



County of Dare
 Planning Office
 PO Box Drawer 1000
 Manteo NC 27954

Manteo: (252) 475-5080
 KDH: (252) 475-5871
 Frisco: (252) 475-5878

RESIDENTIAL BUILDING PERMIT

BUILDING PERMIT#: R-457

06/26/2019

Parcel Number: 013191008
 Location: 27250 TARHEEL CT – SALVO
 Subdivision: WIND OVER WAVES OCEANFRONT
 Legal Description: LOT:9 BLK: SEC:

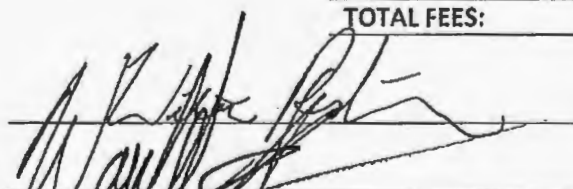
Owner Name: TS VENTURE GROUP LLC
 Owner Mail Address: PO BOX 90 KILL DEVIL HILLS, NC 27948
 Owner Phone and email:

Contractor Name: SAGA CONSTRUCTION INC
 Contractor Mail Address: STE 301, 1314 S CROATAN HWY KILL DEVIL HILLS, NC 27948
 Contractor Phone: Contractor NC License#: 62306

BUILDING INFORMATION

Proposed Construction Use:	SINGLE FAMILY DWELLING NEW , SFD WITH POOL		
Proposed Construction Type:	SFD	Cost of Construction:	\$500,000
Finished Square Footage:	3113	CAMA Permit#:	N/A
Unfinished Square Footage:	569	Septic Permit#:	28745
Stories:	3.0	Septic Permit Date:	05/20/2019
Building Height:	0	Survey/Site Plan:	YES
Total Rooms:	0	Water Tap#:	Y
Footing Type:	PILING	Water Type:	Central Water
Exterior Finish:	LAP SIDING	Flood Zone:	AE
Proposed Finished Floor Elevation:		Base Flood Elevation:	8.0
Bedrooms:	6	Lot/Ground Elevation:	
		Baths/half baths:	5.00/1

Comments: Any deviation from the building plan or site plan requires prior approval.	PERMIT FEE	\$2,562.35
	SWIMMING POOLS;HOT TUBS	300.00
	FLOOD DEVELOPMENT BLDG PERMIT	75.00
	HOME OWNERS RECOVERY FEE	10.00
	RESIDENTIAL ZONING APPROVAL	100.00
	TOTAL FEES:	\$3,047.35

Applicant Signature:  SAGA CONSTRUCTION INC

Inspector Signature:  WWJ

Application Reference # 300 on 06/14/2019



Batteras
New Construction

County of Dare
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Frisco: (252) 475-5878

RESIDENTIAL BUILDING PERMIT

BUILDING PERMIT#: R-456

S

06/26/2019

Parcel Number: 013191009
Location: 27248 TARHEEL CT - SALVO
Subdivision: WIND OVER WAVES OCEANFRONT
Legal Description: LOT:10 BLK: SEC:

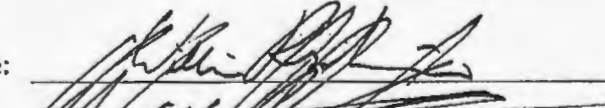
Owner Name: TS VENTURE GROUP LLC
Owner Mail Address: PO BOX 90 KILL DEVIL HILLS, NC 27948
Owner Phone and email:

Contractor Name: SAGA CONSTRUCTION INC
Contractor Mail Address: STE 301, 1314 S CROATAN HWY KILL DEVIL HILLS, NC 27948
Contractor Phone: Contractor NC License#: 62306

BUILDING INFORMATION

Proposed Construction Use:	SINGLE FAMILY DWELLING NEW , SFD WITH POOL	Cost of Construction:	\$600,000
Proposed Construction Type:	SFD	CAMA Permit#:	N/A
Finished Square Footage:	3986	Septic Permit#:	28755
Unfinished Square Footage:	1225	Septic Permit Date:	28755
Stories:	3.0	Survey/Site Plan:	NO
Building Height:	0	Water Tap#:	Y
Total Rooms:	0	Water Type:	Community Water
Footing Type:	PILING	Flood Zone:	AE
Exterior Finish:		Base Flood Elevation:	8.0
Proposed Finished Floor Elevation:		Lot/Ground Elevation:	
Bedrooms:	0	Baths/half baths:	10.00/1

Comments: Any deviation from the building plan or site plan requires prior approval.	PERMIT FEE	\$3,479.50
	SWIMMING POOLS;HOT TUBS	300.00
	FLOOD DEVELOPMENT BLDG PERMIT	75.00
	HOME OWNERS RECOVERY FEE	10.00
	RESIDENTIAL ZONING APPROVAL	100.00
TOTAL FEES:		\$3,964.50

Applicant Signature:  SAGA CONSTRUCTION INC

Inspector Signature:  WWJ

Application Reference # 301 on 06/14/2019



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BUILDING PERMIT#: R-457

06/26/2019

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 Location: 27250 TARHEEL CT – SALVO
 Subdivision: WIND OVER WAVES OCEANFRONT
 Legal Description: LOT:9 BLK: SEC:

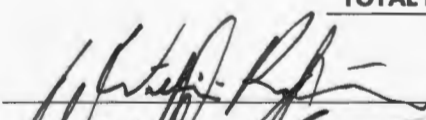

Owner Name: TS VENTURE GROUP LLC
 Owner Mail Address: PO BOX 90 KILL DEVIL HILLS, NC 27948
 Owner Phone and email:

Contractor Name: SAGA CONSTRUCTION INC
 Contractor Mail Address: STE 301, 1314 S CROATAN HWY KILL DEVIL HILLS, NC 27948
 Contractor Phone: Contractor NC License#: 62306

BUILDING INFORMATION

Proposed Construction Use:	SINGLE FAMILY DWELLING NEW , SFD WITH POOL		
Proposed Construction Type:	SFD	Cost of Construction:	\$500,000
Finished Square Footage:	3113	CAMA Permit#:	N/A
Unfinished Square Footage:	569	Septic Permit#:	28745
Stories:	3.0	Septic Permit Date:	05/20/2019
Building Height:	0	Survey/Site Plan:	YES
Total Rooms:	0	Water Tap#:	Y
Footing Type:	PILING	Water Type:	Central Water
Exterior Finish:	LAP SIDING	Flood Zone:	AE
Proposed Finished Floor Elevation:		Base Flood Elevation:	8.0
Bedrooms:	6	Lot/Ground Elevation:	
		Baths/half baths:	5.00/1

Comments: Any deviation from the building plan or site plan requires prior approval.	PERMIT FEE	\$2,562.35
	SWIMMING POOLS;HOT TUBS	300.00
	FLOOD DEVELOPMENT BLDG PERMIT	75.00
	HOME OWNERS RECOVERY FEE	10.00
	RESIDENTIAL ZONING APPROVAL	100.00
	TOTAL FEES:	\$3,047.35

Applicant Signature:  SAGA CONSTRUCTION INC
 Inspector Signature:  WWJ

Application Reference # 300 on 06/14/2019



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RESIDENTIAL BUILDING PERMIT

BUILDING PERMIT#: REMD-416

06/19/2019

Parcel Number: 013905000
 Location: 40050 NC 12 HWY – AVON
 Subdivision: HATTERAS COLONY SEC 6
 Legal Description: LOT: PAR A BLK: SEC: 6

Owner Name: JORVIK PROPERTIES LLC
 Owner Mail Address: P O BOX 1393 BUXTON, NC 27920
 Owner Phone and email:

Contractor Name: ANY ANGLE CONSTRUCTION INC
 Contractor Mail Address: PO BOX 422, BUXTON, NC 27920
 Contractor Phone: 252-995-4367 Contractor NC License#: 31615

BUILDING INFORMATION

Proposed Construction Use:	REMODEL RES OR COM , REPLACE SIDING, STAIRS		
Proposed Construction Type:	SFD	Cost of Construction:	\$15,000
Finished Square Footage:	0	CAMA Permit#:	
Unfinished Square Footage:	0	Septic Permit#:	
Stories:	0.0	Septic Permit Date:	
Building Height:	0	Survey/Site Plan:	
Total Rooms:	0	Water Tap#:	
Footing Type:		Water Type:	
Exterior Finish:		Flood Zone:	
Proposed Finished Floor Elevation:		Base Flood Elevation:	0.0
Bedrooms:	0	Lot/Ground Elevation:	
		Baths/half baths:	0.00/0

Comments: Any deviation from the building plan or site plan requires prior approval. PERMIT FEE \$150.00
 A-293

TOTAL FEES: \$150.00

Applicant Signature: [Signature] ANY ANGLE CONSTRUCTION INC
 Inspector Signature: CH / CF 6/19/19 LMF

Application Reference # 293 on 06/13/2019



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 Frisco: (252) 475-5878

RESIDENTIAL BUILDING PERMIT

BUILDING PERMIT#: R-418

06/20/2019

Parcel Number: 013727000
 Location: 39195 AMBERJACK CT – AVON
 Subdivision: HATTERAS COLONY SEC 3
 Legal Description: LOT: 92 BLK: SEC: 3

Owner Name: GERARD G TTEE JAMES
 Owner Mail Address: 43777 WOODWORTH CT ASHBURN, VA 20147
 Owner Phone and email:

Contractor Name: SAMUEL D HAGEDON
 Contractor Mail Address: PO BOX 395, BUXTON, NC 27920
 Contractor Phone: 252-305-2143 Contractor NC License#: 23305

BUILDING INFORMATION

Proposed Construction Use:	ELEVATION PERMIT PROJECT , ELEV SFD, NEW PILINGS	Cost of Construction:	\$21,500
Proposed Construction Type:		CAMA Permit#:	
Finished Square Footage:	0	Septic Permit#:	
Unfinished Square Footage:	0	Septic Permit Date:	
Stories:	0	Survey/Site Plan:	
Building Height:	0	Water Tap#:	
Total Rooms:	0	Water Type:	
Footing Type:		Flood Zone:	VE
Exterior Finish:		Base Flood Elevation:	0.0
Proposed Finished Floor Elevation:		Lot/Ground Elevation:	
Bedrooms:	0	Baths/half baths:	0/0

Comments: Any deviation from the building plan or site plan requires prior approval.	PERMIT FEE	\$200.00
A-307	FLOOD DEVELOPMENT BLDG PERMIT	75.00

TOTAL FEES: \$275.00

Applicant Signature: Sam Hagedon SAMUEL D HAGEDON
 Inspector Signature: CH/CA 6/20/19 LMF

Application Reference # 307 on 06/17/2019



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DOCKS;PIERS;BULKHEADS;DUNEWLK

DOCKS;PIERS;BULKHEADS;DUNEWLK#: ACC-451

06/26/2019

Parcel Number: 012821070
 Location: 26144 OTTER WAY – SALVO
 Subdivision: WIND OVER WAVES - PH 2
 Legal Description: LOT: 33 BLK: SEC:

Owner Name: KITE BAY LLC
 Owner Mail Address: P O BOX 28 - P O BOX 28 - NAGS HEAD, NC 27959
 Owner Contact Information:

Contractor Name: SCOTT SMALL
 Contractor Mail Address: 1112 W KITTY HAWK RD - KITTY HAWK, NC 27949
 Contractor Phone: 252-473-7695
 Contractor NC License#: UNLICENSED

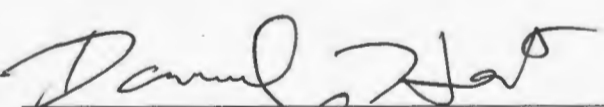
DETAILS RESIDENTIAL


CAMA Permit	73779	Cost of Job:	\$9,835
Lot/Ground elevation (ft)		DOCKS;PIERS;BULKHEADS; DUNEWLK FEE:	\$250.00

Comments:

The owner and builder are responsible to comply with all regulations and laws, and should personally inspect all construction and be certain to comply with all zoning regulations and building setbacks. The applicant certifies that the information on this permit is correct. That he is owner or duly authorized agent of owner. That all construction shall be as shown on the submitted plans and specifications that he understands this permit is valid for six months and may be revoked for failure to comply with applicable regulations and laws.

Call Building Inspector (24 Hours in advance) for inspections at Dare County Offices Manteo Office 252.475.5870, Northern Beach Office 252.475.5871 or Frisco Office 252.475.5878

Applicant Signature:  SCOTT SMALL

Inspector Signature:  WWJ

Application Reference # 321 on 06/19/2019



County of Dare
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Manteo: (252) 475-5870
 Northern Beach: (252) 475-5871
 Frisco: (252) 475-5878

ELECTRICAL PERMIT

ELECTRICAL PERMIT#: ELEC-412

06/19/2019

Parcel Number: 013980000
 Location: 40173 BONITO RD – AVON
 Subdivision: HATTERAS COLONY SEC 11
 Legal Description: LOT: 3 BLK: SEC: 11

Owner Name: MARY SUE TRUSTEES LITTRELL
 Owner Mail Address: 5209 REEL S MILL RD - FREDERICK, MD 21704
 Owner Contact Information:

Contractor Name: MEEKINS ELECTRIC
 Contractor Mail Address: PO BOX 264 - HATTERAS, NC 27943
 Contractor Phone: 2523055060
 Contractor NC License#: L-15935

DETAILS RESIDENTIAL

Amp Increase:	0	Cost of Job:	\$200
Service Amps:	200	ELECTRICAL PERMIT FEE:	\$150.00

Comments: CHANGE METER BASE (CHEC); A-332

The owner and builder are responsible to comply with all regulations and laws, and should personally inspect all construction and be certain to comply with all zoning regulations and building setbacks. The applicant certifies that the information on this permit is correct. That he is owner or duly authorized agent of owner. That all construction shall be as shown on the submitted plans and specifications that he understands this permit is valid for six months and may be revoked for failure to comply with applicable regulations and laws.

Call Building Inspector (24 Hours in advance) for inspections at Dare County Offices Manteo Office 252.475.5870, Northern Beach Office 252.475.5871 or Frisco Office 252.475.5878

Applicant Signature: *Richard Meekins* MEEKINS ELECTRIC

Inspector Signature: *WJ/LJ 6/19/19* LMF

Application Reference # 332 on 06/19/2019



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 Frisco: (252) 475-5878

ELECTRICAL PERMIT

ELECTRICAL PERMIT#: ELEC-413

06/19/2019

Parcel Number: 017763000
 Location: 52608 PINEY RIDGE RD – FRISCO
 Subdivision: ROGUES RETREAT
 Legal Description: LOT: 24 BLK: SEC:

Owner Name: DONALD L II SMITH
 Owner Mail Address: P O BOX 483 - HATTERAS, NC 27943
 Owner Contact Information:

Contractor Name: MEEKINS ELECTRIC
 Contractor Mail Address: PO BOX 264 - HATTERAS, NC 27943
 Contractor Phone: 2523055060
 Contractor NC License#: L-15935

DETAILS

Amp Increase:	0	Cost of Job:	\$600
Service Amps:	200	ELECTRICAL PERMIT FEE:	\$150.00

Comments: CHANGE METER BASE/DISCON (CHEC); A-330

The owner and builder are responsible to comply with all regulations and laws, and should personally inspect all construction and be certain to comply with all zoning regulations and building setbacks. The applicant certifies that the information on this permit is correct. That he is owner or duly authorized agent of owner. That all construction shall be as shown on the submitted plans and specifications that he understands this permit is valid for six months and may be revoked for failure to comply with applicable regulations and laws.

Call Building Inspector (24 Hours in advance) for inspections at Dare County Offices Manteo Office 252.475.5870, Northern Beach Office 252.475.5871 or Frisco Office 252.475.5878

Applicant Signature: *Rebel Mack* MEEKINS ELECTRIC

Inspector Signature: *WJ/LJ 6/19/19* LMF

Application Reference # 330 on 06/19/2019



County of Dare
Planning Office
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Manteo NC 27954

Manteo: (252) 475-5870
Northern Beach: (252) 475-5871
Frisco: (252) 475-5878

ELECTRICAL PERMIT

ELECTRICAL PERMIT#: ELEC-417

06/20/2019

Parcel Number: 014256000
Location: 25313 NC 12 HWY – WAVES
Subdivision: SUBDIVISION - NONE
Legal Description: LOT: BLK: SEC:

Owner Name: OCEAN WAVES CAMPGROUND INC
Owner Mail Address: P O BOX 3576 - WAVES, NC 27982
Owner Contact Information:

Contractor Name: CHEC / (OWNER)
Contractor Mail Address:
Contractor Phone: 252.987.2556 (CAMPGROUND OFFICE)
Contractor NC License#: NA

DETAILS RESIDENTIAL

Amp Increase: 0
Service Amps: 200
Cost of Job: \$50
ELECTRICAL PERMIT FEE: \$150.00

Comments: A-334 / CID: 56256

The owner and builder are responsible to comply with all regulations and laws, and should personally inspect all construction and be certain to comply with all zoning regulations and building setbacks. The applicant certifies that the information on this permit is correct. That he is owner or duly authorized agent of owner. That all construction shall be as shown on the submitted plans and specifications that he understands this permit is valid for six months and may be revoked for failure to comply with applicable regulations and laws.

Call Building Inspector (24 Hours in advance) for inspections at Dare County Offices Manteo Office 252.475.5870, Northern Beach Office 252.475.5871 or Frisco Office 252.475.5878

Applicant Signature: Clyde Bullock CLYDE BULLOCK

Inspector Signature: CH/LF 6/20/19 LMF

Application Reference # 334 on 06/20/2019



County of Dare
 Planning Office
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 Manteo NC 27954

Manteo: (252) 475-5870
 Northern Beach: (252) 475-5871
 Frisco: (252) 475-5878

ELECTRICAL PERMIT

ELECTRICAL PERMIT#: ELEC-434

06/24/2019

Parcel Number: 013586000
 Location: 39269 SANDFIDDLER LN – AVON
 Subdivision: HATTERAS COLONY SEC 2
 Legal Description: LOT: 42 BLK: SEC: 2

Owner Name: HARRY W BARNES
 Owner Mail Address: 215 BROOKSIDE BLVD - PITTSBURGH, PA 15241
 Owner Contact Information:

Contractor Name: BURKE ELECTRIC
 Contractor Mail Address: 119 PETTIE SHORE RD - COFIELD, NC 27922
 Contractor Phone: 2522877143
 Contractor NC License#: L-26844

DETAILS RESIDENTIAL


Amp Increase:	0	Cost of Job:	\$500
Service Amps:	200	ELECTRICAL PERMIT FEE:	\$150.00

Comments:

The owner and builder are responsible to comply with all regulations and laws, and should personally inspect all construction and be certain to comply with all zoning regulations and building setbacks. The applicant certifies that the information on this permit is correct. That he is owner or duly authorized agent of owner. That all construction shall be as shown on the submitted plans and specifications that he understands this permit is valid for six months and may be revoked for failure to comply with applicable regulations and laws.

Call Building Inspector (24 Hours in advance) for inspections at Dare County Offices Manteo Office 252.475.5870, Northern Beach Office 252.475.5871 or Frisco Office 252.475.5878

Applicant Signature: _____ BURKE ELECTRIC

Inspector Signature:  _____ WWJ

Application Reference # 351 on 06/24/2019



County of Dare
 Planning Office
 PO Box Drawer 1000
 Manteo NC 27954

Manteo: (252) 475-5080
 KDH: (252) 475-5871
 Frisco: (252) 475-5878

RESIDENTIAL BUILDING PERMIT

BUILDING PERMIT#: R-418

06/20/2019

Parcel Number: 013727000
 Location: 39195 AMBERJACK CT – AVON
 Subdivision: HATTERAS COLONY SEC 3
 Legal Description: LOT: 92 BLK: SEC: 3

Owner Name: GERARD G TTEE JAMES
 Owner Mail Address: 43777 WOODWORTH CT ASHBURN, VA 20147
 Owner Phone and email:

Contractor Name: SAMUEL D HAGEDON
 Contractor Mail Address: PO BOX 395, BUXTON, NC 27920
 Contractor Phone: 252-305-2143 Contractor NC License#: 23305

BUILDING INFORMATION

Proposed Construction Use:	ELEVATION PERMIT PROJECT , ELEV SFD, NEW PILINGS	Cost of Construction:	\$21,500
Proposed Construction Type:		CAMA Permit#:	
Finished Square Footage:	0	Septic Permit#:	
Unfinished Square Footage:	0	Septic Permit Date:	
Stories:	0	Survey/Site Plan:	
Building Height:	0	Water Tap#:	
Total Rooms:	0	Water Type:	
Footing Type:		Flood Zone:	VE
Exterior Finish:		Base Flood Elevation:	0.0
Proposed Finished Floor Elevation:		Lot/Ground Elevation:	
Bedrooms:	0	Baths/half baths:	0/0

Comments: Any deviation from the building plan or site plan requires prior approval.	PERMIT FEE	\$200.00
A-307	FLOOD DEVELOPMENT BLDG PERMIT	75.00

TOTAL FEES: \$275.00

Applicant Signature: Sam Hagedon SAMUEL D HAGEDON

Inspector Signature: CH/LM 6/20/19 LMF

Application Reference # 307 on 06/17/2019



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 Planning Office
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MECHANICAL PROJECT

MECHANICAL PROJECT#: MECH-310

06/03/2019

Parcel Number: 026569006
 Location: 46417 FLOWERS RIDGE RD – BUXTON
 Subdivision: FLOWERS RIDGE SEC 1
 Legal Description: LOT: 6 BLK: SEC: 1

Owner Name: DAVID ISBRECHT
 Owner Mail Address: P O BOX 276 - BUXTON, NC 27920
 Owner Contact Information:

Contractor Name: PAMLICO AIR INC
 Contractor Mail Address: PO BOX 579 - BUXTON, NC 27920
 Contractor Phone: 252-995-5435
 Contractor NC License#: L15256

DETAILS

UNITS:	1.00	Cost of Job:	\$5,850
Number of Units:	1		
Electrical Contractor ID:	30600-L	MECHANICAL PROJECT FEE:	\$150.00

Comments: A-222 ; 1 INDOOR/OUTDOOR SYS

The owner and builder are responsible to comply with all regulations and laws, and should personally inspect all construction and be certain to comply with all zoning regulations and building setbacks. The applicant certifies that the information on this permit is correct. That he is owner or duly authorized agent of owner. That all construction shall be as shown on the submitted plans and specifications that he understands this permit is valid for six months and may be revoked for failure to comply with applicable regulations and laws.

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Applicant Signature: [Signature] 6-5-19 PAMLICO AIR INC

Inspector Signature: CH/LF 6/3/19 LMF



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MECHANICAL PROJECT

MECHANICAL PROJECT#: MECH-311

06/03/2019

Parcel Number: 013299001
 Location: 27193 HOOPER LN – SALVO
 Subdivision: SUBDIVISION - NONE
 Legal Description: LOT: BLK: SEC:

Owner Name: DAVID STEFFEN
 Owner Mail Address: 243 STABLE RD - CARRBORO, NC 27510
 Owner Contact Information:

Contractor Name: AUGUST AIR LLC
 Contractor Mail Address: PO BOX 726 - AVON, NC 27915
 Contractor Phone: 252-423-9101
 Contractor NC License#: L33886

DETAILS

UNITS:	2.00	Cost of Job:	\$12,500
Number of Units:	2		
Electrical Contractor ID:	15935-L	MECHANICAL PROJECT FEE:	\$150.00

Comments: 2 INDOOR/OUTDOOR SYSTEMS; A-226

The owner and builder are responsible to comply with all regulations and laws, and should personally inspect all construction and be certain to comply with all zoning regulations and building setbacks. The applicant certifies that the information on this permit is correct. That he is owner or duly authorized agent of owner. That all construction shall be as shown on the submitted plans and specifications that he understands this permit is valid for six months and may be revoked for failure to comply with applicable regulations and laws.

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Applicant Signature: AUGUST AIR LLC

Inspector Signature: CH/CA 6/3/19 LMF



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MECHANICAL PROJECT

MECHANICAL PROJECT#: MECH-312

06/03/2019

Parcel Number: 023773000
 Location: 46903 NC 12 HWY – BUXTON
 Subdivision: SUBDIVISION - NONE
 Legal Description: LOT: BLK: SEC:

Owner Name: ELIOT TOD GASKILL
 Owner Mail Address: PO BOX 388 - BUXTON, NC 27920
 Owner Contact Information:

Contractor Name: AUGUST AIR LLC
 Contractor Mail Address: PO BOX 726 - AVON, NC 27915
 Contractor Phone: 252-423-9101
 Contractor NC License#: L33886

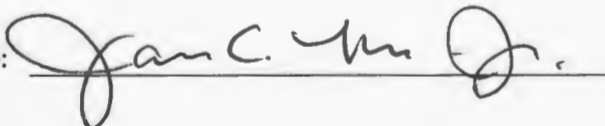
DETAILS

UNITS:	1.00	Cost of Job:	\$10,500
Number of Units:	1		
Electrical Contractor ID:	15935-L	MECHANICAL PROJECT FEE:	\$150.00

Comments: 1 MINI-SPLIT; AIR HANDLER AND HP (A-225)

The owner and builder are responsible to comply with all regulations and laws, and should personally inspect all construction and be certain to comply with all zoning regulations and building setbacks. The applicant certifies that the information on this permit is correct. That he is owner or duly authorized agent of owner. That all construction shall be as shown on the submitted plans and specifications that he understands this permit is valid for six months and may be revoked for failure to comply with applicable regulations and laws.

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Applicant Signature:  AUGUST AIR LLC

Inspector Signature: WT/LT 6/3/19 LMF



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MECHANICAL PROJECT

MECHANICAL PROJECT#: MECH-320

06/04/2019

Parcel Number: 013200008
Location: 27205 FARROW CT – SALVO
Subdivision: FARROW SHORES
Legal Description: LOT: 8 BLK: SEC:

Owner Name: ONE LIFE INNOVATION LLC
Owner Mail Address: P O BOX 9796 - P O BOX 9796 - JACKSON, WY 83002
Owner Contact Information:

Contractor Name: VILLAGE AIR INC
Contractor Mail Address: PO BOX 421 - RODANTHE, NC 27968
Contractor Phone: 252-305-6149
Contractor NC License#: L31489

DETAILS

UNITS: 1.00 Cost of Job: \$6,200
Number of Units: 1
Electrical Contractor ID: 26975-I MECHANICAL PROJECT FEE: \$150.00

Comments: INSTALL 1 HP AND AIR HANDLER; A-239

The owner and builder are responsible to comply with all regulations and laws, and should personally inspect all construction and be certain to comply with all zoning regulations and building setbacks. The applicant certifies that the information on this permit is correct. That he is owner or duly authorized agent of owner. That all construction shall be as shown on the submitted plans and specifications that he understands this permit is valid for six months and may be revoked for failure to comply with applicable regulations and laws.

Call Building Inspector (24 Hours in advance) for inspections at Dare County Offices Manteo Office 252.475.5870, Northern Beach Office 252.475.5871 or Frisco Office 252.475.5878

Applicant Signature: Karel Oren VILLAGE AIR INC

Inspector Signature: CH/CF 6/5/19 LMF



County of Dare
 Planning Office
 PO Box Drawer 1000
 Manteo NC 27954

Manteo: (252) 475-5870
 Northern Beach: (252) 475-5871
 Frisco: (252) 475-5878

MECHANICAL PROJECT

MECHANICAL PROJECT#: MECH-321

06/04/2019

Parcel Number: 012459012
 Location: 22190 GREEN LANTERN CT – RODANTHE
 Subdivision: MIRLO BEACH REV. SEC 1 BLK 4
 Legal Description: LOT: 5 BLK: 4 SEC:

Owner Name: PETER G RICARDS
 Owner Mail Address: 5105 BYRNE AVE - LOWELL, MI 49331
 Owner Contact Information:

Contractor Name: VILLAGE AIR INC
 Contractor Mail Address: PO BOX 421 - RODANTHE, NC 27968
 Contractor Phone: 252-305-6149
 Contractor NC License#: L31489

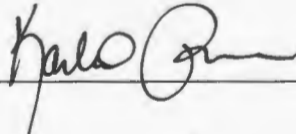
DETAILS

UNITS:	1.00	Cost of Job:	\$3,300
Number of Units:	1		
Electrical Contractor ID:	26975-I	MECHANICAL PROJECT FEE:	\$150.00

Comments: INSTALL 1 HP UNIT; A-238

The owner and builder are responsible to comply with all regulations and laws, and should personally inspect all construction and be certain to comply with all zoning regulations and building setbacks. The applicant certifies that the information on this permit is correct. That he is owner or duly authorized agent of owner. That all construction shall be as shown on the submitted plans and specifications that he understands this permit is valid for six months and may be revoked for failure to comply with applicable regulations and laws.

Call Building Inspector (24 Hours in advance) for inspections at Dare County Offices Manteo Office 252.475.5870, Northern Beach Office 252.475.5871 or Frisco Office 252.475.5878

Applicant Signature:  VILLAGE AIR INC

Inspector Signature: CH / CF 6/5/19 LMF



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MECHANICAL PROJECT

MECHANICAL PROJECT#: MECH-322

06/04/2019

Parcel Number: 014250011
 Location: 25228 ISLAND PINES DR – WAVES
 Subdivision: ISLAND PINES
 Legal Description: LOT: 11 BLK: SEC:

Owner Name: JEFFREY FRANCIS BASCELLI
 Owner Mail Address: 327 HAZEL AVE - FOLSOM, PA 19033
 Owner Contact Information:

Contractor Name: VILLAGE AIR INC
 Contractor Mail Address: PO BOX 421 - RODANTHE, NC 27968
 Contractor Phone: 252-305-6149
 Contractor NC License#: L31489

DETAILS

UNITS:	1.00	Cost of Job:	\$6,000
Number of Units:	1		
Electrical Contractor ID:	26975-I	MECHANICAL PROJECT FEE:	\$150.00

Comments: INSTALL 1 HP AND AIR HANDLER; A-237

The owner and builder are responsible to comply with all regulations and laws, and should personally inspect all construction and be certain to comply with all zoning regulations and building setbacks. The applicant certifies that the information on this permit is correct. That he is owner or duly authorized agent of owner. That all construction shall be as shown on the submitted plans and specifications that he understands this permit is valid for six months and may be revoked for failure to comply with applicable regulations and laws.

Call Building Inspector (24 Hours in advance) for inspections at Dare County Offices Manteo Office 252.475.5870, Northern Beach Office 252.475.5871 or Frisco Office 252.475.5878

Applicant Signature: *Harold Palmer* VILLAGE AIR INC

Inspector Signature: CH/LF 6/5/19 LMF



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MECHANICAL PROJECT

MECHANICAL PROJECT#: MECH-330

06/05/2019

Parcel Number: 014884207
 Location: 50233 SPENCER LN – FRISCO
 Subdivision: SPENCERS WOOD SEC 2
 Legal Description: LOT: 7 BLK: SEC: 2

Owner Name: CHARLES A KLEIN
 Owner Mail Address: PO BOX 437 - FRISCO, NC 27936
 Owner Contact Information:

Contractor Name: PAMLICO AIR INC
 Contractor Mail Address: PO BOX 579 - BUXTON, NC 27920
 Contractor Phone: 252-995-5435
 Contractor NC License#: L15256

DETAILS

UNITS:	1.00	Cost of Job:	\$5,000
Number of Units:	1		
Electrical Contractor ID:	30600-L	MECHANICAL PROJECT FEE:	\$150.00

Comments: 1 OUTDOOR UNIT; A-247

The owner and builder are responsible to comply with all regulations and laws, and should personally inspect all construction and be certain to comply with all zoning regulations and building setbacks. The applicant certifies that the information on this permit is correct. That he is owner or duly authorized agent of owner. That all construction shall be as shown on the submitted plans and specifications that he understands this permit is valid for six months and may be revoked for failure to comply with applicable regulations and laws.

Call Building Inspector (24 Hours in advance) for inspections at Dare County Offices Manteo Office 252.475.5870, Northern Beach Office 252.475.5871 or Frisco Office 252.475.5878

Applicant Signature: John Jann 6-17-19 PAMLICO AIR INC

Inspector Signature: WT/CT 6/5/19 LMF



County of Dare
 Planning Office
 PO Box Drawer 1000
 Manteo NC 27954

Manteo: (252) 475-5870
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MECHANICAL PROJECT

MECHANICAL PROJECT#: MECH-331

06/05/2019

Parcel Number: 013070000
 Location: 26211 JOLLY ROGER RD – SALVO
 Subdivision: HATTERAS COLONY SEC B
 Legal Description: LOT: 30 BLK: SEC: B

Owner Name: FRANK MANGUM REALTY INC
 Owner Mail Address: 1221 EXECUTIVE BLVD STE 104 - CHESAPEAKE, VA 23320
 Owner Contact Information:

Contractor Name: PAMLICO AIR INC
 Contractor Mail Address: PO BOX 579 - BUXTON, NC 27920
 Contractor Phone: 252-995-5435
 Contractor NC License#: L15256

DETAILS

UNITS:	1.00	Cost of Job:	\$5,950
Number of Units:	1		
Electrical Contractor ID:	30600-L	MECHANICAL PROJECT FEE:	\$150.00

Comments: 1 INDOOR/OUTDOOR SYSTEM; A-244

The owner and builder are responsible to comply with all regulations and laws, and should personally inspect all construction and be certain to comply with all zoning regulations and building setbacks. The applicant certifies that the information on this permit is correct. That he is owner or duly authorized agent of owner. That all construction shall be as shown on the submitted plans and specifications that he understands this permit is valid for six months and may be revoked for failure to comply with applicable regulations and laws.

Call Building Inspector (24 Hours in advance) for inspections at Dare County Offices Manteo Office 252.475.5870, Northern Beach Office 252.475.5871 or Frisco Office 252.475.5878

Applicant Signature: *John Lunn 6-17-19* PAMLICO AIR INC

Inspector Signature: *CH/CT 6/5/19* LMF



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 Frisco: (252) 475-5878

MECHANICAL PROJECT

MECHANICAL PROJECT#: MECH-332

06/05/2019

Parcel Number: 013472000
 Location: 40226 DOLPHIN LN – AVON
 Subdivision: HATTERAS COLONY SEC 1
 Legal Description: LOT: 85 BLK: SEC: 1

Owner Name: KENRICK J ALBAUGH
 Owner Mail Address: PO BOX 90 - AVON, NC 27915
 Owner Contact Information:

Contractor Name: PAMLICO AIR INC
 Contractor Mail Address: PO BOX 579 - BUXTON, NC 27920
 Contractor Phone: 252-995-5435
 Contractor NC License#: L15256

DETAILS

UNITS:	1.00	Cost of Job:	\$6,250
Number of Units:	1		
Electrical Contractor ID:	30600-L	MECHANICAL PROJECT FEE:	\$150.00

Comments: 1 INDOOR/OUTDOOR SYSTEM; A-245

The owner and builder are responsible to comply with all regulations and laws, and should personally inspect all construction and be certain to comply with all zoning regulations and building setbacks. The applicant certifies that the information on this permit is correct. That he is owner or duly authorized agent of owner. That all construction shall be as shown on the submitted plans and specifications that he understands this permit is valid for six months and may be revoked for failure to comply with applicable regulations and laws.

Call Building Inspector (24 Hours in advance) for inspections at Dare County Offices Manteo Office 252.475.5870, Northern Beach Office 252.475.5871 or Frisco Office 252.475.5878

Applicant Signature: *[Signature]* 6-12-19 PAMLICO AIR INC

Inspector Signature: *CH/LT 6/5/19* LMF



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MECHANICAL PROJECT

MECHANICAL PROJECT#: MECH-333

06/05/2019

Parcel Number: 012029000
 Location: 50452 TIMBER TRL – FRISCO
 Subdivision: INDIANTOWN SHORES
 Legal Description: LOT: 27 BLK: B SEC:

Owner Name: WILLARD DEAN JR RUSSELL
 Owner Mail Address: 38 CLARK LN - FALLING WATERS, WV 25419
 Owner Contact Information:

Contractor Name: PAMLICO AIR INC
 Contractor Mail Address: PO BOX 579 - BUXTON, NC 27920
 Contractor Phone: 252-995-5435
 Contractor NC License#: L15256

DETAILS

UNITS:	1.00	Cost of Job:	\$5,950
Number of Units:	1		
Electrical Contractor ID:	30600-L	MECHANICAL PROJECT FEE:	\$150.00

Comments: 1 INDOOR/OUTDOOR SYSTEM; A-246

The owner and builder are responsible to comply with all regulations and laws, and should personally inspect all construction and be certain to comply with all zoning regulations and building setbacks. The applicant certifies that the information on this permit is correct. That he is owner or duly authorized agent of owner. That all construction shall be as shown on the submitted plans and specifications that he understands this permit is valid for six months and may be revoked for failure to comply with applicable regulations and laws.

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Applicant Signature: *Willard Dean Jr Russell* 6-17-19 PAMLICO AIR INC

Inspector Signature: *WJ/LJ 6/5/19* LMF



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 Frisco: (252) 475-5878

MECHANICAL PROJECT

MECHANICAL PROJECT#: MECH-336

06/05/2019

Parcel Number: 015535000
 Location: 57176 PRICILLA CURVE RD – HATTERAS
 Subdivision: SUBDIVISION - NONE
 Legal Description: LOT: BLK: SEC:

Owner Name: LARRY H DEMPSEY
 Owner Mail Address: P O BOX 427 - P O BOX 427 - ENFIELD, NC 27823
 Owner Contact Information:

Contractor Name: CALLAHAN HVAC REPAIRS AND SERVICE LLC
 Contractor Mail Address: PO BOX 53 - HATTERAS, NC 27943
 Contractor Phone: 252-986-2757
 Contractor NC License#: L17825

DETAILS

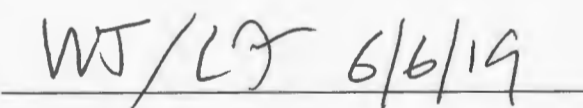
UNITS:	1.00	Cost of Job:	\$5,500
Number of Units:	1		
Electrical Contractor ID:	19768-L	MECHANICAL PROJECT FEE:	\$150.00

Comments: REPLACE 1 HP; A-252

The owner and builder are responsible to comply with all regulations and laws, and should personally inspect all construction and be certain to comply with all zoning regulations and building setbacks. The applicant certifies that the information on this permit is correct. That he is owner or duly authorized agent of owner. That all construction shall be as shown on the submitted plans and specifications that he understands this permit is valid for six months and may be revoked for failure to comply with applicable regulations and laws.

Call Building Inspector (24 Hours in advance) for inspections at Dare County Offices Manteo Office 252.475.5870, Northern Beach Office 252.475.5871 or Frisco Office 252.475.5878

Applicant Signature:  CALLAHAN HVAC REPAIRS AND SERVICE LLC

Inspector Signature:  LMF

Application Reference# 252 on 06/05/2019



County of Dare
 Planning Office
 PO Box Drawer 1000
 Manteo NC 27954

Manteo: (252) 475-5870
 Northern Beach: (252) 475-5871
 Frisco: (252) 475-5878

MECHANICAL PROJECT

MECHANICAL PROJECT#: MECH-337

06/05/2019

Parcel Number: 015580000
 Location: 57095 KOHLER DR – HATTERAS
 Subdivision: SUBDIVISION - NONE
 Legal Description: LOT: BLK: SEC:

Owner Name: RAMONA WALTERS
 Owner Mail Address: P O BOX 456 - HATTERAS, NC 27943
 Owner Contact Information:

Contractor Name: CALLAHAN HVAC REPAIRS AND SERVICE LLC
 Contractor Mail Address: PO BOX 53 - HATTERAS, NC 27943
 Contractor Phone: 252-986-2757
 Contractor NC License#: L17825

DETAILS

UNITS:	1.00	Cost of Job:	\$5,500
Number of Units:	1		
Electrical Contractor ID:	19768-L	MECHANICAL PROJECT FEE:	\$150.00

Comments: REPLACE 1 HP; A-253

The owner and builder are responsible to comply with all regulations and laws, and should personally inspect all construction and be certain to comply with all zoning regulations and building setbacks. The applicant certifies that the information on this permit is correct. That he is owner or duly authorized agent of owner. That all construction shall be as shown on the submitted plans and specifications that he understands this permit is valid for six months and may be revoked for failure to comply with applicable regulations and laws.

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Applicant Signature:  CALLAHAN HVAC REPAIRS AND SERVICE LLC

Inspector Signature: WJ/LJ 6/6/19 LMF

Application Reference# 253 on 06/05/2019



County of Dare
 Planning Office
 PO Box Drawer 1000
 Manteo NC 27954

Manteo: (252) 475-5870
 Northern Beach: (252) 475-5871
 Frisco: (252) 475-5878

MECHANICAL PROJECT

MECHANICAL PROJECT#: MECH-340

06/06/2019

Parcel Number: 016066003
 Location: 57228 SUMMERPLACE DR – HATTERAS
 Subdivision: SUMMERPLACE
 Legal Description: LOT: 3 BLK: SEC:

Owner Name: JACK D LEVIS
 Owner Mail Address: 2775 CHESTNUT RUN RD - YORK, PA 17402
 Owner Contact Information:

Contractor Name: C BREEZE HEATING AND AIR CONDITIONING LL
 Contractor Mail Address: PO BOX 801 - AVON, NC 27915
 Contractor Phone: 252-564-4031
 Contractor NC License#: L31244

DETAILS RESIDENTIAL

UNITS: 1.00 Cost of Job: \$3,400
 Electrical Contractor ID: SP PH 32045

MECHANICAL PROJECT FEE: \$150.00

Comments: 1 OUTDOOR SYSTEM; A-254

The owner and builder are responsible to comply with all regulations and laws, and should personally inspect all construction and be certain to comply with all zoning regulations and building setbacks. The applicant certifies that the information on this permit is correct. That he is owner or duly authorized agent of owner. That all construction shall be as shown on the submitted plans and specifications that he understands this permit is valid for six months and may be revoked for failure to comply with applicable regulations and laws.

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Applicant Signature: Ky H 6/6/19 C BREEZE HEATING AND AIR CONDITIONING LL

Inspector Signature: WJ/LT 6/6/19 LMF

Application Reference # 254 on 06/05/2019



County of Dare
 Planning Office
 PO Box Drawer 1000
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Manteo: (252) 475-5870
 Northern Beach: (252) 475-5871
 Frisco: (252) 475-5878

MECHANICAL PROJECT

MECHANICAL PROJECT#: MECH-342

06/06/2019

Parcel Number: 011730000
 Location: 50118 BLACKBEARDS CT – FRISCO
 Subdivision: BRIGANDS BAY
 Legal Description: LOT: 135 BLK: SEC:

Owner Name: HURLEY MARSHALL BOARD
 Owner Mail Address: 3539 OLD GLENOLA RD - ARCHDALE, NC 27263
 Owner Contact Information:

Contractor Name: C BREEZE HEATING AND AIR CONDITIONING LL
 Contractor Mail Address: PO BOX 801 - AVON, NC 27915
 Contractor Phone: 252-564-4031
 Contractor NC License#: L31244

DETAILS RESIDENTIAL

UNITS: 1.00 Cost of Job: \$6,100
 Electrical Contractor ID: SP PH 32045

MECHANICAL PROJECT FEE: \$150.00

Comments: 1 INDOOR/OUTDOOR SYSTEM; A-256

The owner and builder are responsible to comply with all regulations and laws, and should personally inspect all construction and be certain to comply with all zoning regulations and building setbacks. The applicant certifies that the information on this permit is correct. That he is owner or duly authorized agent of owner. That all construction shall be as shown on the submitted plans and specifications that he understands this permit is valid for six months and may be revoked for failure to comply with applicable regulations and laws.

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Applicant Signature: *Ky/Hy* 6/11/19 C BREEZE HEATING AND AIR CONDITIONING LL

Inspector Signature: *WJ/LJ* 6/6/19 LMF

Application Reference # 256 on 06/05/2019



County of Dare
Planning Office
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Manteo: (252) 475-5870
Northern Beach: (252) 475-5871
Frisco: (252) 475-5878

MECHANICAL PROJECT

MECHANICAL PROJECT#: MECH-343

06/06/2019

Parcel Number: 015858035
Location: 57244 FLAMBEAU RD – HATTERAS
Subdivision: HATTERAS COLONY SOUTH
Legal Description: LOT: 35 BLK: SEC: 1

Owner Name: JAMES C WELLER
Owner Mail Address: 749 HOLLY DR N - ANNAPOLIS, MD 21409
Owner Contact Information:

Contractor Name: C BREEZE HEATING AND AIR CONDITIONING LL
Contractor Mail Address: PO BOX 801 - AVON, NC 27915
Contractor Phone: 252-564-4031
Contractor NC License#: L31244

DETAILS RESIDENTIAL


UNITS: 1.00 Cost of Job: \$3,450
Electrical Contractor ID: SP PH 32045

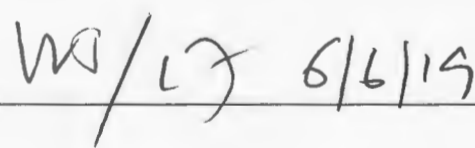
MECHANICAL PROJECT FEE: \$150.00

Comments: 1 OUTDOOR SYSTEM; A-257

The owner and builder are responsible to comply with all regulations and laws, and should personally inspect all construction and be certain to comply with all zoning regulations and building setbacks. The applicant certifies that the information on this permit is correct. That he is owner or duly authorized agent of owner. That all construction shall be as shown on the submitted plans and specifications that he understands this permit is valid for six months and may be revoked for failure to comply with applicable regulations and laws.

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Applicant Signature:  6-11-19 C BREEZE HEATING AND AIR CONDITIONING LL

Inspector Signature:  6/6/19 LMF

Application Reference # 257 on 06/05/2019



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 Manteo NC 27954

Manteo: (252) 475-5870
 Northern Beach: (252) 475-5871
 Frisco: (252) 475-5878

MECHANICAL PROJECT

MECHANICAL PROJECT#: MECH-344

06/06/2019

Parcel Number: 014776000
 Location: 40052 REEF DR – AVON
 Subdivision: PORT AVON
 Legal Description: LOT: 3 BLK: SEC:

Owner Name: MICHAEL M ABADIE
 Owner Mail Address: 1166 MAHOGANY LN W - CROWNSVILLE, MD 21032
 Owner Contact Information:

Contractor Name: C BREEZE HEATING AND AIR CONDITIONING LL
 Contractor Mail Address: PO BOX 801 - AVON, NC 27915
 Contractor Phone: 252-564-4031
 Contractor NC License#: L31244

DETAILS RESIDENTIAL

UNITS: 1.00 Cost of Job: \$3,400
 Electrical Contractor ID: SP PH 32045

MECHANICAL PROJECT FEE: \$150.00

Comments: 1 OUTDOOR SYSTEM; A-258

The owner and builder are responsible to comply with all regulations and laws, and should personally inspect all construction and be certain to comply with all zoning regulations and building setbacks. The applicant certifies that the information on this permit is correct. That he is owner or duly authorized agent of owner. That all construction shall be as shown on the submitted plans and specifications that he understands this permit is valid for six months and may be revoked for failure to comply with applicable regulations and laws.

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Applicant Signature: King King 6/11/19 C BREEZE HEATING AND AIR CONDITIONING LL

Inspector Signature: CH/LF 6/6/19 LMF

Application Reference # 258 on 06/05/2019



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 Planning Office
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 Frisco: (252) 475-5878

MECHANICAL PROJECT

MECHANICAL PROJECT#: MECH-345

06/06/2019

Parcel Number: 014635000
 Location: 40183 MCMULLEN RD – AVON
 Subdivision: SUBDIVISION - NONE
 Legal Description: LOT: 1 BLK: SEC:

Owner Name: HARVEY D SCARBOROUGH
 Owner Mail Address: P O BOX 347 - AVON, NC 27915
 Owner Contact Information:

Contractor Name: C BREEZE HEATING AND AIR CONDITIONING LL
 Contractor Mail Address: PO BOX 801 - AVON, NC 27915
 Contractor Phone: 252-564-4031
 Contractor NC License#: L31244

DETAILS RESIDENTIAL

UNITS: 1.00 Cost of Job: \$3,500
 Electrical Contractor ID: SP PH 32045

MECHANICAL PROJECT FEE: \$150.00

Comments: 1 OUTDOOR SYSTEM; A-259

The owner and builder are responsible to comply with all regulations and laws, and should personally inspect all construction and be certain to comply with all zoning regulations and building setbacks. The applicant certifies that the information on this permit is correct. That he is owner or duly authorized agent of owner. That all construction shall be as shown on the submitted plans and specifications that he understands this permit is valid for six months and may be revoked for failure to comply with applicable regulations and laws.

