kill Devil Hills Water Charges Water Tap #: 1 23592

Printed by : Marty Shaw on: 06/25/2019 01:42 PM

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BJ2019-120 PROJECT NAME: OBX Destinations New 25 Bedroom SFD SITE ADDRESS: 1505 VA DARE TRL N KILL DEVIL HILLS

ISSUED: 06/25/2019 EXPIRES: 12/22/2019

BUILDING JOINT

	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	Ν	
FLOOD ZONE	VE	
BASE FLOOD ELEVATION	11.0	
PURPOSE	Residential New	
CONSTRUCTION TYPE	V	
CONSTRUCTION COST	230000.00	
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	Ν	
OCCUPANCY TYPE	One & Two Family Dwelling	

Printed by : Marty Shaw on: 06/25/2019 01:42 PM

BJ2019-120

P . 4

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 Departme	ent (252) 480-4080 before pouring driveway!					
* This permit becomes null and void if wo or work is suspended for a period of 12 m	rk or construction authorized is not commenced within 6 months or if construction on the at any time after work has started.					
* As-built survey will be required prior to 0	Certificate of Occupancy or Certificate of Compliance.					
* The developer shall be responsible for r	naintaining erosion and sediment control at the disturbed area.					
* A final elevation certificate will be requir accordance with 151.41(C).	ed prior to issuance of a Certificate of Occupancy or a Certificate of Compliance in					
* Development must meet all aspects of 0	Chapter 151 Flood Damage Prevention Ordinance including use and elevation.					
* Per §153.186(D)(1) Mechanical equipment appurtenances shall be screened.	ent shall not be visible from any right-of-way and (2) All Mechanical equipment and					
* THIS PROPERTY IS LOCATED IN A SI						
 All Special Flood Hazard Areas limit the storage only. 	e use of enclosures below the lowest floor for parking, building access and limited					
	ation of the sand dunes which would increase potential flood damage.					
	time of application, 21 days from the establishment of the lowest floor and at					
DEVELOPER MUST OBTAIN ALL THE N PERMIT CAN BE ISSUED.	ECCESSARY FEDERAL, STATE AND LOCAL PERMITS BEFORE THIS					
 * Must comply with Wind Borne Debris re * Zoning Final Inspection is required. 	quirements as defined in NCBC R301.2.1.2 and NCBC 1609.2.					
* Construction must meet all aspect of Ch	napter 153 Zoning including lot coverage and setbacks.					
	gineering certifications, record drawings and approvals as required by NCDEQ and r the sewer extension prior to Final Inspection.					

Printed by : Ryan Lang on: 06/26/2019 09:51 AM

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BJ2019-120 PROJECT NAME: OBX Destinations New 25 Bedroom SFD SITE ADDRESS: 1505 VA DARE TRL N KILL DEVIL HILLS

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

Printed by : Marty Shaw on: 06/25/2019 01:42 PM

Page 4 of 4



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Town of Kill Devil Hills

PO BOX 1719 Kill Devil Hills, NC 27948 Phone: 252-449-5318 Fax: 252-441-4102 5 JAN

JUN 2 8 2019

Planning and Inspection Department

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			
APPLICANT:	DAVID ISBELL 5507 Dawson Rd. B VIRGINIA BEACH, V	'A 23451		OWNER:	DAVID ISBEL 5507 Dawsor VIRGINIA BE		1	
CONTRACTOR	: Heath, Wayne 302 North Virginia Da Kill Devil Hills, NC 27 252-207-5468							
UNLICENSED - REMODELING:		302 North \ Kill Devil Hi	Heath, Wayne 302 North Virginia Dare Trail Kill Devil Hills, NC 27948 252-207-5468			License: 0000 Expires:	00000	
PARCEL:								
PIN:	988419703970)		Parcel Number:	003894	000		
Address:	105 AVIATION	AVE E KILL DE	EVIL HILLS					
				Zonin	g:			
Addition:	KITTY HAWK	SHORES - REVI	ISED	Block	: 38	Lot(s):	15	
Legal Desc	ription:							
FEES:		Paid	Due	BUILDING ARE	A:			
Open Deck Fee		\$150.00	\$0.00	Open Decks		1	EA	
	Totals :	\$150.00	\$0.00					

Printed by : CTHUMAN on: 06/26/2019 09:28 AM

BJ2019-123 PROJECT NAME: Isabell Deck SITE ADDRESS: 105 AVIATION AVE E KILL DEVIL HILLS

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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:

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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

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JUN 27 2019

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TELEVICE / DAU

BUILDING JOINT BJ2019-124 PROJECT NAME: Menendez Enclosure ISSUED: 06/27/2019 SITE ADDRESS: 511 FIRST ST W KILL DEVIL HILLS EXPIRES: 12/24/2019 APPLICANT: **Jillian Menedez** OWNER: **Jillian Menedez** 511 W First St 511 W First St KILL DEVIL HILLS, NC 27948 **KILL DEVIL HILLS, NC 27948** 252-489-3294 252-489-3294 License: Unlicensed Expires: 12/31/2020 **GENERAL:** Self UNKNOWN UNKNOWN, XX 00000 917-862-9006 PARCEL: Parcel PIN: 988409251037 003338000 Number: 511 FIRST ST W KILL DEVIL HILLS Address: Zoning: Addition: **FIRST FLIGHT VILLAGE SEC 1** 56 Block: 0 Lot(s): Legal Description: **BUILDING AREA:** FEES: Paid Due Res. Building Permit Fee \$407.25 \$0.00 **Residential Heated Space** 543 sq. Ft. (.75) Totals : \$407.25 \$0.00

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

Printed by : Marty Shaw on: 06/27/2019 01:36 PM

BJ2019-124

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3

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	

Insulation	
Final	
Zoning Final	
	Final

Printed by : Marty Shaw on: 06/27/2019 01:36 PM

BJ2019-124 PROJECT NAME: Menendez Enclosure SITE ADDRESS: 511 FIRST ST W KILL DEVIL HILLS

ISSUED: 06/27/2019 EXPIRES: 12/24/2019

BUILDING JOINT

CONDITIONS

	This permit becomes null and void if work or construction authorized is not commenced within 6 months or if construction r 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: Date: 6 27 19 Contractor or Authorized Agent:

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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 PROJECT NAME: BRAMWELL METER BASE SITE ADDRESS: 112 MEADOWLARK ST E KILL DEVIL HILLS ISSUED: 06/06/2019

APPLICANT:	Bramwell, David 112 E Meadowlark S Kill Devil Hills, NC 23		c	OWNER:	Bramwell, Da 112 E Meado Kill Devil Hills	wlark Street	
ELECTRICAL-	JNLIMITED:	SUBURBA PO Box 92 Manteo, No 252-475-13	5 C 27954	CONTRACTORS		License: 30633 Expires: 08/09	
PARCEL:							
PIN:	988308890986	6		Parcel Number:	003822	000	
Address:	112 MEADOW	LARK ST E KIL	L DEVIL HILL	S			
				Zoni	ng:		
Addition:	KITTY HAWK	SHORES - REV	ISED	Bloc	k: 34	Lot(s):	6
Legal Desc	cription:						
FEES:		Paid	Due				
Electrical Permi	it Fee	\$150.00	\$0.00				
	Totals :	\$150.00	\$0.00				

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

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JUN 6 2019 à

Printed by : Jordan Blythe on: 06/06/2019 09:56 AM

Page 1 of 2

ELECTRICAL

EXPIRES: 12/03/2019

EL2019-052

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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 All provisions of Laws and Ordinances governing this type of work will be c specified herein or not. The granting of a permit does not presume to give a the provisions of any other state/local law regulating construction or the per Issued By:	omplied with whether uthority to violate or cancel
Contractor or Authorized Agent:	Date: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 PROJECT NAM SITE ADDRESS	ELECTRICAL ISSUED: 06/10/2019 EXPIRES: 12/07/2019						
APPLICANT:	Gatley, Kenneth 149 Racine Dr NEWPORT NEWS,	VA 23608		OWNER:	Gatley, Kenn 149 Racine I NEWPORT N	neth Dr NEWS, VA 2360)8
ELECTRICAL:		P.O. Box 1	or, NC 27964			License: 1807 Expires: 03/3	
PARCEL:							
PIN:	98851721160	5		Parcel Number:	000765	000	
Address:	213 RANDOM	ST KILL DEVIL	HILLS				
				Zon	ing:		
Addition:	VIRGINIA DAI	RE SHORES AM	D BLK 2	Bloc	ck: 2	Lot(s):	11-12
Legal Descri	iption:						
EES:		Paid	Due				
Electrical Permit	Fee	\$150.00	\$0.00				
	Totals :	\$150.00	\$0.00				

JUN 1 0 2019

Printed by : CTHUMAN on: 06/10/2019 10:01 AM

In - - Th

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	С	
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:

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Date: 6

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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 PROJECT NAME: Adams Meter BAse SITE ADDRESS: 104 OCEAN BAY BLVD KILL DEVIL HILLS						ELECTRICA ISSUED: 06/11/201		
SHE ADDRES	C. TOP OCEAN DA					EXPIR	RES: 12/08/2019	
APPLICANT:	Adams, Ann 5917 Farmwell RD RALEIGH, NC 27610 919-235-2407	0		OWNER:	Adams, Ann 5917 Farmwe RALEIGH, NC 919-235-2407	C 27610		
GENERAL:		Self UNKNOW UNKNOW 917-862-9	N, XX 00000			License: Unlic Expires: 12/3		
PARCEL:								
PIN:	988420705538	3		Parcel Number:	0038730	000		
Address:	104 OCEAN B	BAY BLVD KILL	DEVIL HILL	S				
				Zoni	ing:			
Addition:	KITTY HAWK	SHORES - REV	/ISED	Bloc	ck: 37	Lot(s):	10	
Legal Desc	ription:							
FEES:		Paid	Due					
Electrical Permit	t Fee	\$150.00	\$0.00					
Temporary Elect (PreFinal)	tric Service Fee	\$0.00	\$0.00					
	Totals :	\$150.00	\$0.00					
PROJECT DESC	RIPTION: C/O Me	ter base	V NUU # 2001	N 5.00				
			1000					

JUN 1 1 2019

Printed by : CTHUMAN on: 06/11/2019 11:52 AM

EL2019-054

j,

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
Final	REQUIRED INSPECTIONS
	CONDITIONS
This permit becomes null and	d void if work or construction authorized is not commenced within 6 months or if construction
or work is suspended for a period	od 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:

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Page 2 of 2

Date: 6/11

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Town of Kill Devil Hills

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

JUN 2 4 2019

Planning and Inspection Department

TUTION

ELECTRICAL

ISSUED: 06/14/2019

EXPIRES: 12/11/2019

EL2019-057 PROJECT NAME: SITE ADDRESS: 3209 RAYMOND AVE KILL DEVIL HILLS

64 VI	ple R Properties L 9 Fort Raleigh Dr. RGINIA BEACH, V 7-404-4349		(OWNER:	Triple R Propertie 649 Fort Raleigh I VIRGINIA BEACH 757-404-4349	Dr.		
ELECTRICAL, UNLI	MITED:	Outer Bank 1210 Burns Manteo, NO	side Rd		Lice Expi	nse: 2445 res:	1	
PARCEL:								
PIN:	988513045589	9		Parcel Number:	000090000			
Address:	3209 RAYMON	ND AVE KILL DI	EVIL HILLS					
				Zonir	ng:			
Addition:	ORVILLE BEA	CH BLK 5		Block	c: 5	Lot(s):	13	
Legal Descripti	on:							
FEES:		Paid	Due					
Electrical Permit Fe	е	\$150.00	\$0.00					
Angenetische Ausenderstellen, wie erstellte ein die Ausenderstelle Ausenderstelle Ausenderstelle Ausenderstelle	Totals :	\$150.00	\$0.00					

PROJECT DESCRIPTION: Replace overhead service cable.