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Applicant Signature: *[Signature]* 6-11-19 C BREEZE HEATING AND AIR CONDITIONING LL

Inspector Signature: *CH/LT 6/6/19* LMF

Application Reference # 259 on 06/05/2019



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 Planning Office
 PO Box Drawer 1000
 Manteo NC 27954

Manteo: (252) 475-5870
 Northern Beach: (252) 475-5871
 Frisco: (252) 475-5878

MECHANICAL PROJECT

MECHANICAL PROJECT#: MECH-346

06/06/2019

Parcel Number: 015823000
 Location: 58206 SAND RD – HATTERAS
 Subdivision: NITA B BALLANCE
 Legal Description: LOT: 18 BLK: SEC:

Owner Name: JAMES A TEGELER
 Owner Mail Address: 78 HERITAGE DR - GETTYSBURG, PA 17325
 Owner Contact Information:

Contractor Name: C BREEZE HEATING AND AIR CONDITIONING LL
 Contractor Mail Address: PO BOX 801 - AVON, NC 27915
 Contractor Phone: 252-564-4031
 Contractor NC License#: L31244

DETAILS RESIDENTIAL

UNITS: 1.00 Cost of Job: \$6,000
 Electrical Contractor ID: SP PH 32045

MECHANICAL PROJECT FEE: \$150.00

Comments: 1 INDOOR/OUTDOOR SYSTEM; A-260

The owner and builder are responsible to comply with all regulations and laws, and should personally inspect all construction and be certain to comply with all zoning regulations and building setbacks. The applicant certifies that the information on this permit is correct. That he is owner or duly authorized agent of owner. That all construction shall be as shown on the submitted plans and specifications that he understands this permit is valid for six months and may be revoked for failure to comply with applicable regulations and laws.

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Applicant Signature: Kylynn 6-11-19 C BREEZE HEATING AND AIR CONDITIONING LL

Inspector Signature: WJ/LJ 6/6/19 LMF

Application Reference # 260 on 06/05/2019



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 PO Box Drawer 1000
 Manteo NC 27954

Manteo: (252) 475-5870
 Northern Beach: (252) 475-5871
 Frisco: (252) 475-5878

MECHANICAL PROJECT

MECHANICAL PROJECT#: MECH-347

06/06/2019

Parcel Number: 013813000
 Location: 39167 N ALBACORE LN – AVON
 Subdivision: HATTERAS COLONY SEC 4
 Legal Description: LOT: 183 BLK: SEC: 4

Owner Name: R & R BROTHERS LLC
 Owner Mail Address: P O BOX 450 - AVON, NC 27915
 Owner Contact Information: 995-4477

Contractor Name: C BREEZE HEATING AND AIR CONDITIONING LL
 Contractor Mail Address: PO BOX 801 - AVON, NC 27915
 Contractor Phone: 252-564-4031
 Contractor NC License#: L31244

DETAILS RESIDENTIAL

UNITS: 1.00 Cost of Job: \$5,900
 Electrical Contractor ID: SP PH 32045

MECHANICAL PROJECT FEE: \$150.00

Comments: 1 INDOOR/OUTDOOR SYSTEM; A-261

The owner and builder are responsible to comply with all regulations and laws, and should personally inspect all construction and be certain to comply with all zoning regulations and building setbacks. The applicant certifies that the information on this permit is correct. That he is owner or duly authorized agent of owner. That all construction shall be as shown on the submitted plans and specifications that he understands this permit is valid for six months and may be revoked for failure to comply with applicable regulations and laws.

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Applicant Signature: *[Signature]* 6-11-19 C BREEZE HEATING AND AIR CONDITIONING LL

Inspector Signature: *[Signature]* 6/6/19 LMF

Application Reference # 261 on 06/05/2019



County of Dare
 Planning Office
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 Manteo NC 27954

Manteo: (252) 475-5870
 Northern Beach: (252) 475-5871
 Frisco: (252) 475-5878

MECHANICAL PROJECT

MECHANICAL PROJECT#: MECH-348

06/06/2019

Parcel Number: 013778000
 Location: 39164 S ALBACORE LN – AVON
 Subdivision: HATTERAS COLONY SEC 4
 Legal Description: LOT: 145 BLK: SEC: 4

Owner Name: SECOND STAR TO THE RIGHT LLC
 Owner Mail Address: 42969 BUNA MAE LN - LEESBURG, VA 20176
 Owner Contact Information:

Contractor Name: C BREEZE HEATING AND AIR CONDITIONING LL
 Contractor Mail Address: PO BOX 801 - AVON, NC 27915
 Contractor Phone: 252-564-4031
 Contractor NC License#: L31244

DETAILS RESIDENTIAL

UNITS: 1.00 Cost of Job: \$5,900
 Electrical Contractor ID: SP PH 32045

MECHANICAL PROJECT FEE: \$150.00

Comments: 1 INDOOR/OUTDOOR SYSTEM; A-262

The owner and builder are responsible to comply with all regulations and laws, and should personally inspect all construction and be certain to comply with all zoning regulations and building setbacks. The applicant certifies that the information on this permit is correct. That he is owner or duly authorized agent of owner. That all construction shall be as shown on the submitted plans and specifications that he understands this permit is valid for six months and may be revoked for failure to comply with applicable regulations and laws.

Call Building Inspector (24 Hours in advance) for inspections at Dare County Offices Manteo Office 252.475.5870, Northern Beach Office 252.475.5871 or Frisco Office 252.475.5878

Applicant Signature: King/Hay 6-11-19 C BREEZE HEATING AND AIR CONDITIONING LL

Inspector Signature: CH/LT 6/6/19 LMF

Application Reference # 262 on 06/06/2019



County of Dare
 Planning Office
 PO Box Drawer 1000
 Manteo NC 27954

Manteo: (252) 475-5870
 Northern Beach: (252) 475-5871
 Frisco: (252) 475-5878

MECHANICAL PROJECT

MECHANICAL PROJECT#: MECH-349

06/06/2019

Parcel Number: 016819000
 Location: 47968 BUXTON BACK RD – BUXTON
 Subdivision: SUBDIVISION - NONE
 Legal Description: LOT: BLK: SEC:

Owner Name: PATRICIA P JENNETTE
 Owner Mail Address: 1740 SAINT LUKE RD - WOODSTOCK, VA 22664
 Owner Contact Information:

Contractor Name: C BREEZE HEATING AND AIR CONDITIONING LL
 Contractor Mail Address: PO BOX 801 - AVON, NC 27915
 Contractor Phone: 252-564-4031
 Contractor NC License#: L31244

DETAILS RESIDENTIAL

UNITS: 1.00 Cost of Job: \$7,100
 Electrical Contractor ID: SP PH 32045

MECHANICAL PROJECT FEE: \$150.00

Comments: 1 INDOOR/OUTDOOR SYSTEM; A-263

The owner and builder are responsible to comply with all regulations and laws, and should personally inspect all construction and be certain to comply with all zoning regulations and building setbacks. The applicant certifies that the information on this permit is correct. That he is owner or duly authorized agent of owner. That all construction shall be as shown on the submitted plans and specifications that he understands this permit is valid for six months and may be revoked for failure to comply with applicable regulations and laws.

Call Building Inspector (24 Hours in advance) for inspections at Dare County Offices Manteo Office 252.475.5870, Northern Beach Office 252.475.5871 or Frisco Office 252.475.5878

Applicant Signature: King/Hy 6-11-19 C BREEZE HEATING AND AIR CONDITIONING LL

Inspector Signature: WJ/LA 6/6/19 LMF

Application Reference # 263 on 06/06/2019



County of Dare
 Planning Office
 PO Box Drawer 1000
 Manteo NC 27954

Manteo: (252) 475-5870
 Northern Beach: (252) 475-5871
 Frisco: (252) 475-5878

MECHANICAL PROJECT

MECHANICAL PROJECT#: MECH-350

06/06/2019

Parcel Number: 012121001
 Location: 50196 PARADISE DR – FRISCO
 Subdivision: SUBDIVISION - NONE
 Legal Description: LOT: BLK: SEC:

Owner Name: KELLY K WILSON
 Owner Mail Address: P O BOX 921 - P O BOX 921 - AVON, NC 27915
 Owner Contact Information:

Contractor Name: C BREEZE HEATING AND AIR CONDITIONING LL
 Contractor Mail Address: PO BOX 801 - AVON, NC 27915
 Contractor Phone: 252-564-4031
 Contractor NC License#: L31244

DETAILS RESIDENTIAL

UNITS: 1.00 Cost of Job: \$6,200
 Electrical Contractor ID: SP PH 32045

MECHANICAL PROJECT FEE: \$150.00

Comments: 1 INDOOR/OUTDOOR SYSTEM; A-264

The owner and builder are responsible to comply with all regulations and laws, and should personally inspect all construction and be certain to comply with all zoning regulations and building setbacks. The applicant certifies that the information on this permit is correct. That he is owner or duly authorized agent of owner. That all construction shall be as shown on the submitted plans and specifications that he understands this permit is valid for six months and may be revoked for failure to comply with applicable regulations and laws.

Call Building Inspector (24 Hours in advance) for inspections at Dare County Offices Manteo Office 252.475.5870, Northern Beach Office 252.475.5871 or Frisco Office 252.475.5878

Applicant Signature: Kelly K Wilson 6-11-19 C BREEZE HEATING AND AIR CONDITIONING LL

Inspector Signature: WJ/LT 6/6/19 LMF

Application Reference # 264 on 06/06/2019



County of Dare
Planning Office
PO Box Drawer 1000
Manteo NC 27954

Manteo: (252) 475-5870
Northern Beach: (252) 475-5871
Frisco: (252) 475-5878

WMECHANICAL PROJECT

MECHANICAL PROJECT#: MECH-351

06/07/2019

Parcel Number: 013200011
Location: 27243 FARROW DR - SALVO
Subdivision: FARROW SHORES
Legal Description: LOT: 11 BLK: SEC:

Owner Name: RICHARD W TTEE BARCUS
Owner Mail Address: 11143 GLADE DR - RESTON, VA 20191
Owner Contact Information:

Contractor Name: NORTH CAROLINA AIR CONDITIONING INC
Contractor Mail Address: PO BOX 2209 - KITTY HAWK, NC 27942
Contractor Phone: 252-261-3013
Contractor NC License#: L19037

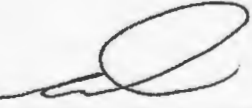
DETAILS RESIDENTIAL

UNITS: 1.00 Cost of Job: \$3,865
Electrical Contractor ID: 23856-L
MECHANICAL PROJECT FEE: \$150.00

Comments: REPLACEMENT OF UP HEAT PUMP W/ 3 TON 14 SEER TRANE EQUIPMENT

The owner and builder are responsible to comply with all regulations and laws, and should personally inspect all construction and be certain to comply with all zoning regulations and building setbacks. The applicant certifies that the information on this permit is correct. That he is owner or duly authorized agent of owner. That all construction shall be as shown on the submitted plans and specifications that he understands this permit is valid for six months and may be revoked for failure to comply with applicable regulations and laws.

Call Building Inspector (24 Hours in advance) for inspections at Dare County Offices Manteo Office 252.475.5870, Northern Beach Office 252.475.5871 or Frisco Office 252.475.5878

Applicant Signature:  NORTH CAROLINA AIR CONDITIONING INC

Inspector Signature: WAYLAND JEANETTE AYT

Application Reference # 269 on 06/07/2019



County of Dare
Planning Office
PO Box Drawer 1000
Manteo NC 27954

Manteo: (252) 475-5870
Northern Beach: (252) 475-5871
Frisco: (252) 475-5878

MECHANICAL PROJECT

MECHANICAL PROJECT#: MECH-368

06/11/2019

Parcel Number: 013549000
Location: 39235 WAHOO CIR - AVON
Subdivision: HATTERAS COLONY SEC 2
Legal Description: LOT: 1 BLK: SEC: 2

Owner Name: TOSHIKO N RECKNER
Owner Mail Address: 36 HOLLY COVE LN - DOVER, DE 19901
Owner Contact Information:

Contractor Name: AIR HANDLERS OBX
Contractor Mail Address: PO BOX 309 - HARBINGER, NC 27941
Contractor Phone: 252-491-8637
Contractor NC License#: L26599

DETAILS RESIDENTIAL

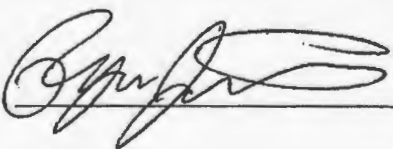
UNITS: 1.00 Cost of Job: \$3,958
Electrical Contractor ID: 32935

MECHANICAL PROJECT FEE: \$150.00

Comments: REMOVE AND REPLACE 2 T 14 SEER HEAT PUMP ONLY

The owner and builder are responsible to comply with all regulations and laws, and should personally inspect all construction and be certain to comply with all zoning regulations and building setbacks. The applicant certifies that the information on this permit is correct. That he is owner or duly authorized agent of owner. That all construction shall be as shown on the submitted plans and specifications that he understands this permit is valid for six months and may be revoked for failure to comply with applicable regulations and laws.

Call Building Inspector (24 Hours In advance) for inspections at Dare County Offices Manteo Office 252.475.5870, Northern Beach Office 252.475.5871 or Frisco Office 252.475.5878

Applicant Signature:  AIR HANDLERS OBX

Inspector Signature: WAYLAND JEANETTE AYT

Application Reference # 280 on 06/11/2019



County of Dare
Planning Office
PO Box Drawer 1000
Manteo NC 27954

Manteo: (252) 475-5870
Northern Beach: (252) 475-5871
Frisco: (252) 475-5878

MECHANICAL PROJECT

MECHANICAL PROJECT#: MECH-369

06/11/2019

Parcel Number: 011495000
Location: 23229 SEA OATS DR – RODANTHE
Subdivision: SURF-SIDE SEC 1
Legal Description: LOT: 6 BLK: SEC: 1

Owner Name: TIMOTHY R GRUBB
Owner Mail Address: 29 SANDERS LN - CREAMRIDGE, NJ 08514
Owner Contact Information:

Contractor Name: AIR HANDLERS OBX
Contractor Mail Address: PO BOX 309 - HARBINGER, NC 27941
Contractor Phone: 252-491-8637
Contractor NC License#: L26599

DETAILS RESIDENTIAL

UNITS: 1.00 Cost of Job: \$3,805
Electrical Contractor ID: 32935

MECHANICAL PROJECT FEE: \$150.00

Comments: REMOVE AND REPLACE 2T 14 SEER GOODMAN HEAT PUMP ONLY

The owner and builder are responsible to comply with all regulations and laws, and should personally inspect all construction and be certain to comply with all zoning regulations and building setbacks. The applicant certifies that the information on this permit is correct. That he is owner or duly authorized agent of owner. That all construction shall be as shown on the submitted plans and specifications that he understands this permit is valid for six months and may be revoked for failure to comply with applicable regulations and laws.

Call Building Inspector (24 Hours In advance) for inspections at Dare County Offices Manteo Office 252.475.5870, Northern Beach Office 252.475.5871 or Frisco Office 252.475.5878

Applicant Signature:  AIR HANDLERS OBX

Inspector Signature: WAYLAND JEANETTE AYT

Application Reference # 281 on 06/11/2019



County of Dare
 Planning Office
 PO Box Drawer 1000
 Manteo NC 27954

Manteo: (252) 475-5870
 Northern Beach: (252) 475-5871
 Frisco: (252) 475-5878

MECHANICAL PROJECT

MECHANICAL PROJECT#: MECH-371

06/11/2019

Parcel Number: 014297007
 Location: 25209 SEA ISLE SHORES LN – WAVES
 Subdivision: SEA ISLE SHORES
 Legal Description: LOT: 7 BLK: SEC:

Owner Name: TRACY T MCMAHON
 Owner Mail Address: 71 AUBLE RD - BLAIRSTOWN, NJ 07825
 Owner Contact Information:

Contractor Name: AUGUST AIR LLC
 Contractor Mail Address: PO BOX 726 - AVON, NC 27915
 Contractor Phone: 252-423-9101
 Contractor NC License#: L33886

DETAILS RESIDENTIAL

UNITS: 1.00 Cost of Job: \$3,000
 Electrical Contractor ID: 15935-L

MECHANICAL PROJECT FEE: \$150.00

Comments: 1 OUTDOOR SYSTEM; A-282

The owner and builder are responsible to comply with all regulations and laws, and should personally inspect all construction and be certain to comply with all zoning regulations and building setbacks. The applicant certifies that the information on this permit is correct. That he is owner or duly authorized agent of owner. That all construction shall be as shown on the submitted plans and specifications that he understands this permit is valid for six months and may be revoked for failure to comply with applicable regulations and laws.

Call Building Inspector (24 Hours in advance) for inspections at Dare County Offices Manteo Office 252.475.5870, Northern Beach Office 252.475.5871 or Frisco Office 252.475.5878

Applicant Signature: Jan C. Thomas Jr. AUGUST AIR LLC

Inspector Signature: CH/LJ 6/11/19 LMF

Application Reference # 282 on 06/11/2019



County of Dare
 Planning Office
 PO Box Drawer 1000
 Manteo NC 27954

Manteo: (252) 475-5870
 Northern Beach: (252) 475-5871
 Frisco: (252) 475-5878

MECHANICAL PROJECT

MECHANICAL PROJECT#: MECH-372

06/11/2019

Parcel Number: 015132022
 Location: 54185 OSPREY WAY – FRISCO
 Subdivision: SURF & SOUND PHASE 2
 Legal Description: LOT: 22 BLK: SEC: 2

Owner Name: JEFFREY T PROPST
 Owner Mail Address: 111 OXFORD SCHOOLD RD - TAYLORSVILLE, NC 28681
 Owner Contact Information:

Contractor Name: AUGUST AIR LLC
 Contractor Mail Address: PO BOX 726 - AVON, NC 27915
 Contractor Phone: 252-423-9101
 Contractor NC License#: L33886

DETAILS RESIDENTIAL

UNITS: 1.00 Cost of Job: \$3,000
 Electrical Contractor ID: 15935-L

MECHANICAL PROJECT FEE: \$150.00

Comments: 1 OUTDOOR SYSTEM; A-283

The owner and builder are responsible to comply with all regulations and laws, and should personally inspect all construction and be certain to comply with all zoning regulations and building setbacks. The applicant certifies that the information on this permit is correct. That he is owner or duly authorized agent of owner. That all construction shall be as shown on the submitted plans and specifications that he understands this permit is valid for six months and may be revoked for failure to comply with applicable regulations and laws.

Call Building Inspector (24 Hours in advance) for inspections at Dare County Offices Manteo Office 252.475.5870, Northern Beach Office 252.475.5871 or Frisco Office 252.475.5878

Applicant Signature: Jan C. Thomas AUGUST AIR LLC

Inspector Signature: WJ/LJ 6/11/19 LMF

Application Reference # 283 on 06/11/2019



County of Dare
 Planning Office
 PO Box Drawer 1000
 Manteo NC 27954

Manteo: (252) 475-5870
 Northern Beach: (252) 475-5871
 Frisco: (252) 475-5878

MECHANICAL PROJECT

MECHANICAL PROJECT#: MECH-376

06/11/2019

Parcel Number: 029619001
 Location: 25200 SEA ISLE HILLS CT – WAVES
 Subdivision: SEA ISLE HILLS SEC. 9
 Legal Description: LOT: 5 BLK: SEC: 9

Owner Name: JEANETTE M HOBSON
 Owner Mail Address: PO BOX 441 - RODANTHE, NC 27968
 Owner Contact Information:

Contractor Name: AMERICAN REFRIGERATION AND HEATING PUMP
 Contractor Mail Address: 47484 BUXTON BACK RD - BUXTON, NC 27920
 Contractor Phone: 252-305-4423
 Contractor NC License#: L29031

DETAILS RESIDENTIAL

UNITS: 1.00 Cost of Job: \$5,229
 Electrical Contractor ID: 15935-L

MECHANICAL PROJECT FEE: \$150.00

Comments: REPLACE 1 INDOOR UNIT AND 2 OUTDOOR UNITS; A-221

The owner and builder are responsible to comply with all regulations and laws, and should personally inspect all construction and be certain to comply with all zoning regulations and building setbacks. The applicant certifies that the information on this permit is correct. That he is owner or duly authorized agent of owner. That all construction shall be as shown on the submitted plans and specifications that he understands this permit is valid for six months and may be revoked for failure to comply with applicable regulations and laws.

Call Building Inspector (24 Hours in advance) for inspections at Dare County Offices Manteo Office 252.475.5870, Northern Beach Office 252.475.5871 or Frisco Office 252.475.5878

Applicant Signature: *[Handwritten Signature]* AMERICAN REFRIGERATION AND HEATING PUMP

Inspector Signature: *CH/CT 6/12/19* LMF

Application Reference # 221 on 06/03/2019



County of Dare
 Planning Office
 PO Box Drawer 1000
 Manteo NC 27954

Manteo: (252) 475-5870
 Northern Beach: (252) 475-5871
 Frisco: (252) 475-5878

MECHANICAL PROJECT

MECHANICAL PROJECT#: MECH-378

06/11/2019

Parcel Number: 015256000
 Location: 54212 TRENT DR – FRISCO
 Subdivision: HOLIDAY HAVEN
 Legal Description: LOT: 8 BLK: SEC:

Owner Name: J KIMBERLY B GOOLD
 Owner Mail Address: 311 49TH ST - VIRGINIA BEACH, VA 23451
 Owner Contact Information:

Contractor Name: C BREEZE HEATING AND AIR CONDITIONING LL
 Contractor Mail Address: PO BOX 801 - AVON, NC 27915
 Contractor Phone: 252-564-4031
 Contractor NC License#: L31244

DETAILS

UNITS:	1.00	Cost of Job:	\$3,450
Electrical Contractor ID:	SP PH 32045	MECHANICAL PROJECT FEE:	\$150.00

Comments: 1 OUTDOOR SYSTEM; A-291

The owner and builder are responsible to comply with all regulations and laws, and should personally inspect all construction and be certain to comply with all zoning regulations and building setbacks. The applicant certifies that the information on this permit is correct. That he is owner or duly authorized agent of owner. That all construction shall be as shown on the submitted plans and specifications that he understands this permit is valid for six months and may be revoked for failure to comply with applicable regulations and laws.

Call Building Inspector (24 Hours in advance) for inspections at Dare County Offices Manteo Office 252.475.5870, Northern Beach Office 252.475.5871 or Frisco Office 252.475.5878

Applicant Signature: Kim Hym 6/18/19 C BREEZE HEATING AND AIR CONDITIONING LL

Inspector Signature: WJ/CF 6/13/19 LMF

Application Reference # 291 on 06/11/2019



County of Dare
 Planning Office
 PO Box Drawer 1000
 Manteo NC 27954

Manteo: (252) 475-5870
 Northern Beach: (252) 475-5871
 Frisco: (252) 475-5878

MECHANICAL PROJECT

MECHANICAL PROJECT#: MECH-379

06/11/2019

Parcel Number: 017376000
 Location: 58224 DUNES DR – HATTERAS
 Subdivision: HATTERAS DUNES
 Legal Description: LOT: 17 BLK: SEC: 1

Owner Name: RECESS OBX LLC
 Owner Mail Address: 55 E ERIE ST # 3605 - CHICAGO, IL 60611
 Owner Contact Information:

Contractor Name: C BREEZE HEATING AND AIR CONDITIONING LL
 Contractor Mail Address: PO BOX 801 - AVON, NC 27915
 Contractor Phone: 252-564-4031
 Contractor NC License#: L31244

DETAILS RESIDENTIAL

UNITS: 1.00 Cost of Job: \$6,000
 Electrical Contractor ID: SP PH 32045

MECHANICAL PROJECT FEE: \$150.00

Comments: 1 INDOOR/OUTDOOR SYSTEM; A-290

The owner and builder are responsible to comply with all regulations and laws, and should personally inspect all construction and be certain to comply with all zoning regulations and building setbacks. The applicant certifies that the information on this permit is correct. That he is owner or duly authorized agent of owner. That all construction shall be as shown on the submitted plans and specifications that he understands this permit is valid for six months and may be revoked for failure to comply with applicable regulations and laws.

Call Building Inspector (24 Hours in advance) for inspections at Dare County Offices Manteo Office 252.475.5870, Northern Beach Office 252.475.5871 or Frisco Office 252.475.5878

Applicant Signature: Key/DA 6/18/19 C BREEZE HEATING AND AIR CONDITIONING LL

Inspector Signature: WJ/LJ 6/13/19 LMF

Application Reference # 290 on 06/11/2019



County of Dare
 Planning Office
 PO Box Drawer 1000
 Manteo NC 27954

Manteo: (252) 475-5870
 Northern Beach: (252) 475-5871
 Frisco: (252) 475-5878

MECHANICAL PROJECT

MECHANICAL PROJECT#: MECH-384

06/14/2019

Parcel Number: 015190000
 Location: 54098 MARLIN DR – FRISCO
 Subdivision: MARLIN VILLAGE
 Legal Description: LOT: 19 BLK: SEC:

Owner Name: TIMOTHY DANIEL
 Owner Mail Address: 110 BUCHANAN VALLEY RD - ORRTANNA, PA 17353
 Owner Contact Information:

Contractor Name: OBHC INC DBA ONE HOUR HEATING & AIR COND
 Contractor Mail Address: PO BOX 2600 - KILL DEVIL HILLS, NC 27948
 Contractor Phone: 252-441-1740
 Contractor NC License#: L12643

DETAILS RESIDENTIAL

UNITS: 2.00 · Cost of Job: \$11,818
 Electrical Contractor ID: 1593-00U

MECHANICAL PROJECT FEE: \$150.00

Comments: REPLACE 2 HVAC SYSTEM WITH 14 SEER 2 & TON CARRIER SYSTEM,

The owner and builder are responsible to comply with all regulations and laws, and should personally inspect all construction and be certain to comply with all zoning regulations and building setbacks. The applicant certifies that the information on this permit is correct. That he is owner or duly authorized agent of owner. That all construction shall be as shown on the submitted plans and specifications that he understands this permit is valid for six months and may be revoked for failure to comply with applicable regulations and laws.

Call Building Inspector (24 Hours in advance) for Inspections at Dare County Offices Manteo Office 252.475.5870, Northern Beach Office 252.475.5871 or Frisco Office 252.475.5878

Applicant Signature: *Timothy Daniel* OBHC INC DBA ONE HOUR HEATING & AIR COND

Inspector Signature: WAYLAND JEANETTE AYT

Application Reference # 299 on 06/14/2019



County of Dare
 Planning Office
 PO Box Drawer 1000
 Manteo NC 27954

Manteo: (252) 475-5870
 Northern Beach: (252) 475-5871
 Frisco: (252) 475-5878

MECHANICAL PROJECT

MECHANICAL PROJECT#: MECH-390

06/17/2019

Parcel Number: 031182000
 Location: 24246 CARIBBEAN WAY – RODANTHE
 Subdivision: ESTATES AT HATTERAS ISL RESORT
 Legal Description: LOT: 18R BLK: SEC:

Owner Name: DAVID LEE TART
 Owner Mail Address: 262 FREMONT AVE - DUBUQUE, IA 52003
 Owner Contact Information:

Contractor Name: PAMLICO AIR INC
 Contractor Mail Address: PO BOX 579 - BUXTON, NC 27920
 Contractor Phone: 252-995-5435
 Contractor NC License#: L15256

DETAILS RESIDENTIAL


UNITS: 1.00 Cost of Job: \$7,500
 Electrical Contractor ID: 30600-L

MECHANICAL PROJECT FEE: \$150.00

Comments: 1 INDOOR/OUTDOOR SYSTEM; A-309

The owner and builder are responsible to comply with all regulations and laws, and should personally inspect all construction and be certain to comply with all zoning regulations and building setbacks. The applicant certifies that the information on this permit is correct. That he is owner or duly authorized agent of owner. That all construction shall be as shown on the submitted plans and specifications that he understands this permit is valid for six months and may be revoked for failure to comply with applicable regulations and laws.

Call Building Inspector (24 Hours in advance) for inspections at Dare County Offices Manteo Office 252.475.5870, Northern Beach Office 252.475.5871 or Frisco Office 252.475.5878

Applicant Signature:  PAMLICO AIR INC

Inspector Signature: CH/CF 6/17/19 LMF

Application Reference # 309 on 06/17/2019



County of Dare
 Planning Office
 PO Box Drawer 1000
 Manteo NC 27954

Manteo: (252) 475-5870
 Northern Beach: (252) 475-5871
 Frisco: (252) 475-5878

MECHANICAL PROJECT

MECHANICAL PROJECT#: MECH-391

06/17/2019

Parcel Number: 013822000
 Location: 39000 BLUEFISH CT – AVON
 Subdivision: HATTERAS COLONY SEC 4
 Legal Description: LOT: PTS 193 & 194 BLK: SEC: 4

Owner Name: ROBERT LAWRENCE AND RENEE DOLORES
 Owner Mail Address: 821 CAMINO DE LAS TRAMPAS - SANTA FE, NM 87501
 Owner Contact Information:

Contractor Name: PAMLICO AIR INC
 Contractor Mail Address: PO BOX 579 - BUXTON, NC 27920
 Contractor Phone: 252-995-5435
 Contractor NC License#: L15256

DETAILS RESIDENTIAL

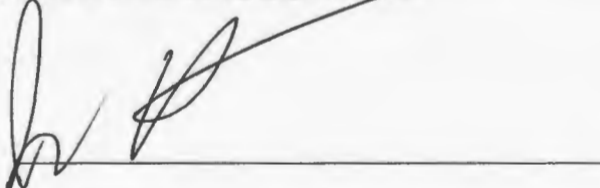
UNITS: 1.00 Cost of Job: \$5,950
 Electrical Contractor ID: 30600-L

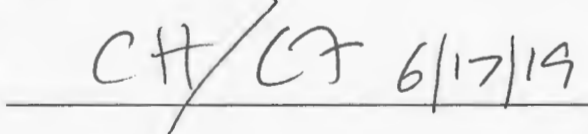
MECHANICAL PROJECT FEE: \$150.00

Comments: 1 INDOOR/OUTDOOR SYSTEM; A-308

The owner and builder are responsible to comply with all regulations and laws, and should personally inspect all construction and be certain to comply with all zoning regulations and building setbacks. The applicant certifies that the information on this permit is correct. That he is owner or duly authorized agent of owner. That all construction shall be as shown on the submitted plans and specifications that he understands this permit is valid for six months and may be revoked for failure to comply with applicable regulations and laws.

Call Building Inspector (24 Hours in advance) for inspections at Dare County Offices Manteo Office 252.475.5870, Northern Beach Office 252.475.5871 or Frisco Office 252.475.5878

Applicant Signature:  PAMLICO AIR INC

Inspector Signature:  LMF

Application Reference # 308 on 06/17/2019



County of Dare
 Planning Office
 PO Box Drawer 1000
 Manteo NC 27954

Manteo: (252) 475-5870
 Northern Beach: (252) 475-5871
 Frisco: (252) 475-5878

MECHANICAL PROJECT

MECHANICAL PROJECT#: MECH-393

06/17/2019

Parcel Number: 012962000
 Location: 26223 CUTLASS LN – SALVO
 Subdivision: HATTERAS COLONY SEC D
 Legal Description: LOT: 57 BLK: SEC: D

Owner Name: TED A TRUSTEES HAMILTON
 Owner Mail Address: 6 JIB CT - HAMPTON, VA 23664
 Owner Contact Information:

Contractor Name: R A HOY HEATING AND AIR CONDITIONING INC
 Contractor Mail Address: PO BOX 265 - KITTY HAWK, NC 27949
 Contractor Phone: 252-261-8178
 Contractor NC License#: L13056

DETAILS RESIDENTIAL

UNITS: 1.00 Cost of Job: \$3,541

Electrical Contractor ID: 22222L

MECHANICAL PROJECT FEE: \$150.00

Comments: CHANGE OUT 2 TON 14 SEER TRANE SYSTEM OUTDOOR AC UNIT ONLY

The owner and builder are responsible to comply with all regulations and laws, and should personally inspect all construction and be certain to comply with all zoning regulations and building setbacks. The applicant certifies that the information on this permit is correct. That he is owner or duly authorized agent of owner. That all construction shall be as shown on the submitted plans and specifications that he understands this permit is valid for six months and may be revoked for failure to comply with applicable regulations and laws.

Call Building Inspector (24 Hours in advance) for inspections at Dare County Offices Manteo Office 252.475.5870, Northern Beach Office 252.475.5871 or Frisco Office 252.475.5878

Applicant Signature:  R A HOY HEATING AND AIR CONDITIONING INC

Inspector Signature: WAYLAND JEANETTE AYT

Application Reference # 310 on 06/17/2019



County of Dare
 Planning Office
 PO Box Drawer 1000
 Manteo NC 27954

Manteo: (252) 475-5870
 Northern Beach: (252) 475-5871
 Frisco: (252) 475-5878

MECHANICAL PROJECT

MECHANICAL PROJECT#: MECH-396

06/17/2019

Parcel Number: 013360002
 Location: 39488 NC 12 HWY A2 – AVON
 Subdivision: PAMLICO POINT CONDOS
 Legal Description: LOT: UT A2 LOTS 1~2~3 BLK: SEC: 4

Owner Name: LINDA L KELLEY
 Owner Mail Address: 211 CREST CIR - WINCHESTER, VA 22602
 Owner Contact Information:

Contractor Name: C BREEZE HEATING AND AIR CONDITIONING LL
 Contractor Mail Address: PO BOX 801 - AVON, NC 27915
 Contractor Phone: 252-564-4031
 Contractor NC License#: L31244

DETAILS RESIDENTIAL

UNITS: 1.00 Cost of Job: \$6,100
 Electrical Contractor ID: SP PH 32045

MECHANICAL PROJECT FEE: \$150.00

Comments: 1 INDOOR/OUTDOOR SYSTEM; A-316

The owner and builder are responsible to comply with all regulations and laws, and should personally inspect all construction and be certain to comply with all zoning regulations and building setbacks. The applicant certifies that the information on this permit is correct. That he is owner or duly authorized agent of owner. That all construction shall be as shown on the submitted plans and specifications that he understands this permit is valid for six months and may be revoked for failure to comply with applicable regulations and laws.

Call Building Inspector (24 Hours in advance) for inspections at Dare County Offices Manteo Office 252.475.5870, Northern Beach Office 252.475.5871 or Frisco Office 252.475.5878

Applicant Signature: Mesa Marie Stevenson C BREEZE HEATING AND AIR CONDITIONING LL

Inspector Signature: CH/LA 6/18/19 LMF

Application Reference # 316 on 06/17/2019



County of Dare
 Planning Office
 PO Box Drawer 1000
 Manteo NC 27954

Manteo: (252) 475-5870
 Northern Beach: (252) 475-5871
 Frisco: (252) 475-5878

MECHANICAL PROJECT

MECHANICAL PROJECT#: MECH-397

06/17/2019

Parcel Number: 014277010
 Location: 25225 LA WAVES DR – WAVES
 Subdivision: LA WAVES SUBDIVISION
 Legal Description: LOT: 13 BLK: SEC: 1

Owner Name: BAB R YOUNG
 Owner Mail Address: 83 WINDING WAY - PLYMOUTH, MA 02360
 Owner Contact Information:

Contractor Name: C BREEZE HEATING AND AIR CONDITIONING LL
 Contractor Mail Address: PO BOX 801 - AVON, NC 27915
 Contractor Phone: 252-564-4031
 Contractor NC License#: L31244

DETAILS RESIDENTIAL

UNITS: 1.00 Cost of Job: \$6,100
 Electrical Contractor ID: SP PH 32045

MECHANICAL PROJECT FEE: \$150.00

Comments: 1 INDOOR/OUTDOOR SYSTEM; A-315

The owner and builder are responsible to comply with all regulations and laws, and should personally inspect all construction and be certain to comply with all zoning regulations and building setbacks. The applicant certifies that the information on this permit is correct. That he is owner or duly authorized agent of owner. That all construction shall be as shown on the submitted plans and specifications that he understands this permit is valid for six months and may be revoked for failure to comply with applicable regulations and laws.

Call Building Inspector (24 Hours in advance) for inspections at Dare County Offices Manteo Office 252.475.5870, Northern Beach Office 252.475.5871 or Frisco Office 252.475.5878

Applicant Signature: Mesa Marie Stevenson BREEZE HEATING AND AIR CONDITIONING LL

Inspector Signature: CH/CF 6/18/19 LMF

Application Reference # 315 on 06/17/2019



County of Dare
 Planning Office
 PO Box Drawer 1000
 Manteo NC 27954

Manteo: (252) 475-5870
 Northern Beach: (252) 475-5871
 Frisco: (252) 475-5878

MECHANICAL PROJECT

MECHANICAL PROJECT#: MECH-398

06/17/2019

Parcel Number: 014324212
 Location: 25289 SEA VISTA DR – WAVES
 Subdivision: ST WAVES PHASE 2
 Legal Description: LOT: 12 BLK: SEC:

Owner Name: GERALD M MCDONNELL
 Owner Mail Address: 1527 N TROOPER ROAD - P O BOX 889 - WORCESTER, PA 19490
 Owner Contact Information:

Contractor Name: C BREEZE HEATING AND AIR CONDITIONING LL
 Contractor Mail Address: PO BOX 801 - AVON, NC 27915
 Contractor Phone: 252-564-4031
 Contractor NC License#: L31244

DETAILS RESIDENTIAL

UNITS: 1.00 Cost of Job: \$5,900
 Electrical Contractor ID: SP PH 32045

MECHANICAL PROJECT FEE: \$150.00

Comments: 1 INDOOR/OUTDOOR SYSTEM; A-314

The owner and builder are responsible to comply with all regulations and laws, and should personally inspect all construction and be certain to comply with all zoning regulations and building setbacks. The applicant certifies that the information on this permit is correct. That he is owner or duly authorized agent of owner. That all construction shall be as shown on the submitted plans and specifications that he understands this permit is valid for six months and may be revoked for failure to comply with applicable regulations and laws.

Call Building Inspector (24 Hours in advance) for inspections at Dare County Offices Manteo Office 252.475.5870, Northern Beach Office 252.475.5871 or Frisco Office 252.475.5878

Applicant Signature: Mesa Marie Stewenson BREEZE HEATING AND AIR CONDITIONING LL

Inspector Signature: CH/LG 6/18/19 LMF

Application Reference # 314 on 06/17/2019



County of Dare
 Planning Office
 PO Box Drawer 1000
 Manteo NC 27954

Manteo: (252) 475-5870
 Northern Beach: (252) 475-5871
 Frisco: (252) 475-5878

MECHANICAL PROJECT

MECHANICAL PROJECT#: MECH-399

06/17/2019

Parcel Number: 014324107
 Location: 25206 SEA VISTA DR – WAVES
 Subdivision: ST WAVES PHASE 1
 Legal Description: LOT: 7 BLK: SEC:

Owner Name: R & R BROTHERS LLC
 Owner Mail Address: P O BOX 450 - AVON, NC 27915
 Owner Contact Information: 995-4477

Contractor Name: C BREEZE HEATING AND AIR CONDITIONING LL
 Contractor Mail Address: PO BOX 801 - AVON, NC 27915
 Contractor Phone: 252-564-4031
 Contractor NC License#: L31244

DETAILS RESIDENTIAL

UNITS: 1.00 Cost of Job: \$6,800
 Electrical Contractor ID: SP PH 32045

MECHANICAL PROJECT FEE: \$150.00

Comments: 1 INDOOR SYSTEM; A-313

The owner and builder are responsible to comply with all regulations and laws, and should personally inspect all construction and be certain to comply with all zoning regulations and building setbacks. The applicant certifies that the information on this permit is correct. That he is owner or duly authorized agent of owner. That all construction shall be as shown on the submitted plans and specifications that he understands this permit is valid for six months and may be revoked for failure to comply with applicable regulations and laws.

Call Building Inspector (24 Hours in advance) for inspections at Dare County Offices Manteo Office 252.475.5870, Northern Beach Office 252.475.5871 or Frisco Office 252.475.5878

Applicant Signature: Mesa Marie Stevenson C BREEZE HEATING AND AIR CONDITIONING LL

Inspector Signature: CH/CT 6/18/19 LMF

Application Reference # 313 on 06/17/2019



County of Dare
 Planning Office
 PO Box Drawer 1000
 Manteo NC 27954

Manteo: (252) 475-5870
 Northern Beach: (252) 475-5871
 Frisco: (252) 475-5878

MECHANICAL PROJECT

MECHANICAL PROJECT#: MECH-421

06/20/2019

Parcel Number: 011567000
 Location: 25006 MAC OCA CT – WAVES
 Subdivision: MAC-OCA REEF
 Legal Description: LOT: 6 BLK: SEC:

Owner Name: HARRISON B WILLIAMS
 Owner Mail Address: 3617 OVAL DR - ALEXANDRIA, VA 22305
 Owner Contact Information:

Contractor Name: VILLAGE AIR INC
 Contractor Mail Address: PO BOX 421 - RODANTHE, NC 27968
 Contractor Phone: 252-305-6149
 Contractor NC License#: L31489

DETAILS RESIDENTIAL

UNITS: 1.00 Cost of Job: \$3,200
 Electrical Contractor ID: 26975-I

MECHANICAL PROJECT FEE: \$150.00

Comments: INSTALL 1 HP; A-338

The owner and builder are responsible to comply with all regulations and laws, and should personally inspect all construction and be certain to comply with all zoning regulations and building setbacks. The applicant certifies that the information on this permit is correct. That he is owner or duly authorized agent of owner. That all construction shall be as shown on the submitted plans and specifications that he understands this permit is valid for six months and may be revoked for failure to comply with applicable regulations and laws.

Call Building Inspector (24 Hours in advance) for inspections at Dare County Offices Manteo Office 252.475.5870, Northern Beach Office 252.475.5871 or Frisco Office 252.475.5878

Applicant Signature: *Nate* VILLAGE AIR INC

Inspector Signature: *CH/LF 6/20/19* LMF

Application Reference # 338 on 06/20/2019



County of Dare
 Planning Office
 PO Box Drawer 1000
 Manteo NC 27954

Manteo: (252) 475-5870
 Northern Beach: (252) 475-5871
 Frisco: (252) 475-5878

MECHANICAL PROJECT

MECHANICAL PROJECT#: MECH-422

06/20/2019

Parcel Number: 028583000
 Location: 27037 OCEAN ST – SALVO
 Subdivision: SALVO BEACH NO 1
 Legal Description: LOT: 30 BLK: SEC:

Owner Name: RICHARD J OSMANSKI
 Owner Mail Address: 11 SENECA CT - PORT JEFFERSON STATI, NY 11776
 Owner Contact Information:

Contractor Name: VILLAGE AIR INC
 Contractor Mail Address: PO BOX 421 - RODANTHE, NC 27968
 Contractor Phone: 252-305-6149
 Contractor NC License#: L31489

DETAILS RESIDENTIAL

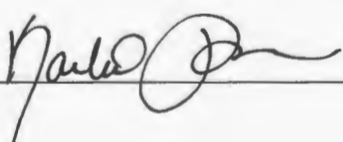
UNITS: 1.00 Cost of Job: \$6,000
 Electrical Contractor ID: 26975-I

MECHANICAL PROJECT FEE: \$150.00

Comments: INSTALL 1 HP AND 1 AIRHANDLER; A-337

The owner and builder are responsible to comply with all regulations and laws, and should personally inspect all construction and be certain to comply with all zoning regulations and building setbacks. The applicant certifies that the information on this permit is correct. That he is owner or duly authorized agent of owner. That all construction shall be as shown on the submitted plans and specifications that he understands this permit is valid for six months and may be revoked for failure to comply with applicable regulations and laws.

Call Building Inspector (24 Hours in advance) for inspections at Dare County Offices Manteo Office 252.475.5870, Northern Beach Office 252.475.5871 or Frisco Office 252.475.5878

Applicant Signature:  VILLAGE AIR INC

Inspector Signature: CH/LT 6/20/19 LMF

Application Reference # 337 on 06/20/2019



County of Dare
 Planning Office
 PO Box Drawer 1000
 Manteo NC 27954

Manteo: (252) 475-5870
 Northern Beach: (252) 475-5871
 Frisco: (252) 475-5878

MECHANICAL PROJECT

MECHANICAL PROJECT#: MECH-423

06/20/2019

Parcel Number: 013322000
 Location: 27239 PARK RD – SALVO
 Subdivision: SALVO BEACH NO 1
 Legal Description: LOT: 9 BLK: SEC:

Owner Name: LYNN BLATT JORDAN
 Owner Mail Address: PO BOX 734 - RODANTHE, NC 27968
 Owner Contact Information:

Contractor Name: VILLAGE AIR INC
 Contractor Mail Address: PO BOX 421 - RODANTHE, NC 27968
 Contractor Phone: 252-305-6149
 Contractor NC License#: L31489

DETAILS RESIDENTIAL

UNITS: 1.00 Cost of Job: \$2,500
 Electrical Contractor ID: 26975-I

MECHANICAL PROJECT FEE: \$150.00

Comments: INSTALL 1 HP; A-336

The owner and builder are responsible to comply with all regulations and laws, and should personally inspect all construction and be certain to comply with all zoning regulations and building setbacks. The applicant certifies that the information on this permit is correct. That he is owner or duly authorized agent of owner. That all construction shall be as shown on the submitted plans and specifications that he understands this permit is valid for six months and may be revoked for failure to comply with applicable regulations and laws.

Call Building Inspector (24 Hours in advance) for inspections at Dare County Offices Manteo Office 252.475.5870, Northern Beach Office 252.475.5871 or Frisco Office 252.475.5878

Applicant Signature: [Handwritten Signature] VILLAGE AIR INC

Inspector Signature: CH/LJ 6/20/19 LMF

Application Reference # 336 on 06/20/2019



County of Dare
 Planning Office
 PO Box Drawer 1000
 Manteo NC 27954

Manteo: (252) 475-5870
 Northern Beach: (252) 475-5871
 Frisco: (252) 475-5878

MECHANICAL PROJECT

MECHANICAL PROJECT#: MECH-424

06/20/2019

Parcel Number: 013309000
 Location: 27668 NC 12 HWY – SALVO
 Subdivision: SUBDIVISION - NONE
 Legal Description: LOT: BLK: SEC:

Owner Name: JOHN K FORT
 Owner Mail Address: 195 N FAIRVIEW AVE - SPARTANBURG, SC 29302
 Owner Contact Information:

Contractor Name: VILLAGE AIR INC
 Contractor Mail Address: PO BOX 421 - RODANTHE, NC 27968
 Contractor Phone: 252-305-6149
 Contractor NC License#: L31489

DETAILS RESIDENTIAL

UNITS: 1.00 Cost of Job: \$6,000
 Electrical Contractor ID: 26975-I

MECHANICAL PROJECT FEE: \$150.00

Comments: INSTALL 1 HP AND 1 AIRHANDLER; A-335

The owner and builder are responsible to comply with all regulations and laws, and should personally inspect all construction and be certain to comply with all zoning regulations and building setbacks. The applicant certifies that the information on this permit is correct. That he is owner or duly authorized agent of owner. That all construction shall be as shown on the submitted plans and specifications that he understands this permit is valid for six months and may be revoked for failure to comply with applicable regulations and laws.

Call Building Inspector (24 Hours in advance) for inspections at Dare County Offices Manteo Office 252.475.5870, Northern Beach Office 252.475.5871 or Frisco Office 252.475.5878

Applicant Signature: VILLAGE AIR INC

Inspector Signature: CH/CF 6/20/19 LMF

Application Reference # 335 on 06/20/2019



County of Dare
 Planning Office
 PO Box Drawer 1000
 Manteo NC 27954

Manteo: (252) 475-5870
 Northern Beach: (252) 475-5871
 Frisco: (252) 475-5878

MECHANICAL PROJECT

MECHANICAL PROJECT#: MECH-426

06/20/2019

Parcel Number: 026571001
 Location: 50114 NC 12 HWY – BUXTON
 Subdivision: WALLACE GRAY DIVISION
 Legal Description: LOT: PARCEL A BLK: SEC:

Owner Name: RAUNA C FULLER
 Owner Mail Address: P O BOX 634 - BUXTON, NC 27920
 Owner Contact Information:

Contractor Name: PAMLICO AIR INC
 Contractor Mail Address: PO BOX 579 - BUXTON, NC 27920
 Contractor Phone: 252-995-5435
 Contractor NC License#: L15256

DETAILS RESIDENTIAL

UNITS: 1.00 Cost of Job: \$5,950
 Electrical Contractor ID: 30600-L

MECHANICAL PROJECT FEE: \$150.00

Comments: 1 INDOOR/OUTDOOR SYSTEM; A-340

The owner and builder are responsible to comply with all regulations and laws, and should personally inspect all construction and be certain to comply with all zoning regulations and building setbacks. The applicant certifies that the information on this permit is correct. That he is owner or duly authorized agent of owner. That all construction shall be as shown on the submitted plans and specifications that he understands this permit is valid for six months and may be revoked for failure to comply with applicable regulations and laws.

Call Building Inspector (24 Hours in advance) for inspections at Dare County Offices Manteo Office 252.475.5870, Northern Beach Office 252.475.5871 or Frisco Office 252.475.5878

Applicant Signature: _____ PAMLICO AIR INC

Inspector Signature: WJ - LF 6/20/19 LMF

Application Reference # 340 on 06/20/2019



County of Dare
Planning Office
PO Box Drawer 1000
Manteo NC 27954

Manteo: (252) 475-5870
Northern Beach: (252) 475-5871
Frisco: (252) 475-5878

MECHANICAL PROJECT

MECHANICAL PROJECT#: MECH-433

06/21/2019

Parcel Number: 013066000
Location: 26719 NC 12 HWY - SALVO
Subdivision: HATTERAS COLONY SEC B
Legal Description: LOT: 25 BLK: SEC: B

Owner Name: JEFFREY ZIEGLER
Owner Mail Address: 1308 RIVER RD - SUFFOLK, VA 23434
Owner Contact Information:

Contractor Name: R A HOY HEATING AND AIR CONDITIONING INC
Contractor Mail Address: PO BOX 265 - KITTY HAWK, NC 27949
Contractor Phone: 252-261-8178
Contractor NC License#: L13056

DETAILS RESIDENTIAL

UNITS: 1.00 Cost of Job: \$6,000
Electrical Contractor ID: 22222L

MECHANICAL PROJECT FEE: \$150.00

Comments: CHANGE OUT 2.5 TON 14 SEER TRANE SYSTEM WHOLE HOUSE WITH T6 THERMOSTAT AND DUCT MODIFICATIONS

The owner and builder are responsible to comply with all regulations and laws, and should personally inspect all construction and be certain to comply with all zoning regulations and building setbacks. The applicant certifies that the information on this permit is correct. That he is owner or duly authorized agent of owner. That all construction shall be as shown on the submitted plans and specifications that he understands this permit is valid for six months and may be revoked for failure to comply with applicable regulations and laws.

Call Building Inspector (24 Hours in advance) for inspections at Dare County Offices Manteo Office 252.475.5870; Northern Beach Office 252.475.5871 or Frisco Office 252.475.5878

Applicant Signature:

R A HOY HEATING AND AIR CONDITIONING INC

Inspector Signature:

WAYLAND JEANETTE

AYT

Application Reference # 343 on 06/21/2019



County of Dare
 Planning Office
 PO Box Drawer 1000
 Manteo NC 27954

Manteo: (252) 475-5870
 Northern Beach: (252) 475-5871
 Frisco: (252) 475-5878

MECHANICAL PROJECT

MECHANICAL PROJECT#: MECH-464

06/27/2019

Parcel Number: 014913001
 Location: 52126 NC 12 HWY – FRISCO
 Subdivision: C H FULCHER TRACT BLK A
 Legal Description: LOT: 2R BLK: A SEC:

Owner Name: SUSAN G YAN
 Owner Mail Address: P O BOX 336 - P O BOX 336 - MANNS HARBOR, NC 27953
 Owner Contact Information:

Contractor Name: R A HOY HEATING AND AIR CONDITIONING INC
 Contractor Mail Address: PO BOX 265 - KITTY HAWK, NC 27949
 Contractor Phone: 252-261-8178
 Contractor NC License#: L13056

DETAILS

UNITS: 1.00 Cost of Job: \$5,338
 Electrical Contractor ID:
MECHANICAL PROJECT FEE: \$150.00

Comments: CHANGE OUT 14 SEER CARRIER AIR HANDLER TOP LEVEL WITH NEW DUCT WORK

The owner and builder are responsible to comply with all regulations and laws, and should personally inspect all construction and be certain to comply with all zoning regulations and building setbacks. The applicant certifies that the information on this permit is correct. That he is owner or duly authorized agent of owner. That all construction shall be as shown on the submitted plans and specifications that he understands this permit is valid for six months and may be revoked for failure to comply with applicable regulations and laws.

Call Building Inspector (24 Hours in advance) for inspections at Dare County Offices Manteo Office 252.475.5870, Northern Beach Office 252.475.5871 or Frisco Office 252.475.5878

Applicant Signature: _____ R A HOY HEATING AND AIR CONDITIONING INC

Inspector Signature: Wayland Jeanette AYT

Application Reference # 374 on 06/27/2019



County of Dare
Planning Office
PO Box Drawer 1000
Manteo NC 27954

Manteo: (252) 475-5870
Northern Beach: (252) 475-5871
Frisco: (252) 475-5878

MECHANICAL PROJECT

MECHANICAL PROJECT#: MECH-465

06/27/2019

Parcel Number: 029593313
Location: 41518 OCEAN VIEW DR – AVON
Subdivision: KINNAKEET SHORES PHASE 3
Legal Description: LOT: 13 BLK: SEC: 3

Owner Name: DOUGLAS B TURNER
Owner Mail Address: 5907 W TIMBER RIDGE LN - AMERICAN FORK, UT 84003
Owner Contact Information:

Contractor Name: R A HOY HEATING AND AIR CONDITIONING INC
Contractor Mail Address: PO BOX 265 - KITTY HAWK, NC 27949
Contractor Phone: 252-261-8178
Contractor NC License#: L13056

DETAILS RESIDENTIAL

UNITS: 1.00 Cost of Job: \$4,292
Electrical Contractor ID: 22222L

MECHANICAL PROJECT FEE: \$150.00

Comments: CHANGE OUT 3 TON 14 SEER TRANE OUTDOOR UNIT TOP LEVEL

The owner and builder are responsible to comply with all regulations and laws, and should personally inspect all construction and be certain to comply with all zoning regulations and building setbacks. The applicant certifies that the information on this permit is correct. That he is owner or duly authorized agent of owner. That all construction shall be as shown on the submitted plans and specifications that he understands this permit is valid for six months and may be revoked for failure to comply with applicable regulations and laws.

Call Building Inspector (24 Hours in advance) for inspections at Dare County Offices Manteo Office 252.475.5870, Northern Beach Office 252.475.5871 or Frisco Office 252.475.5878

Applicant Signature:  R A HOY HEATING AND AIR CONDITIONING INC

Inspector Signature: KEVIN CLARK AYT

Application Reference # 375 on 06/27/2019



County of Dare
Planning Office
PO Box Drawer 1000
Manteo NC 27954

Manteo: (252) 475-5870
Northern Beach: (252) 475-5871
Frisco: (252) 475-5878

MECHANICAL PROJECT

MECHANICAL PROJECT#: MECH-466

06/27/2019

Parcel Number: 016725000
Location: 58224 SUTTON PL – HATTERAS
Subdivision: SUTTON PLACE HATTERAS
Legal Description: LOT: 3 BLK: SEC:

Owner Name: BRYAN J MACK
Owner Mail Address: 12736 KNOLL RD - MOUNT AIRY, MD 21771
Owner Contact Information:

Contractor Name: AIR HANDLERS OBX
Contractor Mail Address: PO BOX 309 - HARBINGER, NC 27941
Contractor Phone: 252-491-8637
Contractor NC License#: L26599

DETAILS

UNITS: 2.00 Cost of Job: \$7,815
Electrical Contractor ID:

MECHANICAL PROJECT FEE: \$150.00

Comments: REMOVE AND REPLACE 2T CARRIER HP ON LOWER LEVEL AND REMOVE AND REPLACE 3.5 T CARRIER HP ON TOP LEVEL

The owner and builder are responsible to comply with all regulations and laws, and should personally inspect all construction and be certain to comply with all zoning regulations and building setbacks. The applicant certifies that the information on this permit is correct. That he is owner or duly authorized agent of owner. That all construction shall be as shown on the submitted plans and specifications that he understands this permit is valid for six months and may be revoked for failure to comply with applicable regulations and laws.

Call Building Inspector (24 Hours in advance) for inspections at Dare County Offices Manteo Office 252.475.5870, Northern Beach Office 252.475.5871 or Frisco Office 252.475.5878

Applicant Signature:  AIR HANDLERS OBX

Inspector Signature: KEVIN CLARK AYT

Application Reference # 377 on 06/27/2019



County of Dare
 Planning Office
 PO Box Drawer 1000
 Manteo NC 27954

Manteo: (252) 475-5080
 KDH: (252) 475-5871
 Frisco: (252) 475-5878

RESIDENTIAL BUILDING PERMIT

BUILDING PERMIT#: REMD-316

06/03/2019

Parcel Number: 015868000
 Location: 57237 FLAMBEAU RD – HATTERAS
 Subdivision: HATTERAS COLONY SOUTH
 Legal Description: LOT: 45 BLK: SEC: 1

Owner Name: MILDRED A LANE
 Owner Mail Address: 6410 MAY BLVD ALEXANDRIA, VA 22310
 Owner Phone and email:

Contractor Name: WAYNE BAUM
 Contractor Mail Address: PO BOX 311, BUXTON, NC 27920
 Contractor Phone: 252-216-5726 Contractor NC License#: UNLICENSED

BUILDING INFORMATION

Proposed Construction Use:	REMODEL RES OR COM , REPAIR RAMP		
Proposed Construction Type:	SFD	Cost of Construction:	\$5,000
Finished Square Footage:	0	CAMA Permit#:	N/A
Unfinished Square Footage:	0	Septic Permit#:	N/A
Stories:	0.0	Septic Permit Date:	N/A
Building Height:	0	Survey/Site Plan:	
Total Rooms:	0	Water Tap#:	N/A
Footing Type:		Water Type:	
Exterior Finish:		Flood Zone:	
Proposed Finished Floor Elevation:		Base Flood Elevation:	0.0
Bedrooms:	0	Lot/Ground Elevation:	
		Baths/half baths:	0.00/0

Comments: Any deviation from the building plan or site plan requires prior approval. PERMIT FEE \$150.00

TOTAL FEES: \$150.00

Applicant Signature: Wayne Baum WAYNE BAUM

Inspector Signature: [Signature] LMF



County of Dare
 Planning Office
 PO Box Drawer 1000
 Manteo NC 27954

Manteo: (252) 475-5080
 KDH: (252) 475-5871
 Frisco: (252) 475-5878

RESIDENTIAL BUILDING PERMIT

BUILDING PERMIT#: REMD-325

06/04/2019

Parcel Number: 014261000
 Location: 25205 LEE ONEAL LN – WAVES
 Subdivision: SUBDIVISION - NONE
 Legal Description: LOT: BLK: SEC:

Owner Name: BERTIE O TTEE SCARBOROUGH
 Owner Mail Address: 1424 FRANKLIN DR VIRGINIA BEACH, VA 23454
 Owner Phone and email:

Contractor Name: BLUCHER SCARBOROUGH
 Contractor Mail Address: 1424 FRANKLIN DR, VIRGINIA BEACH, VA 23454
 Contractor Phone: 757-544-8326 Contractor NC License#: UNLICENSED

BUILDING INFORMATION

Proposed Construction Use:	REMODEL RES OR COM , INTERIOR REMOD POST SFD RAISE		
Proposed Construction Type:	SFD	Cost of Construction:	\$60,000
Finished Square Footage:	0	CAMA Permit#:	N/A
Unfinished Square Footage:	0	Septic Permit#:	20705
Stories:	0.0	Septic Permit Date:	06/12/2012
Building Height:	0	Survey/Site Plan:	
Total Rooms:	0	Water Tap#:	
Footing Type:		Water Type:	
Exterior Finish:		Flood Zone:	
Proposed Finished Floor Elevation:		Base Flood Elevation:	0.0
Bedrooms:	0	Lot/Ground Elevation:	
		Baths/half baths:	0.00/0

Comments: Any deviation from the building plan or site plan requires prior approval. PERMIT FEE \$600.00

TOTAL FEES: \$600.00

Applicant Signature: Bertie O Ttee Scarborough BERTIE O TTEE SCARBOROUGH
 Inspector Signature: CH/LA 06/5/19 LMF



County of Dare
 Planning Office
 PO Box Drawer 1000
 Manteo NC 27954

Manteo: (252) 475-5080
 KDH: (252) 475-5871
 Frisco: (252) 475-5878

RESIDENTIAL BUILDING PERMIT

BUILDING PERMIT#: REMD-339

06/05/2019

Parcel Number: 013812000
 Location: 39163 N ALBACORE LN – AVON
 Subdivision: HATTERAS COLONY SEC 4
 Legal Description: LOT: 182 & PT 181 BLK: SEC: 4

Owner Name: TOMLEX LLC
 Owner Mail Address: PO BOX 450 AVON, NC 27915
 Owner Phone and email:

Contractor Name: GREEN ISLAND BUILDERS INC
 Contractor Mail Address: PO BOX 1571, BUXTON, NC 27920
 Contractor Phone: 207-776-1568 Contractor NC License#: 69409

BUILDING INFORMATION

Proposed Construction Use:	ELEVATION PERMIT PROJECT , ELEV SFD, NEW PILINGS, REMOD	
Proposed Construction Type:	Cost of Construction:	\$85,000
Finished Square Footage: 0	CAMA Permit#:	
Unfinished Square Footage: 0	Septic Permit#:	
Stories: 0	Septic Permit Date:	
Building Height: 0	Survey/Site Plan:	
Total Rooms: 0	Water Tap#:	
Footing Type:	Water Type:	
Exterior Finish:	Flood Zone:	
Proposed Finished Floor Elevation:	Base Flood Elevation:	0.0
Bedrooms: 0	Lot/Ground Elevation:	
	Baths/half baths:	0/0

Comments: Any deviation from the building plan or site plan requires prior approval.	PERMIT FEE	\$850.00
	ELEVATION PERMIT	200.00
	FLOOD DEVELOPMENT BLDG PERMIT	75.00
	HOME OWNERS RECOVERY FEE	10.00
TOTAL FEES:		\$1,135.00

Applicant Signature: _____ GREEN ISLAND BUILDERS INC

Inspector Signature: _____ LMF

Application Reference # 240 on 06/04/2019



County of Dare
 Planning Office
 PO Box Drawer 1000
 Manteo NC 27954

Manteo: (252) 475-5080
 KDH: (252) 475-5871
 Frisco: (252) 475-5878

RESIDENTIAL BUILDING PERMIT

BUILDING PERMIT#: REMD-354

06/10/2019

Parcel Number: 016088000
 Location: 56188 QUEEN ST – HATTERAS
 Subdivision: HATTERAS ESTATES SEC 1
 Legal Description: LOT: 17 BLK: SEC: 1

Owner Name: MICHAEL THOMAS CROUSE
 Owner Mail Address: 3805 COUNTRY CLUB RD ZEBULON, NC 27597
 Owner Phone and email:

Contractor Name: JUSTIN CURCIO
 Contractor Mail Address: PO BOX 321, HATTERAS, NC 27943
 Contractor Phone: 252-473-8452 Contractor NC License#: UNLICENSED

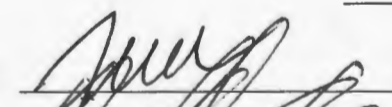

BUILDING INFORMATION

Proposed Construction Use:	REMODEL RES OR COM , REBUILD DECK AND STAIRS	Cost of Construction:	\$12,000
Proposed Construction Type:	SFD	CAMA Permit#:	N/A
Finished Square Footage:	0	Septic Permit#:	28762
Unfinished Square Footage:	0	Septic Permit Date:	05/28/2019
Stories:	0.0	Survey/Site Plan:	
Building Height:	0	Water Tap#:	
Total Rooms:	0	Water Type:	
Footing Type:		Flood Zone:	
Exterior Finish:		Base Flood Elevation:	0.0
Proposed Finished Floor Elevation:		Lot/Ground Elevation:	
Bedrooms:	0	Baths/half baths:	0.00/0

Comments: Any deviation from the building plan or site plan requires prior approval.
 REPLACE DECK; A-214

PERMIT FEE	\$150.00
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TOTAL FEES: \$150.00

Applicant Signature:  JUSTIN CURCIO
 Inspector Signature:  LMF

Application Reference # 214 on 05/30/2019



County of Dare
 Planning Office
 PO Box Drawer 1000
 Manteo NC 27954

Manteo: (252) 475-5080
 KDH: (252) 475-5871
 Frisco: (252) 475-5878

RESIDENTIAL BUILDING PERMIT

BUILDING PERMIT#: REMD-355

06/10/2019

Parcel Number: 011844000
 Location: 50204 SNUG HARBOR DR – FRISCO
 Subdivision: BRIGANDS BAY
 Legal Description: LOT: 270 BLK: SEC:

Owner Name: KEVIN MURRAY MALONE
 Owner Mail Address: 50204 SNUG HARBOR DR FRISCO, NC 27936
 Owner Phone and email:

Contractor Name: EMANUELSON AND DAD INC
 Contractor Mail Address: PO BOX 448, NAGS HEAD, NC 27959
 Contractor Phone: 252-261-2212 Contractor NC License#: 79801

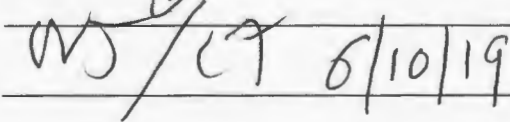
BUILDING INFORMATION

Proposed Construction Use:	REMODEL RES OR COM , REPLACE 9 HOUSE PILINGS		
Proposed Construction Type:	SFD	Cost of Construction:	\$9,000
Finished Square Footage:	0	CAMA Permit#:	N/A
Unfinished Square Footage:	0	Septic Permit#:	28785
Stories:	0.0	Septic Permit Date:	06/02/2019
Building Height:	0	Survey/Site Plan:	
Total Rooms:	0	Water Tap#:	
Footing Type:		Water Type:	
Exterior Finish:		Flood Zone:	AE
Proposed Finished Floor Elevation:		Base Flood Elevation:	0.0
Bedrooms:	0	Lot/Ground Elevation:	
		Baths/half baths:	0.00/0

Comments: Any deviation from the building plan or site plan requires prior approval.
 REPLACE 9 EXTERIOR PILINGS; A-243
 PERMIT FEE \$150.00

TOTAL FEES: \$150.00

Applicant Signature:  EMANUELSON AND DAD INC

Inspector Signature:  LMF

Application Reference # 243 on 06/05/2019



County of Dare
 Planning Office
 PO Box Drawer 1000
 Manteo NC 27954

Manteo: (252) 475-5080
 KDH: (252) 475-5871
 Frisco: (252) 475-5878

RESIDENTIAL BUILDING PERMIT

BUILDING PERMIT#: REMD-356

06/10/2019

Parcel Number: 015232000
 Location: 53203 ROBIN CT – FRISCO
 Subdivision: HIGH TOR SANDS
 Legal Description: LOT: 26 BLK: SEC:

Owner Name: SAMUEL J BODKINS
 Owner Mail Address: 18558 JAMES MADISON HWY GORDONSVILLE, VA 22942
 Owner Phone and email:

Contractor Name: EMANUELSON AND DAD INC
 Contractor Mail Address: PO BOX 448, NAGS HEAD, NC 27959
 Contractor Phone: 252-261-2212 Contractor NC License#: 79801

BUILDING INFORMATION

Proposed Construction Use:	REMODEL RES OR COM , REPLACE 3 8X8 HOUSE PILINGS	Cost of Construction:	\$4,630
Proposed Construction Type:	SFD	CAMA Permit#:	N/A
Finished Square Footage:	0	Septic Permit#:	28753
Unfinished Square Footage:	0	Septic Permit Date:	05/23/19
Stories:	0.0	Survey/Site Plan:	
Building Height:	0	Water Tap#:	N/A
Total Rooms:	0	Water Type:	
Footing Type:		Flood Zone:	
Exterior Finish:		Base Flood Elevation:	0.0
Proposed Finished Floor Elevation:		Lot/Ground Elevation:	
Bedrooms:	0	Baths/half baths:	0.00/0

Comments: Any deviation from the building plan or site plan requires prior approval.
 REPLACE 3 8X8 PILINGS; A-181
 PERMIT FEE \$150.00

TOTAL FEES: \$150.00

Applicant Signature:  EMANUELSON AND DAD INC

Inspector Signature:  LMF

Application Reference # 181 on 05/28/2019



County of Dare
 Planning Office
 PO Box Drawer 1000
 Manteo NC 27954

Manteo: (252) 475-5080
 KDH: (252) 475-5871
 Frisco: (252) 475-5878

RESIDENTIAL BUILDING PERMIT

BUILDING PERMIT#: REMD-358

06/10/2019

Parcel Number: 015547000
 Location: 57171 ALTONA LN – HATTERAS
 Subdivision: SUBDIVISION - NONE
 Legal Description: LOT: BLK: SEC:

Owner Name: CHRISTINE A CONNOLLY
 Owner Mail Address: 9168 HOKE BRADY RD HENRICO, VA 23231
 Owner Phone and email:

Contractor Name: JOHNNY WILLIAMS
 Contractor Mail Address: PO BOX 771 BUXTON NC 27920
 Contractor Phone: 252.995.2435 Contractor NC License#: UNLICENSED

BUILDING INFORMATION

Proposed Construction Use:	REMODEL RES OR COM , ADD 4 PILINGS TO BUILD NEW DECK	Cost of Construction:	\$4,000
Proposed Construction Type:		CAMA Permit#:	
Finished Square Footage:	0	Septic Permit#:	
Unfinished Square Footage:	0	Septic Permit Date:	
Stories:	0	Survey/Site Plan:	
Building Height:	0	Water Tap#:	
Total Rooms:	0	Water Type:	
Footing Type:		Flood Zone:	
Exterior Finish:		Base Flood Elevation:	0.0
Proposed Finished Floor Elevation:		Lot/Ground Elevation:	
Bedrooms:	0	Baths/half baths:	0/0

Comments: Any deviation from the building plan or site plan requires prior approval. PERMIT FEE \$150.00
 DECK EXPANSION WITH 4 PILINGS; A-273

TOTAL FEES: \$150.00

Applicant Signature: Christine A Connolly K & B ENTERPRISES
 Inspector Signature: [Signature] LMF

Application Reference # 273 on 06/06/2019



County of Dare
 Planning Office
 PO Box Drawer 1000
 Manteo NC 27954

Manteo: (252) 475-5080
 KDH: (252) 475-5871
 Frisco: (252) 475-5878

RESIDENTIAL BUILDING PERMIT

BUILDING PERMIT#: REMD-359

06/10/2019

Parcel Number: 027817019
 Location: 42114 PHEASANT CIR – AVON
 Subdivision: KINNAKEET SHORES PHASE 1
 Legal Description: LOT: 19 BLK: SEC:

Owner Name: DAVID M SCARBOROUGH
 Owner Mail Address: PO BOX 1143 AVON, NC 27915
 Owner Phone and email:

Contractor Name: DAVID SCARBOROUGH
 Contractor Mail Address: PO BOX 1143, AVON, NC 27915
 Contractor Phone: 704-854-2538 Contractor NC License#: UNLICENSED

BUILDING INFORMATION

Proposed Construction Use:	REMODEL RES OR COM , ENCLOSE 2 DECKS		
Proposed Construction Type:	SFD	Cost of Construction:	\$30,000
Finished Square Footage:	0	CAMA Permit#:	N/A
Unfinished Square Footage:	0	Septic Permit#:	N/A
Stories:	0.0	Septic Permit Date:	
Building Height:	0	Survey/Site Plan:	
Total Rooms:	0	Water Tap#:	
Footing Type:		Water Type:	
Exterior Finish:		Flood Zone:	
Proposed Finished Floor Elevation:		Base Flood Elevation:	0.0
Bedrooms:	0	Lot/Ground Elevation:	
		Baths/half baths:	0.00/0

Comments: Any deviation from the building plan or site plan requires prior approval. ENCLOSED 3RD FLOOR DECK; A-231 PERMIT FEE \$300.00

TOTAL FEES: \$300.00

Applicant Signature: David M. Scarborough DAVID M SCARBOROUGH
 Inspector Signature: LMF LMF

Application Reference # 231 on 06/03/2019



County of Dare
 Planning Office
 PO Box Drawer 1000
 Manteo NC 27954

Manteo: (252) 475-5080
 KDH: (252) 475-5871
 Frisco: (252) 475-5878

RESIDENTIAL BUILDING PERMIT

BUILDING PERMIT#: REMD-366

06/10/2019

Parcel Number: 015964000
 Location: 57159 C DEERING RIDGE RD – HATTERAS
 Subdivision: SUBDIVISION - NONE
 Legal Description: LOT: BLK: SEC:

Owner Name: HEATHER ODEN
 Owner Mail Address: PO BOX 614 HATTERAS, NC 27943
 Owner Phone and email: 252-475-8160

Contractor Name: HEATHER ODEN
 Contractor Mail Address: PO BOX 614 HATTERAS NC 27943
 Contractor Phone: Contractor NC License#: UNLICENSED

BUILDING INFORMATION

Proposed Construction Use:	REMODEL RES OR COM , ENCLOSE DECK TO ENLARGE/REMODO EXISTING KITCHEN		
Proposed Construction Type:	SFD	Cost of Construction:	\$15,000
Finished Square Footage:	420	CAMA Permit#:	N/A
Unfinished Square Footage:	0	Septic Permit#:	N/A
Stories:	0.0	Septic Permit Date:	N/A
Building Height:	0	Survey/Site Plan:	
Total Rooms:	0	Water Tap#:	
Footing Type:		Water Type:	
Exterior Finish:		Flood Zone:	AE
Proposed Finished Floor Elevation:		Base Flood Elevation:	0.0
Bedrooms:	0	Lot/Ground Elevation:	
		Baths/half baths:	0.00/0

Comments: Any deviation from the building plan or site plan requires prior approval. PERMIT FEE \$150.00
 ENCLOSE DECK TO INCREASE KITCHEN SPACE; A-250

TOTAL FEES: \$150.00

Applicant Signature:  HEATHER ODEN
 Inspector Signature:  LMF

Application Reference # 250 on 06/05/2019



County of Dare
 Planning Office
 PO Box Drawer 1000
 Manteo NC 27954

Manteo: (252) 475-5080
 KDH: (252) 475-5871
 Frisco: (252) 475-5878

RESIDENTIAL BUILDING PERMIT

BUILDING PERMIT#: REMD-387

06/13/2019

Parcel Number: 014822220
 Location: 41198 SPRITSAIL CT – AVON
 Subdivision: KINNAKEET SHORES PH 11
 Legal Description: LOT: 1120 BLK: SEC:

Owner Name: MARIE S MINTON
 Owner Mail Address: 5843 COLFAX AVE ALEXANDRIA, VA 22311
 Owner Phone and email:

Contractor Name: TIDE CONSTRUCTION LLC
 Contractor Mail Address: PO BOX 22, HATTERAS, NC 27943
 Contractor Phone: 2523053055 Contractor NC License#: 70343

BUILDING INFORMATION

Proposed Construction Use:	REMODEL RES OR COM , REMOD/REPAIR DECK BAND, SIDING, 4 PULL SLIDERS		
Proposed Construction Type:	SFD	Cost of Construction:	\$55,000
Finished Square Footage:	0	CAMA Permit#:	N/A
Unfinished Square Footage:	0	Septic Permit#:	N/A
Stories:	0.0	Septic Permit Date:	
Building Height:	0	Survey/Site Plan:	
Total Rooms:	0	Water Tap#:	
Footing Type:		Water Type:	
Exterior Finish:		Flood Zone:	
Proposed Finished Floor Elevation:		Base Flood Elevation:	0.0
Bedrooms:	0	Lot/Ground Elevation:	
		Baths/half baths:	0.00/0

Comments: Any deviation from the building plan or site plan requires prior approval.
 DECK BAND, 4 PULL SLIDERS; A-278

PERMIT FEE		\$550.00
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TOTAL FEES: \$550.00

Applicant Signature: Michael [Signature] TIDE CONSTRUCTION LLC

Inspector Signature: CH/LY 6/14/19 LMF

Application Reference # 278 on 06/10/2019



County of Dare
 Planning Office
 PO Box Drawer 1000
 Manteo NC 27954

Manteo: (252) 475-5080
 KDH: (252) 475-5871
 Frisco: (252) 475-5878

RESIDENTIAL BUILDING PERMIT

BUILDING PERMIT#: REMD-411

06/19/2019

Parcel Number: 015869000
 Location: 57236 FLAMBEAU RD – HATTERAS
 Subdivision: HATTERAS COLONY SOUTH
 Legal Description: LOT: 46 BLK: SEC: 1

Owner Name: SCOTT MCDONALD NORTHROP
 Owner Mail Address: 119 WYE RD QUEENSTOWN, MD 21658
 Owner Phone and email:



Contractor Name: BATCHELOR HOMES
 Contractor Mail Address: PO BOX 787, BUXTON, NC 27920
 Contractor Phone: 252-305-4346 Contractor NC License#: UNLICENSED

BUILDING INFORMATION

Proposed Construction Use:	REMODEL RES OR COM , DECK 10 X 14	Cost of Construction:	\$14,707
Proposed Construction Type:		CAMA Permit#:	
Finished Square Footage:	0	Septic Permit#:	
Unfinished Square Footage:	0	Septic Permit Date:	
Stories:	0	Survey/Site Plan:	
Building Height:	0	Water Tap#:	
Total Rooms:	0	Water Type:	
Footing Type:		Flood Zone:	AE
Exterior Finish:		Base Flood Elevation:	9.0
Proposed Finished Floor Elevation:		Lot/Ground Elevation:	
Bedrooms:	0	Baths/half baths:	0/0

Comments: Any deviation from the building plan or site plan requires prior approval. PERMIT FEE \$150.00
 A-312

TOTAL FEES: \$150.00

Applicant Signature:  BATCHELOR HOMES
 Inspector Signature:  LMF

Application Reference # 312 on 06/17/2019



County of Dare
 Planning Office
 PO Box Drawer 1000
 Manteo NC 27954

Manteo: (252) 475-5080
 KDH: (252) 475-5871
 Frisco: (252) 475-5878

RESIDENTIAL BUILDING PERMIT

BUILDING PERMIT#: REMD-454

06/26/2019

Parcel Number: 017407000
 Location: 58204 WOODALL WAY – HATTERAS
 Subdivision: TEACH'S LAIR ESTATES
 Legal Description: LOT: 1 BLK: SEC:

Owner Name: STEPHEN W PETERS
 Owner Mail Address: 700 AVALON PL PALMYRA, VA 22963
 Owner Phone and email:

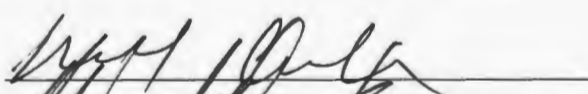

Contractor Name: CAROLAN'S BAY SHORE CONSTRUCTION INC
 Contractor Mail Address: PO BOX 1486, BUXTON, NC 27920
 Contractor Phone: 252-473-9129 Contractor NC License#: 46373

BUILDING INFORMATION

Proposed Construction Use:	REMODEL RES OR COM , RE-SKIN DECK/S	Cost of Construction:	\$20,000
Proposed Construction Type:	SFD	CAMA Permit#:	N/A
Finished Square Footage:	0	Septic Permit#:	N/A
Unfinished Square Footage:	0	Septic Permit Date:	N/A
Stories:	0.0	Survey/Site Plan:	
Building Height:	0	Water Tap#:	
Total Rooms:	0	Water Type:	
Footing Type:		Flood Zone:	
Exterior Finish:		Base Flood Elevation:	0.0
Proposed Finished Floor Elevation:		Lot/Ground Elevation:	
Bedrooms:	0	Baths/half baths:	0.00/0

Comments: Any deviation from the building plan or site plan requires prior approval. PERMIT FEE \$150.00

TOTAL FEES: \$150.00

Applicant Signature:  CAROLAN'S BAY SHORE CONSTRUCTION INC
 Inspector Signature:  WWJ

Application Reference # 266 on 06/06/2019



County of Dare
 Planning Office
 PO Box Drawer 1000
 Manteo NC 27954

Manteo: (252) 475-5080
 KDH: (252) 475-5871
 Frisco: (252) 475-5878

RESIDENTIAL BUILDING PERMIT

BUILDING PERMIT#: REMD-455

06/26/2019

Parcel Number: 014325503
 Location: 25275 SEA ISLE HILLS DR – WAVES
 Subdivision: SEA ISLE HILLS SEC 5
 Legal Description: LOT: 3 BLK: SEC: 5

Owner Name: LOUISE A HOAR
 Owner Mail Address: 101 TOMS CIR CHOCOWINITY, NC 27817
 Owner Phone and email:

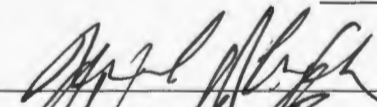
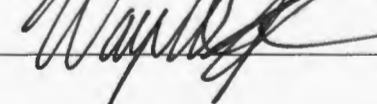
Contractor Name: CAROLAN'S BAY SHORE CONSTRUCTION INC
 Contractor Mail Address: PO BOX 1486, BUXTON, NC 27920
 Contractor Phone: 252-473-9129 Contractor NC License#: 46373

BUILDING INFORMATION

Proposed Construction Use:	REMODEL RES OR COM , RE-SKIN DECK/S	Cost of Construction:	\$27,495
Proposed Construction Type:	SFD	CAMA Permit#:	
Finished Square Footage:	0	Septic Permit#:	
Unfinished Square Footage:	0	Septic Permit Date:	
Stories:	0.0	Survey/Site Plan:	
Building Height:	0	Water Tap#:	
Total Rooms:	0	Water Type:	
Footing Type:		Flood Zone:	
Exterior Finish:		Base Flood Elevation:	0.0
Proposed Finished Floor Elevation:		Lot/Ground Elevation:	
Bedrooms:	0	Baths/half baths:	0.00/0

Comments: Any deviation from the building plan or site plan requires prior approval. PERMIT FEE \$280.00

TOTAL FEES: \$280.00

Applicant Signature:  CAROLAN'S BAY SHORE CONSTRUCTION INC
 Inspector Signature:  WWJ

Application Reference # 267 on 06/06/2019



County of Dare
Planning Office
PO Box Drawer 1000
Manteo NC 27954

Manteo: (252) 475-5870
Northern Beach: (252) 475-5871
Frisco: (252) 475-5878

MECHANICAL PROJECT

MECHANICAL PROJECT#: MECH-317

06/04/2019

Parcel Number: 014045000
Location: 39272 HATTERAS LN -- AVON
Subdivision: OCEANFRONT ENTERPRISES SEC 2
Legal Description: LOT: 23 BLK: SEC: 2

Owner Name: DAVID P COOKSEY
Owner Mail Address: 8885 LOWELL RD - POMFRET, MD 20675
Owner Contact Information:

Contractor Name: AIR HANDLERS OBX
Contractor Mail Address: PO BOX 309 - HARBINGER, NC 27941
Contractor Phone: 252-491-8637
Contractor NC License#: L26599

DETAILS RESIDENTIAL

UNITS: 1.00 Cost of Job: \$7,040
Electrical Contractor ID: 32935

MECHANICAL PROJECT FEE: \$150.00

Comments: CHANGE OUT 2T SYSTEM W/ BRYANT 14 SEER SYSTEM

The owner and builder are responsible to comply with all regulations and laws, and should personally inspect all construction and be certain to comply with all zoning regulations and building setbacks. The applicant certifies that the information on this permit is correct. That he is owner or duly authorized agent of owner. That all construction shall be as shown on the submitted plans and specifications that he understands this permit is valid for six months and may be revoked for failure to comply with applicable regulations and laws.

Call Building Inspector (24 Hours in advance) for inspections at Dare County Offices Manteo Office 252.475.5870, Northern Beach Office 252.475.5871 or Frisco Office 252.475.5878

Applicant Signature: _____ AIR HANDLERS OBX

Inspector Signature: _____ AYT

Application Reference # 233 on 06/04/2019



County of Dare
Planning Office
PO Box Drawer 1000
Manteo NC 27954

Manteo: (252) 475-5870
Northern Beach: (252) 475-5871
Frisco: (252) 475-5878

MECHANICAL PROJECT

MECHANICAL PROJECT#: MECH-318

06/04/2019

Parcel Number: 015746008
Location: 57440 NC 12 HWY A-8 - HATTERAS
Subdivision: SLASH CREEK CONDO
Legal Description: LOT: UNIT A-8 BLK: SEC:

Owner Name: J MICHAEL ONIFER
Owner Mail Address: 613 QUAIL DR - BLUEFIELD, VA 24605
Owner Contact Information:

Contractor Name: AIR HANDLERS OBX
Contractor Mail Address: PO BOX 309 - HARBINGER, NC 27941
Contractor Phone: 252-491-8637
Contractor NC License#: L26599

DETAILS

UNITS: 1.00 Cost of Job: \$7,475
Number of Units: 1
Electrical Contractor ID: 32935 MECHANICAL PROJECT FEE: \$150.00

Comments: REMOTE AND REPLACE 2.5ST W/ CARRIER 14 SEER 2.5 T SYSTEM

The owner and builder are responsible to comply with all regulations and laws, and should personally inspect all construction and be certain to comply with all zoning regulations and building setbacks. The applicant certifies that the information on this permit is correct. That he is owner or duly authorized agent of owner. That all construction shall be as shown on the submitted plans and specifications that he understands this permit is valid for six months and may be revoked for failure to comply with applicable regulations and laws.

Call Building Inspector (24 Hours in advance) for inspections at Dare County Offices Manteo Office 252.475.5870, Northern Beach Office 252.475.5871 or Frisco Office 252.475.5878

Applicant Signature: WAYLAND JEANETTE AIR HANDLERS OBX

Inspector Signature:  AYT



County of Dare
Planning Office
PO Box Drawer 1000
Manteo NC 27954

Manteo: (252) 475-5870
Northern Beach: (252) 475-5871
Frisco: (252) 475-5878

MECHANICAL PROJECT

MECHANICAL PROJECT#: MECH-415

06/19/2019

Parcel Number: 014359001
Location: 39455 NC 12 HWY - AVON
Subdivision: RAYMOND TRUDEAU SUBDIV
Legal Description: LOT: 1 BLK: SEC:

Owner Name: OLLIE R JARVIS
Owner Mail Address: P O BOX 963 - BUXTON, NC 27920
Owner Contact Information:

Contractor Name: PAMLICO AIR INC
Contractor Mail Address: PO BOX 579 - BUXTON, NC 27920
Contractor Phone: 252-995-5435
Contractor NC License#: L15256

DETAILS RESIDENTIAL

Electrical Contractor ID: 30600-L

Cost of Job: \$5,150

MECHANICAL PROJECT FEE: \$150.00

Comments: 1 OUTDOOR UNIT; A-333

The owner and builder are responsible to comply with all regulations and laws, and should personally inspect all construction and be certain to comply with all zoning regulations and building setbacks. The applicant certifies that the information on this permit is correct. That he is owner or duly authorized agent of owner. That all construction shall be as shown on the submitted plans and specifications that he understands this permit is valid for six months and may be revoked for failure to comply with applicable regulations and laws.

Call Building Inspector (24 Hours in advance) for inspections at Dare County Offices Manteo Office 252.475.5870, Northern Beach Office 252.475.5871 or Frisco Office 252.475.5878

Applicant Signature: _____ PAMLICO AIR INC

Inspector Signature: _____ LMF

Application Reference # 333 on 06/19/2019



County of Dare
Planning Office
PO Box Drawer 1000
Manteo NC 27954

Manteo: (252) 475-5870
Northern Beach: (252) 475-5871
Frisco: (252) 475-5878

MECHANICAL PROJECT

MECHANICAL PROJECT#: MECH-458

06/27/2019

Parcel Number: 014324310
Location: 26200 W VISTA DR – WAVES
Subdivision: ST WAVES PHASE 3
Legal Description: LOT: 9A BLK: SEC:

Owner Name: RESORT GROUP HOLDINGS LLC
Owner Mail Address: PO BOX 129 - NAGS HEAD, NC 27959
Owner Contact Information:

Contractor Name: TRADEMARK HEATING & COOLING
Contractor Mail Address: 500 SAND DUNE DRIVE SUITE H KITTY H - KITTY HAWK, NC 27949
Contractor Phone: 252-564-4601
Contractor NC License#: L.31311

DETAILS RESIDENTIAL

UNITS: 1.00 Cost of Job: \$7,365
Electrical Contractor ID: 26359 MECHANICAL PROJECT FEE: \$150.00

Comments: HVAC SYSTEM REPLACEMENT

The owner and builder are responsible to comply with all regulations and laws, and should personally inspect all construction and be certain to comply with all zoning regulations and building setbacks. The applicant certifies that the information on this permit is correct. That he is owner or duly authorized agent of owner. That all construction shall be as shown on the submitted plans and specifications that he understands this permit is valid for six months and may be revoked for failure to comply with applicable regulations and laws.

Call Building Inspector (24 Hours in advance) for inspections at Dare County Offices Manteo Office 252.475.5870, Northern Beach Office 252.475.5871 or Frisco Office 252.475.5878

Applicant Signature: _____ TRADEMARK HEATING & COOLING

Inspector Signature: WAYLAND JEANETTE AYT

Application Reference # 367 on 06/27/2019



County of Dare
 Planning Office
 PO Box Drawer 1000
 Manteo NC 27954

Manteo: (252) 475-5870
 Northern Beach: (252) 475-5871
 Frisco: (252) 475-5878

MECHANICAL PROJECT

MECHANICAL PROJECT#: MECH-435

06/24/2019

Parcel Number: 011670000
 Location: 51169 LASSITER LN – FRISCO
 Subdivision: WIND-HAVEN SHORES
 Legal Description: LOT: 17 BLK: SEC:

Owner Name: GEORGANA JOHNSTON
 Owner Mail Address: BOX 312 - HATTERAS, NC 27943
 Owner Contact Information:

Contractor Name: CALLAHAN, DARRIN & DEE
 Contractor Mail Address: P.O. BOX 53 - HATTERAS, NC 27943
 Contractor Phone: 252-305-1677
 Contractor NC License#: 24451-V

DETAILS RESIDENTIAL

Cost of Job: \$6,000

Electrical Contractor ID: 24451-V

MECHANICAL PROJECT FEE: \$150.00

Comments:

The owner and builder are responsible to comply with all regulations and laws, and should personally inspect all construction and be certain to comply with all zoning regulations and building setbacks. The applicant certifies that the information on this permit is correct. That he is owner or duly authorized agent of owner. That all construction shall be as shown on the submitted plans and specifications that he understands this permit is valid for six months and may be revoked for failure to comply with applicable regulations and laws.

Call Building Inspector (24 Hours in advance) for inspections at Dare County Offices Manteo Office 252.475.5870, Northern Beach Office 252.475.5871 or Frisco Office 252.475.5878

Applicant Signature: _____ CALLAHAN, DARRIN & DEE

Inspector Signature: WJ / KDJ 6/24/19 KDJ

Application Reference # 349 on 06/24/2019



County of Dare
 Planning Office
 PO Box Drawer 1000
 Manteo NC 27954

Manteo: (252) 475-5870
 Northern Beach: (252) 475-5871
 Frisco: (252) 475-5878

MECHANICAL PROJECT

MECHANICAL PROJECT#: MECH-463

R

06/27/2019

Parcel Number: 016757000
 Location: 48060 NC 12 HWY - BUXTON
 Subdivision: SUBDIVISION - NONE
 Legal Description: LOT: BLK: SEC:

Owner Name: LIGHT ASSEMBLY OF GOD INC
 Owner Mail Address: P O BOX 459 - BUXTON, NC 27920
 Owner Contact Information:

Contractor Name: HATTERAS ISLAND AIR INC
 Contractor Mail Address: 40462 NORTH END RD - AVON, NC 27915
 Contractor Phone: 252-305-1671
 Contractor NC License#: L.32971

DETAILS RESIDENTIAL

UNITS: 1.00 Cost of Job: \$5,000
 Electrical Contractor ID: 15935

MECHANICAL PROJECT FEE: \$150.00

Comments: REPLACE ONE SYSTEM INSIDE/OUTSIDE

The owner and builder are responsible to comply with all regulations and laws, and should personally inspect all construction and be certain to comply with all zoning regulations and building setbacks. The applicant certifies that the information on this permit is correct. That he is owner or duly authorized agent of owner. That all construction shall be as shown on the submitted plans and specifications that he understands this permit is valid for six months and may be revoked for failure to comply with applicable regulations and laws.

Call Building Inspector (24 Hours in advance) for inspections at Dare County Offices Manteo Office 252.475.5870, Northern Beach Office 252.475.5871 or Frisco Office 252.475.5878

Applicant Signature: *Alan [Signature]* HATTERAS ISLAND AIR INC

Inspector Signature: *WJ/CH 6/27/19* CH

Application Reference # 372 on 06/27/2019



County of Dare
 Planning Office
 PO Box Drawer 1000
 Manteo NC 27954

Manteo: (252) 475-5870
 Northern Beach: (252) 475-5871
 Frisco: (252) 475-5878

ELECTRICAL PERMIT



E-MAILED

6-28-19

06/27/2019

ELECTRICAL PERMIT#: ELEC-467

Parcel Number: 012877000
 Location: 26221 QUAY CT - SALVO
 Subdivision: HATTERAS COLONY SEC E
 Legal Description: LOT: 46 BLK: SEC: E

Owner Name: WILLIAM F CALLERY
 Owner Mail Address: 10660 MICHMAR DR - CHESTER, VA 23831
 Owner Contact Information:

Contractor Name: SUBURBAN ELECTRIC SERVICES INC
 Contractor Mail Address: 1078 N HWY 64/264 - MANTEO, NC 27954
 Contractor Phone: 252-475-1372
 Contractor NC License#: U-30633

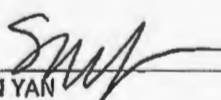
DETAILS RESIDENTIAL

Amp Increase:	0	Cost of Job:	\$1,000
Service Amps:	200	ELECTRICAL PERMIT FEE:	\$150.00

Comments: REPLACE METER BASE

The owner and builder are responsible to comply with all regulations and laws, and should personally inspect all construction and be certain to comply with all zoning regulations and building setbacks. The applicant certifies that the information on this permit is correct. That he is owner or duly authorized agent of owner. That all construction shall be as shown on the submitted plans and specifications that he understands this permit is valid for six months and may be revoked for failure to comply with applicable regulations and laws.

Call Building Inspector (24 Hours in advance) for inspections at Dare County Offices Manteo Office 252.475.5870, Northern Beach Office 252.475.5871 or Frisco Office 252.475.5878

Applicant Signature:  SUBURBAN ELECTRIC SERVICES INC
 SUSAN YAN

Inspector Signature: CREW HAYES  SLF

Application Reference # 378 on 06/27/2019



County of Dare
 Planning Office
 PO Box Drawer 1000
 Manteo NC 27954

Manteo: (252) 475-5870
 Northern Beach: (252) 475-5871
 Frisco: (252) 475-5878

ELECTRICAL PERMIT



E-MAILED

6-28-19

06/27/2019

ELECTRICAL PERMIT#: ELEC-468

Parcel Number: 017290000
 Location: 46401 DIAMOND SHOALS DR - BUXTON
 Subdivision: DIAMOND POINT ESTATES
 Legal Description: LOT: 30 BLK: SEC:

Owner Name: MELANIE VALENTE NELSON
 Owner Mail Address: PO BOX 1372 - BUXTON, NC 27920
 Owner Contact Information:

Contractor Name: SUBURBAN ELECTRIC SERVICES INC
 Contractor Mail Address: 1078 N HWY 64/264 - MANTEO, NC 27954
 Contractor Phone: 252-475-1372
 Contractor NC License#: U-30633

DETAILS RESIDENTIAL

Amp Increase:	0	Cost of Job:	\$8,000
Service Amps:	200	ELECTRICAL PERMIT FEE:	\$150.00

Comments: INSTALL 22 KW GENERAC GENERATOR

The owner and builder are responsible to comply with all regulations and laws, and should personally inspect all construction and be certain to comply with all zoning regulations and building setbacks. The applicant certifies that the information on this permit is correct. That he is owner or duly authorized agent of owner. That all construction shall be as shown on the submitted plans and specifications that he understands this permit is valid for six months and may be revoked for failure to comply with applicable regulations and laws.

Call Building Inspector (24 Hours in advance) for inspections at Dare County Offices Manteo Office 252.475.5870, Northern Beach Office 252.475.5871 or Frisco Office 252.475.5878

Applicant Signature:  SUBURBAN ELECTRIC SERVICES INC
 SUSAN YAN

Inspector Signature: WAYLAND JENNETTE  SLF

Application Reference # 379 on 06/27/2019



County of Dare
Planning Office
PO Box Drawer 1000
Manteo NC 27954

Manteo: (252) 475-5870
Northern Beach: (252) 475-5871
Frisco: (252) 475-5878

ELECTRICAL PERMIT

ELECTRICAL PERMIT#: ELEC-469

06/27/2019

Parcel Number: 011497000
Location: 23237 SEA OATS DR - RODANTHE
Subdivision: SURF-SIDE SEC 1
Legal Description: LOT: 8 BLK: SEC: 1

Owner Name: ROSEANN B VERRECCHIO
Owner Mail Address: P O BOX 207 - 23029 CROSS OF HONOR WAY - RODANTHE, NC 27968
Owner Contact Information:

Contractor Name: SUBURBAN ELECTRIC SERVICES INC
Contractor Mail Address: 1078 N HWY 64/264 - MANTEO, NC 27954
Contractor Phone: 252-475-1372
Contractor NC License#: U-30633

DETAILS RESIDENTIAL

Amp Increase: 0
Service Amps: 200
Cost of Job: \$1,500
ELECTRICAL PERMIT FEE: \$150.00

Comments: REPLACE METER BASE AND DISCONNECT

The owner and builder are responsible to comply with all regulations and laws, and should personally inspect all construction and be certain to comply with all zoning regulations and building setbacks. The applicant certifies that the information on this permit is correct. That he is owner or duly authorized agent of owner. That all construction shall be as shown on the submitted plans and specifications that he understands this permit is valid for six months and may be revoked for failure to comply with applicable regulations and laws.