Printed by : Marty Shaw on: 06/14/2019 01:05 PM

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SITE ADDRESS: 3209 RAYMOND AVE KILL DEVIL HILLS

EXPIRES: 12/11/2019

	DETAILS	
Permit		
Name	Value	
ZONING DISTRICT	С	
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: Bth Date: 6-24-204

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EL2019-059

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Town of Kill Devil Hills

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

JUN 1 9 2019

· · · · ·

Planning and Inspection Department

ELECTRICAL ISSUED: 06/19/2019

PROJECT NAME: SITE ADDRESS: 112 AVIATION AVE E KILL DEVIL HILLS

EXPIRES: 12/16/2019

APPLICANT:	Cernetich, Greg 302 Woodmont Rd JOHNSTOWN, PA 814-659-8472	15905		OWNER:	Cernetich, Gre 302 Woodmor JOHNSTOWN 814-659-8472	nt Rd I, PA 15905	
ELECTRICAL -	LIMITED:	J Pugh Ser PO Box 20 Jarvisburg, 252-202-46	4 NC 27947			icense: 29815 xpires: 07/26	
PARCEL:							
PIN:	98841971417	4		Parcel Number:	0039030	000	
Address:	112 AVIATIO	AVE E KILL DI	EVIL HILLS				
				Zoni	ing:		
Addition:	KITTY HAWK	SHORES - REV	ISED	Bloc	k: 39	Lot(s):	6
Legal Desc	cription:						
EES:		Paid	Due				
Electrical Permi	it Fee	\$150.00	\$0.00				
ut	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

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:

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Page 2 of 2

____ Date: <u>6-19-19</u>



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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

	Schenk, Francis T. OW 2710 Brockington Drive _AS VEGAS, NV 89120 702-468-5570		i	R: Schenk, Francis T. 2710 Brockington Drive LAS VEGAS, NV 89120 702-468-5570				
ELECTRICAL, UN	ILIMITED:	PO Box 27	ills, NC 27948			ense: 1940 bires: 10/02		
PARCEL:								
PIN:	98931314236	5		Parcel Number:	004957000)		
Address:	302 FRESH P	OND DRE KILL	DEVIL HILLS					
				Zoning	:			
Addition:	LAKE DRIVE	DEVELOPMENT	SEC 2	Block:	0	Lot(s):	31	
Legal Descrip	otion:							
FEES:		Paid	Due					
Electrical Permit F	ee	\$150.00	\$0.00				,	
	Totals :	\$150.00	\$0.00				e.	

PROJECT DESCRIPTION: Replace & Relocate meter base. Update service feeder & add hot tub circuit and 2 WP receptacles. JUN 18 2019

Printed by : Marty Shaw on: 06/17/2019 01:35 PM

Page 1 of 2

10 00

EXPIRES: 12/14/2019

	DI	TAILS	
Permit			
Name	Value		
ZONING DISTRICT	С		
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: Edlard Date: 6-18-19

Printed by : Marty Shaw on: 06/17/2019 01:35 PM



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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

	55 ME: Bermuda Bay H SS: 1101 Cambridge			ELECTRICAL ISSUED: 06/12/2019 EXPIRES: 12/09/2019	
APPLICANT:	Bermuda Bay Home PO Box 1807 Nags Head, NC 279 480-4722		on	OWNER:	Bermuda Bay Homeowners Association PO Box 1807 Nags Head, NC 27959 480-4722
CONTRACTOR	2: SEABREEZE ELEC 136 CAROLINA CT MANTEO, NC 27954 (252) 654-2094	WEST	G INC		
ELECTRICAL -	UNLIMITED:	136 CARC	OLINA CT WES , NC 27954	C & LIGHTING INC	C License: 30079 Expires: 04/05/2020
PARCEL:					
PIN:	988306387222	2		Parcel Number:	
Address:	1101 Cambrid	lge Rd. Kill Devi	il Hills		
				Zonir	ng:
Addition:				Block	k: Lot(s):
Legal Desc	ription: Lot 300 R	ecreation, Suns	et Bay		
EES:		Paid	Due		
Electrical Permi	it Fee	\$150.00	\$0.00		
	Totals :	\$150.00	\$0.00		

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

JUN 1 3 2019

Printed by : CTHUMAN on: 06/12/2019 08:54 AM

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

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

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: Date: (/13/19

Printed by : CTHUMAN on: 06/12/2019 08:54 AM

Contractor or Authorized Agent:



Town of Kill Devil Hills

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

JUN 7 2019

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Planning and Inspection Department

I.S.

BANNNER2019-001

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

E	BANNER	
ISSUED:	01/30/2019)

EXPIRES: 04/30/2019

APPLICANT:	P.O. Box 1111 1605 Curtis Bri	LOWES CORP. P.O. Box 1111 1605 Curtis Bridge Rd. Wilkesboro, NC 28697			LOWES P.O. Box 1605 Cur Wilkesbo		d. 7	
CONTRACTOR	:	SAME AS UNKNOWN UNKNOWN				License Expires		as Owner)/2019
PARCEL:								
PIN:	9884104	54012		Parcel Number:	002	746000		
Address:	1500 CR	OATAN HWY N KILL	DEVIL HILLS					
				Zo	ning:			
Addition:	SUBDIVI	SION - NONE		Blo	ock: 0	L	ot(s):	0
Legal Desc	ription:							
FEES:		Paid	Due					
Banner Fee		\$100.00	\$0.00					
9660000000000-0-0-0707000000000000000000	Totals	: \$100.00	\$0.00					
PROJECT DESC	RIPTION: 2 b	anners on building						
			DETAILS	3				
Permit								
Name		Value						
# OF BANNER	S	2						
ZONING DIST	RICT	С						
PURPOSE		Commercial Access	sory					
CONSTRUCTI	ON COST	300.00						
FLOOD ZONE		AE						

Printed by : Donna Elliott on: 01/30/2019 01:03 PM

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.

Date:

Telett Issued By: **Contractor or Authorized Agent:**

Printed by : Donna Elliott on: 01/30/2019 01:03 PM



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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

PAID

JUN 6 2019

Mule Liela

BANNNER2019-002

BANNER

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

						•
ISSUED	: ()6/	05	/20	19	9

EXPIRES: 09/03/2019

	Sharp, Natalya PO Box 1181 kitty hawk, nc 27949 252-305-2828		c		olivola, ma Nancy o Wa P o Box 364 Kill Devil H	LTON	
CONTRACTOR:		SAME AS A 0000000 00000000, r				.icense: 123456 Expires: 04/30/2020	
PARCEL:							
PIN:	988410374122			Parcel Number:	0027390	000	
Address:	1700 CROATAN	HWY N KILL	DEVIL HILLS				
				Zoning	g:		
Addition:	HEDRICKS ADD	DITION - CROA	TAN SH	Block:	0	Lot(s): 0	
Legal Descri	ption:						
FEES:		Paid	Due				
Banner Fee		\$50.00	\$0.00				
	Totals :	\$50.00	\$0.00				
PROJECT DESCR	RIPTION: Banner or	n the building/Ur	nit 1712				
			DETAILS	3			
Permit							
Name	Valu	е					
# OF BANNERS	1						
	ст с						
ZONING DISTR		mercial Access	orv				
ZONING DISTR	Com	mercial Access	.,				
			.,				

BANNNER2019-002 PROJECT NAME: Natalya Sharp/Max's Pizza SITE ADDRESS: 1700 CROATAN HWY N KILL DEVIL HILLS

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 backli

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.

lint Issued By: Date: 6/6/19 **Contractor or Authorized Agent:**

Printed by : Donna Elliott on: 06/06/2019 12:19 PM



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

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JUN 4 2019

ALL OT A LINES.

SG2019-00 PROJECT NAM SITE ADDRESS		N HWY S KILL D	EVIL HILLS			ISSUE	SIGN D: 04/09/2019 ES: 10/06/2019
APPLICANT:	SUNSATION REAL 353 Village Road Virginia Beach, VA 757-822-8412			OWNER:	SUNSATION 353 Village R Virginia Beac 757-822-841	oad h, VA 23451	
CONTRACTOR:		SAME AS A 00000000 00000000,	APPLICANT			License: 12345 Expires: 04/30	
PARCEL:				0.0			
PIN:	98931304087	9		Parcel Number:	008384	000	
Address:	1600 CROAT	AN HWY S KILL	DEVIL HILL	S			
				Zon	ing:		
Addition:	OCEAN ACR	ES TRACT 3 SEC	01	Bloc	k: A	Lot(s):	27-28
Legal Desci	ription:						
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

Printed by : CTHUMAN on: 04/09/2019 12:10 PM

F . 5

SG2019-007 PROJECT NAME: LaLa Land SITE ADDRESS: 1600 CROATAN HWY S KILL DEVIL HILLS

	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	С	
PURPOSE	Commercial Accessory	
CONSTRUCTION COST	3500.00	
FLOOD ZONE	AE	

Final

. 77

REQUIRED INSPECTIONS

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.