Call Building Inspector (24 Hours in advance) for inspections at Dare County Offices Manteo Office 252.475.5870, Northern Beach Office 252.475.5871 or Frisco Office 252.475.5878

Applicant Signature: Susan Yan SUBURBAN ELECTRIC SERVICES INC
SUSAN YAN

Inspector Signature: Crew Hayes SLF
CREW HAYES

Application Reference # 380 on 06/27/2019



County of Dare
 Planning Office
 PO Box Drawer 1000
 Manteo NC 27954

Manteo: (252) 475-5870
 Northern Beach: (252) 475-5871
 Frisco: (252) 475-5878

MECHANICAL PROJECT

MECHANICAL PROJECT#: MECH-382

06/13/2019

Parcel Number: 015386000
 Location: 57174 SAXON CUT DR – HATTERAS
 Subdivision: SUBDIVISION - NONE
 Legal Description: LOT: BLK: SEC:

Owner Name: HATTERAS MARLIN CLUB INC
 Owner Mail Address: BOX 218 - HATTERAS, NC 27943
 Owner Contact Information:

Contractor Name: CALLAHAN HVAC REPAIRS AND SERVICE LLC
 Contractor Mail Address: PO BOX 53 - HATTERAS, NC 27943
 Contractor Phone: 252-986-2757
 Contractor NC License#: L17825

DETAILS RESIDENTIAL

UNITS: 1.00 Cost of Job: \$6,000
 Electrical Contractor ID: 24451-U

MECHANICAL PROJECT FEE: \$150.00

Comments: REPLACE HP AND ALSO REPAIR/INSTALL DUCT INSIDE BATHROOM; A-292

The owner and builder are responsible to comply with all regulations and laws, and should personally inspect all construction and be certain to comply with all zoning regulations and building setbacks. The applicant certifies that the information on this permit is correct. That he is owner or duly authorized agent of owner. That all construction shall be as shown on the submitted plans and specifications that he understands this permit is valid for six months and may be revoked for failure to comply with applicable regulations and laws.

Call Building Inspector (24 Hours in advance) for inspections at Dare County Offices Manteo Office 252.475.5870, Northern Beach Office 252.475.5871 or Frisco Office 252.475.5878

Applicant Signature:  CALLAHAN HVAC REPAIRS AND SERVICE LLC

Inspector Signature: WJ/LF 6/13/19 LMF

Application Reference # 292 on 06/11/2019



County of Dare
Planning Office
PO Box Drawer 1000
Manteo NC 27954

Manteo: (252) 475-5870
Northern Beach: (252) 475-5871
Frisco: (252) 475-5878

MECHANICAL PROJECT

MECHANICAL PROJECT#: MECH-448

06/26/2019

Parcel Number: 015763000
Location: 57263 EAGLE PASS RD – HATTERAS
Subdivision: SUBDIVISION - NONE
Legal Description: LOT: BLK: SEC:

Owner Name: BROWN, JOHN K.
Owner Mail Address: 4249 LAWNVALE DR - GAINESVILLE, VA 20155
Owner Contact Information: 703-753-2728

Contractor Name: CARTWRIGHTS HEATING AND AIR INC
Contractor Mail Address: PO BOX 118 - HATTERAS, NC 27943
Contractor Phone: 252-986-2367
Contractor NC License#: L17651

DETAILS RESIDENTIAL

Electrical Contractor ID: SP.PH.32484

Cost of Job: \$8,080

MECHANICAL PROJECT FEE: \$150.00

Comments:

The owner and builder are responsible to comply with all regulations and laws, and should personally inspect all construction and be certain to comply with all zoning regulations and building setbacks. The applicant certifies that the information on this permit is correct. That he is owner or duly authorized agent of owner. That all construction shall be as shown on the submitted plans and specifications that he understands this permit is valid for six months and may be revoked for failure to comply with applicable regulations and laws.

Call Building Inspector (24 Hours In advance) for inspections at Dare County Offices Manteo Office 252.475.5870, Northern Beach Office 252.475.5871 or Frisco Office 252.475.5878

Applicant Signature: *Glennwood Cortwright* CARTWRIGHTS HEATING AND AIR INC

Inspector Signature: *Wayne J. [Signature]* WWJ

Application Reference # 362 on 06/26/2019



County of Dare
Planning Office
PO Box Drawer 1000
Manteo NC 27954

Manteo: (252) 475-5870
Northern Beach: (252) 475-5871
Frisco: (252) 475-5878

MECHANICAL PROJECT

MECHANICAL PROJECT#: MECH-449

06/26/2019

Parcel Number: 000507029
Location: 58200 SHORE DR - HATTERAS
Subdivision: HATTERAS LANDING SOUND SIDE HOM
Legal Description: LOT: 2 BLK: SEC:

Owner Name: JACK V II THOMSON
Owner Mail Address: 44 OAK LN - DANVILLE, VA 24541
Owner Contact Information:

Contractor Name: CARTWRIGHTS HEATING AND AIR INC
Contractor Mail Address: PO BOX 118 - HATTERAS, NC 27943
Contractor Phone: 252-986-2367
Contractor NC License#: L17651

DETAILS RESIDENTIAL

Electrical Contractor ID: SP.PH.32484
Cost of Job: \$3,550
MECHANICAL PROJECT FEE: \$150.00

Comments:

The owner and builder are responsible to comply with all regulations and laws, and should personally inspect all construction and be certain to comply with all zoning regulations and building setbacks. The applicant certifies that the information on this permit is correct. That he is owner or duly authorized agent of owner. That all construction shall be as shown on the submitted plans and specifications that he understands this permit is valid for six months and may be revoked for failure to comply with applicable regulations and laws.

Call Building Inspector (24 Hours in advance) for inspections at Dare County Offices Manteo Office 252.475.5870, Northern Beach Office 252.475.5871 or Frisco Office 252.475.5878

Applicant Signature: *Glennwood Cartwright* CARTWRIGHTS HEATING AND AIR INC

Inspector Signature: *Wayne J. [Signature]* WWJ

Application Reference # 363 on 06/26/2019



County of Dare
 Planning Office
 PO Box Drawer 1000
 Manteo NC 27954

Manteo: (252) 475-5870
 Northern Beach: (252) 475-5871
 Frisco: (252) 475-5878

MECHANICAL PROJECT

MECHANICAL PROJECT#: MECH-408

06/19/2019

Parcel Number: 027101000
 Location: 57245 FLAMBEAU RD - HATTERAS
 Subdivision: HATTERAS COLONY SOUTH
 Legal Description: LOT: 36 BLK: SEC: 1

Owner Name: MARGARET E FINLEY-SWARTZ
 Owner Mail Address: 3540 REDWING CT - NAPERVILLE, IL 60564
 Owner Contact Information:

Contractor Name: CARTWRIGHTS HEATING AND AIR INC
 Contractor Mail Address: PO BOX 118 - HATTERAS, NC 27943
 Contractor Phone: 252-986-2367
 Contractor NC License#: L17651

DETAILS RESIDENTIAL

UNITS: 1.00 Cost of Job: \$3,400
 Electrical Contractor ID: SP PH 32484
 MECHANICAL PROJECT FEE: \$150.00

Comments: REPLACED 1 OUTSIDE UNIT; A-327

The owner and builder are responsible to comply with all regulations and laws, and should personally inspect all construction and be certain to comply with all zoning regulations and building setbacks. The applicant certifies that the information on this permit is correct. That he is owner or duly authorized agent of owner. That all construction shall be as shown on the submitted plans and specifications that he understands this permit is valid for six months and may be revoked for failure to comply with applicable regulations and laws.

Call Building Inspector (24 Hours in advance) for inspections at Dare County Offices Manteo Office 252.475.5870, Northern Beach Office 252.475.5871 or Frisco Office 252.475.5878

Applicant Signature: *Glennwood Cartwright* CARTWRIGHTS HEATING AND AIR INC

Inspector Signature: *WJ/LF 6/19/19* LMF

Application Reference # 327 on 06/19/2019



County of Dare
 Planning Office
 PO Box Drawer 1000
 Manteo NC 27954

Manteo: (252) 475-5870
 Northern Beach: (252) 475-5871
 Frisco: (252) 475-5878

MECHANICAL PROJECT

MECHANICAL PROJECT#: MECH-407

06/19/2019

Parcel Number: 000507025
 Location: 58042 SOUTH BEACH CT - HATTERAS
 Subdivision: HATTERAS LANDING PH 2
 Legal Description: LOT: 22 BLK: SEC:

Owner Name: ERNEST W PLASSE
 Owner Mail Address: 14 WILLOW ST - MYSTIC, CT 06355
 Owner Contact Information:

Contractor Name: CARTWRIGHTS HEATING AND AIR INC
 Contractor Mail Address: PO BOX 118 - HATTERAS, NC 27943
 Contractor Phone: 252-986-2367
 Contractor NC License#: L17651

DETAILS RESIDENTIAL

UNITS: 1.00 Cost of Job: \$3,300
 Electrical Contractor ID: SP PH 32484

MECHANICAL PROJECT FEE: \$150.00

Comments: REPLACED 1 OUTSIDE UNIT; A-326

The owner and builder are responsible to comply with all regulations and laws, and should personally inspect all construction and be certain to comply with all zoning regulations and building setbacks. The applicant certifies that the information on this permit is correct. That he is owner or duly authorized agent of owner. That all construction shall be as shown on the submitted plans and specifications that he understands this permit is valid for six months and may be revoked for failure to comply with applicable regulations and laws.

Call Building Inspector (24 Hours in advance) for inspections at Dare County Offices Manteo Office 252.475.5870, Northern Beach Office 252.475.5871 or Frisco Office 252.475.5878

Applicant Signature: *Glenwood Cartwright* CARTWRIGHTS HEATING AND AIR INC

Inspector Signature: *WJ/CT 6/19/19* LMF

Application Reference # 326 on 06/19/2019



County of Dare
 Planning Office
 PO Box Drawer 1000
 Manteo NC 27954

Manteo: (252) 475-5870
 Northern Beach: (252) 475-5871
 Frisco: (252) 475-5878

MECHANICAL PROJECT

MECHANICAL PROJECT#: MECH-406

06/19/2019

Parcel Number: 011732000
 Location: 50158 BLACKBEARDS CT – FRISCO
 Subdivision: BRIGANDS BAY
 Legal Description: LOT: 138 BLK: SEC:

Owner Name: MAHLON L G DRABICK
 Owner Mail Address: 5725 BARBMOR CT - ALEXANDRIA, VA 22310
 Owner Contact Information:

Contractor Name: CARTWRIGHTS HEATING AND AIR INC
 Contractor Mail Address: PO BOX 118 - HATTERAS, NC 27943
 Contractor Phone: 252-986-2367
 Contractor NC License#: L17651

DETAILS RESIDENTIAL

UNITS: 1.00 Cost of Job: \$3,300
 Electrical Contractor ID: SP PH 32484
 MECHANICAL PROJECT FEE: \$150.00

Comments: REPLACED 1 OUTSIDE UNIT; A-325

The owner and builder are responsible to comply with all regulations and laws, and should personally inspect all construction and be certain to comply with all zoning regulations and building setbacks. The applicant certifies that the information on this permit is correct. That he is owner or duly authorized agent of owner. That all construction shall be as shown on the submitted plans and specifications that he understands this permit is valid for six months and may be revoked for failure to comply with applicable regulations and laws.

Call Building Inspector (24 Hours in advance) for Inspections at Dare County Offices Manteo Office 252.475.5870, Northern Beach Office 252.475.5871 or Frisco Office 252.475.5878

Applicant Signature: *Glennwood Cartwright* CARTWRIGHTS HEATING AND AIR INC

Inspector Signature: *WJ/LF 6/19/19* LMF

Application Reference # 325 on 06/19/2019



County of Dare
 Planning Office
 PO Box Drawer 1000
 Manteo NC 27954

Manteo: (252) 475-5870
 Northern Beach: (252) 475-5871
 Frisco: (252) 475-5878

MECHANICAL PROJECT

MECHANICAL PROJECT#: MECH-405

06/19/2019

Parcel Number: 025516005
 Location: 57045 LIGHTHOUSE CT -- HATTERAS
 Subdivision: CAPTAIN'S BEACH
 Legal Description: LOT: 5 BLK: SEC:

Owner Name: TONY R MOORE
 Owner Mail Address: 2347 WANDERING RIDGE DR - CHINO HILLS, CA 91709
 Owner Contact Information:

Contractor Name: CARTWRIGHTS HEATING AND AIR INC
 Contractor Mail Address: PO BOX 118 - HATTERAS, NC 27943
 Contractor Phone: 252-986-2367
 Contractor NC License#: L17651

DETAILS RESIDENTIAL

UNITS: 2.00 Cost of Job: \$7,850
 Electrical Contractor ID: SP PH 32484

MECHANICAL PROJECT FEE: \$150.00

Comments: REPLACE 2 OUTDOOR UNITS; A-324

The owner and builder are responsible to comply with all regulations and laws, and should personally inspect all construction and be certain to comply with all zoning regulations and building setbacks. The applicant certifies that the information on this permit is correct. That he is owner or duly authorized agent of owner. That all construction shall be as shown on the submitted plans and specifications that he understands this permit is valid for six months and may be revoked for failure to comply with applicable regulations and laws.

Call Building Inspector (24 Hours in advance) for inspections at Dare County Offices Manteo Office 252.475.5870, Northern Beach Office 252.475.5871 or Frisco Office 252.475.5878

Applicant Signature: *Glennwood Cartwright* CARTWRIGHTS HEATING AND AIR INC

Inspector Signature: *WJ/CS 6/19/19* LMF

Application Reference # 324 on 06/19/2019



County of Dare
 Planning Office
 PO Box Drawer 1000
 Manteo NC 27954

Manteo: (252) 475-5080
 KDH: (252) 475-5871
 Frisco: (252) 475-5878

RESIDENTIAL BUILDING PERMIT

BUILDING PERMIT#: R-400

06/18/2019

Parcel Number: 020271119
 Location: 309 HARBOUR VIEW DR – COLINGTON
 Subdivision: COLINGTON HARBOR SEC P
 Legal Description: LOT: 119 BLK: SEC: Q

Owner Name: GREGORY BUTCHER
 Owner Mail Address: 119 LEE CT KILL DEVIL HILLS, NC 27948
 Owner Phone and email:

Contractor Name: GREGORY BUTCHER
 Contractor Mail Address: 119 LEE CT KILL DEVIL HILLS
 Contractor Phone: 252-207-8727
 Contractor NC License#: 47105

BUILDING INFORMATION

Proposed Construction Use:	SINGLE FAMILY DWELLING NEW	Cost of Construction:	\$250,000
Proposed Construction Type:	SFD	CAMA Permit#:	N/A
Finished Square Footage:	2138	Septic Permit#:	28788
Unfinished Square Footage:	142	Septic Permit Date:	06/06/19
Stories:	0.0	Survey/Site Plan:	YES
Building Height:	0	Water Tap#:	52903
Total Rooms:	0	Water Type:	Community Water
Footing Type:	PILING	Flood Zone:	
Exterior Finish:		Base Flood Elevation:	0.0
Proposed Finished Floor Elevation:		Lot/Ground Elevation:	30
Bedrooms:	0	Baths/half baths:	0.00/0

Comments: Any deviation from the building plan or site plan requires prior approval.	PERMIT FEE	\$1,660.30
	FLOOD DEVELOPMENT BLDG PERMIT	
	HOME OWNERS RECOVERY FEE	10.00
	RESIDENTIAL ZONING APPROVAL	100.00
	TOTAL FEES:	\$1,770.30

Applicant Signature: *Gregory Butcher* GREGORY BUTCHER
 Inspector Signature: KEVIN CLARK AYT

117

Application Reference # 272 on 06/07/2019



County of Dare
 Planning Office
 PO Box Drawer 1000
 Manteo NC 27954

Manteo: (252) 475-5080
 KDH: (252) 475-5871
 Frisco: (252) 475-5878

RESIDENTIAL BUILDING PERMIT

BUILDING PERMIT#: R-394

06/17/2019

Parcel Number: 019621000
 Location: 107 SIR JOHN WHITE CT – COLINGTON
 Subdivision: COLINGTON HARBOR SEC K
 Legal Description: LOT: 157 BLK: SEC: K

Owner Name: CSZ CONSTRUCTION INC
 Owner Mail Address: 221 SIR CHANDLER DR KILL DEVIL HILLS, NC 27948
 Owner Phone and email:

Contractor Name: CSZ CONSTRUCTION INC
 Contractor Mail Address: 211 SIR CHANDLER DR, KILL DEVILS HILLS, NC 27948
 Contractor Phone: 252-581-0107 Contractor NC License#: 81403

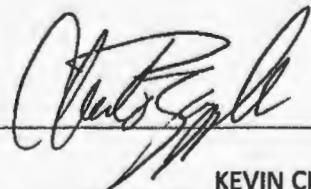
BUILDING INFORMATION

Proposed Construction Use:	SINGLE FAMILY DWELLING NEW	Cost of Construction:	\$230,000
Proposed Construction Type:	SFD	CAMA Permit#:	2019-10
Finished Square Footage:	2428	Septic Permit#:	28793
Unfinished Square Footage:	624	Septic Permit Date:	06/07/19
Stories:	0.0	Survey/Site Plan:	YES
Building Height:	0	Water Tap#:	52908
Total Rooms:	0	Water Type:	Central Water
Footing Type:	PILING	Flood Zone:	AE
Exterior Finish:		Base Flood Elevation:	0.0
Proposed Finished Floor Elevation:		Lot/Ground Elevation:	
Bedrooms:	0	Baths/half baths:	0.00/0

Comments: Any deviation from the building plan or site plan requires prior approval. PERMIT FEE \$2,070.60

FLOOD DEVELOPMENT BLDG PERMIT
 HOME OWNERS RECOVERY FEE 10.00
 RESIDENTIAL ZONING APPROVAL 100.00

TOTAL FEES: \$2,180.60

Applicant Signature:  CSZ CONSTRUCTION INC

Inspector Signature: KEVIN CLARK AYT

95

Application Reference # 275 on 06/10/2019



County of Dare
 Planning Office
 PO Box Drawer 1000
 Manteo NC 27954

Manteo: (252) 475-5870
 Northern Beach: (252) 475-5871
 Frisco: (252) 475-5878

DOCKS;PIERS;BULKHEADS;DUNEWLK

DOCKS;PIERS;BULKHEADS;DUNEWLK#: ACC-326

06/05/2019

Parcel Number: 020475000
 Location: 105 INLET CT – COLINGTON
 Subdivision: COLINGTON HARBOR SEC S
 Legal Description: LOT: 81 BLK: SEC: S

Owner Name: EDWARD J HOFER
 Owner Mail Address: 105 INLET CT - KILL DEVIL HILLS, NC 27948
 Owner Contact Information:

Contractor Name: EMANUELSON AND DAD INC
 Contractor Mail Address: PO BOX 448 - NAGS HEAD, NC 27959
 Contractor Phone: 252-261-2212
 Contractor NC License#: 79801

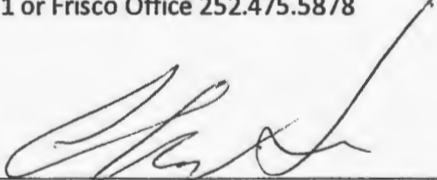
DETAILS

CAMA Permit	73734	Cost of Job:	\$18,000
Lot/Ground elevation (ft)		DOCKS;PIERS;BULKHEADS; DUNEWLK FEE:	\$250.00

Comments: REMOVE 8'X16' PLATFORM CONSTRUCT 32'X 5' PIER AND INSTALL BOATLIFT

The owner and builder are responsible to comply with all regulations and laws, and should personally inspect all construction and be certain to comply with all zoning regulations and building setbacks. The applicant certifies that the information on this permit is correct. That he is owner or duly authorized agent of owner. That all construction shall be as shown on the submitted plans and specifications that he understands this permit is valid for six months and may be revoked for failure to comply with applicable regulations and laws.

Call Building Inspector (24 Hours in advance) for inspections at Dare County Offices Manteo Office 252.475.5870, Northern Beach Office 252.475.5871 or Frisco Office 252.475.5878

Applicant Signature:  EMANUELSON AND DAD INC

Inspector Signature: KEVIN CLARK AYT



County of Dare
 Planning Office
 PO Box Drawer 1000
 Manteo NC 27954

Manteo: (252) 475-5870
 Northern Beach: (252) 475-5871
 Frisco: (252) 475-5878

DOCKS;PIERS;BULKHEADS;DUNEWLK

DOCKS;PIERS;BULKHEADS;DUNEWLK#: ACC-365

06/11/2019

Parcel Number: 027757053
 Location: 2057 CREEK RD – MARTIN'S POINT
 Subdivision: MARTIN'S POINT SECTION 3
 Legal Description: LOT: 9 BLK: 1 SEC: 3

Owner Name: CLAY A MORRISETTE
 Owner Mail Address: 2057 CREEK RD - KITTY HAWK, NC 27949
 Owner Contact Information:

Contractor Name: NORTHEASTERN MARINE INC
 Contractor Mail Address: PO BOX 42 - KITTY HAWK, NC 27949
 Contractor Phone: 2522613682
 Contractor NC License#: 30026

DETAILS RESIDENTIAL

Cost of Job: \$1,950

CAMA Permit 73602

**DOCKS;PIERS;BULKHEADS;
 DUNEWLK FEE: \$250.00**

Lot/Ground elevation (ft)

Comments: PERMIT TO EXPAND EXISTING PIER 88SQ FT

The owner and builder are responsible to comply with all regulations and laws, and should personally inspect all construction and be certain to comply with all zoning regulations and building setbacks. The applicant certifies that the information on this permit is correct. That he is owner or duly authorized agent of owner. That all construction shall be as shown on the submitted plans and specifications that he understands this permit is valid for six months and may be revoked for failure to comply with applicable regulations and laws.

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Applicant Signature: Julie E Emory NORTHEASTERN MARINE INC

Inspector Signature: KEVIN CLARK AYT

Application Reference # 234 on 06/04/2019



County of Dare
 Planning Office
 PO Box Drawer 1000
 Manteo NC 27954

Manteo: (252) 475-5080
 KDH: (252) 475-5871
 Frisco: (252) 475-5878

ACCESSORY PERMIT

ACCESSORY PERMIT#: ACC-420

06/20/2019

Parcel Number: 028310072
 Location: 5028 MARTINS POINT RD – MARTIN'S POINT
 Subdivision: MARTIN'S POINT SECTION 1
 Legal Description: LOT: 72 BLK: 1 SEC: 1

Owner Name: KENNETH EUGENE DEAN
 Owner Mail Address: 1821 DOUGHERTY FERRY RD SAINT LOUIS, MO 63122
 Owner Phone and email:

Contractor Name: LAYDEN MARINE INC
 Contractor Mail Address: PO BOX 1125, ELIZABETH CITY, NC 27906
 Contractor Phone: 252-331-6313 Contractor NC License#: 53309

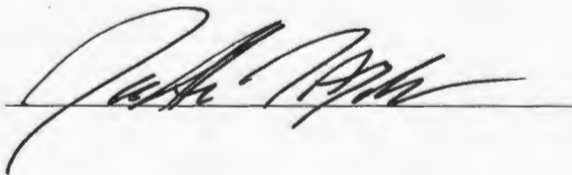
ACCESSORY INFORMATION

Proposed Construction: RESIDENTIAL - DOCKS;PIERS;BULKHEADS;DUNEWLK, BULK
 Description of Work

Cost of Construction: \$18,315
 CAMA Permit#: 73605
 Flood Zone:
 Base Flood Elevation: 0.0
 Lot/Ground Elevation:

Comments: PERMIT FEE \$250.00

TOTAL FEES: \$250.00

Applicant Signature:  LAYDEN MARINE INC

Inspector Signature: KEVIN CLARK AYT

Application Reference # 319 on 06/18/2019



County of Dare
 Planning Office
 PO Box Drawer 1000
 Manteo NC 27954

Manteo: (252) 475-5080
 KDH: (252) 475-5871
 Frisco: (252) 475-5878

ACCESSORY PERMIT

ACCESSORY PERMIT#: ACC-438

06/24/2019

Parcel Number: 004174014
 Location: COLINGTON CREEK DR – KILL DEVIL HILLS
 Subdivision: COLINGTON CREEK ESTATES
 Legal Description: LOT: 14 BLK: SEC:

Owner Name: DONALD II MARSH
 Owner Mail Address: 9605 LANDCASTLE DR ASHLAND, VA 23005
 Owner Phone and email:

Contractor Name: GEORGE TSONEV
 Contractor Mail Address: PO BOX 1892, KILL DEVIL HILLS, NC 27948
 Contractor Phone: Contractor NC License#: 56267

ACCESSORY INFORMATION

Proposed Construction: RESIDENTIAL - DOCKS;PIERS;BULKHEADS;DUNEWLK, BULK
 Description of Work

Cost of Construction: \$8,900
 CAMA Permit#: 72611
 Flood Zone:
 Base Flood Elevation: 0.0
 Lot/Ground Elevation:

Comments: PERMIT FEE \$250.00

TOTAL FEES: \$250.00

Applicant Signature: _____ GEORGE TSONEV

Inspector Signature: _____ AYT



County of Dare
 Planning Office
 PO Box Drawer 1000
 Manteo NC 27954

Manteo: (252) 475-5080
 KDH: (252) 475-5871
 Frisco: (252) 475-5878

ACCESSORY PERMIT

ACCESSORY PERMIT#: ACC-439

06/24/2019

Parcel Number: 004174000
 Location: 124 COLINGTON CREEK DR -- KILL DEVIL HILLS
 Subdivision: COLINGTON CREEK ESTATES
 Legal Description: LOT: 13 BLK: SEC:

Owner Name: KRISTINE A ROOK-MARINAK
 Owner Mail Address: P O BOX 835 KITTY HAWK, NC 27949
 Owner Phone and email:

Contractor Name: GEORGE TSONEV
 Contractor Mail Address: PO BOX 1892, KILL DEVIL HILLS, NC 27948
 Contractor Phone: Contractor NC License#: 56267

ACCESSORY INFORMATION

Proposed Construction: RESIDENTIAL - DOCKS;PIERS;BULKHEADS;DUNEWLK, BULK
 Description of Work

Cost of Construction: \$8,900
 CAMA Permit#: 72610
 Flood Zone:
 Base Flood Elevation: 0.0
 Lot/Ground Elevation:

Comments: PERMIT FEE \$250.00

TOTAL FEES: \$250.00

Applicant Signature: _____ GEORGE TSONEV

Inspector Signature: _____ KEVIN CLARK AYT

Application Reference # 346 on 06/21/2019



County of Dare
 Planning Office
 PO Box Drawer 1000
 Manteo NC 27954

Manteo: (252) 475-5080
 KDH: (252) 475-5871
 Frisco: (252) 475-5878

RESIDENTIAL BUILDING PERMIT

BUILDING PERMIT#: R-362

06/10/2019

Parcel Number: 019912000
 Location: 1154 HARBOUR VIEW DR – COLINGTON
 Subdivision: COLINGTON HARBOR SEC N
 Legal Description: LOT: 20 BLK: SEC: N

Owner Name: RICHARD H TOWNSEND
 Owner Mail Address: 1002 BROOKWOOD DR JOPPA, MD 21085
 Owner Phone and email:


Contractor Name: RICHARD TOWNSEND
 Contractor Mail Address: 1154 HARBOUR VIEW DR, KILL DEVIL HILLS, NC 27948
 Contractor Phone: 410-652-0660 Contractor NC License#:

BUILDING INFORMATION

Proposed Construction Use:	RESIDENTIAL ADDITION	Cost of Construction:	\$20,000
Proposed Construction Type:	SFD	CAMA Permit#:	2019-08
Finished Square Footage:	200	Septic Permit#:	28451
Unfinished Square Footage:	96	Septic Permit Date:	3/20/19
Stories:	0.0	Survey/Site Plan:	YES
Building Height:	0	Water Tap#:	
Total Rooms:	1	Water Type:	
Footing Type:	PILING	Flood Zone:	AE
Exterior Finish:		Base Flood Elevation:	0.0
Proposed Finished Floor Elevation:		Lot/Ground Elevation:	
Bedrooms:	0	Baths/half baths:	0.00/0

Comments: Any deviation from the building plan or site plan requires prior approval.	PERMIT FEE	\$188.40
PERMIT TO EXTEND ROOF TO COVER EXISTING DECK AND CONVERT DECK TO LIVING SPACE	FLOOD DEVELOPMENT BLDG PERMIT HOME OWNERS RECOVERY FEE	75.00

TOTAL FEES: \$263.40

Applicant Signature:  RICHARD H TOWNSEND
 Inspector Signature: KEVIN CLARK AYT

Application Reference # 224 on 06/03/2019



County of Dare
 Planning Office
 PO Box Drawer 1000
 Manteo NC 27954

Manteo: (252) 475-5080
 KDH: (252) 475-5871
 Frisco: (252) 475-5878

RESIDENTIAL BUILDING PERMIT

BUILDING PERMIT#: R-395

06/18/2019

Parcel Number: 028309003
 Location: 1012 MARTINS POINT RD – MARTIN'S POINT
 Subdivision: MARTIN'S POINT SECTION 1
 Legal Description: LOT: 3 BLK: 1 SEC: 1

Owner Name: JOAN C LEWIS
 Owner Mail Address: 6 ROCK SPRING LN SOUTHBOROUGH, MA 01772
 Owner Phone and email:

Contractor Name: SANDERLING CONSTRUCTION INC
 Contractor Mail Address: 517 ELM CT, KILL DEVIL HILLS, NC 27948
 Contractor Phone: Contractor NC License#: 47372

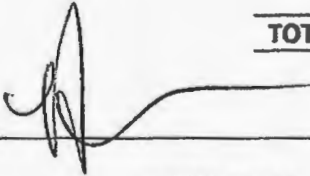
BUILDING INFORMATION

Proposed Construction Use:	REMODEL RES OR COM	Cost of Construction:	\$23,000
Proposed Construction Type:	SFD	CAMA Permit#:	
Finished Square Footage:	324	Septic Permit#:	
Unfinished Square Footage:	0	Septic Permit Date:	
Stories:	0.0	Survey/Site Plan:	
Building Height:	0	Water Tap#:	
Total Rooms:	0	Water Type:	
Footing Type:		Flood Zone:	
Exterior Finish:		Base Flood Elevation:	0.0
Proposed Finished Floor Elevation:		Lot/Ground Elevation:	
Bedrooms:	0	Baths/half baths:	0.00/0

Comments: Any deviation from the building plan or site plan requires prior approval. PERMIT FEE \$243.00

FLOOD DEVELOPMENT BLDG PERMIT
 HOME OWNERS RECOVERY FEE 10.00

TOTAL FEES: \$253.00

Applicant Signature:  SANDERLING CONSTRUCTION INC

Inspector Signature: KEVIN CLARK AYT



County of Dare
 Planning Office
 PO Box Drawer 1000
 Manteo NC 27954

Manteo: (252) 475-5080
 KDH: (252) 475-5871
 Frisco: (252) 475-5878

RESIDENTIAL BUILDING PERMIT

BUILDING PERMIT#: R-429

06/21/2019

Parcel Number: 018767036
 Location: 108 HICKORY RIDGE CT – COLINGTON
 Subdivision: COLINGWOOD
 Legal Description: LOT: 36 BLK: SEC:

Owner Name: KELSEY C SIMS
 Owner Mail Address: 108 HICKORY RIDGE CT KILL DEVIL HILLS, NC 27948
 Owner Phone and email:

Contractor Name: SURFSIDE CONSTRUCTION
 Contractor Mail Address: 115 SAINT CLAIR RD, KILL DEVIL HILLS, NC 27948
 Contractor Phone: 252-548-9253 Contractor NC License#:

BUILDING INFORMATION

Proposed Construction Use:	RESIDENTIAL ADDITION	Cost of Construction:	\$18,675
Proposed Construction Type:	SFD	CAMA Permit#:	NA
Finished Square Footage:	0	Septic Permit#:	28764
Unfinished Square Footage:	470	Septic Permit Date:	5/29/19
Stories:	0.0	Survey/Site Plan:	YES
Building Height:	0	Water Tap#:	
Total Rooms:	0	Water Type:	
Footing Type:	PILING	Flood Zone:	SHX
Exterior Finish:		Base Flood Elevation:	0.0
Proposed Finished Floor Elevation:		Lot/Ground Elevation:	
Bedrooms:	0	Baths/half baths:	0.00/0

Comments: Any deviation from the building plan or site plan requires prior approval. PERMIT FEE \$188.00

FLOOD DEVELOPMENT BLDG PERMIT
 HOME OWNERS RECOVERY FEE

TOTAL FEES: \$188.00

Applicant Signature: *Harriet* SURFSIDE CONSTRUCTION

Inspector Signature: KEVIN CLARK AYT

Application Reference # 201 on 05/30/2019



County of Dare
Planning Office
PO Box Drawer 1000
Manteo NC 27954

Manteo: (252) 475-5870
Northern Beach: (252) 475-5871
Frisco: (252) 475-5878

ELECTRICAL PERMIT

ELECTRICAL PERMIT#: ELEC-402

06/19/2019

Parcel Number: 029326073
Location: 6000 CURRITUCK RD - MARTIN'S POINT
Subdivision: MARTIN'S POINT SECTION 2
Legal Description: LOT: 73 BLK: 1 SEC: 2

Owner Name: THOMAS P HORWATH
Owner Mail Address: 13965 ROVER MILL RD - WEST FRIENDSHIP, MD 21794
Owner Contact Information:

Contractor Name: BEACON ELECTRICAL CONTRACTOR
Contractor Mail Address: 129 SCUPPERNONG RD - MANTEO, NC 27954
Contractor Phone: 2524895680
Contractor NC License#: I-28692

DETAILS RESIDENTIAL

Cost of Job: \$3,000

Amp Increase:

Service Amps:

ELECTRICAL PERMIT FEE: \$150.00

Comments: REPLACE NON SERVICE RATED TRANSFER SWITCH W/NEW SERVICE RATED

WORK ORDER NUMBER # 32296316

The owner and builder are responsible to comply with all regulations and laws, and should personally inspect all construction and be certain to comply with all zoning regulations and building setbacks. The applicant certifies that the information on this permit is correct. That he is owner or duly authorized agent of owner. That all construction shall be as shown on the submitted plans and specifications that he understands this permit is valid for six months and may be revoked for failure to comply with applicable regulations and laws.

Call Building Inspector (24 Hours in advance) for inspections at Dare County Offices Manteo Office 252.475.5870, Northern Beach Office 252.475.5871 or Frisco Office 252.475.5878

Applicant Signature:

Inspector Signature:

KEVIN CLARK

AYT

Application Reference # 322 on 06/19/2019



County of Dare
Planning Office
PO Box Drawer 1000
Manteo NC 27954

Manteo: (252) 475-5870
Northern Beach: (252) 475-5871
Frisco: (252) 475-5878

MECHANICAL PROJECT

MECHANICAL PROJECT#: MECH-319

06/04/2019

Parcel Number: 019992000
Location: 1117 HARBOUR VIEW DR – COLINGTON
Subdivision: COLINGTON HARBOR SEC N
Legal Description: LOT: 112 BLK: SEC: N

Owner Name: JOHN W JR COLEMAN
Owner Mail Address: 1117 HARBOUR VIEW DR - COLINGTON, NC 27948
Owner Contact Information:

Contractor Name: AIR O SMITH INC
Contractor Mail Address: 330 N DOGWOOD TRAIL - SOUTHERN SHORES, NC 27949
Contractor Phone: 252-261-5238
Contractor NC License#: L30070

DETAILS

UNITS: 1.00 Cost of Job: \$5,600
Number of Units: 1
Electrical Contractor ID: 26180-ul **MECHANICAL PROJECT FEE: \$150.00**

Comments: REPLACING EXISTING UPPER LEVEL HVAC SYSTEM WITH 1.5 TON 14 SEER (1) HEAT PUMP AND (1) AIR HANDLER, LINE AND LOW VOLTAGE WIRING

The owner and builder are responsible to comply with all regulations and laws, and should personally inspect all construction and be certain to comply with all zoning regulations and building setbacks. The applicant certifies that the information on this permit is correct. That he is owner or duly authorized agent of owner. That all construction shall be as shown on the submitted plans and specifications that he understands this permit is valid for six months and may be revoked for failure to comply with applicable regulations and laws.

Call Building Inspector (24 Hours in advance) for inspections at Dare County Offices Manteo Office 252.475.5870, Northern Beach Office 252.475.5871 or Frisco Office 252.475.5878

Applicant Signature:  AIR O SMITH INC

Inspector Signature: KEVIN CLARK AYT



County of Dare
Planning Office
PO Box Drawer 1000
Manteo NC 27954

Manteo: (252) 475-5870
Northern Beach: (252) 475-5871
Frisco: (252) 475-5878

MECHANICAL PROJECT

MECHANICAL PROJECT#: MECH-328

06/05/2019

Parcel Number: 029326071
Location: 6008 CURRITUCK RD – MARTIN'S POINT
Subdivision: MARTIN'S POINT SECTION 2
Legal Description: LOT: 71 BLK: 1 SEC: 2

Owner Name: E ANDREW KEENEY
Owner Mail Address: 6008 CURRITUCK RD - KITTY HAWK, NC 27949
Owner Contact Information:

Contractor Name: ALL SEASON HEATING AND COOLING
Contractor Mail Address: PO BOX 244 - POINT HARBOR, NC 27964
Contractor Phone: 252-491-9232
Contractor NC License#: L19091

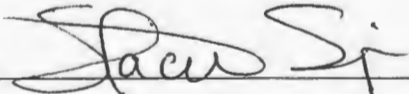
DETAILS

UNITS: 1.00 Cost of Job: \$5,040
Number of Units: 2
Electrical Contractor ID: 3360L **MECHANICAL PROJECT FEE: \$150.00**

Comments: REPLACE DOWNSTAIRS MASTER SYSTEM WITH A 2 TON SPLIT SYSTEM HEAT PUMP AND AIR HANDLER

The owner and builder are responsible to comply with all regulations and laws, and should personally inspect all construction and be certain to comply with all zoning regulations and building setbacks. The applicant certifies that the information on this permit is correct. That he is owner or duly authorized agent of owner. That all construction shall be as shown on the submitted plans and specifications that he understands this permit is valid for six months and may be revoked for failure to comply with applicable regulations and laws.

Call Building Inspector (24 Hours in advance) for inspections at Dare County Offices Manteo Office 252.475.5870; Northern Beach Office 252.475.5871 or Frisco Office 252.475.5878

Applicant Signature:  ALL SEASON HEATING AND COOLING

Inspector Signature: KEVIN CLARK AYT



County of Dare
Planning Office
PO Box Drawer 1000
Manteo NC 27954

Manteo: (252) 475-5870
Northern Beach: (252) 475-5871
Frisco: (252) 475-5878

MECHANICAL PROJECT

MECHANICAL PROJECT#: MECH-335

06/05/2019

Parcel Number: 020590000
Location: 109 KING EDWARD CT – COLINGTON
Subdivision: COLINGTON HARBOR SEC U
Legal Description: LOT: 16 BLK: SEC: U

Owner Name: BILLIE D THOMAS
Owner Mail Address: 109 KING EDWARD CT - KILL DEVIL HILLS, NC 27948
Owner Contact Information:

Contractor Name: R A HOY HEATING AND AIR CONDITIONING INC
Contractor Mail Address: PO BOX 265 - KITTY HAWK, NC 27949
Contractor Phone: 252-261-8178
Contractor NC License#: L13056

DETAILS

UNITS: 2.00 Cost of Job: \$11,358
Number of Units: 2
Electrical Contractor ID: 22222L **MECHANICAL PROJECT FEE: \$150.00**

Comments: CHANGE OUT (2) 1.5 TON 14 SEER TRANE SYSTEM TOP & GROUND LEVELS WITH (2) XL824 THERMOSTATS

The owner and builder are responsible to comply with all regulations and laws, and should personally inspect all construction and be certain to comply with all zoning regulations and building setbacks. The applicant certifies that the information on this permit is correct. That he is owner or duly authorized agent of owner. That all construction shall be as shown on the submitted plans and specifications that he understands this permit is valid for six months and may be revoked for failure to comply with applicable regulations and laws.

Call Building Inspector (24 Hours in advance) for inspections at Dare County Offices Manteo Office 252.475.5870, Northern Beach Office 252.475.5871 or Frisco Office 252.475.5878

Applicant Signature:  R A HOY HEATING AND AIR CONDITIONING INC

Inspector Signature: KEVIN CLARK AYT



County of Dare
Planning Office
PO Box Drawer 1000
Manteo NC 27954

Manteo: (252) 475-5870
Northern Beach: (252) 475-5871
Frisco: (252) 475-5878

MECHANICAL PROJECT

MECHANICAL PROJECT#: MECH-364

06/11/2019

Parcel Number: 014471000
Location: 159 FOXX GRAPE – KILL DEVIL HILLS
Subdivision: BAUM BAY HARBOR SECS 1-4
Legal Description: LOT: 13 BLK: SEC: 1

Owner Name: ADAM T BLANKENSHIP
Owner Mail Address: 159 FOXX GRAPE - KILL DEVIL HILLS, NC 27948
Owner Contact Information:

Contractor Name: ALL IN ONE MECHANICAL LLC
Contractor Mail Address: PO BOX 3392 - KITTY HAWK, NC 27949
Contractor Phone: 252-491-5334
Contractor NC License#: L27675

DETAILS RESIDENTIAL

Electrical Contractor ID: L07784

Cost of Job: \$6,200

MECHANICAL PROJECT FEE: \$150.00

Comments: REMOVE OLD AND INSTALL NEW 2 TON R-410 17 SEER AMERICAN STANDARD HEAT PUMP SYSTEM WITH 8 KW AUX HEAT

The owner and builder are responsible to comply with all regulations and laws, and should personally inspect all construction and be certain to comply with all zoning regulations and building setbacks. The applicant certifies that the information on this permit is correct. That he is owner or duly authorized agent of owner. That all construction shall be as shown on the submitted plans and specifications that he understands this permit is valid for six months and may be revoked for failure to comply with applicable regulations and laws.

Call Building Inspector (24 Hours in advance) for inspections at Dare County Offices Manteo Office 252.475.5870, Northern Beach Office 252.475.5871 or Frisco Office 252.475.5878

Applicant Signature: W.W. Francis ALL IN ONE MECHANICAL LLC

Inspector Signature: KEVIN CLARK AYT

Application Reference # 277 on 06/11/2019



County of Dare
Planning Office
PO Box Drawer 1000
Manteo NC 27954

Manteo: (252) 475-5870
Northern Beach: (252) 475-5871
Frisco: (252) 475-5878

MECHANICAL PROJECT

MECHANICAL PROJECT#: MECH-374

06/12/2019

Parcel Number: 020013000
Location: 1707 HARBOUR VIEW DR – COLINGTON
Subdivision: COLINGTON HARBOR SEC O
Legal Description: LOT: 21 PT 20 BLK: SEC: O

Owner Name: ANGELA ADAMS LAWRENCE
Owner Mail Address: 7521 EFLAND CEDAR GROVE RD - CEDAR GROVE, NC 27231
Owner Contact Information:

Contractor Name: R A HOY HEATING AND AIR CONDITIONING INC
Contractor Mail Address: PO BOX 265 - KITTY HAWK, NC 27949
Contractor Phone: 252-261-8178
Contractor NC License#: L13056

DETAILS RESIDENTIAL

Cost of Job: \$7,565

Electrical Contractor ID: 22222L

MECHANICAL PROJECT FEE: \$150.00

Comments: CHANGE OUT 2.5 TON 16 SEER TRANE MASTER BEDROOM WITH T6 WIFI THERMOSTAT

The owner and builder are responsible to comply with all regulations and laws, and should personally inspect all construction and be certain to comply with all zoning regulations and building setbacks. The applicant certifies that the information on this permit is correct. That he is owner or duly authorized agent of owner. That all construction shall be as shown on the submitted plans and specifications that he understands this permit is valid for six months and may be revoked for failure to comply with applicable regulations and laws.

Call Building Inspector (24 Hours in advance) for inspections at Dare County Offices Manteo Office 252.475.5870, Northern Beach Office 252.475.5871 or Frisco Office 252.475.5878

Applicant Signature:

R A HOY HEATING AND AIR CONDITIONING INC

Inspector Signature:

KEVIN CLARK

AYT

Application Reference # 287 on 06/12/2019



County of Dare
Planning Office
PO Box Drawer 1000
Manteo NC 27954

Manteo: (252) 475-5870
Northern Beach: (252) 475-5871
Frisco: (252) 475-5878

MECHANICAL PROJECT

MECHANICAL PROJECT#: MECH-388

06/17/2019

Parcel Number: 020346000
Location: 132 SIR RICHARD WEST DR – COLINGTON
Subdivision: COLINGTON HARBOR SEC R
Legal Description: LOT: 80 BLK: SEC: R

Owner Name: MICHAEL D RIGGS
Owner Mail Address: 132 SIR RICHARD WEST - KILL DEVIL HILLS, NC 27948
Owner Contact Information:

Contractor Name: ATLANTIC HEATING AND COOLING
Contractor Mail Address: PO BOX 132 - KILL DEVIL HILLS, NC 27948
Contractor Phone: 252-441-7642
Contractor NC License#: L11618

DETAILS RESIDENTIAL

UNITS: 1.00 Cost of Job: \$5,898
Electrical Contractor ID: L07274

MECHANICAL PROJECT FEE: \$150.00

Comments: REMOVE AND REPLACE THE INDOOR & OUTDOOR SECTION OF THE HVAC SYSTEM USING A 14 SEER 4 TON GOODMAN HEAT & A MATCHING GOODMAN AIR HANDLER

The owner and builder are responsible to comply with all regulations and laws, and should personally inspect all construction and be certain to comply with all zoning regulations and building setbacks. The applicant certifies that the information on this permit is correct. That he is owner or duly authorized agent of owner. That all construction shall be as shown on the submitted plans and specifications that he understands this permit is valid for six months and may be revoked for failure to comply with applicable regulations and laws.

Call Building Inspector (24 Hours in advance) for inspections at Dare County Offices Manteo Office 252.475.5870, Northern Beach Office 252.475.5871 or Frisco Office 252.475.5878

Applicant Signature: _____  ATLANTIC HEATING AND COOLING

Inspector Signature: Kevin Clark AYT

Application Reference # 302 on 06/17/2019



County of Dare
 Planning Office
 PO Box Drawer 1000
 Manteo NC 27954

Manteo: (252) 475-5870
 Northern Beach: (252) 475-5871
 Frisco: (252) 475-5878

MECHANICAL PROJECT

MECHANICAL PROJECT#: MECH-389

06/17/2019

Parcel Number: 018934000
 Location: 210 EAGLE DR -- COLINGTON
 Subdivision: COLINGTON HARBOR SEC B
 Legal Description: LOT: 4 BLK: SEC: B

Owner Name: JOSEPH R JR LITTLE
 Owner Mail Address: 701 E 2ND STREET - ESSINGTON, PA 19029
 Owner Contact Information:

Contractor Name: ATLANTIC HEATING AND COOLING
 Contractor Mail Address: PO BOX 132 - KILL DEVIL HILLS, NC 27948
 Contractor Phone: 252-441-7642
 Contractor NC License#: L11618

DETAILS RESIDENTIAL

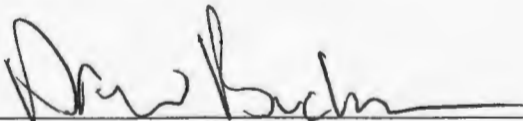
UNITS: 1.00 Cost of Job: \$4,990
 Electrical Contractor ID: L07274

MECHANICAL PROJECT FEE: \$150.00

Comments: REPLACE INDOOR & OUT DOOR SECTION THE HVAC SYSTEM USING 24 SEER 2 TON GOODMAN HEAT PUMP & MATCHING GOODMAN AIR HANDLER

The owner and builder are responsible to comply with all regulations and laws, and should personally inspect all construction and be certain to comply with all zoning regulations and building setbacks. The applicant certifies that the information on this permit is correct. That he is owner or duly authorized agent of owner. That all construction shall be as shown on the submitted plans and specifications that he understands this permit is valid for six months and may be revoked for failure to comply with applicable regulations and laws.

Call Building Inspector (24 Hours in advance) for inspections at Dare County Offices Manteo Office 252.475.5870, Northern Beach Office 252.475.5871 or Frisco Office 252.475.5878

Applicant Signature:  ATLANTIC HEATING AND COOLING

Inspector Signature: KEVIN CLARK AYT

Application Reference # 303 on 06/17/2019



County of Dare
 Planning Office
 PO Box Drawer 1000
 Manteo NC 27954

Manteo: (252) 475-5870
 Northern Beach: (252) 475-5871
 Frisco: (252) 475-5878

MECHANICAL PROJECT

MECHANICAL PROJECT#: MECH-392

06/17/2019

Parcel Number: 028312040
 Location: 3032 MARTINS POINT RD – MARTIN'S POINT
 Subdivision: MARTIN'S POINT SECTION 1
 Legal Description: LOT: 40 BLK: 1 SEC: 1

Owner Name: JAMES R TREES COCHENOUR
 Owner Mail Address: 11594 NEWPORT COVE LN - RESTON, VA 20194
 Owner Contact Information:

Contractor Name: R A HOY HEATING AND AIR CONDITIONING INC
 Contractor Mail Address: PO BOX 265 - KITTY HAWK, NC 27949
 Contractor Phone: 252-261-8178
 Contractor NC License#: L13056

DETAILS RESIDENTIAL

Cost of Job: \$6,847

Electrical Contractor ID: 22222L

MECHANICAL PROJECT FEE: \$150.00

Comments: CHANGE OUT 33 SEER HYPER HEAT 12K MITSUBISHI MINI SPLIT

The owner and builder are responsible to comply with all regulations and laws, and should personally inspect all construction and be certain to comply with all zoning regulations and building setbacks. The applicant certifies that the information on this permit is correct. That he is owner or duly authorized agent of owner. That all construction shall be as shown on the submitted plans and specifications that he understands this permit is valid for six months and may be revoked for failure to comply with applicable regulations and laws.