Printed by : CTHUMAN on: 04/09/2019 12:10 PM

SG2019-007 PROJECT NAME: LaLa Land	SIGN ISSUED: 04/09/2019
SITE ADDRESS: 1600 CROATAN HWY S KILL DEVIL HILLS	EXPIRES: 10/06/2019
I hereby certify that I have read and example this application and know	ow the same to be true and correct
All provisions of Laws and Ordinances governing this type of work w specified herein or not. The granting of a permit does not presume to the provisions of any other state/local law regulating construction or	ill be complied with whether give authority to violate or cancel
Issued By:	
Contractor or Authorized Agent:	Date: 6.4-19

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Printed by : CTHUMAN on: 04/09/2019 12:10 PM

Page 3 of 3

	\$100.00	\$0.00			
	Paid	Due			
ription:					. ,
					Lot(s):
TZZ N Groate		I FIIIS	Zor	nina:	
1722 N Croots	n Hway Kill Dovi	l Hille	Number.		
988410373044	4-7288		Parcel		
•	600 West I Kill Devil H	Boundry Street lills, NC 27948			License: LEGACY UNKNOW Expires: 12/31/2019
Dream Cream PO Box 3323 Kill Devil Hills, NC 2 252-256-1473	7948		OWNER:	POBO	LA, Mark DX 364 EVIL HILLS, NC 27948
					EXPIRES: 12/18/20
	Hwy Kill Devil H	lills			
					SIG ISSUED: 06/21/20
AROLI	Planning	and Inspe	ction Depa	rtment	
Birthplace of Aviation		Kill Devil Hills, NC 27948 Phone: 252-449-5318 Fax: 252-441-4102			JUN 2 1 2019
L HILL	Tow			ills	•
	AROLI ME: Dream Cream S: 1722 N Croatan Dream Cream PO Box 3323 Kill Devil Hills, NC 2 252-256-1473	Phone: 25 Phone: 25 Planning Planning ME: Dream Cream PO Box 3323 Kill Devil Hills, NC 27948 252-256-1473 MDLIGHT 600 West I Kill Devil H 252-449-21 988410373044-7288 1722 N Croatan Hwy Kill Devil Paid	PO BOX Kill Devil Hills, Phone: 252-449-5318 Planning and Insper Paint Po Box 323 Control Point Point Hills Pream Cream PO Box 3323 Control Hills, NC 27948 252-256-1473 Control Point Hills, NC 27948 252-449-2800 P88410373044-7288 1722 N Croatan Hwy Kill Devil Hills reption: Paid Due	PO BOX 1719 Kill Devil Hills, NC 27948 Phone: 252-449-5318 Fax: 252-44 Planning and Inspection Depa Planning and Inspection	Kill Devil Hills, NC 27948 Phone: 252-449-5318 Fax: 252-441-4102 Planning and Inspection Department Pole Pole Pole Pole Vill Devil Hills, NC 27948 Starter Plaid Paid

PROJECT DESCRIPTION: Sign on the building

Printed by : Jordan Blythe on: 06/21/2019 08:45 AM

SG2019-014

Y ... Y

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:	man		
	INA		1 21 10
Contractor or Authorized Agent:	14-1	_ Date:	6-01-17

Printed by : Jordan Blythe on: 06/21/2019 08:45 AM



PROJECT DESCRIPTION: Free-standing sign

Printed by : Jordan Blythe on: 06/24/2019 08:43 AM

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SG2019-016

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

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:	
10-11 AX 91	620 10
Contractor or Authorized Agent:	Date: 0-28-19

Printed by : Jordan Blythe on: 06/24/2019 08:43 AM



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

DEMOLITION DM2019-003 ISSUED: 05/31/2019 **PROJECT NAME:** SITE ADDRESS: 1505 VA DARE TRL N KILL DEVIL HILLS EXPIRES: 11/27/2019 APPLICANT: Ocean Estates LLC OWNER: **Ocean Estates LLC** 905 NORTH VA Dare TR 905 NORTH VA Dare TR Kill Devil Hillsl, NC 27948 Kill Devil Hillsl, NC 27948 252-207-8710 252-207-8710 GENERAL - UNLIMITED: SAUNDERS, RM / R M SAUNDERS GENERAL License: 32380 CONTRACTORS INC Expires: 01/01/2020 PO Box 1922 Kill Devil Hills, NC 27948 252-207-8710 PARCEL: Parcel PIN: 988411651589 002770000 Number: 1505 VA DARE TRL N KILL DEVIL HILLS Address: Zoning: Addition: **CROATAN SHORES** 18-19 Block: Α Lot(s):

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 3 1 2019

Printed by : Marty Shaw on: 05/31/2019 01:19 PM

DM2019-003 PROJECT NAME: SITE ADDRESS: 1505 VA DARE TRL N KILL DEVIL HILLS

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

Printed by : Marty Shaw on: 05/31/2019 01:19 PM



Printed by : CTHUMAN on: 06/19/2019 12:38 PM

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

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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.

I hereby certify that I have read and examined this application and know the All provisions of Laws and Ordinances governing this type of work will be co specified herein or not. The granting of a permit does not presume to give and the provisions of any other stately cal law regulating construction or the per	omplied with whether uthority to violate or cancel
Issued By:	
Contractor or Authorized Agent:	Date: 10/19/2019



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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 PROJECT NAME: SITE ADDRESS: 634 CANAL DR KILL DEVIL HILLS EXPIRES: 43/03/2040

EXPIRES: 12/02/2019

APPLICANT:	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:						License: 58400 Expires: 01/01	
PARCEL:							
PIN:	988413240955	5		Parcel Number:	00336	\$5000	
Address:	634 CANAL DI	R KILL DEVIL H	IILLS				
				Zoni	ing:		
Addition:	FIRST FLIGHT	VILLAGE SEC	1	Bloc	k: 0	Lot(s):	93
Legal Descr	iption:						
FEES:		Paid	Due				
Fence		\$100.00	\$0.00				
	Totals :	\$100.00	\$0.00				

PROJECT DESCRIPTION: New fence in rear yard.

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JUN 5 2019

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Printed by : Marty Shaw on: 06/05/2019 01:52 PM

EXPIRES: 12/02/2019

		DETAILS
Permit		
Name	Value	
ZONING DISTRICT	RL	
CAMA PERMIT	N	
CAMA EXEMPTION	Ν	
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!

No not. Gai Fubic Services Department (252) 400-4000 belore 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 Date: 6-4-19 **Contractor or Authorized Agent:**

Printed by : Marty Shaw on: 06/05/2019 01:52 PM



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

	ME: William Stewart		ZONING PERMIT ISSUED: 06/04/2019
SITE ADDRES	SS: 1511 DOGWOOD LN KILL DEVIL	. HILLS	EXPIRES: 12/01/2019
APPLICANT:	STEWART, WILLIAM J	OWNER:	STEWART, WILLIAM J

	328 WEST EDEN STREET KILL DEVIL HILLS, NC 27948 252-202-8673			OWNER.	328 WEST EDEN STREET KILL DEVIL HILLS, NC 27948 252-202-8673		
CONTRACTOR		SAME AS UNKNOW				License: Same Expires: 12/30	
PARCEL:							
PIN:	988413139920	D		Parcel Number:	027499	0000	
Address:	1511 DOGWC	OD LN KILL DE	EVIL HILLS				
				Zoni	ng:		
Addition:	FIRST FLIGH	T VLG PH A SEC	3	Bloc	k: 0	Lot(s):	56
Legal Desc	ription:						
FEES:		Paid	Due				
Fence		\$100.00	\$0.00				
***************************************	Totals :	\$100.00	\$0.00	No.44			

PROJECT DESCRIPTION: Fence

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JUN 4 2019

Printed by : Donna Elliott on: 06/04/2019 01:36 PM

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.

ornollino Issued By: Contractor or Authorized Agent:

Date: 6/4/19

Printed by : Donna Elliott on: 06/04/2019 01:36 PM



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

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JUN 2 4 2019

TOWAY OF

 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 Self UNKNOWN UNKNOWN, XX 00000 917-862-9006			OWNER:	KING, DIANE 707 Indian Drive Kill Devil Hills, NC 27948 License: Unlicensed Expires: 12/31/2020			
GENERAL:								
PARCEL:								
PIN:	988409252802			Parcel Number:	00273	30000		
Address:	707 INDIAN DR	KILL DEVIL H	IILLS					
				Zon	ing:			
Addition:	HIGH VIEW - HE	DRICKS ADD)	Blog	ck: F	Lot(s):	24	
Legal Des	cription:							
FEES:		Paid	Due					
Fence		\$100.00	\$0.00					
	Totals :	\$100.00	\$0.00					

PROJECT DESCRIPTION: Replace fence on rear of property

Printed by : Jordan Blythe on: 06/24/2019 08:52 AM

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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	Ν .	

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: Date: 6-24-19

Printed by : Jordan Blythe on: 06/24/2019 08:52 AM

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Town of Kill Devil Hills

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

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JUN 2 0 2019

Planning and Inspection Department

Tourse Links

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

APPLICANT:	VIGIL, ALEX 806 W First Street Kill Devil Hills, NC 2794	8		OWNER:		ALEX First Street /il Hills, NC 279	948	
GENERAL:		Self UNKNOWN UNKNOWN 917-862-90	I, XX 00000			License: Expires:		
PARCEL:								
PIN:	988413135610			Parcel Number:	02	27546122		
Address:	806 FIRST ST W	KILL DEVIL	HILLS					
				Zon	ing:			
Addition:				Blog	ck: 0	Lo	ot(s):	122
Legal Desc	cription:							
FEES:		Paid	Due					
Fence		\$100.00	\$0.00					
	Totals :	\$100.00	\$0.00					

PROJECT DESCRIPTION: Fence around perimeter of back yard

4,060 alm

Printed by : CTHUMAN on: 06/17/2019 04:25 PM

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	
RONT YARD SETBACK	30	
REAR YARD SETBACK	20% Depth >30	
SIDE YARD SETBACK	10	
CAMA PERMIT	N	
CAMA EXEMPTION	N	
LOOD ZONE	AE	
BASE FLOOD ELEVATION	9.0	
URPOSE	Residential Accessory	
SURVEYOR NAME AND	William Yetzer L-5274	
CULVERT	N	
DRIVEWAY INVERT 2	N	

Stringline

Zoning Final

Final

F .. 5

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 All provisions of Laws and Ordinances governing this type of specified herein or not. The granting of a permit does not pre- the provisions of any other state/local law regulating constru-	work will be complied with whether sume to give authority to violate or cancel
Issued By:	
Contractor or Authorized Agent:	Date: 20/19

Printed by : CTHUMAN on: 06/17/2019 04:25 PM



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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

ZP2019-03 PROJECT NA SITE ADDRES		Kill Devil Hills				ISSU	NG PERMIT JED: 06/14/2019 IRES: 12/11/2019
APPLICANT:	Skinner, Brian & Mega 9019 Ribbon Falls Loo BRISTOW, VA 20136 703-869-2761			OWNER:	9019 R	r, Brian & Megan ibbon Falls Loop OW, VA 20136 9-2761	
GENERAL:			Enforcement hington Lane nc 27949 96			License: 12 Expires: 10	
PARCEL:							· · · · · · · · · · · · · · · · · · ·
PIN:	988517002147			Parcel Number:			
Address:	431 Palmetto St	. Kill Devil Hills	6	•			
				Zon	ing:		
Addition:				Blog	ck:	Lot(s)):
Legal Des	cription: Lot 10R, Bl	50, Virginia D	are Shores				
FEES:		Paid	Due				
Fence		\$100.00	\$0.00				
IL. INStructures products mate and an and definition of the started	Totals :	\$100.00	\$0.00	-			

PROJECT DESCRIPTION: New fence in front yard.

C.P.A

JUN 1 4 2019

TORNINE TO LT

Printed by : Marty Shaw on: 06/14/2019 09:40 AM

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

Issued By:

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.