Call Building Inspector (24 Hours in advance) for inspections at Dare County Offices Manteo Office 252.475.5870, Northern Beach Office 252.475.5871 or Frisco Office 252.475.5878

Applicant Signature:  R A HOY HEATING AND AIR CONDITIONING INC

Inspector Signature: KEVIN CLARK AYT

Application Reference # 311 on 06/17/2019



County of Dare
 Planning Office
 PO Box Drawer 1000
 Manteo NC 27954

Manteo: (252) 475-5870
 Northern Beach: (252) 475-5871
 Frisco: (252) 475-5878

MECHANICAL PROJECT

MECHANICAL PROJECT#: MECH-431

06/21/2019

Parcel Number: 019203000
 Location: 117 OUTRIGGER DR – COLINGTON
 Subdivision: COLINGTON HARBOR SEC E
 Legal Description: LOT: 28 BLK: SEC: E

Owner Name: THOMAS C WALTZ
 Owner Mail Address: 2880 E EASTON RD - CRESTON, OH 44217
 Owner Contact Information:

Contractor Name: R A HOY HEATING AND AIR CONDITIONING INC
 Contractor Mail Address: PO BOX 265 - KITTY HAWK, NC 27949
 Contractor Phone: 252-261-8178
 Contractor NC License#: L13056

DETAILS RESIDENTIAL

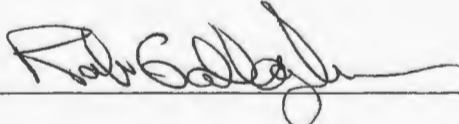
UNITS: 1.00 Cost of Job: \$5,144
 Electrical Contractor ID: 22222L

MECHANICAL PROJECT FEE: \$150.00

Comments: CHANGE OUT 1.5 TO 14 SEER TRANE SYSTEM TOP LEVEL WITH T6 THERMOSTAT

The owner and builder are responsible to comply with all regulations and laws, and should personally inspect all construction and be certain to comply with all zoning regulations and building setbacks. The applicant certifies that the information on this permit is correct. That he is owner or duly authorized agent of owner. That all construction shall be as shown on the submitted plans and specifications that he understands this permit is valid for six months and may be revoked for failure to comply with applicable regulations and laws.

Call Building Inspector (24 Hours in advance) for inspections at Dare County Offices Manteo Office 252.475.5870, Northern Beach Office 252.475.5871 or Frisco Office 252.475.5878

Applicant Signature:  R A HOY HEATING AND AIR CONDITIONING INC

Inspector Signature: KEVIN CLARK AYT

Application Reference # 345 on 06/21/2019



County of Dare
 Planning Office
 PO Box Drawer 1000
 Manteo NC 27954

Manteo: (252) 475-5870
 Northern Beach: (252) 475-5871
 Frisco: (252) 475-5878

MECHANICAL PROJECT

MECHANICAL PROJECT#: MECH-432

06/21/2019

Parcel Number: 020839000
 Location: 219 HURON CT – COLINGTON
 Subdivision: COLINGTON HARBOR SEC Y
 Legal Description: LOT: 147R BLK: SEC: Y

Owner Name: SAMUEL K AYRES
 Owner Mail Address: 219 HURON CT - KILL DEVIL HILLS, NC 27948
 Owner Contact Information:

Contractor Name: R A HOY HEATING AND AIR CONDITIONING INC
 Contractor Mail Address: PO BOX 265 - KITTY HAWK, NC 27949
 Contractor Phone: 252-261-8178
 Contractor NC License#: L13056

DETAILS RESIDENTIAL

UNITS: 1.00 Cost of Job: \$5,529
 Electrical Contractor ID: 22222L

MECHANICAL PROJECT FEE: \$150.00

Comments: CHANGE OUT 18 SEER MITSUBISHI MINI SPLIT MASTER BEDROOM

The owner and builder are responsible to comply with all regulations and laws, and should personally inspect all construction and be certain to comply with all zoning regulations and building setbacks. The applicant certifies that the information on this permit is correct. That he is owner or duly authorized agent of owner. That all construction shall be as shown on the submitted plans and specifications that he understands this permit is valid for six months and may be revoked for failure to comply with applicable regulations and laws.

Call Building Inspector (24 Hours in advance) for inspections at Dare County Offices Manteo Office 252.475.5870; Northern Beach Office 252.475.5871 or Frisco Office 252.475.5878

Applicant Signature:  R A HOY HEATING AND AIR CONDITIONING INC

Inspector Signature: KEVIN CLARK AYT

Application Reference # 344 on 06/21/2019



County of Dare
 Planning Office
 PO Box Drawer 1000
 Manteo NC 27954

Manteo: (252) 475-5870
 Northern Beach: (252) 475-5871
 Frisco: (252) 475-5878

MECHANICAL PROJECT

MECHANICAL PROJECT#: MECH-436

06/24/2019

Parcel Number: 020723000
 Location: 124 SEA GULL CT – COLINGTON
 Subdivision: COLINGTON HARBOR SEC W
 Legal Description: LOT: 47 BLK: SEC: W

Owner Name: KYLE LLC
 Owner Mail Address: 9445 ASSEMBLY WAY - MECHANICSVILLE, VA 23116
 Owner Contact Information:

Contractor Name: COMFORT CONNECTION LLC
 Contractor Mail Address: 2701 N CROATAN HWY - KILL DEVILS HILLS, NC 27498
 Contractor Phone: 252-480-3333
 Contractor NC License#: 29121

DETAILS RESIDENTIAL

UNITS: 1.00 Cost of Job: \$6,500
 Electrical Contractor ID: 30525

MECHANICAL PROJECT FEE: \$150.00

Comments: CHANGE OUT OLD 3 TON SYSTEM WITH NEW 3 TON SYSTEM a/h & H/P

The owner and builder are responsible to comply with all regulations and laws, and should personally inspect all construction and be certain to comply with all zoning regulations and building setbacks. The applicant certifies that the information on this permit is correct. That he is owner or duly authorized agent of owner. That all construction shall be as shown on the submitted plans and specifications that he understands this permit is valid for six months and may be revoked for failure to comply with applicable regulations and laws.

Call Building Inspector (24 Hours in advance) for inspections at Dare County Offices Manteo Office 252.475.5870, Northern Beach Office 252.475.5871 or Frisco Office 252.475.5878

Applicant Signature:  COMFORT CONNECTION LLC

Inspector Signature: KEVIN CLARK AYT

Application Reference # 354 on 06/24/2019



County of Dare
Planning Office
PO Box Drawer 1000
Manteo NC 27954

Manteo: (252) 475-5870
Northern Beach: (252) 475-5871
Frisco: (252) 475-5878

MECHANICAL PROJECT

MECHANICAL PROJECT#: MECH-441

06/25/2019

Parcel Number: 028568004
Location: 1013 MARTINS POINT RD – MARTIN'S POINT
Subdivision: MARTIN'S POINT SECTION 1
Legal Description: LOT: 4 BLK: 2 SEC: 1

Owner Name: JOHN C RICE
Owner Mail Address: 1013 MARTINS POINT RD - KITTY HAWK, NC 27949
Owner Contact Information:

Contractor Name: COMFORT FIRST HEATING AND COOLING INC
Contractor Mail Address: 7001 LARK LANE - SANFORD, NC 27332
Contractor Phone: 919-818-2899
Contractor NC License#: L18855

DETAILS RESIDENTIAL

Cost of Job: \$5,664

Electrical Contractor ID:

MECHANICAL PROJECT FEE: \$150.00

Comments: REPLACE 3.0 TON HP & AH LIKE FOR LIKE

The owner and builder are responsible to comply with all regulations and laws, and should personally inspect all construction and be certain to comply with all zoning regulations and building setbacks. The applicant certifies that the information on this permit is correct. That he is owner or duly authorized agent of owner. That all construction shall be as shown on the submitted plans and specifications that he understands this permit is valid for six months and may be revoked for failure to comply with applicable regulations and laws.

Call Building Inspector (24 Hours in advance) for inspections at Dare County Offices Manteo Office 252.475.5870, Northern Beach Office 252.475.5871 or Frisco Office 252.475.5878

Applicant Signature:

COMFORT FIRST HEATING AND COOLING INC

Inspector Signature:

KEVIN CLARK

AYT

Application Reference # 360 on 06/25/2019



County of Dare
 Planning Office
 PO Box Drawer 1000
 Manteo NC 27954

Manteo: (252) 475-5870
 Northern Beach: (252) 475-5871
 Frisco: (252) 475-5878

MECHANICAL PROJECT

MECHANICAL PROJECT#: MECH-459

06/27/2019

Parcel Number: 019565000
 Location: 803 COLINGTON DR – COLINGTON
 Subdivision: COLINGTON HARBOR SEC J
 Legal Description: LOT: 88A BLK: SEC: J

Owner Name: WILLIAM HENTNIK
 Owner Mail Address: 201 OUTRIGGER DR - KILL DEVIL HILLS, NC 27948
 Owner Contact Information:

Contractor Name: OBHC INC DBA ONE HOUR HEATING & AIR COND
 Contractor Mail Address: PO BOX 2600 - KILL DEVIL HILLS, NC 27948
 Contractor Phone: 252-441-1740
 Contractor NC License#: L12643

DETAILS RESIDENTIAL

UNITS: 1.00 Cost of Job: \$5,919
 Electrical Contractor ID: 15973-004

MECHANICAL PROJECT FEE: \$150.00

Comments:

The owner and builder are responsible to comply with all regulations and laws, and should personally inspect all construction and be certain to comply with all zoning regulations and building setbacks. The applicant certifies that the information on this permit is correct. That he is owner or duly authorized agent of owner. That all construction shall be as shown on the submitted plans and specifications that he understands this permit is valid for six months and may be revoked for failure to comply with applicable regulations and laws.

Call Building Inspector (24 Hours in advance) for inspections at Dare County Offices Manteo Office 252.475.5870, Northern Beach Office 252.475.5871 or Frisco Office 252.475.5878

Applicant Signature: *David M...* OBHC INC DBA ONE HOUR HEATING & AIR COND

Inspector Signature: KEVIN CLARK AYT



County of Dare
Planning Office
PO Box Drawer 1000
Manteo NC 27954

Manteo: (252) 475-5870
Northern Beach: (252) 475-5871
Frisco: (252) 475-5878

MECHANICAL PROJECT

MECHANICAL PROJECT#: MECH-462

06/27/2019

Parcel Number: 020148000
Location: 1517 HARBOUR VIEW DR - COLINGTON
Subdivision: COLINGTON HARBOR SEC P
Legal Description: LOT: 79 BLK: SEC: P

Owner Name: PAT CLAYTON
Owner Mail Address: 483 ASPENWOOD ST - GREEN VALLEY, AZ 85614
Owner Contact Information:

Contractor Name: OBHC INC DBA ONE HOUR HEATING & AIR COND
Contractor Mail Address: PO BOX 2600 - KILL DEVIL HILLS, NC 27948
Contractor Phone: 252-441-1740
Contractor NC License#: L12643

DETAILS RESIDENTIAL

Cost of Job: \$7,252

Electrical Contractor ID: 15973-004

MECHANICAL PROJECT FEE: \$150.00

Comments: REPLACE HVAC SYSTEM WITH 2 TON MITSUBISHI MINI SPLIT SYSTEM

The owner and builder are responsible to comply with all regulations and laws, and should personally inspect all construction and be certain to comply with all zoning regulations and building setbacks. The applicant certifies that the information on this permit is correct. That he is owner or duly authorized agent of owner. That all construction shall be as shown on the submitted plans and specifications that he understands this permit is valid for six months and may be revoked for failure to comply with applicable regulations and laws.

Call Building Inspector (24 Hours In advance) for inspections at Dare County Offices Manteo Office 252.475.5870, Northern Beach Office 252.475.5871 or Frisco Office 252.475.5878

Applicant Signature:

OBHC INC DBA ONE HOUR HEATING & AIR
COND

Inspector Signature:

KEVIN CLARK

AYT

Application Reference # 371 on 06/27/2019



New Construction RI

County of Dare
Planning Office
PO Box Drawer 1000
Manteo NC 27954

Manteo: (252) 475-5080
KDH: (252) 475-5871
Frisco: (252) 475-5878

RESIDENTIAL BUILDING PERMIT

BUILDING PERMIT#: R-377

06/12/2019

Parcel Number: 030007000
Location: 174 BRAKEWOOD RD - MANTEO
Subdivision: BRAKEWOOD SEC. 3
Legal Description: LOT: 8 BLK: SEC: 3

Owner Name: AUSTIN T SHACKLEFORD
Owner Mail Address: 138 WATERSIDE DR NAGS HEAD, NC 27959
Owner Phone and email:

Contractor Name: ARIA CONSTRUCTION AND DEVELOPMENT INC
Contractor Mail Address: PO BOX 321, CRESWELL, NC 27928
Contractor Phone: 252-796-7737 Contractor NC License#: 78928

BUILDING INFORMATION

Proposed Construction Use:	SINGLE FAMILY DWELLING NEW , NEW SFD	Cost of Construction:	\$285,000
Proposed Construction Type:	SFD	CAMA Permit#:	NA
Finished Square Footage:	2012	Septic Permit#:	28772
Unfinished Square Footage:	1570	Septic Permit Date:	5/30/2019
Stories:	2.0	Survey/Site Plan:	
Building Height:	0	Water Tap#:	52915
Total Rooms:	9	Water Type:	Community Water
Footing Type:	PILING	Flood Zone:	X
Exterior Finish:	VINYL SIDING	Base Flood Elevation:	0.0
Proposed Finished Floor Elevation:		Lot/Ground Elevation:	
Bedrooms:	4	Baths/half baths:	2.00/1

Comments: Any deviation from the building plan or site plan requires prior approval.	PERMIT FEE	\$2,137.00
Height Certificate required before rough-in Inspection. As built required before CO.	HOME OWNERS RECOVERY FEE	10.00
	RESIDENTIAL ZONING APPROVAL	100.00

TOTAL FEES: \$2,247.00

Applicant Signature: Brad Alefand ARIA CONSTRUCTION AND DEVELOPMENT INC
Inspector Signature: Ed Kindervater SLF
ED KINDERVATER

Application Reference # 270 on 06/07/2019



County of Dare
 Planning Office
 PO Box Drawer 1000
 Manteo NC 27954

Manteo: (252) 475-5080
 KDH: (252) 475-5871
 Frisco: (252) 475-5878

RESIDENTIAL BUILDING PERMIT

BUILDING PERMIT#: R-443

06/25/2019

Parcel Number: 024616000
 Location: 100 OLD CEMETERY RD – MANTEO
 Subdivision: SUBDIVISION - NONE
 Legal Description: LOT: BLK: SEC:

Owner Name: NORA P SIMPSON
 Owner Mail Address: P O BOX 552 MANTEO, NC 27954
 Owner Phone and email:

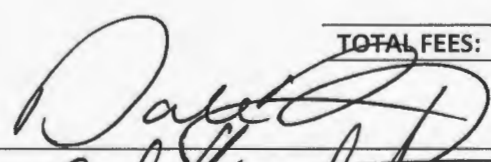
Contractor Name: CLAYTON HOMES INC
 Contractor Mail Address: 1560 NORTH ROAD ST, ELIZABETH CITY, NC 27909
 Contractor Phone: 252-335-1070 Contractor NC License#: 59143

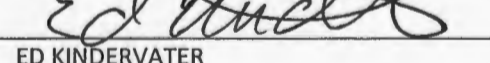
BUILDING INFORMATION

Proposed Construction Use:	SINGLE FAMILY DWELLING NEW , NEW MODULAR	
Proposed Construction Type:	SFD	Cost of Construction: \$172,068
Finished Square Footage:	1900	CAMA Permit#: NA
Unfinished Square Footage:	0	Septic Permit#: 28421
Stories:	1.0	Septic Permit Date: 1/30/2019
Building Height:	0	Survey/Site Plan: YES
Total Rooms:	5	Water Tap#: 52865
Footing Type:	CONCRETE	Water Type: Community Water
Exterior Finish:	VINYL SIDING	Flood Zone: X
Proposed Finished Floor Elevation:		Base Flood Elevation: 0.0
Bedrooms:	4	Lot/Ground Elevation: 11
		Baths/half baths: 2.00/0

Comments: Any deviation from the building plan or site plan requires prior approval.	PERMIT FEE	\$1,425.00
AS-BUILT SURVEY REQUIRED BEFORE CO ISSUED.	HOME OWNERS RECOVERY FEE	10.00
	RESIDENTIAL ZONING APPROVAL	100.00

TOTAL FEES: \$1,535.00

Applicant Signature:  CLAYTON HOMES INC

Inspector Signature:  SLF
 ED KINDERVATER

Application Reference # 295 on 06/13/2019



County of Dare
 Planning Office
 PO Box Drawer 1000
 Manteo NC 27954

Manteo: (252) 475-5080
 KDH: (252) 475-5871
 Frisco: (252) 475-5878

RESIDENTIAL BUILDING PERMIT

BUILDING PERMIT#: R-446

06/26/2019

Parcel Number: 031116015
 Location: 101 LIBBS WAY – MANTEO
 Subdivision: ISLAND WOODS
 Legal Description: LOT: 17 BLK: SEC:

Owner Name: ROSBELIA TOVAR TOVAR
 Owner Mail Address: PO BOX 3424 KILL DEVIL HILLS, NC 27948
 Owner Phone and email:

Contractor Name: ROSBELIA TOVAR
 Contractor Mail Address: PO BOX 3424, KILL DEVIL HILLS, NC 27948
 Contractor Phone: 252-267-5997 Contractor NC License#: UNLICENSED

BUILDING INFORMATION

Proposed Construction Use:	SINGLE FAMILY DWELLING NEW , NEW SFD	Cost of Construction:	\$180,000
Proposed Construction Type:	SFD	CAMA Permit#:	NA
Finished Square Footage:	1868	Septic Permit#:	28824
Unfinished Square Footage:	261	Septic Permit Date:	6/20/2019
Stories:	2.0	Survey/Site Plan:	YES
Building Height:	0	Water Tap#:	52921
Total Rooms:	8	Water Type:	Central Water
Footing Type:	PILING	Flood Zone:	AE
Exterior Finish:	VINYL SIDING	Base Flood Elevation:	7.0
Proposed Finished Floor Elevation:	14	Lot/Ground Elevation:	5.6
Bedrooms:	3	Baths/half baths:	3.00/1

Comments: Any deviation from the building plan or site plan requires prior approval.	PERMIT FEE	\$1,505.00
UNDER CONSTRUCTION ELEVATION CERTIFICATE REQUIRED BEFORE ROUGH-IN INSPECTION, FINISHED CONSTRUCTION ELEVATION CERTIFICATE AND AS-BUILT SURVEY REQUIRED BEFORE CERTIFICATE OF OCCUPANCY WILL BE ISSUED.	FLOOD DEVELOPMENT BLDG PERMIT	75.00
	HOME OWNERS RECOVERY FEE	10.00
	RESIDENTIAL ZONING APPROVAL	100.00
	TOTAL FEES:	\$1,690.00

Applicant Signature: Rosbelia Tovar ROSBELIA TOVAR TOVAR
 Inspector Signature: Ed Kindervater SLF
 ED KINDERVATER



County of Dare
Planning Office
PO Box Drawer 1000
Manteo NC 27954

Manteo: (252) 475-5870
Northern Beach: (252) 475-5871
Frisco: (252) 475-5878

MECHANICAL PROJECT

MECHANICAL PROJECT#: MECH-314

06/03/2019

Parcel Number: 025274002
Location: 138 AMELIA DR - MANTEO
Subdivision: WHISPERING OAKS
Legal Description: LOT: 2 BLK: SEC:

Owner Name: GLEN M SUTHERLAND
Owner Mail Address: 138 AMELIA DR - MANTEO, NC 27954
Owner Contact Information:

Contractor Name: MASTER HEATING AND COOLING
Contractor Mail Address: PO BOX 707 - KITTY HAWK, NC 27949
Contractor Phone: 252-255-0095
Contractor NC License#: L18066

DETAILS

UNITS: 1.00 Cost of Job: \$6,791
Number of Units: 1
Electrical Contractor ID: 26394 U MECHANICAL PROJECT FEE: \$150.00

Comments: CHANGE OUT (1) 2 TON, 16 SEER, R410A LENNOX HEAT PUMP SYSTEM

The owner and builder are responsible to comply with all regulations and laws, and should personally inspect all construction and be certain to comply with all zoning regulations and building setbacks. The applicant certifies that the information on this permit is correct. That he is owner or duly authorized agent of owner. That all construction shall be as shown on the submitted plans and specifications that he understands this permit is valid for six months and may be revoked for failure to comply with applicable regulations and laws.

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Applicant Signature:  MASTER HEATING AND COOLING

Inspector Signature:  AYT



County of Dare
Planning Office
PO Box Drawer 1000
Manteo NC 27954

Manteo: (252) 475-5870
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Frisco: (252) 475-5878

MECHANICAL PROJECT

MECHANICAL PROJECT#: MECH-329

06/05/2019

Parcel Number: 016392016
Location: 164 MEEKINS DR – MANTEO
Subdivision: WARREN HEIGHTS SUBDIV
Legal Description: LOT: 16 BLK: SEC:

Owner Name: RONALD E MEEKINS
Owner Mail Address: P O BOX 1956 - MANTEO, NC 27954
Owner Contact Information:

Contractor Name: ALL SEASON HEATING AND COOLING
Contractor Mail Address: PO BOX 244 - POINT HARBOR, NC 27964
Contractor Phone: 252-491-9232
Contractor NC License#: L19091

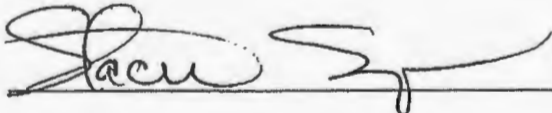
DETAILS

UNITS:	1.00	Cost of Job:	\$5,070
Number of Units:	2		
Electrical Contractor ID:	3360L	MECHANICAL PROJECT FEE:	\$150.00

Comments: REPLACE UPSTAIRS SYSTEM W/ A 1.5 TON SPLIT SYSTEM HEAT PUMP & AIR HANDLER

The owner and builder are responsible to comply with all regulations and laws, and should personally inspect all construction and be certain to comply with all zoning regulations and building setbacks. The applicant certifies that the information on this permit is correct. That he is owner or duly authorized agent of owner. That all construction shall be as shown on the submitted plans and specifications that he understands this permit is valid for six months and may be revoked for failure to comply with applicable regulations and laws.

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Applicant Signature:  ALL SEASON HEATING AND COOLING

Inspector Signature: ED KINDERVATER AYT



County of Dare
Planning Office
PO Box Drawer 1000
Manteo NC 27954

Manteo: (252) 475-5870
Northern Beach: (252) 475-5871
Frisco: (252) 475-5878

MECHANICAL PROJECT

MECHANICAL PROJECT#: MECH-385

06/14/2019

Parcel Number: 028181106
Location: 128 FIRST COLONY CT - MANTEO
Subdivision: FIRST COLONY ESTATES
Legal Description: LOT: 6 BLK: SEC:

Owner Name: CLARENCE R FERRIS
Owner Mail Address: 128 FIRST COLONY CT - MANTEO, NC 27954
Owner Contact Information:

Contractor Name: OBHC INC DBA ONE HOUR HEATING & AIR COND
Contractor Mail Address: PO BOX 2600 - KILL DEVIL HILLS, NC 27948
Contractor Phone: 252-441-1740
Contractor NC License#: L12643

DETAILS RESIDENTIAL

UNITS: 1.00 Cost of Job: \$6,581
Electrical Contractor ID: 15973-00U

MECHANICAL PROJECT FEE: \$150.00

Comments: REPLACE HVAC WITH 14 SEER 2 TON DAIKIN AIR HANDLER & HEAT PUMP

The owner and builder are responsible to comply with all regulations and laws, and should personally inspect all construction and be certain to comply with all zoning regulations and building setbacks. The applicant certifies that the information on this permit is correct. That he is owner or duly authorized agent of owner. That all construction shall be as shown on the submitted plans and specifications that he understands this permit is valid for six months and may be revoked for failure to comply with applicable regulations and laws.

Call Building Inspector (24 Hours in advance) for inspections at Dare County Offices Manteo Office 252.475.5870, Northern Beach Office 252.475.5871 or Frisco Office 252.475.5878

Applicant Signature: _____

OBHC INC DBA ONE HOUR HEATING & AIR
COND

Inspector Signature: _____

ED KINDERVATER

AYT

Application Reference # 297 on 06/14/2019



County of Dare
 Planning Office
 PO Box Drawer 1000
 Manteo NC 27954

Manteo: (252) 475-5870
 Northern Beach: (252) 475-5871
 Frisco: (252) 475-5878

MECHANICAL PROJECT

MECHANICAL PROJECT#: MECH-386

06/14/2019

Parcel Number: 027030008
 Location: 104 NORTH END CT – MANTEO
 Subdivision: NORTH END COLONY
 Legal Description: LOT: 8 BLK: SEC:

Owner Name: AMENIE K SCHWEIZER
 Owner Mail Address: 104 NORTH END CT - MANTEO, NC 27954
 Owner Contact Information:

Contractor Name: OBHC INC DBA ONE HOUR HEATING & AIR COND
 Contractor Mail Address: PO BOX 2600 - KILL DEVIL HILLS, NC 27948
 Contractor Phone: 252-441-1740
 Contractor NC License#: L12643

DETAILS RESIDENTIAL

UNITS: 1.00 Cost of Job: \$8,830

Electrical Contractor ID: 15973-00u
 MECHANICAL PROJECT FEE: \$150.00

Comments: REPLACE HVAC WITH 16 SEER 2 TON DAIKIN AIR HANDLER & HEAT PUMP

The owner and builder are responsible to comply with all regulations and laws, and should personally inspect all construction and be certain to comply with all zoning regulations and building setbacks. The applicant certifies that the information on this permit is correct. That he is owner or duly authorized agent of owner. That all construction shall be as shown on the submitted plans and specifications that he understands this permit is valid for six months and may be revoked for failure to comply with applicable regulations and laws.

Call Building Inspector (24 Hours in advance) for inspections at Dare County Offices Manteo Office 252.475.5870, Northern Beach Office 252.475.5871 or Frisco Office 252.475.5878

Applicant Signature: *Donald M. DeLoach* OBHC INC DBA ONE HOUR HEATING & AIR COND

Inspector Signature: ED KINDERVATER AYT

Application Reference # 296 on 06/14/2019



County of Dare
 Planning Office
 PO Box Drawer 1000
 Manteo NC 27954

Manteo: (252) 475-5870
 Northern Beach: (252) 475-5871
 Frisco: (252) 475-5878

MECHANICAL PROJECT

MECHANICAL PROJECT#: MECH-442

06/25/2019

Parcel Number: 024410030
 Location: 127 WEIR POINT DR – MANTEO
 Subdivision: HERITAGE POINT PHASE 2
 Legal Description: LOT: 72 BLK: SEC:

Owner Name: RICHARD J MARTIN
 Owner Mail Address: 127 WEIR POINT DR - MANTEO, NC 27954
 Owner Contact Information:

Contractor Name: COMFORT FIRST HEATING AND COOLING INC
 Contractor Mail Address: 7001 LARK LANE - SANFORD, NC 27332
 Contractor Phone: 919-818-2899
 Contractor NC License#: L18855

DETAILS RESIDENTIAL

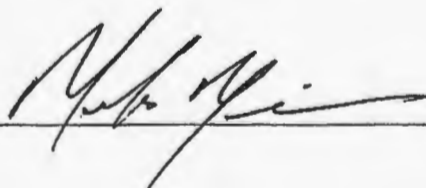
UNITS: 1.00 Cost of Job: \$1,971
 Electrical Contractor ID: 21474

MECHANICAL PROJECT FEE: \$150.00

Comments: REPLACE 3.0 TON HP & AH LIKE FOR LIKE

The owner and builder are responsible to comply with all regulations and laws, and should personally inspect all construction and be certain to comply with all zoning regulations and building setbacks. The applicant certifies that the information on this permit is correct. That he is owner or duly authorized agent of owner. That all construction shall be as shown on the submitted plans and specifications that he understands this permit is valid for six months and may be revoked for failure to comply with applicable regulations and laws.

Call Building Inspector (24 Hours in advance) for inspections at Dare County Offices Manteo Office 252.475.5870, Northern Beach Office 252.475.5871 or Frisco Office 252.475.5878

Applicant Signature:  COMFORT FIRST HEATING AND COOLING INC

Inspector Signature: KEVIN CLARK AYT

Application Reference # 359 on 06/25/2019



County of Dare
Planning Office
PO Box Drawer 1000
Manteo NC 27954

Manteo: (252) 475-5870
Northern Beach: (252) 475-5871
Frisco: (252) 475-5878

MECHANICAL PROJECT

MECHANICAL PROJECT#: MECH-460

06/27/2019

Parcel Number: 025327005
Location: 107 JUNIPER ST - MANTEO
Subdivision: CREEF RIDGE GARDENS
Legal Description: LOT: 6 BLK: SEC:

Owner Name: GROVER JR SHELDON
Owner Mail Address: 1031 FARMVILLE HWY - KEYSVILLE, VA 23947
Owner Contact Information:

Contractor Name: OBHC INC DBA ONE HOUR HEATING & AIR COND
Contractor Mail Address: PO BOX 2600 - KILL DEVIL HILLS, NC 27948
Contractor Phone: 252-441-1740
Contractor NC License#: L12643

DETAILS RESIDENTIAL

UNITS: 1.00 Cost of Job: \$6,233
Electrical Contractor ID: 15973-004

MECHANICAL PROJECT FEE: \$150.00

Comments: REPLACE HVAC WITH 14 SEER 2 TON RUUD AIR HANDLER & HEAT PUMP

The owner and builder are responsible to comply with all regulations and laws, and should personally inspect all construction and be certain to comply with all zoning regulations and building setbacks. The applicant certifies that the information on this permit is correct. That he is owner or duly authorized agent of owner. That all construction shall be as shown on the submitted plans and specifications that he understands this permit is valid for six months and may be revoked for failure to comply with applicable regulations and laws.

Call Building Inspector (24 Hours In advance) for inspections at Dare County Offices Manteo Office 252.475.5870, Northern Beach Office 252.475.5871 or Frisco Office 252.475.5878

Applicant Signature: [Signature] OBHC INC DBA ONE HOUR HEATING & AIR COND

Inspector Signature: KEVIN CLARK AYT

Application Reference # 369 on 06/27/2019



County of Dare
Planning Office
PO Box Drawer 1000
Manteo NC 27954

Manteo: (252) 475-5870
Northern Beach: (252) 475-5871
Frisco: (252) 475-5878

MECHANICAL PROJECT

MECHANICAL PROJECT#: MECH-461

06/27/2019

Parcel Number: 024410043
Location: 157 FORT HUGAR WAY – MANTEO
Subdivision: HERITAGE POINT PHASE 2
Legal Description: LOT: 85 BLK: SEC:

Owner Name: JAMES R JR GILREATH
Owner Mail Address: 157 FORT HUGAR WAY - MANTEO, NC 27954
Owner Contact Information:

Contractor Name: OBHC INC DBA ONE HOUR HEATING & AIR COND
Contractor Mail Address: PO BOX 2600 - KILL DEVIL HILLS, NC 27948
Contractor Phone: 252-441-1740
Contractor NC License#: L12643

DETAILS RESIDENTIAL

UNITS: 2.00 Cost of Job: \$17,718


Electrical Contractor ID: 15973-004

MECHANICAL PROJECT FEE: \$150.00

Comments: REP;LACE 2 HVAC SYSTEMS WITH 16 SEER 21/2 +3 TON DAIKIN AIR HANDLER & HEAT PUMP

The owner and builder are responsible to comply with all regulations and laws, and should personally inspect all construction and be certain to comply with all zoning regulations and building setbacks. The applicant certifies that the information on this permit is correct. That he is owner or duly authorized agent of owner. That all construction shall be as shown on the submitted plans and specifications that he understands this permit is valid for six months and may be revoked for failure to comply with applicable regulations and laws.

Call Building Inspector (24 Hours in advance) for inspections at Dare County Offices Manteo Office 252.475.5870, Northern Beach Office 252.475.5871 or Frisco Office 252.475.5878

Applicant Signature:  OBHC INC DBA ONE HOUR HEATING & AIR COND

Inspector Signature: KEVIN CLARK AYT

Application Reference # 370 on 06/27/2019



County of Dare
 Planning Office
 PO Box Drawer 1000
 Manteo NC 27954

Manteo: (252) 475-5080
 KDH: (252) 475-5871
 Frisco: (252) 475-5878

ACCESSORY PERMIT

ACCESSORY PERMIT#: ACC-425

06/20/2019

Parcel Number: 016574000
 Location: 74 BEVERLY DR – WANCHESE
 Subdivision: LAWRENCE OWENS
 Legal Description: LOT: BLK: SEC:

Owner Name: BILLY GAITHER JR MIDGETT
 Owner Mail Address: P O BOX 723 WANCHESE, NC 27981
 Owner Phone and email:

Contractor Name: TOTAL MARINE SERVICES INC
 Contractor Mail Address: PO BOX 415, WANCHESE, NC 27981
 Contractor Phone: 252-473-3338 Contractor NC License#: 56244

ACCESSORY INFORMATION

Proposed Construction: - DOCKS;PIERS;BULKHEADS;DUNEWLK, BULK
 Description of Work REPAIR/REPLACE 50' OF BULKHEAD PLUS DOCK

Cost of Construction: \$20,000
 CAMA Permit#: 73615
 Flood Zone:
 Base Flood Elevation: 0.0
 Lot/Ground Elevation:

Comments: PERMIT FEE \$250.00

TOTAL FEES: \$250.00

Applicant Signature: W. Silver TOTAL MARINE SERVICES INC
 WINSTON SILVER

Inspector Signature: E. Kindervater SLF
 ED KINDERVATER

Application Reference # 328 on 06/19/2019



County of Dare
 Planning Office
 PO Box Drawer 1000
 Manteo NC 27954

Manteo: (252) 475-5080
 KDH: (252) 475-5871
 Frisco: (252) 475-5878

ACCESSORY PERMIT

ACCESSORY PERMIT#: ACC-437

06/24/2019

Parcel Number: 024372001
 Location: 248 MOTHER VINEYARD RD – MANTEO
 Subdivision: KERRY LENNON DOWD S/D
 Legal Description: LOT: 3A BLK: SEC:

Owner Name: DAVID J SAFFELL
 Owner Mail Address: 248 MOTHER VINEYARD RD MANTEO, NC 27954
 Owner Phone and email:

Contractor Name: PUGH BROTHERS CONSTRUCTION LLC
 Contractor Mail Address: 172 SWAN VIEW DR, KILL DEVIL HILLS, NC 27948
 Contractor Phone: 252-207-1468 Contractor NC License#: 53279

ACCESSORY INFORMATION

Proposed Construction: RESIDENTIAL - DOCKS;PIERS;BULKHEADS;DUNEWLK, PIER
 Description of Work PIER 5' X 100' /W KAYAK LAUNCH, BOATLIFT

Cost of Construction: \$28,300
 CAMA Permit#: 73757
 Flood Zone:
 Base Flood Elevation: 0.0
 Lot/Ground Elevation:

Comments: PERMIT FEE \$250.00
 5' X 100' PIER WITH KAYAK LAUNCH
 AND BOAT LIFT

TOTAL FEES: \$250.00

Applicant Signature:  PUGH BROTHERS CONSTRUCTION LLC
 VICTOR PUGH

Inspector Signature: ED KINDERVATER  SLF

Application Reference # 318 on 06/18/2019



County of Dare
 Planning Office
 PO Box Drawer 1000
 Manteo NC 27954

Manteo: (252) 475-5080
 KDH: (252) 475-5871
 Frisco: (252) 475-5878

ACCESSORY PERMIT

ACCESSORY PERMIT#: ACC-324

06/05/2019

APPLICATION 236

Parcel Number: 031116003
 Location: 106 PAYNE RD – MANTEO
 Subdivision: ISLAND WOODS
 Legal Description: LOT: 5 BLK: SEC:

Owner Name: WADE E SIBLEY
 Owner Mail Address: 106 PAYNE RD MANTEO, NC 27954
 Owner Phone and email:

Contractor Name: GIBBS DAUGHTERS NC LLC
 Contractor Mail Address: PO BOX 2387, MANTEO, NC 27954
 Contractor Phone: 252-202-5991 Contractor NC License#: 56180

ACCESSORY INFORMATION

Proposed Construction: MISC ACCESSORY, ACC, OUTDOOR SHOWER 5X7 WITH ROOF
 Description of Work: OUTDOOR SHOWER 5X7 WITH ROOF

Finished Square Footage:	0	Cost of Construction:	\$3,525
Unfinished Square Footage:	35	CAMA Permit#:	
Footing Type:	PILING	Flood Zone:	
		Base Flood Elevation:	0.0
		Lot/Ground Elevation:	0

Comments: PERMIT FEE \$150.00

TOTAL FEES: \$150.00

Applicant Signature:  GIBBS REALTY AND CONSTRUCTION LLC

Inspector Signature:  SLF



County of Dare
 Planning Office
 PO Box Drawer 1000
 Manteo NC 27954

Manteo: (252) 475-5080
 KDH: (252) 475-5871
 Frisco: (252) 475-5878

RESIDENTIAL BUILDING PERMIT

BUILDING PERMIT#: ACC-327

06/05/2019

Parcel Number: 025742008
 Location: 669 VISTA LAKE DR – MANTEO
 Subdivision: VISTA LAKE REVISED
 Legal Description: LOT: 8~9 BLK: SEC:

Owner Name: JANICE E SCHROEDER
 Owner Mail Address: 669 VISTA LAKE DR MANTEO, NC 27954
 Owner Phone and email:

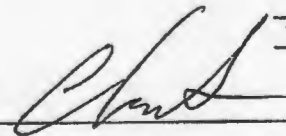
Contractor Name: EMANUELSON AND DAD INC
 Contractor Mail Address: PO BOX 448, NAGS HEAD, NC 27959
 Contractor Phone: 252-261-2212 Contractor NC License#: 79801

BUILDING INFORMATION

Proposed Construction Use:	MISC ACCESSORY , Replace deck and stairs in same footprint	
Proposed Construction Type:	SFD	Cost of Construction: \$7,096
Finished Square Footage:	0	CAMA Permit#:
Unfinished Square Footage:	128	Septic Permit#:
Stories:	0.0	Septic Permit Date:
Building Height:	0	Survey/Site Plan:
Total Rooms:	0	Water Tap#:
Footing Type:	PILING	Water Type:
Exterior Finish:	NOT APPLICABLE	Flood Zone:
Proposed Finished Floor Elevation:		Base Flood Elevation: 0.0
Bedrooms:	0	Lot/Ground Elevation:
		Baths/half baths: 0.00/0

Comments: Any deviation from the building plan or site plan requires prior approval. PERMIT FEE \$150.00

TOTAL FEES: \$150.00

Applicant Signature:  EMANUELSON AND DAD INC

Inspector Signature: ED KINDERVATER AYT



County of Dare
 Planning Office
 PO Box Drawer 1000
 Manteo NC 27954

Manteo: (252) 475-5080
 KDH: (252) 475-5871
 Frisco: (252) 475-5878

RESIDENTIAL BUILDING PERMIT

BUILDING PERMIT#: R-453

Amended 7-2-19
 264 Unfinished SF

06/26/2019

Parcel Number: 024652015
 Location: 102 SHERWOOD DR - MANTEO
 Subdivision: NOTTINGHAM (REVISED)
 Legal Description: LOT: 5 BLK: SEC:

Owner Name: ARNOLD D TOLSON
 Owner Mail Address: 102 SHERWOOD DR MANTEO, NC 27954
 Owner Phone and email:

Contractor Name: RENAISSANCE CONSTRUCTION COMPANY INC
 Contractor Mail Address: PO BOX 1411, MANTEO, NC 27954
 Contractor Phone: 2524733312 Contractor NC License#: 26244

BUILDING INFORMATION

Proposed Construction Use:	RESIDENTIAL ADDITION , REPLACE DECK WITH SCREEN PORCH IN SAME FOOTPRINT		
Proposed Construction Type:	SFD	Cost of Construction:	\$10,000
Finished Square Footage:	0	CAMA Permit#:	
Unfinished Square Footage:	216 → 264 Unfinished SF	Septic Permit#:	not needed
Stories:	1.0	Septic Permit Date:	
Building Height:	0	Survey/Site Plan:	
Total Rooms:	0	Water Tap#:	
Footing Type:	PILING	Water Type:	
Exterior Finish:	NOT APPLICABLE	Flood Zone:	AE
Proposed Finished Floor Elevation:		Base Flood Elevation:	0.0
Bedrooms:	0	Lot/Ground Elevation:	
		Baths/half baths:	0.00/0


Comments: Any deviation from the building plan or site plan requires prior approval. PERMIT FEE \$150.00

TOTAL FEES: \$150.00

Applicant Signature:  RENAISSANCE CONSTRUCTION COMPANY INC

Inspector Signature:  ED KINDERVATER SLF

AMENDED 7-2-19



Application Reference # 357 on 06/25/2019



County of Dare
 Planning Office
 PO Box Drawer 1000
 Manteo NC 27954

Manteo: (252) 475-5080
 KDH: (252) 475-5871
 Frisco: (252) 475-5878

MOBILE HOME BUILDING PERMIT

BUILDING PERMIT#: R-403

06/19/2019

Parcel Number: 017530001
 Location: 6602 OLD MANNS HARBOR RD – MANNS HARBOR
 Subdivision: PINE HEIGHTS SEC 1 LOT: 3-A BLK: SEC: 1
 Mobile Home Park:

OWNER INFORMATION

Owner Name: FRED KELLY
 Owner Mail Address: PO BOX 127 MANNS HARBOR, NC 27953
 Owner Phone and email:

MOBILE HOME MOVER

Mover Name: ADKINS AND SONS
 Mover Mail Address: 258 WILLEYTON ROAD, GATES, NC 27937
 Mover Phone: Mover NC License#: 46320

MOBILE HOME INSTALLER

Installer Name: SAME
 Installer Mail Address:
 Installer Phone: Installer NC License#:

DETAILS

Living Space	1456	Estimated Cost:	\$43,674
Non-living Space	0	CAMA Permit#:	na
Make:	Clayton	Septic Permit#:	28656
Model:	HE	Septic Permit Date:	4/18/2019
Year:	1998	Survey/Site Plan:	
Serial #:	HHC011182NCAB	Water Tap#:	
HUD #:	HWC260405/260406	Water Type:	
Width in feet:	28	Flood Zone:	AE
Length in feet:	52	Base Flood Elevation:	0.0 5.0
Hurricane Built:	3	Lot/Ground Elevation:	0
Footing/foundation Type:	MASONARY		

Comments: Any deviation from the building plan or site plan requires prior approval. Finished Construction Elevation Certificate and As-Built Survey required before CO Issued.	PERMIT FEE	\$728.00
Mobile Home moved FROM 5847B Hwy 264, Manns Harbor	FLOOD DEVELOPMENT BLDG PERMIT	75.00
TOTAL FEES:		\$803.00

Applicant Signature: Willis Creef WILLIS CREEF
 Inspector Signature: Ed Kindervater SLF
 ED KINDERVATER

06/19/2019 1:00



County of Dare
 Planning Office
 PO Box Drawer 1000
 Manteo NC 27954

Manteo: (252) 475-5870
 Northern Beach: (252) 475-5871
 Frisco: (252) 475-5878

MECHANICAL PROJECT

MECHANICAL PROJECT#: MECH-452

06/26/2019

Parcel Number: 024079000
 Location: 215 BAYVIEW DR – STUMPY POINT
 Subdivision: SUBDIVISION - NONE
 Legal Description: LOT: BLK: SEC:

Owner Name: JAMES G JR MEEKINS
 Owner Mail Address: 215 BAY VIEW DR - STUMPY POINT, NC 27978
 Owner Contact Information:

Contractor Name: ARMSTRONG AND SON HEATING AND AIR LLC
 Contractor Mail Address: 3978 ALBEMARLE CHURCH RD - COLUMBIA, NC 27925
 Contractor Phone: 252-797-4100
 Contractor NC License#: L22516

DETAILS RESIDENTIAL

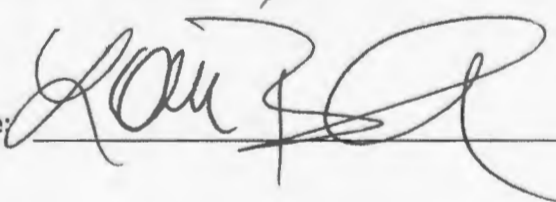
UNITS: 1.00 Cost of Job: \$4,800
 Electrical Contractor ID: L.07391

MECHANICAL PROJECT FEE: \$150.00

Comments: 3.5 TON CHAMPION 14 SEER GASPAC

The owner and builder are responsible to comply with all regulations and laws, and should personally inspect all construction and be certain to comply with all zoning regulations and building setbacks. The applicant certifies that the information on this permit is correct. That he is owner or duly authorized agent of owner. That all construction shall be as shown on the submitted plans and specifications that he understands this permit is valid for six months and may be revoked for failure to comply with applicable regulations and laws.

Call Building Inspector (24 Hours in advance) for inspections at Dare County Offices Manteo Office 252.475.5870, Northern Beach Office 252.475.5871 or Frisco Office 252.475.5878

Applicant Signature:  ARMSTRONG AND SON HEATING AND AIR LLC

Inspector Signature: ED KINDERVATER  SLF

Application Reference # 365 on 06/26/2019



County of Dare
 Planning Office
 PO Box Drawer 1000
 Manteo NC 27954

Manteo: (252) 475-5870
 Northern Beach: (252) 475-5871
 Frisco: (252) 475-5878

MECHANICAL PROJECT

MECHANICAL PROJECT#: MECH-428

06/20/2019

Parcel Number: 025142001
 Location: 1073 N HWY 64/264 – MANTEO
 Subdivision: SUBDIVISION - NONE
 Legal Description: LOT: PARCEL A BLK: SEC:

Owner Name: THOMAS MALCOLM FEARING
 Owner Mail Address: P O BOX 982 - MANTEO, NC 27954
 Owner Contact Information:

Contractor Name: ARMSTRONG AND SON HEATING AND AIR LLC
 Contractor Mail Address: 3978 ALBEMARLE CHURCH RD - COLUMBIA, NC 27925
 Contractor Phone: 252-797-4100
 Contractor NC License#: L22516

DETAILS RESIDENTIAL

UNITS: 1.00 Cost of Job: \$4,000

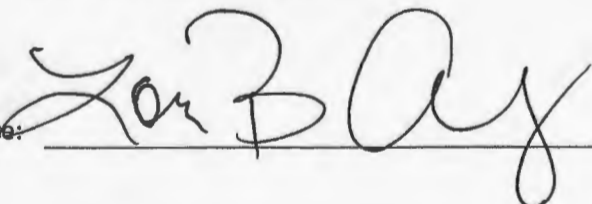
Electrical Contractor ID: L.07391

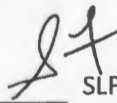
MECHANICAL PROJECT FEE: \$150.00

Comments: CHANGEOUT

The owner and builder are responsible to comply with all regulations and laws, and should personally inspect all construction and be certain to comply with all zoning regulations and building setbacks. The applicant certifies that the information on this permit is correct. That he is owner or duly authorized agent of owner. That all construction shall be as shown on the submitted plans and specifications that he understands this permit is valid for six months and may be revoked for failure to comply with applicable regulations and laws.

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Applicant Signature:  ARMSTRONG AND SON HEATING AND AIR LLC

Inspector Signature: ED KINDERVATER  SLF

Application Reference # 341 on 06/20/2019



County of Dare
 Planning Office
 PO Box Drawer 1000
 Manteo NC 27954

Manteo: (252) 475-5870
 Northern Beach: (252) 475-5871
 Frisco: (252) 475-5878

MECHANICAL PROJECT

MECHANICAL PROJECT#: MECH-381

06/13/2019

Parcel Number: 024309000
 Location: 129 MOTHER VINEYARD RD – MANTEO
 Subdivision: CAPT ELLERY C MIDGETT HOMEPL
 Legal Description: LOT: 1 BLK: SEC:

Owner Name: FRED I BRUMBACH
 Owner Mail Address: 129 MOTHER VINEYARD RD - MANTEO, NC 27954
 Owner Contact Information:

Contractor Name: ARMSTRONG AND SON HEATING AND AIR LLC
 Contractor Mail Address: 3978 ALBEMARLE CHURCH RD - COLUMBIA, NC 27925
 Contractor Phone: 252-797-4100
 Contractor NC License#: L22516

DETAILS RESIDENTIAL

UNITS: 1.00 Cost of Job: \$3,000

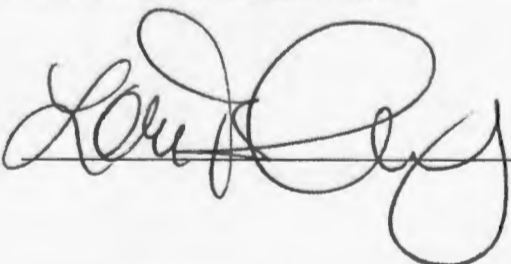
Electrical Contractor ID: L07391

MECHANICAL PROJECT FEE: \$150.00

Comments: INSTALL 30,000 BTU DAIKIN MINI SPLIT

The owner and builder are responsible to comply with all regulations and laws, and should personally inspect all construction and be certain to comply with all zoning regulations and building setbacks. The applicant certifies that the information on this permit is correct. That he is owner or duly authorized agent of owner. That all construction shall be as shown on the submitted plans and specifications that he understands this permit is valid for six months and may be revoked for failure to comply with applicable regulations and laws.

Call Building Inspector (24 Hours in advance) for inspections at Dare County Offices Manteo Office 252.475.5870, Northern Beach Office 252.475.5871 or Frisco Office 252.475.5878

Applicant Signature:  ARMSTRONG AND SON HEATING AND AIR LLC

Inspector Signature: ED KINDERVATER  SLF

Application Reference # 289 on 06/13/2019



County of Dare
 Planning Office
 PO Box Drawer 1000
 Manteo NC 27954

Manteo: (252) 475-5870
 Northern Beach: (252) 475-5871
 Frisco: (252) 475-5878

MECHANICAL PROJECT

MECHANICAL PROJECT#: MECH-380

06/13/2019

Parcel Number: 025368000
 Location: 1273 BURNSIDE RD – MANTEO
 Subdivision: SUBDIVISION - NONE
 Legal Description: LOT: 1 BLK: SEC:

Owner Name: ALISON M HOOD
 Owner Mail Address: 1273 BURNSIDE RD - MANTEO, NC 27954
 Owner Contact Information:

Contractor Name: ARMSTRONG AND SON HEATING AND AIR LLC
 Contractor Mail Address: 3978 ALBEMARLE CHURCH RD - COLUMBIA, NC 27925
 Contractor Phone: 252-797-4100
 Contractor NC License#: L22516

DETAILS RESIDENTIAL

UNITS: 2.00 Cost of Job: \$8,500

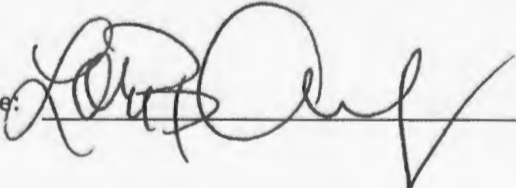
Electrical Contractor ID: L.07391

MECHANICAL PROJECT FEE: \$150.00

**Comments: CHANGEOUT 2 TON TRANE SPLIT SYSTEM AND
 AND 1.5 TON TRANE SPLIT SYSTEM**

The owner and builder are responsible to comply with all regulations and laws, and should personally inspect all construction and be certain to comply with all zoning regulations and building setbacks. The applicant certifies that the information on this permit is correct. That he is owner or duly authorized agent of owner. That all construction shall be as shown on the submitted plans and specifications that he understands this permit is valid for six months and may be revoked for failure to comply with applicable regulations and laws.

Call Building Inspector (24 Hours in advance) for inspections at Dare County Offices Manteo Office 252.475.5870, Northern Beach Office 252.475.5871 or Frisco Office 252.475.5878

Applicant Signature:  ARMSTRONG AND SON HEATING AND AIR LLC

Inspector Signature: ED KINDERVATER  SLF

Application Reference # 193 on 05/29/2019



County of Dare
Planning Office
PO Box Drawer 1000
Manteo NC 27954

Manteo: (252) 475-5870
Northern Beach: (252) 475-5871
Frisco: (252) 475-5878

MECHANICAL PROJECT

MECHANICAL PROJECT#: MECH-375

06/12/2019

Parcel Number: 025251013
Location: 1021 DRIFTWOOD DR - MANTEO
Subdivision: SUBDIVISION - NONE
Legal Description: LOT: PARCEL 2 BLK: SEC:

Owner Name: KELLOGG SUPPLY CO INC
Owner Mail Address: P O BOX 99 - MANTEO, NC 27954
Owner Contact Information:

Contractor Name: R A HOY HEATING AND AIR CONDITIONING INC
Contractor Mail Address: PO BOX 265 - KITTY HAWK, NC 27949
Contractor Phone: 252-261-8178
Contractor NC License#: L13056

DETAILS RESIDENTIAL

UNITS: 1.00 Cost of Job: \$2,788

Electrical Contractor ID: 22222-L MECHANICAL PROJECT FEE: \$150.00

Comments: CHANGE OUT PTAC UNIT WITH AMMA 1200BTU INCLUDES WALL SLEEVE

The owner and builder are responsible to comply with all regulations and laws, and should personally inspect all construction and be certain to comply with all zoning regulations and building setbacks. The applicant certifies that the information on this permit is correct. That he is owner or duly authorized agent of owner. That all construction shall be as shown on the submitted plans and specifications that he understands this permit is valid for six months and may be revoked for failure to comply with applicable regulations and laws.

Call Building Inspector (24 Hours in advance) for inspections at Dare County Offices Manteo Office 252.475.5870, Northern Beach Office 252.475.5871 or Frisco Office 252.475.5878

Applicant Signature:  R A HOY HEATING AND AIR CONDITIONING INC

Inspector Signature: ED KINDERVATER AYT

Application Reference # 286 on 06/12/2019



County of Dare
 Planning Office
 PO Box Drawer 1000
 Manteo NC 27954

Manteo: (252) 475-5870
 Northern Beach: (252) 475-5871
 Frisco: (252) 475-5878

MECHANICAL PROJECT

MECHANICAL PROJECT#: MECH-373

06/11/2019

Parcel Number: 024410062
 Location: 138 FORT HUGAR WAY – MANTEO
 Subdivision: HERITAGE POINT PHASE 3
 Legal Description: LOT: 103 BLK: SEC:

Owner Name: NICHOLAS J P COTTER
 Owner Mail Address: 1401 SOUTHWIND CT - VIENNA, VA 22182
 Owner Contact Information:

Contractor Name: BEACH AIR OF THE OUTER BANKS LLC
 Contractor Mail Address: PO BOX 1047 - MANTEO, NC 27954
 Contractor Phone: 252-473-1995
 Contractor NC License#: L29768

DETAILS RESIDENTIAL

UNITS: 1.00 Cost of Job: \$7,240
 Electrical Contractor ID: U.4354

MECHANICAL PROJECT FEE: \$150.00

Comments: CHANGEOUT 2 TON 16 SEER AIR HANDLER AND HEAT PUMP

The owner and builder are responsible to comply with all regulations and laws, and should personally inspect all construction and be certain to comply with all zoning regulations and building setbacks. The applicant certifies that the information on this permit is correct. That he is owner or duly authorized agent of owner. That all construction shall be as shown on the submitted plans and specifications that he understands this permit is valid for six months and may be revoked for failure to comply with applicable regulations and laws.

Call Building Inspector (24 Hours in advance) for inspections at Dare County Offices Manteo Office 252.475.5870, Northern Beach Office 252.475.5871 or Frisco Office 252.475.5878

Applicant Signature: Cate Jordan BEACH AIR OF THE OUTER BANKS LLC

Inspector Signature: ED KINDERVATER SLF

Application Reference # 285 on 06/11/2019



County of Dare
 Planning Office
 PO Box Drawer 1000
 Manteo NC 27954

Manteo: (252) 475-5870
 Northern Beach: (252) 475-5871
 Frisco: (252) 475-5878

MECHANICAL PROJECT

MECHANICAL PROJECT#: MECH-334

06/05/2019

APPLICATION 248

Parcel Number: 024233000
 Location: 175 AIRPORT RD – MANTEO
 Subdivision: EVANSVILLE SUBDIV
 Legal Description: LOT: 65 BLK: SEC:

Owner Name: JUNE LEIGH WALKER
 Owner Mail Address: 175 AIRPORT RD - MANTEO, NC 27954
 Owner Contact Information:

Contractor Name: BEACH AIR OF THE OUTER BANKS LLC
 Contractor Mail Address: PO BOX 1047 - MANTEO, NC 27954
 Contractor Phone: 252-473-1995
 Contractor NC License#: L29768

DETAILS

UNITS:	1.00	Cost of Job:	\$6,804
Number of Units:	1		
Electrical Contractor ID:	U.4354	MECHANICAL PROJECT FEE:	\$150.00

Comments: CHANGEOUT 3 TON 16 SEER HEAT PUMP AND AIR HANDLER

The owner and builder are responsible to comply with all regulations and laws, and should personally inspect all construction and be certain to comply with all zoning regulations and building setbacks. The applicant certifies that the information on this permit is correct. That he is owner or duly authorized agent of owner. That all construction shall be as shown on the submitted plans and specifications that he understands this permit is valid for six months and may be revoked for failure to comply with applicable regulations and laws.

Call Building Inspector (24 Hours in advance) for inspections at Dare County Offices Manteo Office 252.475.5870, Northern Beach Office 252.475.5871 or Frisco Office 252.475.5878

Applicant Signature: Cate Jordan BEACH AIR OF THE OUTER BANKS LLC

Inspector Signature: ED KINDERVATER SLF SLF



County of Dare
 Planning Office
 PO Box Drawer 1000
 Manteo NC 27954

Manteo: (252) 475-5870
 Northern Beach: (252) 475-5871
 Frisco: (252) 475-5878

ELECTRICAL PERMIT

ELECTRICAL PERMIT#: ELEC-445

06/26/2019

Parcel Number: 025866007
 Location: 222 TOLER RD – MANTEO
 Subdivision: SKYCO PINES
 Legal Description: LOT: 7 BLK: SEC:

Owner Name: ALICE H WILSON
 Owner Mail Address: 139 NEWSOME GROVE RD - AHOSKIE, NC 27910
 Owner Contact Information:

Contractor Name: BEACON ELECTRICAL CONTRACTOR
 Contractor Mail Address: 129 SCUPPERNONG RD - MANTEO, NC 27954
 Contractor Phone: 2524895680
 Contractor NC License#: I-28692

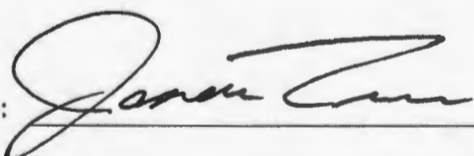
DETAILS RESIDENTIAL

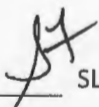
Amp Increase:	0	Cost of Job:	\$1,500
Service Amps:	200	ELECTRICAL PERMIT FEE:	\$150.00

Comments: CLEAN UP ELECTRIC
 REPLACE DISCONNECT

The owner and builder are responsible to comply with all regulations and laws, and should personally inspect all construction and be certain to comply with all zoning regulations and building setbacks. The applicant certifies that the information on this permit is correct. That he is owner or duly authorized agent of owner. That all construction shall be as shown on the submitted plans and specifications that he understands this permit is valid for six months and may be revoked for failure to comply with applicable regulations and laws.

Call Building Inspector (24 Hours in advance) for inspections at Dare County Offices Manteo Office 252.475.5870, Northern Beach Office 252.475.5871 or Frisco Office 252.475.5878

Applicant Signature:  BEACON ELECTRICAL CONTRACTOR

Inspector Signature: ED KINDERVATER  SLF



County of Dare
Planning Office
PO Box Drawer 1000
Manteo NC 27954

Manteo: (252) 475-5870
Northern Beach: (252) 475-5871
Frisco: (252) 475-5878

ELECTRICAL PERMIT

ELECTRICAL PERMIT#: ELEC-440

06/25/2019

Parcel Number: 030050000
Location: 133 N FEARING PL – MANTEO
Subdivision: BRAKEWOOD SEC. 3
Legal Description: LOT: 51 BLK: SEC: 3

Owner Name: ROBERT VAZQUEZ
Owner Mail Address: 133 FEARING PLACE LN - MANTEO, NC 27954
Owner Contact Information:

Contractor Name: SUBURBAN ELECTRIC SERVICES INC
Contractor Mail Address: 1078 N HWY 64/264 - MANTEO, NC 27954
Contractor Phone: 252-475-1372
Contractor NC License#: U-30633

DETAILS RESIDENTIAL

Amp Increase: 0
Service Amps: 200

Cost of Job: \$7,000

ELECTRICAL PERMIT FEE: \$150.00

Comments: INSTALL 16 KW GENERAC GENERATOR
WITH 200 AMP SERVICE

The owner and builder are responsible to comply with all regulations and laws, and should personally inspect all construction and be certain to comply with all zoning regulations and building setbacks. The applicant certifies that the information on this permit is correct. That he is owner or duly authorized agent of owner. That all construction shall be as shown on the submitted plans and specifications that he understands this permit is valid for six months and may be revoked for failure to comply with applicable regulations and laws.

Call Building Inspector (24 Hours in advance) for inspections at Dare County Offices Manteo Office 252.475.5870, Northern Beach Office 252.475.5871 or Frisco Office 252.475.5878

Applicant Signature:  SUBURBAN ELECTRIC SERVICES INC

Inspector Signature: ED KINDERVATER  SLF

Application Reference # 358 on 06/25/2019



County of Dare
 Planning Office
 PO Box Drawer 1000
 Manteo NC 27954

Manteo: (252) 475-5870
 Northern Beach: (252) 475-5871
 Frisco: (252) 475-5878

ELECTRICAL PERMIT

ELECTRICAL PERMIT#: ELEC-383

06/13/2019

Parcel Number: 023888000
 Location: BOAT RAMP RD – MANNS HARBOR
 Subdivision: SUBDIVISION - NONE
 Legal Description: LOT: BLK: SEC:

Owner Name: WHITE'S SHOPPING CENTER
 Owner Mail Address: PO BOX 9 - MANNS HARBOR, NC 27953
 Owner Contact Information:

Contractor Name: SUBURBAN ELECTRIC SERVICES INC
 Contractor Mail Address: 1078 N HWY 64/264 - MANTEO, NC 27954
 Contractor Phone: 252-475-1372
 Contractor NC License#: U-30633

DETAILS RESIDENTIAL

Cost of Job: \$1,500

Amp Increase: 0
 Service Amps: 200

ELECTRICAL PERMIT FEE: \$150.00

Comments: MYRA JUNE JENKINS, TRAILER LOT # 34, 7471 PINE STRAW LANE
 LOCATED DIRECTLY BEHIND SEAFOOD STORE
 REPLACE EXT DISCONNECT AND UNDERGROUND WIRE

The owner and builder are responsible to comply with all regulations and laws, and should personally inspect all construction and be certain to comply with all zoning regulations and building setbacks. The applicant certifies that the information on this permit is correct. That he is owner or duly authorized agent of owner. That all construction shall be as shown on the submitted plans and specifications that he understands this permit is valid for six months and may be revoked for failure to comply with applicable regulations and laws.

Call Building Inspector (24 Hours in advance) for inspections at Dare County Offices Manteo Office 252.475.5870, Northern Beach Office 252.475.5871 or Frisco Office 252.475.5878

Applicant Signature:  SUBURBAN ELECTRIC SERVICES INC

Inspector Signature: ED KINDERVATER  SLF

Application Reference # 294 on 06/13/2019



MECHANICAL PERMIT

PERMIT NUMBER: 4716

DATE: 5-30-19

OWNER: Laura Pickens
ADDRESS: Box 21776
CITY: St. Simons Isl. STATE: GA ZIP: 31522
PHONE: 828-674-5120

CONTRACTOR: DBH Fire One Hour Heating & Air conditioning
ADDRESS: Box 2600
CITY: KOH STATE: NC ZIP: 27948
PHONE: 573-9465 tom

LOCATION: 601 VICARS LN
BUILDER: _____

NUMBER OF HEATING UNITS: 1
NUMBER OF B.T.U.'S: 39,000
LICENSE NUMBER: 12643 H-2-3 CLASS 1
COST: 5789.00

NUMBER OF REGISTERS: _____
TONNAGE: 2 1/2
WORK ORDER NUMBER: _____
Permit Cost: 150.00

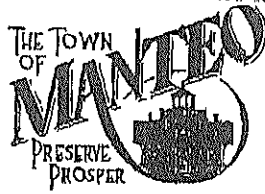
If repairing or altering, please describe work: Replace HVAC with 145seer 2 1/2 ton
Daikin air handler & heat pump

CALL BUILDING INSPECTOR 24 HOURS IN ADVANCE FOR ALL INSPECTIONS

DATE OF ISSUANCE: 6/4/19

SEALS: Randy McIndy
(Applicant)

[Signature]
(Inspector)



MECHANICAL PERMIT

PERMIT NUMBER: 4717

DATE: 6-3-19

OWNER: Theresa Nicholea Taylor
ADDRESS: 207 Queen Elizabeth Ave #23
CITY: Manteo STATE: NC ZIP: 27954
PHONE: _____

CONTRACTOR: Armstrong & Son Heating & Air
ADDRESS: 3978 Albemarle Church Rd
CITY: Columbia STATE: NC ZIP: 27985
PHONE: 852-797-4100

LOCATION: 207 Queen Elizabeth Ave
BUILDER: _____

PARCEL NUMBER: 024780023

NUMBER OF HEATING UNITS: 1
NUMBER OF B.T.U.'S: _____
LICENSE NUMBER: 22516
COST: \$4800.00

NUMBER OF REGISTERS: _____
TONNAGE: 3 ton
WORK ORDER NUMBER: _____
Permit Cost: 150.00

If repairing or altering, please describe work: 3 ton Trane 14 seer split system
- Change out -

CALL BUILDING INSPECTOR 24 HOURS IN ADVANCE FOR ALL INSPECTIONS

DATE OF ISSUANCE: 6/16/19

SEAL: Olivia Bouldge
(Applicant)

[Signature]
(Inspector)



MECHANICAL PERMIT

PERMIT NUMBER: 4718

DATE: 6-6-19

OWNER: Brent Tomlinson
ADDRESS: 1034 Pirates Way
CITY: Manteo STATE: NC ZIP: 27954
PHONE: _____

CONTRACTOR: Armstrong & Son Heating & Air
ADDRESS: 3978 Albemarle Church Rd
CITY: Columbia STATE: NC ZIP: 27925
PHONE: 252-797-4100

LOCATION: 1034 Pirates Way
BUILDER: _____

PARCEL NUMBER: 031064016

NUMBER OF HEATING UNITS: 1
NUMBER OF B.T.U.'s: _____
LICENSE NUMBER: 22516
COST: 6,000

NUMBER OF REGISTERS: _____
TONNAGE: 2 ton
WORK ORDER NUMBER: _____
Permit Cost: 150.00

If repairing or altering, please describe work: change out 2 ton frame heat pump and Air Handles

CALL BUILDING INSPECTOR 24 HOURS IN ADVANCE FOR ALL INSPECTIONS

DATE OF ISSUANCE: 6/6/19

SEALS: [Signature]
(Applicant)

[Signature]
(Inspector)



MECHANICAL PERMIT

PERMIT NUMBER: 4719

DATE: 06/11/2019

OWNER: RICHARD BARTELL
ADDRESS: 615 PIRATES WAY
CITY: MANTEO STATE: NC ZIP: 27954
PHONE: 804-513-7943
LOCATION: 615 PIRATES WAY
BUILDER: _____

CONTRACTOR: R A HOY HEATING & A/C, INC
ADDRESS: P O BOX #179
CITY: KITTY HAWK STATE: NC ZIP: 27949
PHONE: (252) 261-2008

NUMBER OF HEATING UNITS: 1
NUMBER OF B.T.U.'S: _____
LICENSE NUMBER: 13056
COST: \$ 6411

NUMBER OF REGISTERS: _____
TONNAGE: 2.5
WORK ORDER NUMBER: _____
Permit Cost: 8150

If repairing or altering, please describe work: _____
C/O 2 TON 14 SEER TRANE SYSTEM ROOF TOP WITH T6 THERMOSTAT

CALL BUILDING INSPECTOR 24 HOURS IN ADVANCE FOR ALL INSPECTIONS

DATE OF ISSUANCE: 6/11/19

SEALS: [Signature]
(Applicant)

[Signature]
(Inspector)
Fred Featherstone



MECHANICAL PERMIT

PERMIT NUMBER: 4720

DATE: 6/11/19

OWNER: Richard Kessler
ADDRESS: 20 Sailfish Drive
CITY: Manteo STATE: NC ZIP: 27954
PHONE: 703-966-4862

CONTRACTOR: Beach Air Heating and Cooling
ADDRESS: PO Box 1047
CITY: Manteo STATE: NC ZIP: 27954
PHONE: 252-473-1995

LOCATION: 20 Sailfish Dr Manteo NC 27954 PARCEL NUMBER: 025694319
BUILDER: _____

NUMBER OF HEATING UNITS: 1 NUMBER OF AIR HANDLERS: 1
NUMBER OF REGISTERS: _____ TONNAGE: 2
LICENSE NUMBER: 29768 WORK ORDER NUMBER: _____
COST: \$6,433.00 Permit Cost: \$150.00

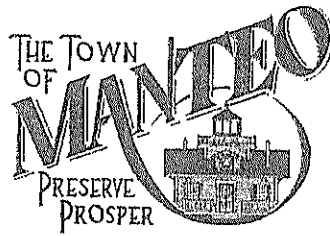
If repairing or altering, please describe work: Remove 2 ton 16 seer air handler and heat pump,
Install new 2 ton 16 seer air handler and heat pump

CALL BUILDING INSPECTOR 24 HOURS IN ADVANCE FOR ALL INSPECTIONS

DATE OF ISSUANCE: 6/11/19 SEALS: Cato Jordan
(Applicant)

Fred Featherstone
(Inspector)

(UPDATED 7/2017)



PERMIT NUMBER: 4721

MOBILE HOME PERMIT APPLICATION

DATE: 06/10/19

OWNER'S NAME: Zoila R. Torres Huarcaya
OWNER'S ADDRESS: 117 Lot 6 Etheridge Rd
CITY/STATE/ZIP: Manteo, NC 27954
OWNER'S PHONE #: _____

PROPERTY INFORMATION

Parcel Number # 025623000
ADDRESS 604 S. Walker Raleigh St. Manteo, NC
FLOOD ZONE AE BASE FLOOD 8.2
GROUND ELEVATION 5.5

SELLER'S INFORMATION

SELLER'S NAME/COMPANY ROBERT Peterson & Lyda Peterson
CONTACT PERSON _____
SELLER'S/COMPANY ADDRESS PO. Box 1279 700A FERNANDA ST
CITY/STATE/ZIP MANTEO - NC 27954
PHONE # 252-305-0756
FAX # _____

MOVER'S INFORMATION

MOVER'S NAME Vega mobile home Contractors
MOVER'S ADDRESS 4577 Our Place Lane
CITY/STATE/ZIP Washington, NC 27889
MOVER'S LICENSE # 3308 / 252-975-3768

INSTALLER'S INFORMATION IF DIFFERENT FROM MOVER

INSTALLER'S NAME - Same - Fred Stafford
INSTALLER'S ADDRESS _____
CITY/STATE/ZIP _____
INSTALLER'S PHONE # _____
FAX # _____
INSTALLER'S LICENSE # _____

MOBILE HOME DATA

MAKE Oakwood MODEL B63 YEAR 1994
WIDTH & LENGTH 26.7 X 64.3 Square Feet 1664

TOTAL LIVING AREA 2 SQ. FT. HURRICANE ZONE 2
NUMBER OF BEDROOMS 3
TYPE OF FOUNDATION (BLOCK, BRICK, PILING, OR WOOD) lynde
SERIAL # 2-68-28-CK3-228530 HUD # N/A-369842 & 369843
COST OF MOBILE HOME \$ 8,000.00

APPLICANT'S SIGNATURE [Signature] DATE 06/10/19

INCOMPLETE APPLICATIONS WILL NOT BE ACCEPTED; FILL IN ALL SPACES. IF NOT APPLICABLE INDICATE N/A

ADDITIONAL NOTES: _____

- EACH APPLICATION MUST BE ACCOMPANIED BY:
- SITE PLAN SHOWING ACTUAL DIMENSIONS OF THE LOT, ALL STRUCTURES, DRIVEWAYS AND PARKING
 - ELEVATION OF THE SITE
 - CAMA PERMIT IF REQUIRED

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

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

Estimated or Contract Cost: \$10,000 Permit Cost: \$858.40

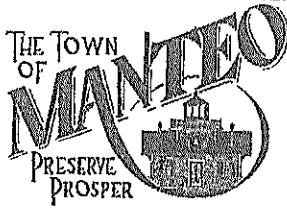
Date of Issuance: _____

Seals: [Signature]
Applicant

[Signature]
Inspector

[Signature]
Zoning Official

Conditions of Permit: _____



ELECTRICAL PERMIT

PERMIT NUMBER: 4722

DATE: 6/13/19

OWNER: James Mercer
ADDRESS: 520 Harbor Heights Dr.
CITY: Lexington STATE: SC ZIP: 29072
PHONE: _____

CONTRACTOR: Suburban Electric Services, Inc.
ADDRESS: P.O. Box 336
CITY: Manns Harbor STATE: NC ZIP: 27953
PHONE: 252-475-1372

LOCATION: 64 Ballast Pt Drive PARCEL NUMBER: 025694436
BUILDER: _____

RESIDENTIAL: NEW ALTERATION
COMMERCIAL: NEW ALTERATION

NC POWER WORK REQUEST NUMBER OR POWER METER NUMBER (IF APPLICABLE) _____
SERVICE AMPS: 200

LICENSE NUMBER: U-30633 INCREASED TO: _____
COST: \$1500 WORK ORDER NUMBER: _____
Permit Cost: \$ 50

If repairing or altering, please describe work: Replace meter base and disconnect panel

CALL BUILDING INSPECTOR 24 HOURS IN ADVANCE FOR ALL INSPECTIONS

DATE OF ISSUANCE: 6/13/19 SEALS: *SMJ*
(Applicant)

Erin Featherstone
(Inspector)



BUILDING PERMIT

PERMIT NUMBER: 4723

DATE: 6/13/2019

OWNER: Roberto Inchasutegui
ADDRESS: 201 Kemp Road East
CITY: Greensboro STATE: NC ZIP: 27410

BUILDER: MELSTONIC MARINE CONST, INC.
CONTRACTOR LICENSE #: 78077
ADDRESS: 7000 Maritime Woods Drive
CITY: Manteo STATE: NC ZIP: 27954
PHONE: 252-202-2678 cell

LOCATION OF BUILDING SITE: 47 Ballast Point Drive
PARCEL NUMBER: 025694404 FLOOD ZONE: _____ ZONING DISTRICT: _____
NC POWER WORK REQUEST NUMBER OR POWER METER NUMBER (IF APPLICABLE) _____
ERECT: _____ ALTER: _____ REPAIR: _____

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

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

ADDITIONAL NOTES: Construct a new pier as per cama permit and engineering

EACH APPLICATION MUST BE ACCOMPANIED BY:

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

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

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

Estimated or Contract Cost: 40,881.00

Review 50.00

Date of Issuance: 6/25/19

Permit Cost: 215.31

Seals: [Signature]
Applicant

[Signature]
Inspector

[Signature]
Zoning Official

Conditions of Permit: _____



MECHANICAL PERMIT

PERMIT NUMBER: 4724

DATE: 6-21-19

OWNER: Blue Water Raw Bar + Grill
ADDRESS: 336 West Villa Dunes Rd
CITY: Washhead STATE: NC ZIP: 27989
PHONE: _____

CONTRACTOR: Armstrong + Son Heating + Air
ADDRESS: 3978 Aldemarle Church Rd
CITY: Columbia STATE: NC ZIP: 27925
PHONE: 252-797-4100

LOCATION: 2000 sailfish fish Dr. PARCEL NUMBER: 025694529
BUILDER: _____

NUMBER OF HEATING UNITS: _____
NUMBER OF B.T.U.'s: _____
LICENSE NUMBER: 27516
COST: \$ 9,500.

NUMBER OF REGISTERS: _____
TONNAGE: 5 ton
WORK ORDER NUMBER: _____
Permit Cost: \$ 150

If repairing or altering, please describe work: Change out 5 ton Rheem H/P
+ 5 ton Goodman straight A/C

CALL BUILDING INSPECTOR 24 HOURS IN ADVANCE FOR ALL INSPECTIONS

DATE OF ISSUANCE: 6/27/19

SEALS: [Signature]
(Applicant)

[Signature]
(Inspector)
Leadhuster

[Handwritten notes]



MECHANICAL PERMIT

PERMIT NUMBER: 4725

DATE: 6/24/19

OWNER: Shallowbag Bay Club
ADDRESS: 1100 N Bay Club Drive
CITY: Manteo STATE: NC ZIP: 27954
PHONE: _____

CONTRACTOR: Beach Air Heating and Cooling
ADDRESS: 551 NC 345
CITY: Manteo STATE: nc ZIP: 27954
PHONE: _____

LOCATION: 1100 S Bay Club Drive Building #8
BUILDER: _____

PARCEL NUMBER: 030835087

NUMBER OF HEATING UNITS: 1
NUMBER OF REGISTERS: _____
LICENSE NUMBER: 29768
COST: \$4,991.00

NUMBER OF AIR HANDLERS: 1
TONNAGE: 2
WORK ORDER NUMBER: _____
Permit Cost: 150.00

If repairing or altering, please describe work: Remove 2 ton 14 seer air handler and heat pump
Install 2 ton 14 seer air handler and heat pump

CALL BUILDING INSPECTOR 24 HOURS IN ADVANCE FOR ALL INSPECTIONS

DATE OF ISSUANCE: 6/24/19 SEALS: [Signature]
(Applicant)

[Signature]
(Inspector)

(UPDATED 7/2017)



MECHANICAL PERMIT

PERMIT NUMBER: 4726

DATE: 6/24/19

OWNER: Shallowbag Bay Club
ADDRESS: 1100 N Bay Club Drive
CITY: Manteo STATE: NC ZIP: 27954
PHONE: _____

CONTRACTOR: Beach Air Heating and Cooling
ADDRESS: 551 NC 345
CITY: Manteo STATE: nc ZIP: 27954
PHONE: _____

LOCATION: 1100 n Bay Club Drive Building #5 PARCEL NUMBER: 030835087
BUILDER: _____

NUMBER OF HEATING UNITS: 1 NUMBER OF AIR HANDLERS: 1
NUMBER OF REGISTERS: _____ TONNAGE: 2
LICENSE NUMBER: 29768 WORK ORDER NUMBER: _____
COST: \$5,391.00 Permit Cost: 150.00

If repairing or altering, please describe work: Remove 2 ton 14 seer air handler and heat pump
Install 2 ton 14 seer air handler and heat pump

CALL BUILDING INSPECTOR 24 HOURS IN ADVANCE FOR ALL INSPECTIONS

DATE OF ISSUANCE: 6/24/19 SEALS: [Signature]
(Applicant)

[Signature]
(Inspector)

(UPDATED 7/2017)

TOWN OF SOUTHERN SHORES
PLANNING AND CODE
ENFORCEMENT

5375 N Virginia Dare Trl
Southern Shores NC 27949
(252) 261-2394 ext 3 tel
(252) 255-0876 fax
www.southernshores-nc.gov



SUB-CONTRACTOR SIGN OFF AND/OR PERMIT

Date 4-3-19
PROJECT ADDRESS 330 Hillcrest Dr (TENNIS CTS)
Owner Southern Shores Civic Assn
Mailing Address 5375 VIRGINIA DARE TRAIL
City, State, Zip Southern Shores, NC 27949
Phone 252-261-4619

Permit Number 10538
Fee \$ 100

EXISTING Building Permit Number _____ NO FEE (if work is associated with a Building Permit) _____

ELECTRICAL = Licensee Name JASON A. YER NC License/Classification _____
Company Name J. ALAN ELECTRICAL SER
Address P.O. Box 427 Phone 252-573-8097
City, State & zip Kitty Hawk, NC 27949 Estimated Project Cost \$900
Description of Work: Lighting outdoor Load Center and Meter base, Recessed

PLUMBING = Licensee Name _____ NC License/Classification _____
Company Name _____
Address _____ Phone _____
City State & zip _____ Estimated Project Cost _____
Description of Work: _____

GAS = Licensee Name _____ NC License/Classification _____
Company Name _____
Address _____ Phone _____
City State & zip _____ Estimated Project Cost _____
Description of Work: _____

MECHANICAL = Licensee Name _____ NC License/Classification _____
Company Name _____
Address _____ Phone _____
City State & zip _____ Estimated Project Cost _____
Description of Work: _____

FIRE SPRINKLER = Licensee Name _____ NC License/Classification _____
Company Name _____
Address _____ Phone _____
City State & zip _____ Estimated Project Cost _____
Description of Work: _____

I hereby certify that all information in this application is correct and all work will comply with the State Building Code and all other local laws and ordinances and regulations. The Inspection Department will be notified of any changes in the approved plans and specification for the project permitted herein.

Jason A. Yer 5/30/19
Signature of Licensee Date

Buddy Shelton 4-3-19
Signature of Permit Official Date

TOWN OF SOUTHERN SHORES
PLANNING AND CODE
ENFORCEMENT

5375 N Virginia Dare Trl
Southern Shores NC 27949
(252) 261-2394 ext 3 tel
(252) 255-0876 fax
www.southernshores-nc.gov



SUB-CONTRACTOR SIGN OFF AND/OR PERMIT

Date 6/3/2019

PROJECT ADDRESS 16 6TH AVE

Owner IANA ELENA BALITSKY

Mailing Address 4231 GUNBY RD

City, State, Zip MARION STATION, MD 21838

Phone _____

Permit Number 10540
Fee \$ 100

EXISTING Building Permit Number _____ NO FEE (if work is associated with a Building Permit) _____

ELECTRICAL = Licensee Name BRYAN MULLER NC License/Classification _____

Company Name PRECISE ELECTRICAL

Address _____ Phone _____

City State & zip _____ Estimated Project Cost _____

Description of Work: _____

PLUMBING = Licensee Name _____ NC License/Classification _____

Company Name _____

Address _____ Phone _____

City State & zip _____ Estimated Project Cost _____

Description of Work: _____

GAS = Licensee Name _____ NC License/Classification _____

Company Name _____

Address _____ Phone _____

City State & zip _____ Estimated Project Cost _____

Description of Work: _____

MECHANICAL = Licensee Name ANTHONY PRITCHETT NC License/Classification 180666

Company Name MASTER HEATING & COOLING

Address PO Box 707 Phone 252.255.0095

City State & zip KITTY HAWK, NC 27948 Estimated Project Cost 14000

Description of Work: INSTALL (1) .5 TON DUCTLESS MINI SPLIT, R410A, 18 SEER, AIRTEMP

FIRE SPRINKLER = Licensee Name _____ NC License/Classification _____

Company Name _____

Address _____ Phone _____

City State & zip _____ Estimated Project Cost _____

Description of Work: _____

I hereby certify that all information in this application is correct and all work will comply with the State Building Code and all other local laws and ordinances and regulations. The Inspection Department will be notified of any changes in the approved plans and specification for the project permitted herein.

[Signature]
Signature of Licensee
6/3/19
Date

[Signature]
Signature of Permit Official
6-3-19
Date

TOWN OF SOUTHERN SHORES
PLANNING AND CODE
ENFORCEMENT

5375 N Virginia Dare Trl
Southern Shores NC 27949
(252) 261-2394 ext 4 tel
(252) 255-0876 fax
www.southernshores-nc.gov



SUB-CONTRACTOR SIGN OFF AND/OR PERMIT

Date 5/17/19

PROJECT ADDRESS 5 Pelican Watch Way #A

Owner Glenn Wood
Mailing Address 5 Pelican Watch Way
City, State, Zip Southern Shores, NC 27949
Phone 252-734-2982

Permit Number 10524
Fee \$ 100

EXISTING Building Permit Number _____ NO FEE (if work is associated with a Building Permit) _____

ELECTRICAL = Licensee Name _____ NC License/Classification _____

Company Name _____

Address _____ Phone _____

City State & zip _____ Estimated Project Cost _____

Description of Work: _____

PLUMBING = Licensee Name _____ NC License/Classification _____

Company Name _____

Address _____ Phone _____

City State & zip _____ Estimated Project Cost _____

Description of Work: _____

GAS = Licensee Name _____ NC License/Classification _____

Company Name _____

Address _____ Phone _____

City State & zip _____ Estimated Project Cost _____

Description of Work: _____

MECHANICAL = Licensee Name Nathan Bolton NC License/Classification # 30680

Company Name RS Andrews of Tidewater

Address 4550 Bainbridge Blvd. Phone (757) 998-4234

City State & zip Chesapeake, VA 23320 Estimated Project Cost \$6,000

Description of Work: Replace Heat Pump + Air Handler. Like for Like.

FIRE SPRINKLER = Licensee Name _____ NC License/Classification _____

Company Name _____

Address _____ Phone _____

City State & zip _____ Estimated Project Cost _____

Description of Work: _____

I hereby certify that all information in this application is correct and all work will comply with the State Building Code and all other local laws and ordinances and regulations. The Inspection Department will be notified of any changes in the approved plans and specification for the project permitted herein.

Nathan Bolton
Signature of Licensee
5/17/19
Date

Bucky Shotter
Signature of Permit Official
6-4-19
Date



TOWN OF SOUTHERN SHORES
 5375 N Virginia Dare Trl
 Southern Shores, NC
 27949
 (252) 261-2394 tel
 (252) 255-0876 fax
www.southernshores-nc.gov

SUBCONTRACTOR SIGN OFF AND/OR PERMIT

Date 06/03/2019
 PROJECT ADDRESS 14 TWELFTH AVENUE
 Owner TIMOTHY HUTCHINS
 Mailing Address 6005 COREWOOD LANE
 City, State, Zip BETHESDA, MD 20816
 Phone 301-801-7305

Permit Number 10541
 Fee \$ 100

EXISTING Building Permit Number _____ NO FEE _____

ELECTRICAL = Licensee Name FREDERICK MARKLIN NC License/Classification 22222-L / LTD
 Company Name R A HOY HEATING & A/C. INC
 Address P O BOX 179 Phone (252) 261-2008
 City State & zip KITTY HAWK, NC 27949 Estimated Project Cost INCL in MECH
Description of Work: CONNECTION OF MECH EQUIP BELOW

PLUMBING = Licensee Name _____ NC License/Classification _____
 Company Name _____
 Address _____ Phone _____
 City State & zip _____ Estimated Project Cost _____
Description of Work: _____

GAS = Licensee Name _____ NC License/Classification _____
 Company Name _____
 Address _____ Phone _____
 City State & zip _____ Estimated Project Cost _____
Description of Work: _____

MECHANICAL = Licensee Name DOUGLAS WAKELEY NC License/Classification 13056 / H 2 & 3 P-1
 Company Name R A HOY HEATING & A/C. INC
 Address P O BOX 179 Phone (252) 261-2008
 City State & zip KITTY HAWK, NC 27949 Estimated Project Cost 7322
Description of Work: C/O 3 TON 16 SEER TRANE SYSTEM TOP LEVEL WITH XL724 THERMOSTAT

I hereby certify that all information in this application is correct and all work will comply with the State Building Code and all other local laws and ordinances and regulations. The Inspection Department will be notified of any changes in the approved plans and specification for the project permitted herein.

Douglas Wakeley 06/03/2019
 Signature of Licensee Date
Frederick Marklin (ELEC)

Buddy Sheeta 6-4-19
 Signature of Permit Official Date
J. D. S.

4 Jun 19 WF 8659

TOWN OF SOUTHERN SHORES
PLANNING AND CODE
ENFORCEMENT

5375 N Virginia Dare Trl
Southern Shores NC 27949
(252) 261-2394 ext 3 tel
(252) 255-0876 fax
www.southernshores-nc.gov



SUB-CONTRACTOR SIGN OFF AND/OR PERMIT

Date 4 Jun 19

PROJECT ADDRESS 127 Duck Woods Dr

Owner Nikolaus Smeltzer
Mailing Address _____
City, State, Zip _____
Phone _____

Permit Number 10543
Fee \$ 100

EXISTING Building Permit Number _____ NO FEE (if work is associated with a Building Permit) _____

ELECTRICAL = Licensee Name _____ NC License/Classification _____
Company Name _____
Address _____ Phone _____
City State & zip _____ Estimated Project Cost _____
Description of Work: _____

PLUMBING = Licensee Name _____ NC License/Classification _____
Company Name _____
Address _____ Phone _____
City State & zip _____ Estimated Project Cost _____
Description of Work: _____

GAS = Licensee Name _____ NC License/Classification _____
Company Name _____
Address _____ Phone _____
City State & zip _____ Estimated Project Cost _____
Description of Work: _____

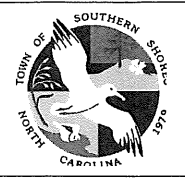
MECHANICAL = Licensee Name Edwin J. Miller NC License/Classification 23299 H3
Company Name Delta T Heating & Air Conditioning, Inc
Address 162 Yaupon Trail Phone 261-0404
City State & zip S.S Estimated Project Cost 5200
Description of Work: Repl. existing upper level HVAC with an American Standard 2.5 ton 14 SEER

FIRE SPRINKLER = Licensee Name _____ NC License/Classification _____
Company Name _____
Address _____ Phone _____
City State & zip _____ Estimated Project Cost _____
Description of Work: _____

I hereby certify that all information in this application is correct and all work will comply with the State Building Code and all other local laws and ordinances and regulations. The Inspection Department will be notified of any changes in the approved plans and specification for the project permitted herein.

Edwin Miller 4 Jun 19
Signature of Licensee Date

Buddy Spitzer 6-4-19
Signature of Permit Official Date
JINS



**TOWN OF SOUTHERN SHORES
PLANNING AND CODE ENFORCEMENT**
5375 N Virginia Dare Trail, Southern Shores, NC 27949
(252) 261-2394 Ext 3 - Office (252) 255-0876 - Fax
www.southernshores-nc.gov

**RESIDENTIAL
BUILDING/FLOODPLAIN DEVELOPMENT PERMIT
BUILDING PERMIT #10542**

Location: 155 High Dune Loop

Parcel: 005064000 PIN: 986716831178

District: 20- SOUTHERN SHORES

Subdivision: CHICHAUK

LotBlkSect: LOT: 310 BLK: SEC:

CAMPBELL, BRYAN EUX
CAMPBELL, LEA ANNE EUX
155 HIGH DUNE LOOP
KITTY HAWK NC 27949

PHONE #: 615-390-4772

CELL #:

BUSINESS NAME: DBD Services, Inc
CONTRACTOR'S NAME: Dien Davis
ADDRESS: PO Box 2318
CITY, STATE, ZIP: Kitty Hawk, NC 27949
OFFICE#: 252-255-1192
CELL#:
FAX#: 252-255-1193
EMAIL: gulfstreampoolsobx@gmail.com

NC G.C. LICENSED CONTRACTOR: X YES NO
NC G.C. LICENSE NUMBER: 60217
LIMITATION: Limited
CLASSIFICATION: Building
QUALIFIER: Norman Van Dien Davis

LIEN AGENT: Fidelity National Title Company, LLC Entry #1050704
19 W Hargett St., Suite 507 / Raleigh, NC 27601

DESCRIPTION OF WORK – (Any deviation from the Building Plan or Site Plan requires prior approval): Construction of a pool, deck and pool barrier fence

SPECIAL CONDITIONS -

TYPE OF CONSTRUCTION: Accessory - Pool	TYPE OF FOUNDATION:	PERMIT TYPE: Residential
TOTAL HEATED/LIVING AREAS (SF):	HEAT:	PROPERTY USE: Single Family Dwelling
TOTAL NON-HEATED AREAS (SF):	A/C:	RESIDENTIAL TYPE: Residence
NUMBER OF STORIES:	INTERIOR WALLS:	ZONING DISTRICT: RS-1
BEDROOMS:	EXTERIOR WALLS:	ZONING PERMIT #: 2019-42
SEPTIC CAPACITY # OF PERSONS:	FIREPLACE:	DATE APPROVED: 5/31/2019
BATHS: ½ BATHS:	ROOF:	
DETACHED GARAGE:	INSULATION:	
STORAGE ENCLOSURE: POOL: 968	ELEVATOR (SF):	
FLOOD ZONE: Shaded X	DECKS (SF):	CAMA PERMIT #: n/a
BASE FLOOD ELEVATION: PLUS 2FT=	PORCHES (SF):	DATE ISSUED:
	WINDOWS MAKE:	SEPTIC PERMIT #: 28765
	TYPE:	DATE ISSUED: 5/31/2019

*****The owner and builder are responsible for the following: All work done shall comply with the State Building Code and all other applicable State and local laws. The applicant certifies that the information on this permit is correct; that he/she is the owner or duly authorized agent of owner; that all construction shall be as shown on the submitted plans and specifications; the he/she understands this permit is valid for 180 days to begin construction and may be revoked for failure to comply with applicable regulations and laws.**

TOTAL CONSTRUCTION COST	\$36,274		
HEATED/LIVING AREA (sf) (new square footage)		X .60/sf (single family) = X .75/sf (all others) =	\$
NON-HEATED AREA (sf) (new square footage)		X .30/sf (single family) = X .35/sf (all others) =	\$
REMODEL/REPAIR/ALTERATION (no additional square footage)	\$	X \$10 per \$1,000 of cost =	\$
		Pool = \$125	\$125.00
		Zoning Permit Fee = \$50	\$50.00
		Plan Review Fee = \$150 or \$100	\$
		Minimum Permit Fee = \$100	\$
		Homeowner's Recovery Fund \$10	\$
		TOTAL FEE	\$175.00

[Signature]
Applicant - Owner/Contractor

[Signature]
DIEN DAVIS
(Please print and sign name)

6-4-19
Date Issued

[Signature]
Building/Code/Zoning Official

6-4-19
Date Approved



**TOWN OF SOUTHERN SHORES
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**RESIDENTIAL
BUILDING/FLOODPLAIN DEVELOPMENT PERMIT
BUILDING PERMIT #10546**

LOCATION: 249 Hillcrest Drive

Parcel: 022138000 PIN: 986814321628
District: 20- SOUTHERN SHORES
Subdivision: SO/SH SOUNDSTIDE BLK 95
LotBlkSect: LOT: 8 BLK: 95 SEC:

MCGANN, SAMUEL W III
249 HILLCREST DR
KITTY HAWK NC 27949

PHONE #: 252-261-1321

CELL #: 252-202-9463

BUSINESS NAME: SeaGrove Homes, Inc
CONTRACTOR'S NAME: Gary Cosgrove
ADDRESS: PO Box 943
CITY, STATE, ZIP: Kitty Hawk, NC 27949
OFFICE#: 252-261-0187
CELL#: 252-207-5736
FAX#:
EMAIL: seagrovehomes@gmail.com

NC G.C. LICENSED CONTRACTOR: X YES NO
NC G.C. LICENSE NUMBER: 31525
LIMITATION: Unlimited
CLASSIFICATION: Residential
QUALIFIER: Gary Cosgrove

LIEN AGENT: n/a

DESCRIPTION OF WORK – (Any deviation from the Building Plan or Site Plan requires prior approval): New accessory pool – pool deck and barrier fence = 858 sf total area

SPECIAL CONDITIONS -

TYPE OF CONSTRUCTION: Accessory Pool	TYPE OF FOUNDATION:	PERMIT TYPE: Residential
TOTAL HEATED/LIVING AREAS (SF):	HEAT:	RESIDENCE/2nd HOME/RENTAL: Residence
TOTAL NON-HEATED AREAS (SF):	A/C:	PROPERTY USE: Single Family Dwelling
NUMBER OF STORIES:	INTERIOR WALLS:	ZONING DISTRICT: RS-1
BEDROOMS:	EXTERIOR WALLS:	ZONING PERMIT #: 2019-43
SEPTIC CAPACITY # OF PERSONS:	FIREPLACE:	DATE ISSUED: 6/5/2019
BATHS: ½ BATHS:	ROOF:	CAMA PERMIT #: n/a
GARAGE: STORAGE BLDG:	INSULATION:	DATE ISSUED:
STORAGE ENCLOSURE: POOL: 858sf total area	ELEVATOR (SF):	SEPTIC PERMIT #: 28279
FLOOD ZONE: Shaded X	DECKS (SF):	DATE ISSUED: 5/31/2019 – approved site plan
BASE FLOOD ELEVATION: PLUS 2FT=	PORCHES (SF):	
	WINDOWS MAKE:	
	TYPE:	

*****The owner and builder are responsible for the following: All work done shall comply with the State Building Code and all other applicable State and local laws. The applicant certifies that the information on this permit is correct; that he/she is the owner or duly authorized agent of owner; that all construction shall be as shown on the submitted plans and specifications; the he/she understands this permit is valid for 180 days to begin construction and may be revoked for failure to comply with applicable regulations and laws.**

TOTAL CONSTRUCTION COST	\$65,000		
HEATED/LIVING AREA (sf) (new square footage)		X .60/sf (single family) = X .75/sf (all others) =	\$
NON-HEATED AREA (sf) (new square footage)		X .30/sf (single family) = X .35/sf (all others) =	\$
REMODEL/REPAIR/ALTERATION (no additional square footage)	\$	X \$10 per \$1,000 of cost =	\$
		Pool = \$125	\$125.00
		Zoning Permit Fee = \$50	\$50.00
		Plan Review Fee = \$150 or \$100	\$
		Minimum Permit Fee = \$100	\$
		Homeowner's Recovery Fund \$10	\$
		TOTAL FEE	\$175.00

Handwritten signature: Gary Cosgrove

Handwritten signature: Gary Cosgrove
(Please print and sign name)

Handwritten date: June 5-19

Applicant - Owner/Contractor

Date Issued

Handwritten signature: B. D. Shelton

Handwritten date: 6-5-19

Building/Code/Zoning Official

Date Approved

Handwritten initials: B. D. S.