Contractor or Authorized Agent: RL We

Printed by : Marty Shaw on: 06/14/2019 09:40 AM

Page 2 of 2

Date: 6-14-19



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 SITE ADDRESS: 1510 MONUMENT LN KILL DEVIL HILLS

EXPIRES: 12/09/2019

APPLICANT:	Riddick, Jason 1510 Monument Lane Kill Devil Hills, NC 279	48		OWNER:	Riddick, Jase 1510 Monum Kill Devil Hill	ent Lane	
GENERAL:		Self UNKNOWN UNKNOWN 917-862-90	N, XX 00000			License: Unlicense Expires: 12/31/202	-
PARCEL:							
PIN:	988414343509			Parcel Number:	003391	000	
Address:	1510 MONUME	NT LN KILL D	EVIL HILLS				
				Zon	ing:		
Addition:	FIRST FLIGHT	VILLAGE SEC	1	Bloc	ck: 0	Lot(s): 12	23
Legal Desc	cription:						
EES:		Paid	Due				
Fence		\$100.00	\$0.00				
	Totals :	\$100.00	\$0.00	-			

PROJECT DESCRIPTION: 6ft fence in the back yard

JUN 1 2 2019

Printed by : Jordan Blythe on: 06/12/2019 03:36 PM

ZP2019-049

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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	Ν
CAMA EXEMPTION	Ν
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	Ν
	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.

specified herein or not. The granting of a permit does not presume to give the provisions of any other state/local law regulating construction or the	
Issued By:	
Contractor or Authorized Agent:	Date: 6-12-19

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

Planning and Inspection Department

	50 ME: WADDELL FENCE SS: 1409 PIRATES LOOI	P KILL DEV	IL HILLS			ISSUE	G PERMIT D: 06/12/2019 ES: 12/09/2019
APPLICANT:	Ryan Waddell 2604 S. Memorial Blvd. nags head, nc 27959 252-599-1611			OWNER:	Ryan Waddo 2604 S. Mer nags head, r 252-599-161	norial Blvd. nc 27959	
GENERAL:		Self UNKNOWN UNKNOWN 917-862-90	I, XX 00000			License: Unlice Expires: 12/31	
PARCEL:							
PIN:	988414440091			Parcel Number:	003558	8000	
Address:	1409 PIRATES LO	OP KILL DE	EVIL HILLS				
				Zon	ing:		
Addition:	LANDING SECTIO	N 2, THE		Blog	ck: 0	Lot(s):	53
Legal Des	cription:						
FEES:		Paid	Due				
Fence	9	5100.00	\$0.00				

\$0.00

PROJECT DESCRIPTION: 6' FENCE ON SOUTHERN PROPERTY LINE

\$100.00

17.1

Totals :

JUN 1 2 2019

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Printed by : Jordan Blythe on: 06/12/2019 02:51 PM

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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

* 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 All provisions of Laws and Ordinances governing this type of work will be conspecified herein or not. The granting of a permit does not presume to give and the provisions of any other state/local law regulating construction or the per- Issued By:	omplied withority t	with whether o violate or cancel
Contractor or Authorized Agent:	Date:	6-12-19

Printed by : Jordan Blythe on: 06/12/2019 02:51 PM

DEV	ILA	Tow	n of Kil	l Devil Hil	ls		
X	LES ,	PO BOX 1719 Kill Devil Hills, NC 27948 Phone: 252-449-5318 Fax: 252-441-4102			2142		
20 Avia	AROLIN ^P	1 1101107 20				JUN 1	1 2019
· / C		Planning	and Inspe	ection Depar	tment		- the
	18 ME: KOZAK FENCE SS: 2026 VA DARE TF	rl n kill de'	VIL HILLS			ISSUE	IG PERMIT D: 06/11/2019 ES: 12/08/2019
APPLICANT:	KOZAK, WARREN D 3133 Riveredge Dr PORTSMOUTH, VA 23	3703		OWNER:	KOZAK, WA 3133 Rivere PORTSMOU		
BUILDER:		UNKNOW	N, XX 00000			License: unlic Expires: 12/3	
PARCEL:							
PIN:	988518301286			Parcel Number:	030652	2000	
Address:	2026 VA DARE	TRL N KILL D	EVIL HILLS				
				Zoni	•		
Addition:				Bloc	k: 0	Lot(s):	32 & 32A
Legal Desc	cription:						
FEES:		Paid	Due				
		\$100.00	\$0.00				
Fence		\$100.00					

PROJECT DESCRIPTION: FENCE ALONG REAR AND NORTH PROPERTY LINES

Printed by : Jordan Blythe on: 06/11/2019 02:26 PM

F- . 3

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

F.

DETAILS

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

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: Date: 0 Contractor or Authorized Agent: _

Printed by : Jordan Blythe on: 06/11/2019 02:26 PM



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

JUN 1 1 2019

Planning and Inspection Department

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

APPLICANT:	2024 N Va Dare Kill Devil Hills, NC 27948			OWNER:	Debbie & Randall Appleton 2024 N Va Dare Kill Devil Hills, NC 27948			
BUILDER:						License: unlice Expires: 12/30		
PARCEL:								
PIN:	988518302212			Parcel Number:	030653	3000		
Address:	2024 VA DARE	TRL N KILL D	EVIL HILLS					
				Zoni	ng:			
Addition:				Block	k: 0	Lot(s):	34 & 34A	
Legal Des	cription:							
EES:		Paid	Due					
Fence		\$100.00	\$0.00					
	Totals :	\$100.00	\$0.00	-				

Printed by : Jordan Blythe on: 06/11/2019 02:21 PM

ZP2019-047

-1

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	Ν	
CAMA EXEMPTION	Ν	
FLOOD ZONE	AE	
BASE FLOOD ELEVATION	9.00	
PURPOSE	Residential Accessory	
CONSTRUCTION COST	5791.19	
CULVERT	Ν	
DRIVEWAY INVERT 2	N	
	REQUIRED INSPECTIONS	
Stringline	Final	
And a second	CONDITIONS	
	d void if work or construction authorized is not commenced within 6 months or if con od of 12 months at any time after work has started.	struction
Il provisions of Laws and pecified herein or not. Th	e read and examined this application and know the same to be true and d Ordinances governing this type of work will be complied with whether he granting of a permit does not presume to give authority to violate or er state/local law regulating construction or the performance of constru- tion	er r cancel
contractor or Authorized	Agent: Delle App Date: 10/11/1	9

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Page 2 of 2



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

Planning and Inspection Department

JUN 27 2019

TC:MICS POLICE LINES

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

EXPIRES: 12/24/2019

	APPLICANT: JOHN GIGLIA 815 Cedar Dr. KILL DEVIL HILLS, NC 27948 631-880-9843			OWNER:	JOHN GIG 815 Cedar KILL DEVIL 631-880-98	Dr. HILLS, NC 2794	8
CONTRACTOR:		SAME AS UNKNOWN UNKNOWN				License: Same Expires: 12/30	
PARCEL:							
PIN:	988413130091			Parcel Number:	02847	79000	
Address:	815 CEDAR DF		HILLS				
				Zoni	ng:		
Addition:				Bloc	k: 0	Lot(s):	99
Legal Descrip	ption:						
FEES:		Paid	Due				
Driveway Permit F	ee	\$50.00	\$0.00				
	Totals :	\$50.00	\$0.00	-			

PROJECT DESCRIPTION: Replace portion of driveway

Printed by : Donna Elliott on: 06/27/2019 12:15 PM

DW2019-010 PROJECT NAME: John Giglia SITE ADDRESS: 815 CEDAR DR KILL DEVIL HILLS

EXPIRES: 12/24/2019

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

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.

int Issued By: Date 2 June 19 **Contractor or Authorized Agent:**

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Town of Kill Devil Hills

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

JUN 3 2019

1 10 2 A

Planning and Inspection Department

DW2019-00 PROJECT NAM	E: Bunn Driveway	Addtion			ISSUED: 06/	EWAY 03/2019	
SITE ADDRESS	: 216 SOTHEL S	T E KILL DEVIL	HILLS			EXPIRES: 11	/30/201
	Duran Oberlan				Dung Charle		
	Bunn, Charles 22226 Old Chapel F Newsomes, VA 238	Road 74		OWNER:	Bunn, Charle 22226 Old C Newsomes, V	hapel Road	
GENERAL:		Self UNKNOW UNKNOW 917-862-9	N, XX 00000			License: Unlicensed Expires: 12/31/2020	
PARCEL:							
PIN:	98851313406	0		Parcel Number:	000416	0000	
Address:	216 SOTHEL	STE KILL DEV	IL HILLS				
				Zon	ing:		
Addition:	VIRGINIA DA	RE SHORES		Bloc	ck: 8	Lot(s): 29-30	
Legal Descri	ption:						
FEES:		Paid	Due				
Building Permit F	ee - Minimum	\$150.00	\$0.00				
sennitefilifiand recolligiolitearitiere admitterAroutseethi	Totals :	\$150.00	\$0.00				

Printed by : Marty Shaw on: 06/03/2019 02:04 PM

DW2019-009 PROJECT NAME: Bunn Driveway Addtion SITE ADDRESS: 216 SOTHEL ST E KILL DEVIL HILLS

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	Slab/Foundation	
0		
Final		
This permit becomes null and work is suspended for a perio NOTICE: Call Public Services	CONDITIONS void if work or construction authorized is not commenced within 6 months or if cons d of 12 months at any time after work has started. Department (252) 480-4080 before pouring driveway! d prior to Certificate of Occupancy or Certificate of Compliance.	truction
This permit becomes null and work is suspended for a perio NOTICE: Call Public Services As-built survey will be required hereby certify that I have Il provisions of Laws and pecified herein or not. The	void if work or construction authorized is not commenced within 6 months or if cons d of 12 months at any time after work has started. Department (252) 480-4080 before pouring driveway!	correc
This permit becomes null and work is suspended for a perio NOTICE: Call Public Services As-built survey will be required hereby certify that I have all provisions of Laws and pecified herein or not. The he provisions of any other	void if work or construction authorized is not commenced within 6 months or if const of of 12 months at any time after work has started. Department (252) 480-4080 before pouring driveway! d prior to Certificate of Occupancy or Certificate of Compliance. read and examined this application and know the same to be true and Ordinances governing this type of work will be complied with whether e granting of a permit does not presume to give authority to violate or or state/local law regulating construction or the performance of construct	correc

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Town of Kill Devil Hills

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

JUN 26 2019

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R_ "

Planning and Inspection Department

EG2019-00 PROJECT NAM SITE ADDRESS	4 IE: Sinanaj Clearing S: 0 FIFTH ST W H	E	EXCAVATION AND GRADING ISSUED: 06/19/201 EXPIRES: 12/16/201				
APPLICANT:	SINANAJ, ERMAL 205 W. Morning View nags head, nc 27959	v Drive	c	OWNER:	SINANAJ, E 205 W. Morr nags head, r	ning View Drive	
CONTRACTOR:	ALL COUNTY BUILD 205 West Morning D NAGS HEAD, NC 27 252-475-4047	ove					
GENERAL-LIMITED:		205 West M NAGS HEA	ALL COUNTY BUILDERS LLC 205 West Morning Dove NAGS HEAD, NC 27959 252-475-4047			License: 59306 Expires: 01/11/2020	
PARCEL:							
PIN:	988405283945	5		Parcel Number:	002057	7000	
Address:	0 FIFTH ST W	KILL DEVIL HI	LS				
				Zoni	ng:		
Addition:	WRIGHT'S SH	IORES		Bloc	k: 0	Lot(s): 3	
Legal Descr	iption:						
EES:		Paid	Due				
and Disturbing		\$100.00	\$0.00				
	Totals :	\$100.00	\$0.00				

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

Printed by : CTHUMAN on: 06/19/2019 04:50 PM

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	Ν
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 grapting 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

Printed by : CTHUMAN on: 06/19/2019 04:50 PM



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

JUN 3 2019

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Planning and Inspection Department

BP2019-126 PROJECT NAME SITE ADDRESS	E: Stephens Piling 305 BURNS DR	BUILDING ISSUED: 05/31/201 EXPIRES: 11/27/201					
	STEPHENS, J ANTHONY P O BOX 2475 KILL DEVIL HILLS, NC 27948			OWNER:	STEPHENS, P O BOX 247 KILL DEVIL H		
	Emanuelson and Da 6705 CROATAN HV 6705 S. Croatan Hw nags head, nc 27959 252-261-2215	VY SOUTH y.					
RESIDENTIAL, LI	MITED:	Emanuelso 6705 CRO/ 6705 S. Cro nags head, 252-261-22	ATAN HWY So batan Hwy. nc 27959	OUTH		License: 79801 Expires: 06/14/2019	
PARCEL:							
PIN:	98831694105	7		Parcel Number:	008463	000	
Address:	305 BURNS D	R KILL DEVIL H	HILLS				
				Zoni	ng:		
Addition:	OCEAN ACRE	ES TRACT 3 SEC	01	Bloc	k: F	Lot(s): 5	
Legal Descri	ption:						
FEES:		Paid	Due				
Building Permit Fe Fee	ee - Minimum	\$150.00	\$0.00				
	Totals :	\$150.00	\$0.00				

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

Printed by : CTHUMAN on: 05/31/2019 09:09 AM



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

JUN 4 2019

s 41 - 1

Planning and Inspection Department

	7 ME: DREAM TIME P S: 1209 WINDSON		EVIL HILLS			BUILDING ISSUED: 06/03/2019 EXPIRES: 11/30/2019
APPLICANT:	DREAM TIME OBX L 319 WHITESTONE F CHARLOTTE, NC 28 704-400-4871	RD			DREAM TIMI 319 WHITES CHARLOTTE 704-400-487	TONE RD E, NC 28270
CONTRACTOR:		BARRY TV UNKNOWN UNKNOWN 252-423-05	N N, XX 00000			License: LEGACY UNKNOWN Expires: 12/30/2019
PARCEL:						
PIN:	988415647321			Parcel Number:	004079	000
Address:	1209 WINDSO	NG WAY KILL	DEVIL HILLS	5		
				Zoning	g:	
Addition:				Block:	0	Lot(s): 11
Legal Desci	ription:					
FEES:		Paid	Due			
Building Permit I Fee	Fee - Minimum	\$150.00	\$0.00			
	Totals :	\$150.00	\$0.00			

PROJECT DESCRIPTION: REPLACE NW PILING

Printed by : Jordan Blythe on: 06/03/2019 08:44 AM

BP2019-127

4 - · · ·

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	Ν	
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:	time	
Contractor or Authorized Agent:	Barr	Date: 6-4-19

Printed by : Jordan Blythe on: 06/03/2019 08:44 AM



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

JUN 4 2019

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Planning and Inspection Department

BP2019-12 PROJECT NA SITE ADDRES	28 ME: Heaton Piling replacement SS: 411 SEAGULL CT KILL DE	VIL HILLS	BUILDIN ISSUED: 06/03/20 EXPIRES: 11/30/20	019
APPLICANT:	Heaton, Russell 193 Winnepeg Ave EGG HARBOR TOWNSHIP, NJ (OWNER: 08234	Heaton, Russell 193 Winnepeg Ave EGG HARBOR TOWNSHIP, NJ 08234	
GENERAL:	UNKI	NOWN NOWN, XX 00000 162-9006	License: Unlicensed Expires: 12/31/2020	

PARCEL:								
PIN:	98841433467	0		Parcel Number:	00357700	0		
Address:	411 SEAGULI	CT KILL DEVIL	HILLS					
				Zoning:				
Addition:	LANDING SE	CTION 2, THE		Block:	0	Lot(s):	72	
Legal Descri	ption:							
FEES:		Paid	Due					
Building Permit Fe Fee	ee - Minimum	\$150.00	\$0.00					
	Totals :	\$150.00	\$0.00					

PROJECT DESCRIPTION: replace pilings on front deck landing

Printed by : CTHUMAN on: 06/03/2019 02:08 PM

BP2019-128

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

EXPIRES: 11/30/2019

	DETAILS	
Permit		
Name	Value	
CAMA PERMIT	Ν	
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	Ν	
CONSTRUCTION COST	500.00	
SURVEYOR NAME AND NUMBER	William S Jones L-2532	
OCCUPANCY TYPE	One & Two Family Dwelling	

REQUIRED INSPECTIONS

Zoning	Fina	
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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.

Printed by : CTHUMAN on: 06/03/2019 02:08 PM

BP2019-128 PROJECT NAME: Heaton Piling replacement SITE ADDRESS: 411 SEAGULL CT KILL DEVIL HILLS

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EXPIRES: 11/30/2019

I hereby certify that I have read and	xamined this	application and know	the same to	be true and correct.
All provisions of Laws and Ordinance	es governing	this type of work will b	e complied	with whether
specified herein or not. The granting	of a permit d	oes not presume to giv	e authority	to violate or cancel
the provisions of any other statelloca	I law regulat	ing construction or the	performanc	e of construction.
Issued By:				
Cell		· •		1 1
Contractor or Authorized Agent:	Russ	Deaton	Date:	6/4/19

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Page 3 of 3



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

JUN 26 2019

Planning and Inspection Department

BUILDING BP2019-147 ISSUED: 06/26/2019 PROJECT NAME: FITZGERALD STAIR REBUILD SITE ADDRESS: 3130 VA DARE TRL N KILL DEVIL HILLS EXPIRES: 12/23/2019 APPLICANT: FITZGERALD, AUBREY H FITZGERALD, AUBREY H OWNER: **5 POINDEXTER PLACE 5 POINDEXTER PLACE** NEWPORT NEWS, VA 23606 NEWPORT NEWS, VA 23606 **BUILDING LIMITED:** EVANS HOMES LLC. License: 49040 **5121 WINDSOR PL** Expires: 12/31/2019 kitty hawk, nc 27949 252-207-8127 PARCEL: Parcel PIN: 988513049237 000108000 Number: 3130 VA DARE TRL N KILL DEVIL HILLS Address: Zoning: Addition: **ORVILLE BEACH BLK 8** Block: 8 Lot(s): 4 Legal Description: FEES: Paid Due **Building Permit Fee - Minimum** \$150.00 \$0.00 Fee Totals : \$150.00 \$0.00 PROJECT DESCRIPTION: REBUILD STAIR AND RAILING

Printed by : Jordan Blythe on: 06/26/2019 09:51 AM

Contractor or Authorized Agent:

2.2

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. BAA Issued By: _ 4 Date: 6.26.19

Printed by : Jordan Blythe on: 06/26/2019 09:51 AM

Page 3 of 3



BP2019-148

Town of Kill Devil Hills

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

JUN 27 2019

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Planning and Inspection Department

BUILDING ISSUED: 06/26/2019

PROJECT NAME: SITE ADDRESS: 1523 SIR WALTER RD KILL DEVIL HILLS

EXPIRES: 12/23/2019

APPLICANT:	Barry Prokop 1523 Sir Walter Rd. Kill Devil Hillsl, NC 2 703-426-8510	7948	C		Barry Prokop 1523 Sir Walte Kill Devil Hillsl, 703-426-8510		
UNLICENSED -	REMODELING:	First Light (P.O. Box 1) kitty hawk, 804-690-84	09 nc 27949	Improvements.		icense: 1234 xpires:	
PARCEL:							
PIN:	988411554712	2		Parcel Number:	0031840	00	
Address:	1523 SIR WAL	TER RD KILL D	DEVIL HILLS				
				Zoning	g:		
Addition:	W R DEATON	- DELRAY BEA	СН	Block:	D	Lot(s):	29
Legal Desc	cription:						
EES:		Paid	Due				
Building Permit Fee	Fee - Minimum	\$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.

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		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	Ν	
CONSTRUCTION COST	11462.00	
CONSTRUCTION TYPE	V	
OCCUPANCY TYPE	One & Two Family Dwelling	

Final

REQUIRED INSPECTIONS

CONDITIONS

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

All provisions of specified herein	Laws and Ordin or not. The gran	ances governing this type of ting of a permit does not pres	and know the same to be true and correct. work will be complied with whether sume to give authority to violate or cancel ction or the performance of construction.
Issued By:	14912	The Sta	Date: 5-27-19
506773 *4 61 * 226844 * 120°00 * 512175 60	PLAANING Date / Time Payment Receipt # Greenvorent		
이아바 STITH TIA Printed by : Marty Shaw on: 0	Town of Kill De		Page 2 of 2



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

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JUN 27 2019

Planning and Inspection Department

OP2019-032 PROJECT NAME: Susan B Miller SITE ADDRESS: 2207 Bay Drive Kill Devil Hills EXPIRES:

PARENT PERMIT #: BJ2018-229

APPLICANT:	Miller, Susan B 3800 Elijah Baum kitty hawk, nc 27949 252-489-7543			OWNER:	Miller, Susan 3800 Elijah B kitty hawk, no 252-489-754	aum : 27949
GENERAL:		Self UNKNOWN UNKNOWN 917-862-90	I, XX 00000			License: Unlicensed Expires: 12/31/2020
PARCEL:						
PIN:	987408991771			Parcel Number:		
Address:	2207 Bay Drive	e Kill Devil Hills				
				Zoni	ing:	
Addition:				Bloc	ck:	Lot(s):
Legal Desc	ription: Lot 1 Block	k 76				
FEES:		Paid	Due			
Certificate of Oc	cupancy Fee	\$50.00	\$0.00			
Residential Tras	h Can	\$106.75	\$0.00			
	Totals :	\$156.75	\$0.00			

PROJECT DESCRIPTION: New 4 Bedroom SFD

Printed by : Marty Shaw on: 06/26/2019 04:40 PM

OP2019-032 PROJECT NAME: Susan B Miller SITE ADDRESS: 2207 Bay Drive Kill Devil Hills

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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	
Il provisions of Laws and pecified herein or not., Th	d Ordinances governing this type of ne granting of a permit does not pres	and know the same to be true and correct work will be complied with whether sume to give authority to violate or cancel tion or the performance of construction.