TOWN OF SOUTHERN SHORES
PLANNING AND CODE
ENFORCEMENT

5375 N Virginia Dare Trl
Southern Shores NC 27949
(252) 261-2394 ext 4 tel
(252) 255-0876 fax
www.southernshores-nc.gov



SUB-CONTRACTOR SIGN OFF AND/OR PERMIT

Date 05/30/2019

PROJECT ADDRESS 301 N. DOGWOOD TRL

Owner NANCY SHEEHAN
Mailing Address 2416 GREGORY ST
City, State, Zip MADISON WI 53711-1927
Phone 608-515-9434

Permit Number 10539
Fee \$ 100.00

EXISTING Building Permit Number _____ NO FEE (if work is associated with a Building Permit) _____

ELECTRICAL = Licensee Name TIMOTHIE GRIFFITHS NC License/Classification 26180 - UL
Company Name GRIFFITHS ELECTRICAL
Address P.O. BOX 82 Phone 252-599-7891
City State & zip HARBINGER, NC 27941 Estimated Project Cost _____
Description of Work: LINE AND LOW VOLTAGE WIRING

PLUMBING = Licensee Name _____ NC License/Classification _____
Company Name _____
Address _____ Phone _____
City State & zip _____ Estimated Project Cost _____
Description of Work: _____

GAS = Licensee Name _____ NC License/Classification _____
Company Name _____
Address _____ Phone _____
City State & zip _____ Estimated Project Cost _____
Description of Work: _____

MECHANICAL = Licensee Name STEVE SMITH NC License/Classification 30070
Company Name AIR-O-SMITH, INC.
Address 330 N. DOGWOOD TRAIL Phone 252-261-5238
City State & zip SOUTHERN SHORES, NC 27949 Estimated Project Cost 6,400
Description of Work: REPLACE 14 SEER, 2.5-TON SYSTEM

FIRE SPRINKLER = Licensee Name _____ NC License/Classification _____
Company Name _____
Address _____ Phone _____
City State & zip _____ Estimated Project Cost _____
Description of Work: _____

I hereby certify that all information in this application is correct and all work will comply with the State Building Code and all other local laws and ordinances and regulations. The Inspection Department will be notified of any changes in the approved plans and specification for the project permitted herein.

[Signature] 6/5/19
Signature of Licensee Date

[Signature] 05/30/2019 6-5-19
Signature of Permit Official Date
J. D. NIS

TOWN OF SOUTHERN SHORES
 5375 N Virginia Dare Trl
 Southern Shores, NC
 27949
 (252) 261-2394 tel
 (252) 255-0876 fax
 www.southernshores-nc.gov



SUBCONTRACTOR SIGN OFF AND/OR PERMIT

Date 06/05/2019
 PROJECT ADDRESS 145 BAYBERRY TRAIL
 Owner LENN HOOKS
 Mailing Address 134 GRAY FOX RUN
 City, State, Zip CHESNEE, SC 29323
 Phone _____

Permit Number 10547
 Fee \$ 100

EXISTING Building Permit Number _____ NO FEE _____

ELECTRICAL = Licensee Name FREDERICK MARKLIN NC License/Classification 22222-L / LTD
 Company Name R A HOY HEATING & A/C, INC
 Address P O BOX 179 Phone (252) 261-2008
 City State & zip KITTY HAWK, NC 27949 Estimated Project Cost INCL in MECH
 Description of Work: CONNECTION OF MECH EQUIP BELOW

PLUMBING = Licensee Name _____ NC License/Classification _____
 Company Name _____
 Address _____ Phone _____
 City State & zip _____ Estimated Project Cost _____
 Description of Work: _____

GAS = Licensee Name _____ NC License/Classification _____
 Company Name _____
 Address _____ Phone _____
 City State & zip _____ Estimated Project Cost _____
 Description of Work: _____

MECHANICAL = Licensee Name DOUGLAS WAKELEY NC License/Classification 13056 / H 2 & 3 P-1
 Company Name R A HOY HEATING & A/C, INC
 Address P O BOX 179 Phone (252) 261-2008
 City State & zip KITTY HAWK, NC 27949 Estimated Project Cost 5086.00
 Description of Work: C/O 2 TON 14 SEER TRANE SYSTEM FIRST LEVEL WITH WIFI T6 THERMOSTAT

I hereby certify that all information in this application is correct and all work will comply with the State Building Code and all other local laws and ordinances and regulations. The Inspection Department will be notified of any changes in the approved plans and specification for the project permitted herein.

Douglas Wakeley 06/05/2019
 Signature of Licensee Date
Frederick Marklin (ELEC)

Brendy Steele 6-6-19
 Signature of Permit Official Date
by DWS

TOWN OF
SOUTHERN SHORES
 5375 N Virginia Dare Trl
 Southern Shores, NC
 27949
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SUBCONTRACTOR SIGN OFF AND/OR PERMIT

Date 06/06/2019
 PROJECT ADDRESS 8 SANDPIPER LANE
 Owner HARDEE REALTY CORP
 Mailing Address PO BOX 6175
 City, State, Zip PORTSMOUTH, VA 23703
 Phone 757-620-4126

Permit Number 10548
 Fee \$ 100

EXISTING Building Permit Number _____ NO FEE _____

ELECTRICAL = Licensee Name FREDERICK MARKLIN NC License/Classification 22222-L / LTD
 Company Name R A HOY HEATING & A/C. INC
 Address P O BOX 179 Phone (252) 261-2008
 City State & zip KITTY HAWK, NC 27949 Estimated Project Cost INCL in MECH
 Description of Work: CONNECTION OF MECH EQUIP BELOW

PLUMBING = Licensee Name _____ NC License/Classification _____
 Company Name _____
 Address _____ Phone _____
 City State & zip _____ Estimated Project Cost _____
 Description of Work: _____

GAS = Licensee Name _____ NC License/Classification _____
 Company Name _____
 Address _____ Phone _____
 City State & zip _____ Estimated Project Cost _____
 Description of Work: _____

MECHANICAL = Licensee Name DOUGLAS WAKELEY NC License/Classification 13056 / H 2 & 3 P-1
 Company Name R A HOY HEATING & A/C. INC
 Address P O BOX 179 Phone (252) 261-2008
 City State & zip KITTY HAWK, NC 27949 Estimated Project Cost 6962
 Description of Work: C/O 2 TON 16 SEER TRANE SYSTEM TOP LEVEL WITH XL 724 THERMOSTAT

I hereby certify that all information in this application is correct and all work will comply with the State Building Code and all other local laws and ordinances and regulations. The Inspection Department will be notified of any changes in the approved plans and specification for the project permitted herein.

Douglas Wakeley 06/06/2019
 Signature of Licensee Date

Benny S. Shelton 6-6-19
 Signature of Permit Official Date

Frederick Marklin (ELEC)

JUDIS

TOWN OF
SOUTHERN SHORES
5375 N Virginia Dare Trl
Southern Shores, NC
27949
(252) 261-2394 tel
(252) 255-0876 fax
www.southernshores-nc.gov



SUBCONTRACTOR SIGN OFF AND/OR PERMIT

Date 06/07/2019
PROJECT ADDRESS 5 THIRTEENTH AVENUE
Owner BONNIE ABDALLAH
Mailing Address 311 MASSIE LANE
City, State, Zip YORKTOWN, VA 23693
Phone 757-867-6775

Permit Number 10551

Fee \$ 100

EXISTING Building Permit Number _____ NO FEE _____

ELECTRICAL = Licensee Name FREDERICK MARKLIN NC License/Classification 22222-L / LTD
Company Name R A HOY HEATING & A/C, INC
Address P O BOX 179 Phone (252) 261-2008
City State & zip KITTY HAWK, NC 27949 Estimated Project Cost INCL in MECH
Description of Work: CONNECTION OF MECH EQUIP BELOW

PLUMBING = Licensee Name _____ NC License/Classification _____
Company Name _____
Address _____ Phone _____
City State & zip _____ Estimated Project Cost _____
Description of Work: _____

GAS = Licensee Name _____ NC License/Classification _____
Company Name _____
Address _____ Phone _____
City State & zip _____ Estimated Project Cost _____
Description of Work: _____

MECHANICAL = Licensee Name DOUGLAS WAKELEY NC License/Classification 13056 / H 2 & 3 P-1
Company Name R A HOY HEATING & A/C, INC
Address P O BOX 179 Phone (252) 261-2008
City State & zip KITTY HAWK, NC 27949 Estimated Project Cost 31,100.00
Description of Work: C/O (2) 3 TON & (1) 2 TON 18 SEER TRANE SYSTEM
WITH (3) XL850 THERMOSTATS

I hereby certify that all information in this application is correct and all work will comply with the State Building Code and all other local laws and ordinances and regulations. The Inspection Department will be notified of any changes in the approved plans and specification for the project permitted herein.

[Signature] 06/07/2019
Signature of Licensee Date

[Signature] 6-7-19
Signature of Permit Official Date

[Signature] (ELEC)

[Signature]



TOWN OF SOUTHERN SHORES
 5375 N Virginia Dare Trl
 Southern Shores, NC 27949
 (252) 261-2394 tel
 (252) 255-0876 fax
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SUBCONTRACTOR SIGN OFF AND/OR PERMIT

Date 06/07/2019
 PROJECT ADDRESS 213 DUCK ROAD
 Owner EDWARD KOWALSKI
 Mailing Address 26 KINDERHOOK DRIVE
 City, State, Zip POUGHKEEPSIE, NY 12603
 Phone 914-204-0308

Permit Number 10552
 Fee \$ 100

EXISTING Building Permit Number _____ NO FEE _____

ELECTRICAL = Licensee Name FREDERICK MARKLIN NC License/Classification 22222-L / LTD
 Company Name R A HOY HEATING & A/C, INC
 Address P O BOX 179 Phone (252) 261-2008
 City State & zip KITTY HAWK, NC 27949 Estimated Project Cost INCL in MECH
Description of Work: CONNECTION OF MECH EQUIP BELOW

PLUMBING = Licensee Name _____ NC License/Classification _____
 Company Name _____
 Address _____ Phone _____
 City State & zip _____ Estimated Project Cost _____
Description of Work: _____

GAS = Licensee Name _____ NC License/Classification _____
 Company Name _____
 Address _____ Phone _____
 City State & zip _____ Estimated Project Cost _____
Description of Work: _____

MECHANICAL = Licensee Name DOUGLAS WAKELEY NC License/Classification 13056 / H 2 & 3 P-1
 Company Name R A HOY HEATING & A/C, INC
 Address P O BOX 179 Phone (252) 261-2008
 City State & zip KITTY HAWK, NC 27949 Estimated Project Cost 6987
Description of Work: INSTALL MITSUBISHI 2-ZONE DUCTLESS MINI SPLIT SYSTEM 18 SEER

I hereby certify that all information in this application is correct and all work will comply with the State Building Code and all other local laws and ordinances and regulations. The Inspection Department will be notified of any changes in the approved plans and specification for the project permitted herein.

Signature of Licensee [Signature] Date 06/07/2019 Signature of Permit Official [Signature] Date 06-7-19
[Signature] (ELEC) [Signature]

Dabri Dshelton@southernshores-nc.gov

TOWN OF SOUTHERN SHORES
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SUB-CONTRACTOR SIGN OFF AND/OR PERMIT

Date 6/6/19

PROJECT ADDRESS 6 5th Ave, Southern Shores, NC

Owner Mike DAVIS DAVIS Family, LLC
Mailing Address 9043 River Crescent
City, State, Zip Swanwick VA 23433
Phone 757-535-4225

Permit Number 10549
Fee \$ 100

EXISTING Building Permit Number _____ NO FEE (if work is associated with a Building Permit) _____

ELECTRICAL = Licensee Name Lionel Richard NC License/Classification U. 31933

Company Name Atome Code Electric, LLC

Address PO Box 1088 Phone 252 375-3232

City State & zip 16th Hwy NC 27949 Estimated Project Cost 950⁰⁰

Description of Work: Meter base replacement. Dominion WR# 322 80001

PLUMBING = Licensee Name _____ NC License/Classification _____

Company Name _____

Address _____ Phone _____

City State & zip _____ Estimated Project Cost _____

Description of Work: _____

GAS = Licensee Name _____ NC License/Classification _____

Company Name _____

Address _____ Phone _____

City State & zip _____ Estimated Project Cost _____

Description of Work: _____

MECHANICAL = Licensee Name _____ NC License/Classification _____

Company Name _____

Address _____ Phone _____

City State & zip _____ Estimated Project Cost _____

Description of Work: _____

FIRE SPRINKLER = Licensee Name _____ NC License/Classification _____

Company Name _____

Address _____ Phone _____

City State & zip _____ Estimated Project Cost _____

Description of Work: _____

I hereby certify that all information in this application is correct and all work will comply with the State Building Code and all other local laws and ordinances and regulations. The Inspection Department will be notified of any changes in the approved plans and specification for the project permitted herein.

Lionel M Richard 6/6/19
Signature of Licensee Date

Brendy Spivey 6-7-19
Signature of Permit Official Date

**TOWN OF SOUTHERN SHORES
PLANNING AND CODE
ENFORCEMENT**

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Southern Shores NC 27949
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SUB-CONTRACTOR SIGN OFF AND/OR PERMIT

Date June 7, 2019

PROJECT ADDRESS 23 Periwinkle Place

Owner David Gwyer

Mailing Address 4355 Shirley Road

City, State, Zip Richmond VA 23325

Phone 804-240-1872

Permit Number 10554
Fee \$ 100

EXISTING Building Permit Number _____ NO FEE (if work is associated with a Building Permit) _____

ELECTRICAL = Licensee Name _____ NC License/Classification _____
Company Name Winston King
Address _____ Phone _____
City State & zip _____ Estimated Project Cost _____
Description of Work: _____

PLUMBING = Licensee Name _____ NC License/Classification _____
Company Name _____
Address _____ Phone _____
City State & zip _____ Estimated Project Cost _____
Description of Work: _____

GAS = Licensee Name _____ NC License/Classification _____
Company Name _____
Address _____ Phone _____
City State & zip _____ Estimated Project Cost _____
Description of Work: _____

MECHANICAL = Licensee Name Henry J Liverman NC License/Classification 11618 H2 / H3-1
Company Name Atlantic Heating & Cooling, Ltd.
Address P O Box 132 Phone 252-441-7642
City State & zip Kill Devil Hills NC 27948 Estimated Project Cost 10,580.00
Description of Work: Remove/replace indoor/outdoor sections of the HVAC systems using 14 SEER Goodman heat pumps/air handlers. 2 ton upstairs - 1.5 ton downstairs

FIRE SPRINKLER = Licensee Name _____ NC License/Classification _____
Company Name _____
Address _____ Phone _____
City State & zip _____ Estimated Project Cost _____
Description of Work: _____

I hereby certify that all information in this application is correct and all work will comply with the State Building Code and all other local laws and ordinances and regulations. The Inspection Department will be notified of any changes in the approved plans and specification for the project permitted herein.

Henry J Liverman 06/07/2019
Signature of Licensee Date

Ben [Signature] 6-11-19
Signature of Permit Official Date



TOWN OF SOUTHERN SHORES
 5375 N Virginia Dare Trl
 Southern Shores NC
 27949
 (252) 261-2394 tel
 (252) 255-0876 fax
 www.southernshores-nc.gov

SUB-CONTRACTOR SIGN OFF AND/OR PERMIT

Date 6/11/2019
 PROJECT ADDRESS #8 Ocean Blvd
 Owner Allen Mahilo
 Mailing Address 108 Kristen Court
 City, State, Zip Amherst Ohio 44001
 Phone 440-832-1789

Permit Number 10555
 Fee \$ 100

EXISTING Building Permit Number _____ NO FEE (if work is associated with a Building Permit) _____

ELECTRICAL = Licensee Name _____ NC License/Classification _____
 Company Name Dauco
 Address _____ Phone _____
 City State & zip _____ Estimated Project Cost _____
Description of Work: _____

PLUMBING = Licensee Name _____ NC License/Classification _____
 Company Name _____
 Address _____ Phone _____
 City State & zip _____ Estimated Project Cost _____
Description of Work: _____

GAS = Licensee Name _____ NC License/Classification _____
 Company Name _____
 Address _____ Phone _____
 City State & zip _____ Estimated Project Cost _____
Description of Work: _____

MECHANICAL = Licensee Name DANNY HEDGEPOTH NC License/Classification 20564 #3-CLASS I
 Company Name Airmakers Inc
 Address 128 Beasley Lane Phone 232-449-2980
 City State & zip Kill Devil Hills Estimated Project Cost \$5275.00
Description of Work: Change out 2 Ton Goodman Heat Pump System with 2 Ton Comfort maker Heat Pump System

FIRE SPRINKLER = Licensee Name _____ NC License/Classification _____
 Company Name _____
 Address _____ Phone _____
 City State & zip _____ Estimated Project Cost _____
Description of Work: _____

I hereby certify that all information in this application is correct and all work will comply with the State Building Code and all other local laws and ordinances and regulations. The Inspection Department will be notified of any changes in the approved plans and specification for the project permitted herein.

[Signature] 6/11/19
 Signature of Licensee Date

[Signature] 6-11-19
 Signature of Permit Official Date
JUDIS

TOWN OF SOUTHERN SHORES
PLANNING AND CODE
ENFORCEMENT
5375 N Virginia Dare Trl
Southern Shores NC 27949
(252) 261-2394 ext 4 tel
(252) 255-0876 fax
www.southernshores-nc.gov



SUB-CONTRACTOR SIGN OFF AND/OR PERMIT

Date 6-10-19 #A
PROJECT ADDRESS 16 Pelican Watch
Owner Rachel Jones
Mailing Address 4500 Edgewater Ave
City, State, Zip Richmond Va 2323
Phone _____

Permit Number 10553
Fee \$ 100

EXISTING Building Permit Number _____ NO FEE (if work is associated with a Building Permit)

ELECTRICAL = Licensee Name N.W. Francis NC License/Classification L-07784

Company Name N.W. Francis
Address 4238 Poor Ridge Rd Phone 252-202-5350
City State & zip Kitty Hawk, NC 27949 Estimated Project Cost \$300

Description of Work: inspect electrical install for heat pump system.

PLUMBING = Licensee Name _____ NC License/Classification _____

Company Name _____

Address _____ Phone _____

City State & zip _____ Estimated Project Cost _____

Description of Work: _____

GAS = Licensee Name _____ NC License/Classification _____

Company Name _____

Address _____ Phone _____

City State & zip _____ Estimated Project Cost _____

Description of Work: _____

MECHANICAL = Licensee Name Ray E. Herdige NC License/Classification 27675 H3F

Company Name ALL-IN-ONE-MECH.

Address P.O. Box 3392 Phone 252-202-5350

City State & zip Kitty Hawk, NC 27949 Estimated Project Cost \$3200

Description of Work: Remove old and install new 2 1/2 ton, R-410a, 14 SEER heat pump.

FIRE SPRINKLER = Licensee Name _____ NC License/Classification _____

Company Name _____

Address _____ Phone _____

City State & zip _____ Estimated Project Cost _____

Description of Work: _____

I hereby certify that all information in this application is correct and all work will comply with the State Building Code and all other local laws and ordinances and regulations. The Inspection Department will be notified of any changes in the approved plans and specification for the project permitted herein.

N.W. Francis 6-10-19
Signature of Licensee Date

[Signature] 6-11-19
Signature of Permit Official Date



**TOWN OF SOUTHERN SHORES
PLANNING AND CODE ENFORCEMENT**
5375 N Virginia Dare Trail, Southern Shores, NC 27949
(252) 261-2394 Ext 3 - Office (252) 255-0876 - Fax
www.southernshores-nc.gov

**RESIDENTIAL
BUILDING/FLOODPLAIN DEVELOPMENT PERMIT
BUILDING PERMIT #10545**

Location: 17 Mallard Cove Loop

Parcel: 031029000 PIN: 986714329540
District: 20- SOUTHERN SHORES
Subdivision: MALLARD COVE PHASE 3
LotBlkSect: LOT: 17 BLK: SEC:

**PRAGID, PETER A EUX
PRAGID, MARY E EUX
31 MASTERS CT
LITTLE EGG HARBOR NJ 08087**

PHONE #: CELL #:

BUSINESS NAME: Jeffrey H Haskett Homes, Inc
CONTRACTOR'S NAME: Jeff Haskett
ADDRESS: 4711 Lindburgh Ave
CITY, STATE, ZIP: Kitty Hawk, NC 27949
OFFICE#:
CELL#: 252-267-1777
FAX#:
EMAIL: jeffreyhaskett@gmail.com

NC G.C. LICENSED CONTRACTOR: YES NO
NC G.C. LICENSE NUMBER: 46718
LIMITATION: Intermediate
CLASSIFICATION: Building
QUALIFIER: Jeffrey H Haskett

LIEN AGENT: n/a

DESCRIPTION OF WORK – (Any deviation from the Building Plan or Site Plan requires prior approval): Remodel – to include new cabinetry and associated electrical-plumbing-gas for kitchen and bathroom remodel

SPECIAL CONDITIONS -

TYPE OF CONSTRUCTION: Remodel	TYPE OF FOUNDATION:	PERMIT TYPE: Residential
	HEAT:	PROPERTY USE: Single Family Dwelling
TOTAL HEATED/LIVING AREAS (SF):	A/C:	RESIDENTIAL TYPE: 2 nd Home
TOTAL NON-HEATED AREAS (SF):	INTERIOR WALLS:	
	EXTERIOR WALLS:	ZONING DISTRICT: RS-10
NUMBER OF STORIES:	FIREPLACE:	ZONING PERMIT #: n/a
BEDROOMS:	ROOF:	DATE APPROVED:
SEPTIC CAPACITY # OF PERSONS:	INSULATION:	
BATHS: ½ BATHS:	ELEVATOR (SF):	
DETACHED GARAGE:	DECKS (SF):	CAMA PERMIT #: n/a
STORAGE ENCLOSURE: POOL:	PORCHES (SF):	DATE ISSUED:
FLOOD ZONE: Shaded X	WINDOWS MAKE:	SEPTIC PERMIT #: n/a
BASE FLOOD ELEVATION: PLUS 2FT=	TYPE:	DATE ISSUED:

*****The owner and builder are responsible for the following: All work done shall comply with the State Building Code and all other applicable State and local laws. The applicant certifies that the information on this permit is correct; that he/she is the owner or duly authorized agent of owner; that all construction shall be as shown on the submitted plans and specifications; the he/she understands this permit is valid for 180 days to begin construction and may be revoked for failure to comply with applicable regulations and laws.**

TOTAL CONSTRUCTION COST	\$28,000		
HEATED/LIVING AREA (sf) (new square footage)		X .60/sf (single family) = X .75/sf (all others) =	\$
NON-HEATED AREA (sf) (new square footage)		X .30/sf (single family) = X .35/sf (all others) =	\$
REMODEL/REPAIR/ALTERATION (no additional square footage)	\$28,000	X \$10 per \$1,000 of cost =	\$280.00
		Pool = \$125	\$
		Zoning Permit Fee = \$50	\$
		Plan Review Fee = \$150 or \$100	\$
		Minimum Permit Fee = \$100	\$
		Homeowner's Recovery Fund \$10	\$10.00
		TOTAL FEE	\$290.00

Jeff Haskett
Applicant - Owner/Contractor (Please print and sign name) 6.11.19
Brandon Sheota
Building/Code/Zoning Official 10-6-19
W. H. NIS Date Approved

TOWN OF SOUTHERN SHORES
 5375 N Virginia Dare Trl
 Southern Shores, NC 27949
 (252) 261-2394 tel
 (252) 255-0876 fax
 www.southernshores-nc.gov



SUBCONTRACTOR SIGN OFF AND/OR PERMIT

Date 06/11/2019
 PROJECT ADDRESS 235 N DOGWOOD TRAIL
 Owner ROBERT MICHIE
 Mailing Address 201 WALSING DRIVE
 City, State, Zip RICHMOND, VA 23229
 Phone 804-357-3860

Permit Number 10559
 Fee \$ 100

EXISTING Building Permit Number _____ NO FEE _____

ELECTRICAL = Licensee Name FREDERICK MARKLIN NC License/Classification 22222-L / LTD
 Company Name R A HOY HEATING & A/C. INC
 Address P O BOX 179 Phone (252) 261-2008
 City State & zip KITTY HAWK, NC 27949 Estimated Project Cost INCL in MECH
 Description of Work: CONNECTION OF MECH EQUIP BELOW

PLUMBING = Licensee Name _____ NC License/Classification _____
 Company Name _____
 Address _____ Phone _____
 City State & zip _____ Estimated Project Cost _____
 Description of Work: _____

GAS = Licensee Name _____ NC License/Classification _____
 Company Name _____
 Address _____ Phone _____
 City State & zip _____ Estimated Project Cost _____
 Description of Work: _____

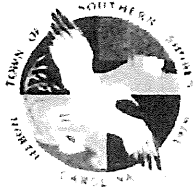
MECHANICAL = Licensee Name DOUGLAS WAKELEY NC License/Classification 13056 / H 2 & 3 P-1
 Company Name R A HOY HEATING & A/C. INC
 Address P O BOX 179 Phone (252) 261-2008
 City State & zip KITTY HAWK, NC 27949 Estimated Project Cost 7454
 Description of Work: C/O 4 TON 16 SEER TRANE SYSTEM TOP LEVEL

I hereby certify that all information in this application is correct and all work will comply with the State Building Code and all other local laws and ordinances and regulations. The Inspection Department will be notified of any changes in the approved plans and specification for the project permitted herein.

Douglas Wakeley 06/11/2019
 Signature of Licensee Date
Douglas Wakeley (ELEC)

Robert Michie 6-12-19
 Signature of Permit Official Date
JUDIS

TOWN OF
SOUTHERN SHORES
5375 N Virginia Dare Trl
Southern Shores, NC
27949
(252) 261-2394 tel
(252) 255-0876 fax
www.southernshores-nc.gov



SUBCONTRACTOR SIGN OFF AND/OR PERMIT

Date 06/11/2019
PROJECT ADDRESS 235 DUCK RD
Owner JAMES BAYLOUS
Mailing Address 200 TURNBERRY
City, State, Zip SMITHFIELD, NC 23430
Phone 757-575-7505

Permit Number 10560
Fee \$ 100

EXISTING Building Permit Number _____ NO FEE _____

ELECTRICAL = Licensee Name FREDERICK MARKLIN NC License/Classification 22222-L / LTD
Company Name R A HOY HEATING & A/C, INC
Address P O BOX 179 Phone (252) 261-2008
City State & zip KITTY HAWK, NC 27949 Estimated Project Cost INCL in MECH
Description of Work: CONNECTION OF MECH EQUIP BELOW

PLUMBING = Licensee Name _____ NC License/Classification _____
Company Name _____
Address _____ Phone _____
City State & zip _____ Estimated Project Cost _____
Description of Work: _____

GAS = Licensee Name _____ NC License/Classification _____
Company Name _____
Address _____ Phone _____
City State & zip _____ Estimated Project Cost _____
Description of Work: _____

MECHANICAL = Licensee Name DOUGLAS WAKELEY NC License/Classification 13056 / H 2 & 3 P-1
Company Name R A HOY HEATING & A/C, INC
Address P O BOX 179 Phone (252) 261-2008
City State & zip KITTY HAWK, NC 27949 Estimated Project Cost 18,764
Description of Work: C/O (2) TON & 3 TON 16 SEER TRANE SYSTEM WITH (3) WIFI THERMOSTATS

I hereby certify that all information in this application is correct and all work will comply with the State Building Code and all other local laws and ordinances and regulations. The Inspection Department will be notified of any changes in the approved plans and specification for the project permitted herein.

Douglas Wakeley 06/11/2019
Signature of Licensee Date
Frederick Marklin (ELEC)

Brendy Spitzer 6-12-19
Signature of Permit Official Date
JLS

TOWN OF SOUTHERN SHORES
 5375 N Virginia Dare Trl
 Southern Shores, NC
 27949
 (252) 261-2394 tel
 (252) 255-0876 fax
 www.southernshores-nc.gov



SUBCONTRACTOR SIGN OFF AND/OR PERMIT

Date 06/11/2019
 PROJECT ADDRESS 2 TWELFTH AVENUE
 Owner FRED GIVEN, JR
 Mailing Address 2 TWELFTH AVENUE
 City, State, Zip KITTY HAWK, NC 27949
 Phone 252-261-3610

Permit Number 10561
 Fee \$ 100

EXISTING Building Permit Number _____ NO FEE _____

ELECTRICAL = Licensee Name FREDERICK MARKLIN NC License/Classification 22222-L / LTD
 Company Name R A HOY HEATING & A/C, INC
 Address P O BOX 179 Phone (252) 261-2008
 City State & zip KITTY HAWK, NC 27949 Estimated Project Cost INCL in MECH
Description of Work: CONNECTION OF MECH EQUIP BELOW

PLUMBING = Licensee Name _____ NC License/Classification _____
 Company Name _____
 Address _____ Phone _____
 City State & zip _____ Estimated Project Cost _____
Description of Work: _____

GAS = Licensee Name _____ NC License/Classification _____
 Company Name _____
 Address _____ Phone _____
 City State & zip _____ Estimated Project Cost _____
Description of Work: _____

MECHANICAL = Licensee Name DOUGLAS WAKELEY NC License/Classification 13056 / H 2 & 3 P-1
 Company Name R A HOY HEATING & A/C, INC
 Address P O BOX 179 Phone (252) 261-2008
 City State & zip KITTY HAWK, NC 27949 Estimated Project Cost 7687
Description of Work: REPLACE ALL DUCT WORK

I hereby certify that all information in this application is correct and all work will comply with the State Building Code and all other local laws and ordinances and regulations. The Inspection Department will be notified of any changes in the approved plans and specification for the project permitted herein.

Douglas Wakeley 06/11/2019
 Signature of Licensee Date
Frederick Marklin (ELEC)

Buddy Steiner 6/12/19
 Signature of Permit Official Date
JDMS



**TOWN OF SOUTHERN SHORES
PLANNING AND CODE ENFORCEMENT**
5375 N Virginia Dare Trail, Southern Shores, NC 27949
(252) 261-2394 Ext 3 - Office (252) 255-0876 - Fax
www.southernshores-nc.gov

**COMMERCIAL
BUILDING/FLOODPLAIN DEVELOPMENT PERMIT
BUILDING PERMIT #10550**

5500/5595 N Croatan Hwy – Unit #30

Parcel: 022510000 PIN: 986720717057

District: 20- SOUTHERN SHORES

Subdivision: SUBDIVISION - NONE

LotBlkSect: LOT: BLK: SEC:

SOUTHERN SHORES OWNER, LLC
610 E MOREHEAD ST STE 100
CHARLOTTE NC 28202

PHONE #: 704-319-4922

CELL #:

BUSINESS NAME: Dream Builders Construction & Development, LLC

CONTRACTOR'S NAME: Ali Amini

ADDRESS: PO Box 33

CITY, STATE, ZIP: Kill Devil Hills, NC 27948

OFFICE#:

CELL#: 252-573-8910

FAX#: 877-735-3611

EMAIL: aamini@dreambuildersobx.com

NC G.C. LICENSED CONTRACTOR: YES NO

NC G.C. LICENSE NUMBER: 75296

LIMITATION: Unlimited

CLASSIFICATION: Building

QUALIFIER: Ali Amini

LIEN AGENT: Chicago Title Company, LLC Entry# 1055444

19 W. Hargett St., Suite 507 / Raleigh, NC 27601

DESCRIPTION OF WORK – (Any deviation from the Building Plan or Site Plan requires prior approval): Remodel and Change of Use – Remodel Unit #30 = see approved plans - New Tenant = Keller Williams OBX Realty

SPECIAL CONDITIONS -

TYPE OF CONSTRUCTION: Remodel	TYPE OF FOUNDATION:	PERMIT TYPE: Commercial
	HEAT:	PROPERTY USE: Shopping Center – Office
TOTAL HEATED/LIVING AREAS (SF):	A/C:	Business
TOTAL NON-HEATED AREAS (SF):	INTERIOR WALLS:	
	EXTERIOR WALLS:	ZONING DISTRICT: C – General Commercial
NUMBER OF STORIES:	FIREPLACE:	ZONING PERMIT #: 2019-47
BEDROOMS:	ROOF:	DATE APPROVED: 6/11/2019
SEPTIC CAPACITY # OF PERSONS:	INSULATION:	
BATHS: ½ BATHS:	ELEVATOR (SF):	
DETACHED GARAGE:	DECKS (SF):	CAMA PERMIT #: n/a
STORAGE ENCLOSURE: POOL:	PORCHES (SF):	DATE ISSUED:
FLOOD ZONE: AE	WINDOWS MAKE:	SEPTIC PERMIT #: 28782
BASE FLOOD ELEVATION: 7FT PLUS 2FT= 9FT	TYPE:	DATE ISSUED: 6/4/2019

***The owner and builder are responsible for the following: All work done shall comply with the State Building Code and all other applicable State and local laws. The applicant certifies that the information on this permit is correct; that he/she is the owner or duly authorized agent of owner; that all construction shall be as shown on the submitted plans and specifications; the he/she understands this permit is valid for 180 days to begin construction and may be revoked for failure to comply with applicable regulations and laws.

TOTAL CONSTRUCTION COST	\$200,000		
HEATED/LIVING AREA (sf)		X .60/sf (single family) =	\$
(new square footage)		X .75/sf (all others) =	
NON-HEATED AREA (sf)		X .30/sf (single family) =	\$
(new square footage)		X .35/sf (all others) =	
REMODEL/REPAIR/ALTERATION	\$200,000	X \$10 per \$1,000 of cost =	\$2,000
(no additional square footage)			
		Pool = \$125	\$
		Zoning Permit Fee = \$50	\$50.00
		Plan Review Fee = \$150 or \$100	\$
		Minimum Permit Fee = \$100	\$
		Homeowner's Recovery Fund\$10	\$
		TOTAL FEE	\$2,050.00

[Signature]
Applicant - Owner/Contractor (Please print and sign name)

6/12/19
Date Issued

[Signature]
Building/Code/Zoning Official

6-11-19
Date Approved

TOWN OF SOUTHERN SHORES
PLANNING AND CODE
ENFORCEMENT
5375 N Virginia Dare Trl
Southern Shores NC 27949
(252) 261-2394 ext 3 tel
(252) 255-0876 fax
www.southernshores-nc.gov



SUB-CONTRACTOR SIGN OFF AND/OR PERMIT

Date 6-12-19
PROJECT ADDRESS 51 Hickory Trl
Owner Ellen BarBaro
Mailing Address 51 Hickory Trl
City, State, Zip 55 27942
Phone _____

Permit Number 10562
Fee \$ 100

EXISTING Building Permit Number _____ NO FEE (if work is associated with a Building Permit) _____

ELECTRICAL = Licensee Name Steve Gordon NC License/Classification 14104-L
Company Name HASKET
Address _____ Phone 252-267 4767
City State & zip _____ Estimated Project Cost _____
Description of Work: _____

PLUMBING = Licensee Name _____ NC License/Classification _____
Company Name _____
Address _____ Phone _____
City State & zip _____ Estimated Project Cost _____
Description of Work: _____

GAS = Licensee Name _____ NC License/Classification _____
Company Name _____
Address _____ Phone _____
City State & zip _____ Estimated Project Cost _____
Description of Work: _____

MECHANICAL = Licensee Name Will Creech NC License/Classification 2930
Company Name American Refrigerator & Heat Pump Repair, LLC
Address PO Box 835 Nags Head Phone 252-202-9302
City State & zip NC 27951 Estimated Project Cost 5600.00
Description of Work: Installing American Standard 2 ton System for top floor

FIRE SPRINKLER = Licensee Name _____ NC License/Classification _____
Company Name _____
Address _____ Phone _____
City State & zip _____ Estimated Project Cost _____
Description of Work: _____

I hereby certify that all information in this application is correct and all work will comply with the State Building Code and all other local laws and ordinances and regulations. The Inspection Department will be notified of any changes in the approved plans and specification for the project permitted herein.

[Signature]
Signature of Licensee

6/12/19
Date

[Signature] 6-12-19
Signature of Permit Official Date
JUNIS



TOWN OF SOUTHERN SHORES
PLANNING AND CODE ENFORCEMENT
 5375 N Virginia Dare Trail, Southern Shores, NC 27949
 (252) 261-2394 Ext 4 - Office (252) 255-0876 - Fax
www.southernshores-nc.gov

RESIDENTIAL
BUILDING/FLOODPLAIN DEVELOPMENT PERMIT
BUILDING PERMIT #10558

Location: 357 Sea Oats Trail
Parcel: 029135000 PIN: 986805088649
District: 20- SOUTHERN SHORES
Subdivision: SO/SH BLK 61
LotBlkSect: LOT: 17 BLK: 61 SEC:

STANKOVIC, BRATISLAV EUX
STANKOVIKJ, MIRJANA EUX
920 KINGS MILL RD
CHAPEL HILL NC 27517

PHONE #:

CELL #:

BUSINESS NAME: Caribbean Pool and Spa of the Outer Banks, Inc
CONTRACTOR'S NAME: Pete Kelly
ADDRESS: PO Box 65
CITY, STATE, ZIP: Kitty Hawk, NC 27949
OFFICE#: 252-480-2900
CELL#: 252-207-1773
FAX#:
EMAIL: pete@caribbeanobx.com

NC G.C. LICENSED CONTRACTOR: X YES NO
NC G.C. LICENSE NUMBER: 73571
LIMITATION: Limited
CLASSIFICATION: Residential
QUALIFIER: Peter Franklin Kelly

LIEN AGENT: N/A

DESCRIPTION OF WORK – (Any deviation from the Building Plan or Site Plan requires prior approval): Construction of a new pool, pool deck, and pool barrier fence = Total area = 740sf

SPECIAL CONDITIONS -

TYPE OF CONSTRUCTION: Accessory Pool	TYPE OF FOUNDATION:	PERMIT TYPE: Residential
TOTAL HEATED/LIVING AREAS (SF):	HEAT:	RESIDENTIAL TYPE: Residence
TOTAL NON-HEATED AREAS (SF):	A/C:	PROPERTY USE: Single Family Dwelling
NUMBER OF STORIES:	INTERIOR WALLS:	ZONING DISTRICT: RS-1
BEDROOMS:	EXTERIOR WALLS:	ZONING PERMIT #: 2019-48
SEPTIC CAPACITY # OF PERSONS:	FIREPLACE:	DATE ISSUED: 6/13/2019
BATHS: ½ BATHS:	ROOF:	CAMA PERMIT #:
GARAGE: STORAGE BLDG:	INSULATION:	DATE ISSUED:
STORAGE ENCLOSURE: POOL: 740sf	ELEVATOR (SF):	SEPTIC PERMIT #: 28749
FLOOD ZONE: AE	DECKS (SF):	DATE ISSUED: 5/21/2019
BASE FLOOD ELEVATION: 7FT PLUS 2FT= 9FT	PORCHES (SF):	
	WINDOWS MAKE:	
	TYPE:	

*****The owner and builder are responsible for the following: All work done shall comply with the State Building Code and all other applicable State and local laws. The applicant certifies that the information on this permit is correct; that he/she is the owner or duly authorized agent of owner; that all construction shall be as shown on the submitted plans and specifications; the he/she understands this permit is valid for 180 days to begin construction and may be revoked for failure to comply with applicable regulations and laws.**

TOTAL CONSTRUCTION COST	\$49,850		
HEATED/LIVING AREA (sf) (new square footage)		X .60/sf (single family) =	\$
		X .75/sf (all others) =	
NON-HEATED AREA (sf) (new square footage)		X .30/sf (single family) =	\$
		X .35/sf (all others) =	
REMODEL/REPAIR/ALTERATION (no additional square footage)	\$	X \$10 per \$1,000 of cost =	\$
		Pool = \$125	\$125.00
		Zoning Permit Fee = \$50	\$50.00
		Plan Review Fee = \$150 or \$100	\$
		Minimum Permit Fee = \$100	\$
		Homeowner's Recovery Fund \$10	\$
		TOTAL FEE	\$175.00

Applicant - Owner/Contractor (Please print and sign name)

Date Issued

Building/Code/Zoning Official

Date Approved

[Handwritten Signature]
 Building/Code/Zoning Official *[Handwritten Signature]*

6-13-19
 Date Issued
6-13-19
 Date Approved

**TOWN OF SOUTHERN SHORES
PLANNING AND CODE
ENFORCEMENT**

5375 N Virginia Dare Trl
Southern Shores NC 27949
(252) 261-2394 ext 4 tel
(252) 255-0876 fax
www.southernshores-nc.gov



SUB-CONTRACTOR SIGN OFF AND/OR PERMIT

Date 6-13-19

PROJECT ADDRESS 138 Goose Feather Ln

Owner Gary E Morgan
Mailing Address 101 Little Rockwell way
City, State, Zip Hampton, VA, 23669
Phone 757-329-0782

Permit Number 10563
Fee \$ 100

EXISTING Building Permit Number _____ NO FEE (if work is associated with a Building Permit) _____

ELECTRICAL = Licensee Name Jeff Fischer NC License/Classification _____
Company Name Fischer Building Co
Address 105 Phodoms Dr Phone 202-9468
City State & zip KDIA NC 27948 Estimated Project Cost 300.00
Description of Work: wire duct handler & heat pump

PLUMBING = Licensee Name _____ NC License/Classification _____
Company Name _____
Address _____ Phone _____
City State & zip _____ Estimated Project Cost _____
Description of Work: _____

GAS = Licensee Name _____ NC License/Classification _____
Company Name _____
Address _____ Phone _____
City State & zip _____ Estimated Project Cost _____
Description of Work: _____

MECHANICAL = Licensee Name Brian McDonald NC License/Classification 12643H23 Class 1
Brian Jefferson McDonald
Company Name ONE HOUR HEATING & AIR CONDITIONING
Address Box 2600 701 N Fresh Pond Dr Phone 441-1740
City State & zip KDIA NC 27948 Estimated Project Cost 7380.00
Description of Work: Replace HVAC with 14 seer 2 TON Carrier
air handler & heat pumps

FIRE SPRINKLER = Licensee Name _____ NC License/Classification _____
Company Name _____
Address _____ Phone _____
City State & zip _____ Estimated Project Cost _____
Description of Work: _____

I hereby certify that all information in this application is correct and all work will comply with the State Building Code and all other local laws and ordinances and regulations. The Inspection Department will be notified of any changes in the approved plans and specification for the project permitted herein.

[Signature] 6-13-19
Signature of Licensee Date

[Signature] 6-13-19
Signature of Permit Official Date
[Signature]

TOWN OF SOUTHERN SHORES
 PLANNING AND CODE
 ENFORCEMENT
 5375 N Virginia Dare Trl
 Southern Shores NC 27949
 (252) 261-2394 ext 4 tel
 (252) 255-0876 fax
 www.southernshores-nc.gov



SUB-CONTRACTOR SIGN OFF AND/OR PERMIT

Date 6-13-19
 PROJECT ADDRESS 13 EISHA Ave
 Owner John F Kasprzak
 Mailing Address 3301 Haydenpark Ln.
 City, State, Zip Henrico VA 23238
 Phone 804-683-1639

Permit Number 105604
 Fee \$ 100

EXISTING Building Permit Number _____ NO FEE (if work is associated with a Building Permit) _____

ELECTRICAL = Licensee Name Jeff Fischer NC License/Classification 15973-004
 Company Name Fischer Building Co.
 Address 105 Rhodans Dr Phone 202-9468
 City State & zip KD H NC 27948 Estimated Project Cost 400'
 Description of Work: wire rain handles & heat pumps

PLUMBING = Licensee Name _____ NC License/Classification _____
 Company Name _____
 Address _____ Phone _____
 City State & zip _____ Estimated Project Cost _____
 Description of Work: _____

GAS = Licensee Name _____ NC License/Classification _____
 Company Name _____
 Address _____ Phone _____
 City State & zip _____ Estimated Project Cost _____
 Description of Work: _____

MECHANICAL = Licensee Name Brian McDonald NC License/Classification _____
 Company Name Brian Jefferson McDonald
 Address Box 2600 Phone 441-1740
 City State & zip KD H NC 27948 Estimated Project Cost 11,834'
 Description of Work: Replace 2 HVACs with 14 sec 2.5 & 3.5
Ton Carrier air handlers & heat pumps

FIRE SPRINKLER = Licensee Name _____ NC License/Classification _____
 Company Name _____
 Address _____ Phone _____
 City State & zip _____ Estimated Project Cost _____
 Description of Work: _____

I hereby certify that all information in this application is correct and all work will comply with the State Building Code and all other local laws and ordinances and regulations. The Inspection Department will be notified of any changes in the approved plans and specification for the project permitted herein.

[Signature] 6-13-19
 Signature of Licensee Date

[Signature] 6-13-19
 Signature of Permit Official Date



SUBCONTRACTOR SIGN OFF AND/OR PERMIT

Date 10-13-19

Owner Mark Winkler

Mailing Address 8525 Oak Chase Cir

City State, Zip Fairfax, VA 22039

Street Address 301 Hillcrest Dr.

Subdivision SO/STH Blk 93

Lot 7 Block 93 Section _____

PIN 980809152247

Flood Zone: _____

TOWN OF SOUTHERN SHORES

5375 N Virginia Dare Trl

Southern Shores, NC 27949

(252) 261-2394 tel (252) 255-0876 fax

www.southernshores-nc.gov

Permit Number 10565

Fee 100

ELECTRICAL Licensee Name Nathan Owens NC License/Classification 33601

Company Name Jesse Owens Electric Corp.

Address 123 Jesse Owens DR Phone 473-8923

City State & zip Harbinger, NC 27947 Estimated Project Cost 0

Description of Work: electrical associated w/ system replacement

PLUMBING Licensee Name _____ NC License/Classification _____

Company Name _____

Address _____ Phone _____

City State & zip _____ Estimated Project Cost _____

Description of Work: _____

GAS Licensee Name _____ NC License/Classification _____

Company Name _____

Address _____ Phone _____

City State & zip _____ Estimated Project Cost _____

Description of Work: _____

MECHANICAL Licensee Name Joe Simpson NC License/Classification 19091 Group 2 & 3

Company Name All Seasons Heating & Cooling

Address PO Box 244 Phone 491-9232

City State & zip Point Harbor, NC 27964 Estimated Project Cost 5,000.00

Description of Work: Replace upstairs w/ 2.5 ton split system heat pump & air chandler

I hereby certify that all information in this application is correct and all work will comply with the State Building Code and all other local laws and ordinances and regulations. The Inspection Department will be notified of any changes in the approved plans and specification for the project permitted herein.

Signature of Licensee Joe Simpson Date 10-13-19

Signature of Permit Official Benny Simpson Date 10-13-19

SUB-CONTRACTOR SIGN OFF AND/OR PERMIT

TOWN OF SOUTHERN SHORES

5375 N Virginia Dare Trl
Southern Shores NC
27949

(252) 261-2394 tel
(252) 255-0876 fax

www.southernshores-nc.gov



Date 6-13-2019

PROJECT ADDRESS 43 SKYLINE RD

Owner Thomas Trotter

Mailing Address 321 PALMER DRIVE

City, State, Zip PHILADELPHIA, PA 19115

Phone 215-687-6026

Permit Number 10567
Fee \$ 100

EXISTING Building Permit Number _____ NO FEE (if work is associated with a Building Permit) _____

ELECTRICAL = Licensee Name _____ NC License/Classification _____
Company Name Precise Electrical
Address _____ Phone _____
City State & zip _____ Estimated Project Cost _____
Description of Work: _____

PLUMBING = Licensee Name _____ NC License/Classification _____
Company Name _____
Address _____ Phone _____
City State & zip _____ Estimated Project Cost _____
Description of Work: _____

GAS = Licensee Name _____ NC License/Classification _____
Company Name _____
Address _____ Phone _____
City State & zip _____ Estimated Project Cost _____
Description of Work: _____

MECHANICAL = Licensee Name Norman C Perry NC License/Classification 27257 H2-H31
Company Name American Home Services Inc
Address PO Box 3054 Phone 252-480-3400
City State & zip Kitty Hawk NC 27949 Estimated Project Cost 5650.00
Description of Work: Replace existing HVAC trim equipment w/ 3 ton/45acr 40A York Heat Pump +
Architect w/10 new heater

FIRE SPRINKLER = Licensee Name _____ NC License/Classification _____
Company Name _____
Address _____ Phone _____
City State & zip _____ Estimated Project Cost _____
Description of Work: _____

I hereby certify that all information in this application is correct and all work will comply with the State Building Code and all other local laws and ordinances and regulations. The Inspection Department will be notified of any changes in the approved plans and specification for the project permitted herein.