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

Planning and Inspection Department

BUILDING BP2019-151 **PROJECT NAME:** WILLIAMS STAIRS, DECKS, AND SHED **SITE ADDRESS:** 214 SOTHEL ST E KILL DEVIL HILLS ISSUED: 06/28/2019 EXPIRES: 12/25/2019 **APPLICANT:** WILLIAMS, CHARLES E JR WILLIAMS, CHARLES E JR OWNER: RT 1 BOX 390-G RT 1 BOX 390-G FISHERSVILLE, VA 22939 FISHERSVILLE, VA 22939 License: Unlicensed Expires: 12/31/2020 GENERAL: Self UNKNOWN UNKNOWN, XX 00000 917-862-9006 PARCEL: Parcel PIN: 988513124928 000415000 Number: 214 SOTHEL ST E KILL DEVIL HILLS Address: Zoning: Addition: **VIRGINIA DARE SHORES** Block: 8 27-28 Lot(s): Legal Description: FEES: Paid Due **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

JUN 28 2019

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Printed by : Jordan Blythe on: 06/28/2019 02:38 PM

BP2019-151

PROJECT NAME: WILLIAMS STAIRS, DECKS, AND SHED **SITE ADDRESS:** 214 SOTHEL ST E KILL DEVIL HILLS

EXPIRES: 12/25/2019

		DETAILS
Permit		
Name	Value	
CAMA PERMIT	N	
CAMA EXEMPTION	Ν	
ZONING DISTRICT	С	
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	Ν	
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

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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

	50 ME: JENNINGS 8'X ² SS: 601 West Sports					BUILDING ISSUED: 06/28/2019 EXPIRES: 12/25/2019
APPLICANT:	Jennings, Donald F. 515 W. Soundside R nags head, nc 27959 252-207-4936	Road	ow	VNER:	Jennings, Donald F. 515 W. Soundside Ro nags head, nc 27959 252-207-4936	ad
RESIDENTIAL	- INTERMEDIATE:	JENNINGS P. O. Box 1 nags head, 252-207-49	102 nc 27959		License: Expires:	: 32637 01/01/2020
PARCEL:						
PIN:	988517007110	0		Parcel Number:		
Address:	601 West Spo	ortsman Drive Kill	Devil Hills			
				Zoni	ng:	
Addition:				Bloc	k: Lo	ot(s):
Legal Desc	cription: Lot 180, A	Avalon Beach Sub	odivision			
EES:		Paid	Due			
Building Permit Fee	Fee - Minimum	\$150.00	\$0.00			
	Totals :	\$150.00	\$0.00			

Printed by : Jordan Blythe on: 06/28/2019 10:32 AM

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PROJECT NAME: JENNINGS 8'X12' STORAGE ENCLOSURE **SITE ADDRESS:** 601 West Sportsman Drive Kill Devil Hills

EXPIRES: 12/25/2019

Date: 6-28-19

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:

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Page 3 of 3



1

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 PROJECT NAME: HOLLOWELL ROOF AND WINDOWS

SITE ADDRESS: 404 THIRD ST W KILL DEVIL HILLS

BUILDING ISSUED: 06/28/2019

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:	UNKNOWN		N, XX 00000	00000		License: Unlicensed Expires: 12/31/2020		
PARCEL:								
PIN:	98840927428	5		Parcel Number:	00246	9000		
Address:	404 THIRD ST	W KILL DEVIL	HILLS					
				Zonir	ng:			
Addition:	SEA HOLLY F	RIDGE		Block	с Н	Lot(s): 16		
Legal Desc	cription:							
FEES:		Paid	Due					
Building Permit Fee	Fee - Minimum	\$150.00	\$0.00					
	Totals :	\$150.00	\$0.00					

PROJECT DESCRIPTION: REPLACE SHINGLES WITH METAL ROOF, REPLACE WINDOWS

JUN 28 2019

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2

PROJECT NAME: HOLLOWELL ROOF AND WINDOWS SITE ADDRESS: 404 THIRD ST W KILL DEVIL HILLS

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	х	
FINAL ELEVATION CERTIFICATE	Ν	
CONSTRUCTION COST	6000.00	
CONSTRUCTION TYPE	V	
OCCUPANCY TYPE	One & Two Family Dwelling	

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.

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PROJECT NAME: HOLLOWELL ROOF AND WINDOWS SITE ADDRESS: 404 THIRD ST W KILL DEVIL HILLS

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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. 1 1

Issued By:

Contractor or Authorized Agent: Echan A Harman Date: 6-29-19

Printed by : Jordan Blythe on: 06/28/2019 09:18 AM



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

BUILDING BP2019-133 ISSUED: 06/10/2019 **PROJECT NAME:** Holcomb Deck and Stairs SITE ADDRESS: 308 TERN CT KILL DEVIL HILLS EXPIRES: 12/07/2019 APPLICANT: Holcomb, Robert OWNER: Holcomb, Robert 499 Sandy Shores Rd McHenry, MD 21541 499 Sandy Shores Rd McHenry, MD 21541 Set - Wave Construction 1400 Harrington Ave Kill Devil Hills, NC 27948 License: 0000000 Expires: 06/28/2024 UNLICENSED - REMODELING: 252-996-0099 PARCEL: Parcel PIN: 988410350689 003225000 Number: 308 TERN CT KILL DEVIL HILLS Address: Zoning: Addition: **FIRST FLIGHT VILLAGE SEC 2** Block: 0 Lot(s): 236 Legal Description: FEES: Paid Due **Building Permit Fee - Minimum** \$150.00 \$0.00 Fee \$0.00 Totals : \$150.00

PROJECT DESCRIPTION: Decking, handrail and stair replacement "as is where is"

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JUN 1 1 2019

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BP2019-133 PROJECT NAME: Holcomb Deck and Stairs SITE ADDRESS: 308 TERN CT KILL DEVIL HILLS

EXPIRES: 12/07/2019

	D	ETAILS	
Permit			
Name	Value		
CAMA PERMIT	Ν		
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	Х		
FINAL ELEVATION CERTIFICATE	N		
CONSTRUCTION COST	2000.00		
	REQUIRE	ED INSPECTIONS	
Zoning Final		Final	
		NDITIONS	
This permit becomes null an work is suspended for a per			nmenced within 6 months or if construction d.
hereby certify that I have	e read and examined th	is application and k	know the same to be true and correct
Il provisions of Laws an	d Ordinarices governin	g this type of work	will be complied with whether to give authority to violate or cancel
ne provisions of any oth	er state/local law regula	ating construction o	or the performance of construction.
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Contractor or Authorized			Date: 6 · 11 · 19

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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

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PROJECT NAME: STANCIL STAIRS, HANDRAILS, AND DECKING **SITE ADDRESS:** 2813 RAYMOND AVE KILL DEVIL HILLS

BUILDING ISSUED: 06/11/2019

EXPIRES: 12/08/2019

	MARGARET STAN(2200 CRESENT AV CHARLOTTE, NC 2 919-491-8213	Έ		OWNER:	MARGARET 2200 CRESE CHARLOTTE 919-491-821	ENT AVE E, NC 28207	
GENERAL:		WES LIVE UNKNOWN UNKNOWN 252-619-25	N N, XX 00000			License: unlicensed Expires: 12/31/2019	
PARCEL:							
PIN:	98851312373	7		Parcel Number:	000393	3000	
Address:	2813 RAYMO	ND AVE KILL D	EVIL HILLS				
				Zonir	ig:		
Addition:	VIRGINIA DA	RE SHORES		Block	: 7	Lot(s): 15-16	
Legal Descrip	otion:						
EES:		Paid	Due				
Building Permit Fe Fee	ee - Minimum	\$150.00	\$0.00				
	Totals :	\$150.00	\$0.00				

JUN 1 4 2019

Printed by : Jordan Blythe on: 06/11/2019 09:37 AM

BP2019-139 PROJECT NAME: STANCIL STAIRS, HANDRAILS, AND DECKING **SITE ADDRESS:** 2813 RAYMOND AVE KILL DEVIL HILLS

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. 247 MC Issued By: Date: 6-14-**Contractor or Authorized Agent:**

Printed by : Jordan Blythe on: 06/11/2019 09:37 AM

NOEV NOEV NoRTH C	Town of Kill PO BOX Kill Devil Hills, Phone: 252-449-5318 Planning and Inspe	1719 NC 27948 Fax: 252-441-410		i'	
LANDINGS	41 ME: OUTER BANKS BEACH CLUB STAIRS AND SS: 1110 VA DARE TRL S KILL DEVIL HILLS)	,		BUILDING ED: 06/17/2019 RES: 12/14/2019
APPLICANT:	OUTER BANKS BEACH CLUB 1110 S. Va. Dare Tr. Kill Devil Hills, NC 27948	11	JTER BANKS B 10 S. Va. Dare I Devil Hills, NC	Tr.	UB
GENERAL:	Self UNKNOWN UNKNOWN, XX 00000 917-862-9006			nse: Unlic res: 12/3	
PARCEL:					
PIN:	98930508005501	Parcel Number:	027867000		
Address:	1110 VA DARE TRL S KILL DEVIL HILLS				
		Zoning:			4.0/00100
Addition:	KILL DEVIL HILLS SEC 1	Block:	4	Lot(s):	1-8/CONDO- BLDGS 1-2
Legal Desc	cription:				
EES: Building Permit	Paid Due Fee - Minimum \$150.00 \$0.00				

\$0.00

\$150.00 PROJECT DESCRIPTION: REPLACE STAIRS AND LANDINGS ON ONE CONDO BUILDING

Totals :

Printed by : Jordan Blythe on: 06/17/2019 08:45 AM

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	Ν	
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.

EXPIRES: 12/14/2019

9

Date

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:

Printed by : Jordan Blythe on: 06/17/2019 08:45 AM



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Town of Kill Devil Hills

PO BOX 1719 Kill Devil Hills, NC 27948 Phone: 252-449-5318 Fax: 252-441-4102 Provident 1

JUN 18 2019

Planning and Inspection Department

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P	OLEMAN HOLLAN .O. Box 3159 itty Hawk, NC 2794		c	P.C	LEMAN He b. Box 3159 y Hawk, Ne	9	
UNLICENSED - RE	MODELING:		STATION RD	REMODELING INC.		icense: 0000° Expires: 01/01	
PARCEL:						1000	
PIN:	988513044364	1		Parcel Number:	0000190	000	
Address:	204 HELGA S	TE KILL DEVIL	HILLS				
				Zoning:			
Addition:	ORVILLE BEA	CH AMENDED	BLK 4	Block:	4	Lot(s):	5
Legal Descript	tion:						
FEES:		Paid	Due				
Building Permit Fee Fee	e - Minimum	\$150.00	\$0.00				
and the second of the second se	Totals :	\$150.00	\$0.00				

PROJECT DESCRIPTION: Add 12'x12' shed to rear yard.

Printed by : Marty Shaw on: 06/14/2019 08:08 AM

BP2019-140 PROJECT NAME:

SITE ADDRESS: 204 HELGA ST E KILL DEVIL HILLS

EXPIRES: 12/11/2019

Permit	
Name	Value
CAMA PERMIT	Ν
CAMA EXEMPTION	N
ZONING DISTRICT	С
FLOOD ZONE	AE
BASE FLOOD ELEVATION	9
FINAL ELEVATION CERTIFICATE	Ν
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: Date: 6-18-19 Contractor or Authorized Agents

Printed by : Marty Shaw on: 06/14/2019 08:08 AM



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Town of Kill Devil Hills

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

JUN 21 2019

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Planning and Inspection Department

BUILDING BP2019-144 PROJECT NAME: Michelle Copeland ISSUED: 06/21/2019 SITE ADDRESS: 402 WALLACE ST KILL DEVIL HILLS EXPIRES: 12/18/2019 Copeland, Michelle **APPLICANT:** A Team OWNER: 402 Wallaace Street 402 Wallace Street Kill Devil Hills, NC 27948 Kill Devil Hills, NC 27948 252-599-2230 252-599-2230 CONTRACTOR: SAME AS APPLICANT License: 123456 0000000 Expires: 04/30/2020 00000000, nc 00000 PARCEL: Parcel PIN: 987516836794 000242000

Number: 402 WALLACE ST KILL DEVIL HILLS Address: Zoning: Addition: **ORVILLE BEACH WEST** Block: 0 Lot(s): 150 Legal Description: FEES: Paid Due \$0.00 **Building Permit Fee - Minimum** \$150.00 Fee Totals : \$150.00 \$0.00

PROJECT DESCRIPTION: Repair front deck, add 6X6 deck on rear of house, add 3' steps to side of house

Printed by : Jordan Blythe on: 06/21/2019 10:12 AM

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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	Ν		
CAMA EXEMPTION	Ν		
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	Х		
FINAL ELEVATION CERTIFICATE	Ν		
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.

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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:

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20 Aviati		Dianning	and Inchas	ction Departm	ont	JUN 2 4 2019
		Flanning	and inspec	cion Departin	ient	
	6 ME: Cubine rebuild s S: 1703 WYANDO		EVIL HILLS			BUILDING ISSUED: 06/21/2019 EXPIRES: 12/18/2019
APPLICANT:	CUBINE, CARRIE E 2029 NEWPORT NE KILL DEVIL HILLS, I	WS ST	c	2		RRIE E DRT NEWS ST HILLS, NC 27948
CONTRACTOR	SHANE CLARK 607 INDIAN DR Kill Devil Hills, NC 27 252-305-2477	7948				
UNLICENSED E	BUILDER:	SHANE CL 607 INDIA Kill Devil H 252-305-24	N DR ills, NC 27948			License: 000 Expires:
PARCEL:						and the same BPS
PIN:	988409263185	5		Parcel Number:	002695	000
Address:	1703 WYAND	OTTE ST KILL I	DEVIL HILLS	Zoning:		
Addition:	HIGH VIEW - I	HEDRICKS ADD)	Block:	D	Lot(s): 12
Legal Desc	ription:					
FEES:		Paid	Due			
Building Permit I Fee	Fee - Minimum	\$150.00	\$0.00			
100						

Printed by : Jordan Blythe on: 06/21/2019 04:22 PM

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Page 1 of 3

F

F . . .

PROJECT NAME: Cubine rebuild stairs SITE ADDRESS: 1703 WYANDOTTE ST KILL DEVIL HILLS

EXPIRES: 12/18/2019

	DETAILS	
Permit		
Name	Value	
CAMA PERMIT	N	
CAMA EXEMPTION	Ν	
ZONING DISTRICT	RL	
PURPOSE	Residential Repair/Remodel	
FRONT YARD SETBACK	30	
SIDE YARD SETBACK	8	
REAR YARD SETBACK	20% Depth >30	
FLOOD ZONE	х	
FINAL ELEVATION CERTIFICATE	Ν	
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.

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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:** 9 Contractor or Authorized Agent; Date:

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Town of Kill Devil Hills

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

JUN 2 1 2019

Planning and Inspection Department

BUILDING **BP2019-145** PROJECT NAME: Brown top deck and stairs repair ISSUED: 06/21/2019 SITE ADDRESS: 1630 VILLAGE LN KILL DEVIL HILLS EXPIRES: 12/18/2019 APPLICANT: **BROWN, GREG BROWN, GREG OWNER:** 6922 RUSKIN STREET 6922 RUSKIN STREET SPRINGFIELD, VA 22150 SPRINGFIELD, VA 22150 **CONTRACTOR:** Full House Ventures **PO Box 498** kitty hawk, nc 27949 919-608-2120 License: 00000000 **UNLICENSED - REMODELING:** Full House Ventures Expires: 06/11/2024 PO Box 498 kitty hawk, nc 27949 919-608-2120 PARCEL: Parcel PIN: 988410267071 003243000 Number: 1630 VILLAGE LN KILL DEVIL HILLS Address: Zoning: Addition: **FIRST FLIGHT VILLAGE SEC 2** 263 Block: 0 Lot(s): Legal Description: FEES: Paid Due **Building Permit Fee - Minimum** \$150.00 \$0.00 Fee \$0.00 Totals : \$150.00 PROJECT DESCRIPTION: Remove and replace top crows nest and stairs

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7

PROJECT NAME: Brown top deck and stairs repair SITE ADDRESS: 1630 VILLAGE LN KILL DEVIL HILLS

EXPIRES: 12/18/2019

meValueMA PERMITNMA EXEMPTIONNNING DISTRICTRLRPOSEResidential Repair/RemodelONT YARD SETBACK30DE YARD SETBACK8AR YARD SETBACK20% Depth >30OOD ZONEXVAL ELEVATION RTIFICATENSTRUCTION COST4500.00RVEYOR NAME AND IMBERF. Richard Quible L- 1157CUPANCY TYPEOne & Two Family			DETAILS	
MA PERMITNMA EXEMPTIONNNING DISTRICTRLRPOSEResidential Repair/RemodelONT YARD SETBACK30DE YARD SETBACK8COD ZONEXVAL ELEVATION RTIFICATENRVEYOR NAME AND MBERF. Richard Quible L- 1157CUPANCY TYPEOne & Two Family	Permit			
MA EXEMPTIONNNING DISTRICTRLRPOSEResidential Repair/RemodelONT YARD SETBACK30DE YARD SETBACK8AR YARD SETBACK20% Depth > 30OOD ZONEXNAL ELEVATION SETTIFICATENSETUCTION COST4500.00RVEYOR NAME AND IMBERF. Richard Quible L- 1157CUPANCY TYPEOne & Two Family	Name	Value		
NING DISTRICTRLRPOSEResidential Repair/RemodelONT YARD SETBACK30DE YARD SETBACK8CAR YARD SETBACK20% Depth >30OOD ZONEXNAL ELEVATION RTIFICATENSTRUCTION COST4500.00RVEYOR NAME AND MBERF. Richard Quible L- 1157CUPANCY TYPEOne & Two Family	CAMA PERMIT	Ν		
RPOSEResidential Repair/RemodelONT YARD SETBACK30DE YARD SETBACK8AR YARD SETBACK20% Depth >30OOD ZONEXVAL ELEVATION RTIFICATENONSTRUCTION COST4500.00RVEYOR NAME AND IMBERF. Richard Quible L- 1157CUPANCY TYPEOne & Two Family	CAMA EXEMPTION	Ν		
Repair/RemodelONT YARD SETBACK30DE YARD SETBACK8AR YARD SETBACK20% Depth >30OOD ZONEXNAL ELEVATION RTIFICATENNSTRUCTION COST4500.00RVEYOR NAME AND MBERF. Richard Quible L- 1157CUPANCY TYPEOne & Two Family	ZONING DISTRICT	RL		
DE YARD SETBACK8AR YARD SETBACK20% Depth >30OOD ZONEXNAL ELEVATIONNRTIFICATE4500.00RVEYOR NAME ANDF. Richard Quible L- 1157CUPANCY TYPEOne & Two Family	PURPOSE			
AR YARD SETBACK20% Depth >30OOD ZONEXNAL ELEVATION RTIFICATENINSTRUCTION COST4500.00RVEYOR NAME AND MBERF. Richard Quible L- 1157CUPANCY TYPEOne & Two Family	FRONT YARD SETBACK	30		
OOD ZONE X VAL ELEVATION RTIFICATE N ONSTRUCTION COST 4500.00 RVEYOR NAME AND MBER F. Richard Quible L- 1157 CCUPANCY TYPE One & Two Family	SIDE YARD SETBACK	8		
NAL ELEVATION N RTIFICATE NSTRUCTION COST 4500.00 RVEYOR NAME AND F. Richard Quible L- 1157 CCUPANCY TYPE One & Two Family	REAR YARD SETBACK	20% Depth >30		
RTIFICATE INSTRUCTION COST 4500.00 RVEYOR NAME AND F. Richard Quible L- IMBER 1157 CCUPANCY TYPE One & Two Family	FLOOD ZONE	Х		
RVEYOR NAME ANDF. Richard Quible L-IMBER1157CCUPANCY TYPEOne & Two Family	FINAL ELEVATION CERTIFICATE	Ν		
IMBER 1157 CCUPANCY TYPE One & Two Family	CONSTRUCTION COST	4500.00		
	SURVEYOR NAME AND NUMBER			
	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.

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Issued By:

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PROJECT NAME: Brown top deck and stairs repair **SITE ADDRESS:** 1630 VILLAGE LN KILL DEVIL HILLS

EXPIRES: 12/18/2019

Date: 6-21-19

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.

- Gre

Contractor or Authorized Agent:

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Town of Kill Devil Hills

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

JUN 2 5 2019

Planning and Inspection Department

BUILDING **BP2019-146** ISSUED: 06/25/2019 PROJECT NAME: RAAB STAIRS AND LANDING SITE ADDRESS: 1101 VEELEE DR KILL DEVIL HILLS EXPIRES: 12/22/2019 APPLICANT: CAROL RAAB **OWNER:** CAROL RAAB 1101 VEELEE DR 1101 VEELEE DR Kill Devil Hills, NC 27948 Kill Devil Hills, NC 27948 239-265-5508 239-265-5508 License: Unlicensed **GENERAL:** Self UNKNOWN Expires: 12/31/2020 UNKNOWN, XX 00000 917-862-9006 PARCEL: Parcel PIN: 988415635577 028343000 Number: 1101 VEELEE DR KILL DEVIL HILLS Address: Zoning: Addition: **KITTY HAWK SHORES - REVISED** Block: 15 Lot(s): 8 Legal Description: FEES: Paid Due \$0.00 **Building Permit Fee - Minimum** \$150.00 Fee Totals : \$150.00 \$0.00 PROJECT DESCRIPTION: **REBUILD STAIRS AND LANDING SAME FOOTPRINT**

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PROJECT NAME: RAAB STAIRS AND LANDING SITE ADDRESS: 1101 VEELEE DR KILL DEVIL HILLS

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	Ν		
CONSTRUCTION COST	2000.00		
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.

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EXPIRES: 12/22/2019

Date:

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: 1

Contractor or Authorized Agent:

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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 PROJECT NAME: JONES STAIR REBUILD SITE ADDRESS: 208 SEA VILLAGE LN KILL DEVIL HILLS						BUILDIN ISSUED: 04/25/201 EXPIRES: 10/22/201			
APPLICANT:	JONES, ROBERT L MARK A JONES 8700 GREYCLIFF R RICHMOND, VA 232		(JONES, ROE MARK A JON 8700 GREYC RICHMOND,	NES CLIFF ROAD			
GENERAL LIM	ITED:	B. R. Neier 208 Barco Barco, NC 207-8236				License: 60862 Expires:	2		
PARCEL:									
PIN:	988513131766	5		Parcel Number:	000963	000			
Address:	208 SEA VILL	AGE LN KILL D	EVIL HILLS						
				Zoning	g:				
Addition:				Block:	. 0	Lot(s):	6		
Legal Desc	cription:								
FEES:		Paid	Due						
Building Permit Fee	Fee - Minimum	\$150.00	\$0.00						
	Totals :	\$150.00	\$0.00						

PROJECT DESCRIPTION: REBUILD 2 SETS OF STAIRS ON EAST AND WEST SIDE OF PROPERTY

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JUN 1 1 2019

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PROJECT NAME: JONES STAIR REBUILD SITE ADDRESS: 208 SEA VILLAGE LN KILL DEVIL HILLS

EXPIRES: 10/22/2019

		DETAILS	
Permit			
Name	Value		
CAMA PERMIT	N		
CAMA EXEMPTION	Ν		
ZONING DISTRICT	С		
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.

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PROJECT NAME: JONES STAIR REBUILD SITE ADDRESS: 208 SEA VILLAGE LN KILL DEVIL HILLS

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

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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 PROJECT NAME: MARSHALL STAIR REBUILD SITE ADDRESS: 205 SEA VILLAGE LN KILL DEVIL HILLS						BUILDIN ISSUED: 04/25/201 EXPIRES: 10/22/201		
APPLICANT:	MARSHALL, W RIC 2036 ORCHARD DF POCOMOKE CITY,	RIVE	(OWNER:	2036 ORCH/	W RICHARD ARD DRIVE E CITY, MD 21851-2873		
GENERAL LIM	ITED:	B. R. Neier 208 Barco I Barco, NC 207-8236				License: 60862 Expires:		
PARCEL:								
PIN:	988513130570	0		Parcel Number:	009121	000		
Address:	205 SEA VILL	AGE LN KILL DI	EVIL HILLS					
				Zonin	g:			
Addition:				Block	: 0	Lot(s): 28		
Legal Des	cription:							
FEES:		Paid	Due					
Building Permit Fee	t Fee - Minimum	\$150.00	\$0.00					
	Totals :	\$150.00	\$0.00					

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4

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. 2 Issued By: Date: 6-11-19 Contractor or Authorized Agent:

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PROJECT NAME: Miller Deck & Steps SITE ADDRESS: 808 FOX ST KILL DEVIL HILLS

BP2019-131

Town of Kill Devil Hills

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

JUN 1 1 2019

The state

Planning and Inspection Department

BUILDING

ISSUED: 06/06/2019

EXPIRES: 12/03/2019

APPLICANT:	REBECCA MILLER 808 Fox St. K D H, NC 27948			OWNER:	REBECCA 808 Fox St K D H, NC		
GENERAL:		Self UNKNOVM UNKNOVM 917-862-90	00000 XX 0				Unlicensed 12/31/2020
PARCEL:		and the share of the					
PIN:	988308778872	2		Parcel Number:	00439	95000	
Address:	808 FOX ST	KILL DEVIL HILL	S				
				Zonir	ig:		
Addition:	KILL DEVIL H	LLS REALTY CO	ORP	Block	:: 20	Lot	(s): 5
Legal Desc	ription:						
FEES:		Paid	Due				
Building Permit I Fee	Fee - Minimum	\$150.00	\$0.00				
	Totals :	\$150.00	\$0.00				

PROJECT DESCRIPTION: Repair deck, steps and handrails as needed. "As is where is"

Printed by : CTHUMAN on: 06/06/2019 08:50 AM

BP2019-131 PROJECT NAME: Miller Deck & Steps SITE ADDRESS: 808 FOX ST KILL DEVIL HILLS

1 ... 2

EXPIRES: 12/03/2019

	DETAILS	
Permit		
Name	Value	
CAMA PERMIT	Ν	
CAMA EXEMPTION	Ν	
PURPOSE	Residential Repair/Remodel	
FRONT YARD SETBACK	30	
SIDE YARD SETBACK	10	
REAR YARD SETBACK	20% Depth >30	
FLOOD ZONE	х	
FINAL ELEVATION CERTIFICATE	Ν	
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: Level Contractor or Authorized Agent: Level Contractor Date: 6 11 19

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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 PROJECT NAME: HILL SHEATHING SITE ADDRESS: 207 ARCH ST E KILL DEVIL HILLS BUILDING ISSUED: 06/11/2019

EXPIRES: 12/08/2019

					Kill Devil Hills, NC 2 252-256-2091	27940
GENERAL:		CHRIS GAI 105 ELIZA Kill Devil Hi 252-455-58	BETH CT IIsl, NC 27948			se: 9090909090909090 es: 05/31/2022
PARCEL:						
PIN:	988513043681			Parcel Number:	000015000	
Address:	207 ARCH ST E	KILL DEVIL H	HILLS			
				Zoning	g:	
Addition:	ORVILLE BEACH	AMENDED B	BLK 4	Block:	4	Lot(s): 1
Legal Descrip	tion:					
FEES:		Paid	Due			
Building Permit Fe Fee	e - Minimum	\$150.00	\$0.00			
	Totals :	\$150.00	\$0.00			
PROJECT DESCRI	PTION: REPLACE	Γ1-11 STRU(CTURAL SHE	ATHING		
		JUN 11	2019		QIA9 WITH	
					CASH	
		• , . •			2451	



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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

	5 ME: Solomon Rear S: 3302 BAY DR					BUIL ISSUED: 06/ EXPIRES: 12/	
APPLICANT:	Solomon, Gloria 213 Chapel Drive LAKE JUNALUSKA	A, NC 28745			Solomon, Glori 213 Chapel Dri LAKE JUNALU	a ive ISKA, NC 28745	
CONTRACTOR:	JB UTZ CONSTRU 2719 S Wrightsville nags head, nc 279 252-475-4619	Ave					
GENERAL:				DN		icense: none xpires: 12/31/2019	
PARCEL:							
PIN:	9875167397	05		Parcel Number:	0003210	00	
Address:	3302 BAY DI	R KILL DEVIL HI	LS				
				Zoning	g:		
Addition:	ORVILLE BE	ACH WEST		Block:	0	Lot(s): 243	
Legal Desc	ription:						
FEES:		Paid	Due	BUILDING AREA	.:		
Covered Porch I Open Deck Fee		\$360.00 \$150.00	\$0.00 \$0.00	Open Decks		1 EA	
Open Deck ree				Covered Porche	es/Decks	480 SQFT	
	Totals :	\$510.00	\$0.00				
PROJECT DESC	, , , , , , , , , , , , , , , , , , ,			cate stairs in rear y	yen u		
	JUN 11	2013					
Printed by : CTHUMAN c	on: 06/11/2019 08:52 AM						Page 1 of
		Paid	Due				
ES: ilding Permit Fee e	e - Minimum	\$150.00	\$0.00				



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					BUILDIN ISSUED: 06/06/20 EXPIRES: 12/03/20			
APPLICANT:	Al Martin 310 St. Louis St Kill Devil Hills, NC 27 252-449-8485	7948			BAKER, ROI POB 1611 310 ST LOU KILL DEVIL I			
UNLICENSED B	BUILDER:	SHANE CL 607 INDIAN Kill Devil H 252-305-24	N DR IIIs, NC 27948	3		License: 000 Expires:		
PARCEL:								
PIN:	987516849404	4		Parcel Number:	000180	0000		
Address:	310 ST LOUIS	ST KILL DEVIL	HILLS					
				Zoning	g:			
Addition:	ORVILLE BEA	CH WEST		Block:	0	Lot(s): 73		
Legal Desc	ription:							
FEES:		Paid	Due	BUILDING AREA	A:			
Open Deck Fee		\$150.00	\$0.00	Open Decks		1 EA		
	Totals :	\$150.00	\$0.00					

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BP2019-129 PROJECT NAME: Gaither Office Building Repair SITE ADDRESS: 2705 CROATAN HWY N KILL DEVIL HILLS

EXPIRES: 12/02/2019

	DETAILS	
Permit		
Name	Value	
CAMA PERMIT	N	
CAMA EXEMPTION	N	
ZONING DISTRICT	С	
PURPOSE	Commercial Repair/Remodel	
FRONT YARD SETBACK	30	
SIDE YARD SETBACK	10	
FLOOD ZONE	AE	
BASE FLOOD ELEVATION	9.0	
FINAL ELEVATION CERTIFICATE	Ν	
CONSTRUCTION COST	42000.00	
OCCUPANCY TYPE	Business	
	REQUIRED INSPECTIONS	
Sheathing	Zoning Final	
Insulation	Final	
Th.:	CONDITIONS	41.0.00
work is suspended for a peri-	d void if work or construction authorized is not commenced within 6 months or if construct iod of 12 months at any time after work has started.	lion
Contractor and the second s	e Debris requirements as defined in NCBC R301.2.1.2 and NCBC 1609.2.	
indet opnipij man rinde bonn		
	e read and examined this application and know the same to be true and corr	rect.
hereby certify that I have All provisions of Laws and specified herein or not Th	e read and examined this application and know the same to be true and corr of Ordinances governing this type of work will be complied with whether he granting of a permit does not presume to give authority to violate or can	cel
hereby certify that I have All provisions of Laws and specified herein or not Th	d Ordinarices governing this type of work will be complied with whether	cel
hereby certify that I have All provisions of Laws and specified herein or not Th	d Oreinances governing this type of work will be complied with whether he granting of a permit does not presume to give authority to violate or can	cel
hereby certify that I have All provisions of Laws and specified herein or not Th he provisions of any othe	er Oreinances governing this type of work will be complied with whether he granting of a permit does not presume to give authority to violate or can er state local law regulating construction or the performance of constructio	cel
hereby certify that I have All provisions of Laws and specified herein or not Th he provisions of any othe	er Oreinances governing this type of work will be complied with whether he granting of a permit does not presume to give authority to violate or can er state/local law regulating construction or the performance of constructio	cel
hereby certify that I have All provisions of Laws and pecified herein or not Th he provisions of any othe ssued By	er Oreinances governing this type of work will be complied with whether he granting of a permit does not presume to give authority to violate or can er state local law regulating construction or the performance of constructio	cel
hereby certify that I have All provisions of Laws and specified herein or not Th he provisions of any othe ssued By Contractor or Authorized	Agent: \underline{M}	cel
hereby certify that I have All provisions of Laws and pecified herein or not Th he provisions of any othe ssued By	Agent: Date: Date:	cel
hereby certify that I have All provisions of Laws and specified herein or not Th he provisions of any othe ssued By Contractor or Authorized	Agent: Date: Date:	cel n.



PROJECT NAME: Anne Griffin Deck Repair/Replace SITE ADDRESS: 329 PALMETTO ST W KILL DEVIL HILLS

BP2019-130

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

CLI III LI LI

BUILDING ISSUED: 06/05/2019

EXPIRES: 12/02/2019

APPLICANT:	Anne, Griffin O 325 Palmetto St. Kill Devil Hillsl, NC 27948 252-599-1872			Anne, Griffin 325 Palmetto St. Kill Devil Hillsl, NC 27948 252-599-1872		
CONTRACTOR:		SAME AS UNKNOWN UNKNOWN				License: Same as Owner Expires: 12/30/2019
PARCEL:						
PIN:	988517007527	7		Parcel Number:	0030110	000
Address:	329 PALMETT	O ST W KILL D	EVIL HILLS			
				Zoning	g:	
Addition:	VIRGINIA DAF	RE SHORES		Block:	49	Lot(s): 6-8
Legal Desc	ription:					
FEES:		Paid	Due			
Building Permit I Fee	Fee - Minimum	\$150.00	\$0.00			
	Totals :	\$150.00	\$0.00			

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PROJECT NAME: Anne Griffin Deck Repair/Replace **SITE ADDRESS:** 329 PALMETTO ST W KILL DEVIL HILLS

EXPIRES: 12/02/2019

		DETAILS
Permit		
Name	Value	
CAMA PERMIT	Ν	
CAMA EXEMPTION	Ν	
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	Ν	
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.
 Dock and Steirs approved to go back AS IS WILLERE IS

* Deck and Stairs approved to go back AS IS WHERE IS

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EXPIRES: 12/02/2019

Date: 4/5

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:

Man

am

Contractor or Authorized Agent:

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