Signature of Licensee [Signature] Date 6-14-2019

Signature of Permit Official [Signature] Date 6-14-19



**TOWN OF SOUTHERN SHORES
PLANNING AND CODE ENFORCEMENT**
5375 N Virginia Dare Trail, Southern Shores, NC 27949
(252) 261-2394 Ext 3 - Office (252) 255-0876 - Fax
www.southernshores-nc.gov

**RESIDENTIAL
BUILDING/FLOODPLAIN DEVELOPMENT PERMIT
BUILDING PERMIT #10557**

Location: 232 N Dogwood Trail

Parcel: 021402000 PIN: 986817128070
District: 20- SOUTHERN SHORES
Subdivision: SO/SH SOUNDSIDE BLK 109
LotBlkSect: LOT: 28 BLK: 109 SEC:

DARLING, ANDREW S EUX
DARLING, SUSAN L EUX
232 N DOGWOOD TRL
KITTY HAWK NC 27949

PHONE #: 252-207-5556 CELL #:

BUSINESS NAME:
CONTRACTOR'S NAME: Property Owner
ADDRESS:
CITY, STATE, ZIP:
OFFICE#:
CELL#:
FAX#:
EMAIL:

NC G.C. LICENSED CONTRACTOR: ___ YES NO
NC G.C. LICENSE NUMBER:
LIMITATION:
CLASSIFICATION:
QUALIFIER:

LIEN AGENT: n/a

DESCRIPTION OF WORK – (Any deviation from the Building Plan or Site Plan requires prior approval): Expansion of deck and convert into a screen porch

SPECIAL CONDITIONS -

TYPE OF CONSTRUCTION: Addition	TYPE OF FOUNDATION:	PERMIT TYPE: Residential
TOTAL HEATED/LIVING AREAS (SF):	HEAT:	PROPERTY USE: Single Family Dwelling
TOTAL NON-HEATED AREAS (SF): 160	A/C:	RESIDENTIAL TYPE: Residence
NUMBER OF STORIES:	INTERIOR WALLS:	ZONING DISTRICT: RS-1
BEDROOMS:	EXTERIOR WALLS:	ZONING PERMIT #: 2019-45
SEPTIC CAPACITY # OF PERSONS:	FIREPLACE:	DATE APPROVED: 6/11/2019
BATHS: ½ BATHS:	ROOF:	
DETACHED GARAGE:	INSULATION:	
STORAGE ENCLOSURE: POOL:	ELEVATOR (SF):	CAMA PERMIT #: n/a
FLOOD ZONE: AE	DECKS (SF):	DATE ISSUED:
BASE FLOOD ELEVATION: 7FT PLUS 2FT= 9FT	PORCHES (SF):	SEPTIC PERMIT #: 28798
	WINDOWS MAKE:	DATE ISSUED: 6/7/2019
	TYPE:	

*****The owner and builder are responsible for the following: All work done shall comply with the State Building Code and all other applicable State and local laws. The applicant certifies that the information on this permit is correct; that he/she is the owner or duly authorized agent of owner; that all construction shall be as shown on the submitted plans and specifications; the he/she understands this permit is valid for 180 days to begin construction and may be revoked for failure to comply with applicable regulations and laws.**

TOTAL CONSTRUCTION COST	\$5,000		
HEATED/LIVING AREA (sf) (new square footage)		X .60/sf (single family) = X .75/sf (all others) =	\$
NON-HEATED AREA (sf) (new square footage)	160	X .30/sf (single family) = X .35/sf (all others) =	\$n/a
REMODEL/REPAIR/ALTERATION (no additional square footage)	\$	X \$10 per \$1,000 of cost =	\$
		Pool = \$125	\$
		Zoning Permit Fee = \$50	\$50.00
		Plan Review Fee = \$150 or \$100	\$
		Minimum Permit Fee = \$100	\$100.00
		Homeowner's Recovery Fund\$10	\$
		TOTAL FEE	\$150.00

Applicant - Owner/Contractor (Please print and sign name) 6-17-19
Buckley Spelto Date Issued
 Building/Code/Zoning Official J. D. B. S. 6-13-19
Date Approved

TOWN OF SOUTHERN SHORES
PLANNING AND CODE
ENFORCEMENT
5375 N Virginia Dare Trl
Southern Shores NC 27949
(252) 281-2394 ext 4 tel
(252) 255-0876 fax
www.southernshores-nc.gov



SUB-CONTRACTOR SIGN OFF AND/OR PERMIT

Date June 17, 2019

PROJECT ADDRESS 314 Hillcrest Drive

Owner Glenn Moore
Mailing Address 7500 Cherry Tree Drive
City, State, Zip Fulton MD 20759
Phone 240-228-4213

Permit Number 10570
Fee \$ 100

EXISTING Building Permit Number _____ NO FEE (if work is associated with a Building Permit) _____

ELECTRICAL = Licensee Name _____ NC License/Classification _____
Company Name _____
Address _____ Phone _____
City State & zip _____ Estimated Project Cost _____

Description of Work: _____

PLUMBING = Licensee Name _____ NC License/Classification _____
Company Name _____
Address _____ Phone _____
City State & zip _____ Estimated Project Cost _____

Description of Work: _____

GAS = Licensee Name _____ NC License/Classification _____
Company Name _____
Address _____ Phone _____
City State & zip _____ Estimated Project Cost _____

Description of Work: _____

MECHANICAL = Licensee Name Henry J Liverman NC License/Classification 11618 H2 / H3-1
Company Name Atlantic Heating & Cooling, Ltd.
Address P O Box 132 Phone 252-441-7642
City State & zip Kill Devil Hills NC 27948 Estimated Project Cost \$3,800.00

Description of Work: Installation of a ductless 17 SEER Daikin mini-split system in the workshop

FIRE SPRINKLER = Licensee Name _____ NC License/Classification _____
Company Name _____
Address _____ Phone _____
City State & zip _____ Estimated Project Cost _____

Description of Work: _____

I hereby certify that all information in this application is correct and all work will comply with the State Building Code and all other local laws and ordinances and regulations. The Inspection Department will be notified of any changes in the approved plans and specification for the project permitted herein.

Henry J Liverman 06/17/19
Signature of Licensee Date

Benny Stotow 6-17-19
Signature of Permit Official Date

TOWN OF SOUTHERN SHORES

5375 N Virginia Dare Trl
Southern Shores, NC
27949

(252) 261-2394 tel
(252) 255-0876 fax

www.southernshores-nc.gov



SUBCONTRACTOR SIGN OFF AND/OR PERMIT

Date 06/17/2019

PROJECT ADDRESS 161 WAX MYRTLE TRL

Owner ABIGAIL RICHON

Mailing Address 6 ACLINE COURT

City, State, Zip GAITHERSBURG, VA 20878

Phone _____

Permit Number 10573

Fee \$ 100

EXISTING Building Permit Number _____ NO FEE _____

ELECTRICAL = Licensee Name FREDERICK MARKLIN

NC License/Classification 22222-L / LTD

Company Name R A HOY HEATING & A/C. INC

Address P O BOX 179 Phone (252) 261-2008

City State & zip KITTY HAWK, NC 27949 Estimated Project Cost INCL in MECH

Description of Work: CONNECTION OF MECH EQUIP BELOW

PLUMBING = Licensee Name _____

NC License/Classification _____

Company Name _____

Address _____ Phone _____

City State & zip _____ Estimated Project Cost _____

Description of Work: _____

GAS = Licensee Name _____

NC License/Classification _____

Company Name _____

Address _____ Phone _____

City State & zip _____ Estimated Project Cost _____

Description of Work: _____

MECHANICAL = Licensee Name DOUGLAS WAKELEY

NC License/Classification 13056 / H 2 & 3 P-1

Company Name R A HOY HEATING & A/C. INC

Address P O BOX 179 Phone (252) 261-2008

City State & zip KITTY HAWK, NC 27949 Estimated Project Cost 6760

Description of Work: C/O 3 TON 14 SEER TRANE SYSTEM MAIN LEVEL WITH T6 THERMOSTATS

I hereby certify that all information in this application is correct and all work will comply with the State Building Code and all other local laws and ordinances and regulations. The Inspection Department will be notified of any changes in the approved plans and specification for the project permitted herein.

Douglas Wakeley 06/17/2019
Signature of Licensee Date

Abigail Richon 6-18-19
Signature of Permit Official Date
By: WtH

Frederick Marklin (ELEC)

TOWN OF SOUTHERN SHORES
PLANNING AND CODE
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Southern Shores NC 27949
(252) 261-2394 ext 3 tel
(252) 255-0876 fax
www.southernshores-nc.gov



SUB-CONTRACTOR SIGN OFF AND/OR PERMIT

Date 6-18-19

PROJECT ADDRESS 131 Clamshell Dr. Southern Shores

Owner Nick Frank
Mailing Address P.O. Box 87
City, State, Zip Manteo NC 27954
Phone _____

Permit Number 10574
Fee \$ 100

EXISTING Building Permit Number _____ NO FEE (if work is associated with a Building Permit) _____

ELECTRICAL = Licensee Name Tommy Twiddy NC License/Classification 141180
Company Name Ace Mechanical
Address P.O. Box 160 Phone 252-473-5063
City State & zip Manteo Harbor Estimated Project Cost \$200.00
Description of Work: Electrical to change HVAC- 2 ton Split System

PLUMBING = Licensee Name _____ NC License/Classification _____
Company Name _____
Address _____ Phone _____
City State & zip _____ Estimated Project Cost _____
Description of Work: _____

GAS = Licensee Name _____ NC License/Classification _____
Company Name _____
Address _____ Phone _____
City State & zip _____ Estimated Project Cost _____
Description of Work: _____

MECHANICAL = Licensee Name David Armstrong NC License/Classification 21460
Company Name David Armstrong Services LLC
Address 20 Albemarle Shores Ext Phone 252-797-4177
City State & zip Columbia NC 27925 Estimated Project Cost \$4,000.00
Description of Work: Change out 2 ton Split System Installing 2 ton Carrier Split System Heat Pump 14 seer using existia duct and electrical

FIRE SPRINKLER = Licensee Name _____ NC License/Classification _____
Company Name _____
Address _____ Phone _____
City State & zip _____ Estimated Project Cost _____
Description of Work: _____

I hereby certify that all information in this application is correct and all work will comply with the State Building Code and all other local laws and ordinances and regulations. The Inspection Department will be notified of any changes in the approved plans and specification for the project permitted herein.

Dennis Brumain 6-18-19
Signature of Licensee Date

Buddy Shelton 6-18-19
Signature of Permit Official Date
TINK



**TOWN OF SOUTHERN SHORES
PLANNING AND CODE ENFORCEMENT**
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(252) 261-2394 Ext 3 - Office (252) 255-0876 - Fax
www.southernshores-nc.gov

**RESIDENTIAL
BUILDING/FLOODPLAIN DEVELOPMENT PERMIT
BUILDING PERMIT #10566**

Location: 95 Duck Woods Drive
Parcel: 030173000 PIN: 986715541672
District: 20- SOUTHERN SHORES
Subdivision: SO/SH BLK 227A
LotBlkSect: LOT: 22 BLK: 227A SEC

**LUSK, MATTHEW T EUX
LUSK, ANN TAYLOR S EUX
95 DUCK WOODS DR
SOUTHERN SHORES NC 27949**

PHONE #: 252-489-9267 CELL #:

BUSINESS NAME: T&B Homes, Inc
CONTRACTOR'S NAME: Terry G. Robins
ADDRESS: 425 Burns Drive
CITY, STATE, ZIP: Kill Devil Hills, NC 27948
OFFICE#:
CELL#: 252-305-0028
FAX#:
EMAIL: info@tbhomesobx.com

NC G.C. LICENSED CONTRACTOR: YES NO
NC G.C. LICENSE NUMBER: 80069
LIMITATION: Limited
CLASSIFICATION: Building
QUALIFIER: Terry Gene Robins

LIEN AGENT: n/a

DESCRIPTION OF WORK – (Any deviation from the Building Plan or Site Plan requires prior approval): Convert existing 572sf space over attached garage into heated living area (bathroom and office) dwelling to remain 3 bedroom sleeping #6 per DCEHD

SPECIAL CONDITIONS -

TYPE OF CONSTRUCTION: Addition	TYPE OF FOUNDATION:	PERMIT TYPE: Residential
	HEAT: Heat Pump	PROPERTY USE: Single Family Dwelling
TOTAL HEATED/LIVING AREAS (SF): 572	A/C: Heat Pump	RESIDENTIAL TYPE: Residence
TOTAL NON-HEATED AREAS (SF):	INTERIOR WALLS: Drywall	
	EXTERIOR WALLS:	ZONING DISTRICT: RS-1
NUMBER OF STORIES:	FIREPLACE:	ZONING PERMIT #: n/a
BEDROOMS: to remain 3 total	ROOF:	DATE APPROVED:
SEPTIC CAPACITY # OF PERSONS: to remain #6	INSULATION: Batt	
BATHS: 1 proposed ½ BATHS:	ELEVATOR (SF):	
DETACHED GARAGE:	DECKS (SF):	CAMA PERMIT #: n/a
STORAGE ENCLOSURE: POOL:	PORCHES (SF):	DATE ISSUED:
FLOOD ZONE: AE	WINDOWS MAKE:	SEPTIC PERMIT #: 28808
BASE FLOOD ELEVATION: 7FT PLUS 2FT= 9FT	TYPE:	DATE ISSUED: 6/13/2019

*****The owner and builder are responsible for the following: All work done shall comply with the State Building Code and all other applicable State and local laws. The applicant certifies that the information on this permit is correct; that he/she is the owner or duly authorized agent of owner; that all construction shall be as shown on the submitted plans and specifications; the he/she understands this permit is valid for 180 days to begin construction and may be revoked for failure to comply with applicable regulations and laws.**

TOTAL CONSTRUCTION COST	\$30,000		
HEATED/LIVING AREA (sf) (new square footage)	572	X .60/sf (single family) =	\$343.20
		X .75/sf (all others) =	
NON-HEATED AREA (sf) (new square footage)		X .30/sf (single family) =	\$
		X .35/sf (all others) =	
REMODEL/REPAIR/ALTERATION (no additional square footage)	\$	X \$10 per \$1,000 of cost =	\$
		Pool = \$125	\$
		Zoning Permit Fee = \$50	\$
		Plan Review Fee = \$150 or \$100	\$
		Minimum Permit Fee = \$100	\$
		Homeowner's Recovery Fund\$10	\$10.00
		TOTAL FEE	\$353.20

T&B Homes, Inc **Ben Nelson** **6/17/19**
Applicant - Owner/Contractor (Please print and sign name) Date Issued
Burley Shelton
Building/Code/Zoning Official **JNK** **6-17-19**
Date Approved

TOWN OF SOUTHERN SHORES

5375 N Virginia Dare Trl
Southern Shores NC
27949

(252) 261-2394 tel
(252) 255-0876 fax

www.southernshores-nc.gov



SUB-CONTRACTOR SIGN OFF AND/OR PERMIT

Date 6/14/19

PROJECT ADDRESS 23 Fourth Ave

Owner Iris, Donald

Mailing Address 22 Stewart Lane

City, State, Zip Deptford NJ 08096

Phone 609-238-9673

Permit Number 105608

Fee \$ 100

EXISTING Building Permit Number _____ NO FEE (if work is associated with a Building Permit) _____

ELECTRICAL = Licensee Name Jimmy Weaver NC License/Classification 24744
 Company Name North Beach Services
 Address P.O. Box 181 Phone 252-491-2878
 City State & zip Kitty Hawk NC Estimated Project Cost 100
 Description of Work: All necessary electrical hookups

PLUMBING = Licensee Name _____ NC License/Classification _____
 Company Name _____
 Address _____ Phone _____
 City State & zip _____ Estimated Project Cost _____
 Description of Work: _____

GAS = Licensee Name _____ NC License/Classification _____
 Company Name _____
 Address _____ Phone _____
 City State & zip _____ Estimated Project Cost _____
 Description of Work: _____

MECHANICAL = Licensee Name Suzanne Rich NC License/Classification 33023
 Company Name North Beach Services
 Address P.O. Box 181 Phone 252-491-2878
 City State & zip Kitty Hawk NC Estimated Project Cost 5670.00
 Description of Work: Replace existing heat pump and air handler with matching 1.5 ton heat pump

FIRE SPRINKLER = Licensee Name _____ NC License/Classification _____
 Company Name _____
 Address _____ Phone _____
 City State & zip _____ Estimated Project Cost _____
 Description of Work: _____

I hereby certify that all information in this application is correct and all work will comply with the State Building Code and all other local laws and ordinances and regulations. The Inspection Department will be notified of any changes in the approved plans and specification for the project permitted herein.

Jimmy Weaver
Signature of Licensee

6/14/19
Date

Burke Shelton
Signature of Permit Official

6-18-19
Date

JD/NS

TOWN OF SOUTHERN SHORES
5375 N Virginia Dare Trl
Southern Shores NC
27949
(252) 261-2394 tel
(252) 255-0876 fax
www.southernshores-nc.gov



SUB-CONTRACTOR SIGN OFF AND/OR PERMIT

Date 6/12/2019

PROJECT ADDRESS 252 HILLCREST DR

Owner DUCK UNITED METHODIST CHURCH
Mailing Address PO BOX 8010
City, State, Zip KITTY HAWK, NC 27949
Phone _____

Permit Number 10576
Fee \$ 100

EXISTING Building Permit Number _____ NO FEE (if work is associated with a Building Permit) _____

ELECTRICAL = Licensee Name BRYAN MULHER

NC License/Classification 26395 U

Company Name PRECISE ELECTRICAL

Address 534 LEVELS RD

Phone 252.796.7900

City State & zip COLUMBIA, NC 27925

Estimated Project Cost _____

Description of Work: _____

PLUMBING = Licensee Name _____

NC License/Classification _____

Company Name _____

Address _____

Phone _____

City State & zip _____

Estimated Project Cost _____

Description of Work: _____

GAS = Licensee Name _____

NC License/Classification _____

Company Name _____

Address _____

Phone _____

City State & zip _____

Estimated Project Cost _____

Description of Work: _____

MECHANICAL = Licensee Name ANTHONY PRITCHETT

NC License/Classification 18066

Company Name MASTER HEATING & COOLING

Address PO BOX 707

Phone 252.255.0095

City State & zip KITTY HAWK, NC 27949

Estimated Project Cost 6,000

Description of Work: _____

FIRE SPRINKLER = Licensee Name _____

NC License/Classification _____

Company Name _____

Address _____

Phone _____

City State & zip _____

Estimated Project Cost _____

Description of Work: _____

I hereby certify that all information in this application is correct and all work will comply with the State Building Code and all other local laws and ordinances and regulations. The Inspection Department will be notified of any changes in the approved plans and specification for the project permitted herein.

[Signature]
Signature of Licensee

6/12/2019
Date

[Signature]
Signature of Permit Official
6-19-19
Date



TOWN OF SOUTHERN SHORES
 5375 N Virginia Dare Trl
 Southern Shores NC
 27949
 (252) 261-2394 tel
 (252) 255-0876 fax
 www.southernshores-nc.gov

SUB-CONTRACTOR SIGN OFF AND/OR PERMIT

Date 6/12/2019

PROJECT ADDRESS 324 SEA OATS TR

Owner CAROLE TURNER
 Mailing Address 2808 ASHWOOD DR
 City, State, Zip CHESAPEAKE, VA 23321
 Phone (757) 484.6903

Permit Number 10577
 Fee \$ 100

EXISTING Building Permit Number _____ NO FEE (if work is associated with a Building Permit) _____

ELECTRICAL = Licensee Name BRYAN MUTHLETZ NC License/Classification 26395 U
 Company Name PRECISE ELECTRICAL
 Address 534 LEVELS RD Phone 252.796.7900
 City State & zip COLUMBIA, NC 27925 Estimated Project Cost ~~_____~~
 Description of Work: _____

PLUMBING = Licensee Name _____ NC License/Classification _____
 Company Name _____
 Address _____ Phone _____
 City State & zip _____ Estimated Project Cost _____
 Description of Work: _____

GAS = Licensee Name _____ NC License/Classification _____
 Company Name _____
 Address _____ Phone _____
 City State & zip _____ Estimated Project Cost _____
 Description of Work: _____

MECHANICAL = Licensee Name ANTHONY PRITCHETT NC License/Classification 18066
 Company Name MASTER HEATING & COOLING
 Address PO Box 707 Phone 252.255.0095
 City State & zip KITTY HAWK, NC 27949 Estimated Project Cost 6,000
 Description of Work: CHANGE OUT (1) 2 TON LENNOX, 14 SEER, R410A HEAT PUMP SYSTEM

FIRE SPRINKLER = Licensee Name _____ NC License/Classification _____
 Company Name _____
 Address _____ Phone _____
 City State & zip _____ Estimated Project Cost _____
 Description of Work: _____

I hereby certify that all information in this application is correct and all work will comply with the State Building Code and all other local laws and ordinances and regulations. The Inspection Department will be notified of any changes in the approved plans and specification for the project permitted herein.

[Signature]
 Signature of Licensee
6/12/2019
 Date

[Signature]
 Signature of Permit Official
6-19-19
 Date
 H. H. INK



TOWN OF SOUTHERN SHORES

5375 N Virginia Dare Trl
Southern Shores, NC 27949
(252) 261-2394 tel (252) 255-0876 fax
www.southernshores-nc.gov

Permit Number 10578

Fee 100

SUBCONTRACTOR SIGN OFF AND/OR PERMIT

Date 6-18-19
Owner Goodwill Community Foundation
Mailing Address 4808 Chew Page Rd.
City State, Zip Raleigh NC 27702
Street Address 5381 N. Va. Dare Tr.
Subdivision So/sh Amd Portion Plat A Sec 1
Lot 20-23 Block A Section 1
PIN 987717010526
Flood Zone: _____

ELECTRICAL Licensee Name Nathan Owens NC License/Classification 336DL
Company Name Jesse Owens Electric Corp.
Address 123 Jesse Owens Dr. Phone 473-8923
City State & zip Harbinger, NC 27947 Estimated Project Cost 0
Description of Work: electrical associated w/ system
replacements

PLUMBING Licensee Name _____ NC License/Classification _____
Company Name _____
Address _____ Phone _____
City State & zip _____ Estimated Project Cost _____
Description of Work: _____

GAS Licensee Name _____ NC License/Classification _____
Company Name _____
Address _____ Phone _____
City State & zip _____ Estimated Project Cost _____
Description of Work: _____

MECHANICAL Licensee Name Joe Simpson NC License/Classification 9091 Group 2#3
Company Name All Seasons Heating & Cooling
Address PO Box 244 Phone 491-9232
City State & zip Port Harbor, NC 27964 Estimated Project Cost 16,720.00
Description of Work: Replace system w/ a 5 ton heat pump & evaporator
coil paired w/ a 9296 120,000 BTU gas furnace

I hereby certify that all information in this application is correct and all work will comply with the State Building Code and all other local laws and ordinances and regulations. The Inspection Department will be notified of any changes in the approved plans and specification for the project permitted herein.

Joe Simpson 6-18-19
Signature of Licensee Date

Brandon Sheffer 6-19-19
Signature of Permit Official Date
JL/DVS



**TOWN OF SOUTHERN SHORES
PLANNING AND CODE ENFORCEMENT**
5375 N Virginia Dare Trail, Southern Shores, NC 27949
(252) 261-2394 Ext 3 - Office (252) 255-0876 - Fax
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**RESIDENTIAL
BUILDING/FLOODPLAIN DEVELOPMENT PERMIT
BUILDING PERMIT #10528**

Location: 245 Sea Oats Trail
Parcel: 021496000 PIN: 986814325653
District: 20- SOUTHERN SHORES
Subdivision: SO/SH BEACH BLK 84
LotBlkSect: LOT: 4 BLK: 84 SEC:

HAYES, JOHN W EUX
HAYES, JANET M EUX
209 DARDEN DR
POQUOSON VA 23662

PHONE #: 757-813-5164

CELL #:

BUSINESS NAME: Mitchell Homes, Inc
CONTRACTOR'S NAME: Brian Mesco
ADDRESS: 1650 Holly Hills Rd
CITY, STATE, ZIP: Powhatan, VA 23139
OFFICE#: 804-378-5211
CELL#:
FAX#:
EMAIL: dlumpkin@mitchellhomesinc.com

NC G.C. LICENSED CONTRACTOR: X NO
NC G.C. LICENSE NUMBER: 76127
LIMITATION: Limited
CLASSIFICATION: Residential
QUALIFIER: Brian Christopher Mesco

LIEN AGENT: Chicago Title Company, LLC Entry #1048885
19 W Hargett St., Suite 507/Raleigh, NC 27601

DESCRIPTION OF WORK – (Any deviation from the Building Plan or Site Plan requires prior approval): Construction of a new single family dwelling with two attached garages

SPECIAL CONDITIONS -

TYPE OF CONSTRUCTION: New SFD	TYPE OF FOUNDATION: Block	PERMIT TYPE: Residential
	HEAT: Heat Pump	PROPERTY USE: Single Family Dwelling
TOTAL HEATED/LIVING AREAS (SF): 2,493	A/C: Heat Pump	RESIDENTIAL TYPE: Residence
TOTAL NON-HEATED AREAS (SF): 1,143	INTERIOR WALLS: Drywall	
	EXTERIOR WALLS: Vinyl/Stone	ZONING DISTRICT: RS-1
NUMBER OF STORIES: 2	FIREPLACE: Gas	ZONING PERMIT #: 2019-46
BEDROOMS: 4	ROOF: Asphalt	DATE APPROVED: 6/11/2019
SEPTIC CAPACITY # OF PERSONS: 8	INSULATION: Batt	
BATHS: 3 ½ BATHS: n/a	ELEVATOR (SF): n/a	
DETACHED GARAGES: 760 SF	DECKS (SF): n/a	CAMA PERMIT #: n/a
STORAGE ENCLOSURE: N/A POOL: N/A	PORCHES (SF): 383	DATE ISSUED:
FLOOD ZONE: Shaded X	WINDOWS MAKE:	SEPTIC PERMIT #: 28687
BASE FLOOD ELEVATION: PLUS 2FT=	TYPE:	DATE ISSUED: 5/2/2019

*****The owner and builder are responsible for the following: All work done shall comply with the State Building Code and all other applicable State and local laws. The applicant certifies that the information on this permit is correct; that he/she is the owner or duly authorized agent of owner; that all construction shall be as shown on the submitted plans and specifications; the he/she understands this permit is valid for 180 days to begin construction and may be revoked for failure to comply with applicable regulations and laws.**

TOTAL CONSTRUCTION COST	\$200,000		
HEATED/LIVING AREA (sf) (new square footage)	2,493	X .60/sf (single family) =	\$1,495.80
		X .75/sf (all others) =	
NON-HEATED AREA (sf) (new square footage)	1,143	X .30/sf (single family) =	\$342.90
		X .35/sf (all others) =	
REMODEL/REPAIR/ALTERATION (no additional square footage)	\$	X \$10 per \$1,000 of cost =	\$
		Pool = \$125	\$
		Zoning Permit Fee = \$50	\$50.00
		Plan Review Fee = \$150 or \$100	\$pd
		Minimum Permit Fee = \$100	\$
		Homeowner's Recovery Fund\$10	\$10.00
		TOTAL FEE	\$1,898.70

Mitchell Homes Inc. Chet Heyman *Chet Heyman* *6-19-2019*
Applicant - Owner/Contractor (Please print and sign name) Date Issued
Brian Mesco
Building/Code/Zoning Official Date Approved
DLUMPKIN



**TOWN OF SOUTHERN SHORES
PLANNING AND CODE ENFORCEMENT**
5375 N Virginia Dare Trail, Southern Shores, NC 27949
(252) 261-2394 Ext 4 - Office (252) 255-0876 - Fax
www.southernshores-nc.gov

**RESIDENTIAL
BUILDING/FLOODPLAIN DEVELOPMENT PERMIT
BUILDING PERMIT #10569**

Location: 142 Oyster Bed Lane
Parcel: 022383093 PIN: 986707677831
District: 20- SOUTHERN SHORES
Subdivision: CHICHAUK
LotBlkSect: LOT: 93 BLK: SEC:

**BENTLEY, BRUCE F CO-TTEES OR SUCESSOR TRE
BENTLEY, SUSAN TRE
1228 CLAGETT DR
ROCKVILLE MD 20851**
PHONE #: 301-980-3870 CELL #:

BUSINESS NAME:
CONTRACTOR'S NAME: Property Owner
ADDRESS:
CITY, STATE, ZIP:
OFFICE#:
CELL#:
FAX#:
EMAIL:

NC G.C. LICENSED CONTRACTOR: ___ YES ___ NO
NC G.C. LICENSE NUMBER:
LIMITATION:
CLASSIFICATION:
QUALIFIER:
LIEN AGENT: n/a

DESCRIPTION OF WORK – (Any deviation from the Building Plan or Site Plan requires prior approval): New ramp from concrete driveway to existing deck

SPECIAL CONDITIONS -

TYPE OF CONSTRUCTION: Addition	TYPE OF FOUNDATION: Piling	PERMIT TYPE: Residential
	HEAT:	RESIDENTIAL TYPE: Residence
TOTAL HEATED/LIVING AREAS (SF):	A/C:	PROPERTY USE: Single Family Dwelling
TOTAL NON-HEATED AREAS (SF):	INTERIOR WALLS:	ZONING DISTRICT: RS-1
	EXTERIOR WALLS:	ZONING PERMIT #: n/a
NUMBER OF STORIES:	FIREPLACE:	DATE ISSUED:
BEDROOMS:	ROOF:	
SEPTIC CAPACITY # OF PERSONS:	INSULATION:	CAMA PERMIT #: n/a
BATHS: ½ BATHS:	ELEVATOR (SF):	DATE ISSUED:
GARAGE: STORAGE BLDG:	DECKS:	SEPTIC PERMIT #: 28787
STORAGE ENCLOSURE:	PORCHES:	DATE ISSUED: 6/5/2019
POOL:	WINDOWS MAKE:	
FLOOD ZONE: Shaded X	TYPE:	

*****The owner and builder are responsible for the following: All work done shall comply with the State Building Code and all other applicable State and local laws. The applicant certifies that the information on this permit is correct; that he/she is the owner or duly authorized agent of owner; that all construction shall be as shown on the submitted plans and specifications; the he/she understands this permit is valid for 180 days to begin construction and may be revoked for failure to comply with applicable regulations and laws.**

TOTAL CONSTRUCTION COST	\$1,500		
HEATED/LIVING AREA (sf) (new square footage)	X .60/sf (single family) = X .75/sf (all others) =		\$
NON-HEATED AREA (sf) (new square footage)	X .30/sf (single family) = X .35/sf (all others) =		\$
REMODEL/REPAIR/ALTERATION (no additional square footage)	X \$10 per \$1,000 of cost =		\$
	Pool = \$125		\$
	Zoning Permit Fee = \$50		\$
	Plan Review Fee = \$150 or \$100		\$
	Minimum Permit Fee = \$100		\$100.00
	Homeowner's Recovery Fund \$10		\$
	TOTAL FEE		\$100.00

Bruce Bentley **BRUCE BENTLEY** **06-20-2019**
Applicant - Owner/Contractor (Please print and sign name) Date Issued
Burke Shelton
Building/Code/Zoning Official *DJ DS* Date Approved



TOWN OF SOUTHERN SHORES
PLANNING AND CODE ENFORCEMENT
 5375 N Virginia Dare Trail, Southern Shores, NC 27949
 (252) 261-2394 Ext 3 - Office (252) 255-0876 - Fax
www.southernshores-nc.gov

RESIDENTIAL
BUILDING/FLOODPLAIN DEVELOPMENT PERMIT
BUILDING PERMIT #10572

Location: 305 N Dogwood Trail
Parcel: 021444000 PIN: 986809150599
District: 20- SOUTHERN SHORES
Subdivision: SO/SH SECTIONS A&B
LotBlkSect: LOT: 23 & 40' OF 24 BLK: D SEC: B

AMBROSE, BETTY R
305 DOGWOOD TRL
KITTY HAWK NC 27949

PHONE #: 252-261-6852 CELL #:

BUSINESS NAME: Northeastern Marine
CONTRACTOR'S NAME: Bill Jones
ADDRESS: PO Box 42
CITY, STATE, ZIP: Kitty Hawk, NC 27949
OFFICE#: 252-261-3682
CELL#:
FAX#: 252-261-2275
EMAIL: julie@nemarineconst.com

NC G.C. LICENSED CONTRACTOR: YES NO
NC G.C. LICENSE NUMBER: 30026
LIMITATION: Limited
CLASSIFICATION: Marine
QUALIFIER: William Jones

LIEN AGENT: n/a

DESCRIPTION OF WORK – (Any deviation from the Building Plan or Site Plan requires prior approval): Installing approx. 112lf of vinyl bulkhead, 5x5 landing and rebuild steps from storm damage

SPECIAL CONDITIONS - STORM DAMAGE – HURRICANE FLORENCE

TYPE OF CONSTRUCTION: Bulkhead	TYPE OF FOUNDATION:	PERMIT TYPE: Residential
	HEAT:	PROPERTY USE: Single Family Dwelling
TOTAL HEATED/LIVING AREAS (SF):	A/C:	RESIDENTIAL TYPE: Residence
TOTAL NON-HEATED AREAS (SF):	INTERIOR WALLS:	
	EXTERIOR WALLS:	ZONING DISTRICT: RS-1
NUMBER OF STORIES:	FIREPLACE:	ZONING PERMIT #: n/a
BEDROOMS:	ROOF:	DATE APPROVED:
SEPTIC CAPACITY # OF PERSONS:	INSULATION:	
BATHS: ½ BATHS:	ELEVATOR (SF):	
DETACHED GARAGE:	DECKS (SF):	CAMA PERMIT #: General 73623A
STORAGE ENCLOSURE: POOL:	PORCHES (SF):	DATE ISSUED:
FLOOD ZONE: AE	WINDOWS MAKE:	SEPTIC PERMIT #:
BASE FLOOD ELEVATION: 7FT PLUS 2FT= 9FT	TYPE:	DATE ISSUED:

*****The owner and builder are responsible for the following: All work done shall comply with the State Building Code and all other applicable State and local laws. The applicant certifies that the information on this permit is correct; that he/she is the owner or duly authorized agent of owner; that all construction shall be as shown on the submitted plans and specifications; the he/she understands this permit is valid for 180 days to begin construction and may be revoked for failure to comply with applicable regulations and laws.**

TOTAL CONSTRUCTION COST	\$36,500		
HEATED/LIVING AREA (sf) (new square footage)		X .60/sf (single family) =	\$
		X .75/sf (all others) =	
NON-HEATED AREA (sf) (new square footage)		X .30/sf (single family) =	\$
		X .35/sf (all others) =	
REMODEL/REPAIR/ALTERATION (no additional square footage)	\$	X \$10 per \$1,000 of cost =	\$
		Pool = \$125	\$
		Zoning Permit Fee = \$50	\$
		Plan Review Fee = \$150 or \$100	\$
		Minimum Permit Fee = \$100	\$
		Homeowner's Recovery Fund \$10	\$
		TOTAL FEE	\$FEE WAIVED

Julie Emory *Julie Emory* *6/20/19*
 Applicant - Owner/Contractor (Please print and sign name) Date Issued
Brendley Shelton *JLS* *6-18-19*
 Building/Code/Zoning Official Date Approved



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www.southernshores-nc.gov

**RESIDENTIAL
BUILDING/FLOODPLAIN DEVELOPMENT PERMIT
BUILDING PERMIT #10571**

Location: 336 Hillcrest Dr

Parcel: 020963000 PIN: 986809262907
District: 20- SOUTHERN SHORES
Subdivision: SO/SH BEACH BLKS 62 72 82
LotBlkSect: LOT: 14 BLK: 62 SEC:

FENN, SUSAN W
250 PANTOPS MOUNTAIN RD APARTMENT 5128
CHARLOTTESVILLE VA 22911

PHONE #: 919-824-1411 CELL #:

BUSINESS NAME:
CONTRACTOR'S NAME: Property Owner
ADDRESS:
CITY, STATE, ZIP:
OFFICE#:
CELL#:
FAX#:
EMAIL:

NC G.C. LICENSED CONTRACTOR: ___ YES _X_ NO
NC G.C. LICENSE NUMBER:
LIMITATION:
CLASSIFICATION:
QUALIFIER:

LIEN AGENT: n/a

DESCRIPTION OF WORK – (Any deviation from the Building Plan or Site Plan requires prior approval): Installation of 10x16 accessory storage building on concrete block foundation

SPECIAL CONDITIONS -

TYPE OF CONSTRUCTION: Accessory – storage building	TYPE OF FOUNDATION:	PERMIT TYPE: Residential
TOTAL HEATED/LIVING AREAS (SF):	HEAT: A/C:	PROPERTY USE: Single Family Dwelling
TOTAL NON-HEATED AREAS (SF):	INTERIOR WALLS:	RESIDENTIAL TYPE: Residence
NUMBER OF STORIES:	EXTERIOR WALLS:	ZONING DISTRICT: RS-1
BEDROOMS:	FIREPLACE:	ZONING PERMIT #: 2019-49
SEPTIC CAPACITY # OF PERSONS:	ROOF:	DATE APPROVED: 6/20/2019
BATHS: ½ BATHS:	INSULATION:	
DETACHED GARAGE:	ELEVATOR (SF):	
STORAGE ENCLOSURE: POOL:	DECKS (SF):	CAMA PERMIT #: n/a
FLOOD ZONE: Shaded X	PORCHES (SF):	DATE ISSUED:
BASE FLOOD ELEVATION: PLUS 2FT=	WINDOWS MAKE:	SEPTIC PERMIT #: 28810
	TYPE:	DATE ISSUED: 6/13/2019

*****The owner and builder are responsible for the following: All work done shall comply with the State Building Code and all other applicable State and local laws. The applicant certifies that the information on this permit is correct; that he/she is the owner or duly authorized agent of owner; that all construction shall be as shown on the submitted plans and specifications; the he/she understands this permit is valid for 180 days to begin construction and may be revoked for failure to comply with applicable regulations and laws.**

TOTAL CONSTRUCTION COST	\$5,000		
HEATED/LIVING AREA (sf) (new square footage)		X .60/sf (single family) = X .75/sf (all others) =	\$
NON-HEATED AREA (sf) (new square footage)		X .30/sf (single family) = X .35/sf (all others) =	\$
REMODEL/REPAIR/ALTERATION (no additional square footage)	\$	X \$10 per \$1,000 of cost =	\$
		Pool = \$125	\$
		Zoning Permit Fee = \$50	\$50.00
		Plan Review Fee = \$150 or \$100	\$
		Minimum Permit Fee = \$100	\$100.00
		Homeowner's Recovery Fund \$10	\$
		TOTAL FEE	\$150.00

Applicant - Owner/Contractor Andrew Fenn (Please print and sign name) Date Issued 6/21/19
 Building/Code/Zoning Official Bunley Speeth Date Approved 6-20-19
JL DKS



**TOWN OF SOUTHERN SHORES
PLANNING AND CODE ENFORCEMENT**
5375 N Virginia Dare Trail, Southern Shores, NC 27949
(252) 261-2394 Ext 3 - Office (252) 255-0876 - Fax
www.southernshores-nc.gov

**RESIDENTIAL
BUILDING/FLOODPLAIN DEVELOPMENT PERMIT
BUILDING PERMIT #10556**

Location: 170 Beech Tree Trail
Parcel: 022055000 PIN: 986818304781
District: 20- SOUTHERN SHORES
Subdivision: SO/SH BLKS 140, 140A,150,150A
LotBlkSect: LOT: 2 BLK: 140 SEC:

**PEPLER, HENDRIK L EUX
PEPLER, ANNA S EUX
408 W HELGA ST
KILL DEVIL HILLS NC 27948**

PHONE #: 717-884-1976

CELL #:

BUSINESS NAME: Albemarle Contractors, Inc
CONTRACTOR'S NAME: Lori N McGraw
ADDRESS: PO Box 146
CITY, STATE, ZIP: Southern Shores, NC 27949
OFFICE#: 252-261-1080
CELL#: 252-202-9994
FAX#:
EMAIL: albemarle27949@gmail.com

NC G.C. LICENSED CONTRACTOR: YES NO
NC G.C. LICENSE NUMBER: 53847
LIMITATION: Intermediate
CLASSIFICATION: Building
QUALIFIER: Lori N McGraw

LIEN AGENT: Premier Land Title Insurance Company Entry #1046737
19 W. Hargett St., Suite 507 / Raleigh, NC 27601

DESCRIPTION OF WORK – (Any deviation from the Building Plan or Site Plan requires prior approval): Construction of a new single family dwelling with attached garage

SPECIAL CONDITIONS -

TYPE OF CONSTRUCTION: New SFD	TYPE OF FOUNDATION: Piling	PERMIT TYPE: Residential
	HEAT: Electric	PROPERTY USE: Single Family Dwelling
TOTAL HEATED/LIVING AREAS (SF): 2,536	A/C: Electric	RESIDENTIAL TYPE: Residence
TOTAL NON-HEATED AREAS (SF): 1,301	INTERIOR WALLS: Drywall	
	EXTERIOR WALLS: LP Smartside	ZONING DISTRICT: RS-1
NUMBER OF STORIES: 2	FIREPLACE: n/a	ZONING PERMIT #: 2019-45
BEDROOMS: 4	ROOF: Asphalt	DATE APPROVED: 6/11/2019
SEPTIC CAPACITY # OF PERSONS: 8	INSULATION: Batt	
BATHS: 3 ½ BATHS:	ELEVATOR (SF): n/a	
ATTACHED GARAGE: 684SF	DECKS (SF): 269	CAMA PERMIT #: n/a
STORAGE ENCLOSURE: POOL:	PORCHES (SF): 348	DATE ISSUED:
FLOOD ZONE: Shaded X	WINDOWS MAKE: Pella	SEPTIC PERMIT #: 28632
BASE FLOOD ELEVATION: PLUS 2FT=	TYPE: Double Hung	DATE ISSUED: 4/4/2019

*****The owner and builder are responsible for the following: All work done shall comply with the State Building Code and all other applicable State and local laws. The applicant certifies that the information on this permit is correct; that he/she is the owner or duly authorized agent of owner; that all construction shall be as shown on the submitted plans and specifications; the he/she understands this permit is valid for 180 days to begin construction and may be revoked for failure to comply with applicable regulations and laws.**

TOTAL CONSTRUCTION COST	\$439,897		
HEATED/LIVING AREA (sf) (new square footage)	2,536	X .60/sf (single family) =	\$1,521.60
		X .75/sf (all others) =	
NON-HEATED AREA (sf) (new square footage)	1,301	X .30/sf (single family) =	\$390.30
		X .35/sf (all others) =	
REMODEL/REPAIR/ALTERATION (no additional square footage)	\$	X \$10 per \$1,000 of cost =	\$
		Pool = \$125	\$
		Zoning Permit Fee = \$50	\$50.00
		Plan Review Fee = \$150 or \$100	\$pd
		Minimum Permit Fee = \$100	\$
		Homeowner's Recovery Fund \$10	\$10.00
		TOTAL FEE	\$1,971.90

Applicant - Owner/Contractor

(Please print and sign name)

Date Issued

Building/Code/Zoning Official

Date Approved

[Signature]

[Signature]

6-25-19

[Signature]

6-14-19

[Signature]

TOWN OF SOUTHERN SHORES
 PLANNING AND CODE
 ENFORCEMENT
 5375 N Virginia Dare Trl
 Southern Shores NC 27949
 (252) 261-2394 ext 3 tel
 (252) 255-0876 fax
 www.southernshores-nc.gov



SUB-CONTRACTOR SIGN OFF AND/OR PERMIT

Date 6-20-19
 PROJECT ADDRESS 30 Circle Dr
 Owner Brad Jordan
 Mailing Address _____
 City, State, Zip _____
 Phone _____

Permit Number 10580
 Fee \$ 100

EXISTING Building Permit Number _____ NO FEE (if work is associated with a Building Permit) _____

ELECTRICAL = Licensee Name _____ NC License/Classification _____
 Company Name _____
 Address _____ Phone _____
 City State & zip _____ Estimated Project Cost _____
Description of Work: _____

PLUMBING = Licensee Name _____ NC License/Classification _____
 Company Name _____
 Address _____ Phone _____
 City State & zip _____ Estimated Project Cost _____
Description of Work: _____

GAS = Licensee Name _____ NC License/Classification _____
 Company Name _____
 Address _____ Phone _____
 City State & zip _____ Estimated Project Cost _____
Description of Work: _____

MECHANICAL = Licensee Name Robert E Harwood Z NC License/Classification H3-I
 Company Name HARO Air LLC
 Address 116 BALLAST ROCK 76 UNIT 4 Phone 252-491-5220
 City State & zip POWELL'S POINT NC 27964 Estimated Project Cost 900
Description of Work: Relocate 2 HWPumps to New Area

FIRE SPRINKLER = Licensee Name _____ NC License/Classification _____
 Company Name _____
 Address _____ Phone _____
 City State & zip _____ Estimated Project Cost _____
Description of Work: _____

I hereby certify that all information in this application is correct and all work will comply with the State Building Code and all other local laws and ordinances and regulations. The Inspection Department will be notified of any changes in the approved plans and specification for the project permitted herein.

Robert E Harwood Z 6-20-19
 Signature of Licensee Date

Benny Shelton 6-24-19
 Signature of Permit Official Date
 JD1115

TOWN OF SOUTHERN SHORES
 PLANNING AND CODE
 ENFORCEMENT
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 www.southernshores-nc.gov



SUB-CONTRACTOR SIGN OFF AND/OR PERMIT

Date 25 Jun 19

PROJECT ADDRESS 104 S. Dogwood Trail

Owner Lou Christensen
 Mailing Address _____
 City, State, Zip _____
 Phone _____

Permit Number 10581
 Fee \$ 100

EXISTING Building Permit Number _____ NO FEE (if work is associated with a Building Permit) _____

ELECTRICAL = Licensee Name _____ NC License/Classification _____
 Company Name Five Wire Electrical
 Address _____ Phone _____
 City State & zip _____ Estimated Project Cost _____
 Description of Work: _____

PLUMBING = Licensee Name _____ NC License/Classification _____
 Company Name _____
 Address _____ Phone _____
 City State & zip _____ Estimated Project Cost _____
 Description of Work: _____

GAS = Licensee Name _____ NC License/Classification _____
 Company Name _____
 Address _____ Phone _____
 City State & zip _____ Estimated Project Cost _____
 Description of Work: _____

MECHANICAL = Licensee Name Edwin J Miller NC License/Classification 73299 H3
 Company Name Delta T
 Address 167 Yaupon Trail Phone 252.261.0404
 City State & zip Southern Shores Estimated Project Cost 5,700
 Description of Work: Repl. HVAC system with a 2.5 ton 14 SEER American Standard heat pump system

FIRE SPRINKLER = Licensee Name _____ NC License/Classification _____
 Company Name _____
 Address _____ Phone _____
 City State & zip _____ Estimated Project Cost _____
 Description of Work: _____

I hereby certify that all information in this application is correct and all work will comply with the State Building Code and all other local laws and ordinances and regulations. The Inspection Department will be notified of any changes in the approved plans and specification for the project permitted herein.

Lou Christensen
 Signature of Licensee

25 Jun 19
 Date

Burke Shelton
 Signature of Permit Official
6-24-19
 Date

JEINS

TOWN OF SOUTHERN SHORES
PLANNING AND CODE
ENFORCEMENT
5375 N Virginia Dare Trl
Southern Shores NC 27949
(252) 261-2394 ext 4 tel
(252) 255-0876 fax
www.southernshores-nc.gov



SUB-CONTRACTOR SIGN OFF AND/OR PERMIT

Date 6-25-19

PROJECT ADDRESS 71 Ocean Blvd

Owner Anna C Aldridge
Mailing Address 161 Creeper Rd PO Box 75
City, State, Zip Bridgeport WV 26330
Phone 304-672-2046

Permit Number 10582
Fee \$ 100

EXISTING Building Permit Number _____ NO FEE (if work is associated with a Building Permit) _____

ELECTRICAL = Licensee Name Jeff Fischer NC License/Classification 15972 001
Company Name Fischer Building Co
Address 105 Rhodanus Dr Phone 202-9468
City State & zip KDH NC 27948 Estimated Project Cost _____
Description of Work: Wire 2 air handlers & 2 heat pumps

PLUMBING = Licensee Name _____ NC License/Classification _____
Company Name _____
Address _____ Phone _____
City State & zip _____ Estimated Project Cost _____
Description of Work: _____

GAS = Licensee Name _____ NC License/Classification _____
Company Name _____
Address _____ Phone _____
City State & zip _____ Estimated Project Cost _____
Description of Work: _____

MECHANICAL = Licensee Name Brian J. McDonald NC License/Classification 12643 H2-3 Class 1
Company Name Brian Jefferson McDonald DBA ONE HOUR HEATING & AIR CONDITIONING
Address Box 2600 701 W. Frog Pond Dr Phone 441-1740
City State & zip KDH NC 27948 Estimated Project Cost \$5,000
Description of Work: Replace 2 HVAC's with 14 seer 2 & 2.5 ton Carrier air handlers & heat pumps.

FIRE SPRINKLER = Licensee Name _____ NC License/Classification _____
Company Name _____
Address _____ Phone _____
City State & zip _____ Estimated Project Cost _____
Description of Work: _____

I hereby certify that all information in this application is correct and all work will comply with the State Building Code and all other local laws and ordinances and regulations. The Inspection Department will be notified of any changes in the approved plans and specification for the project permitted herein.

[Signature] Signature of Licensee
6-24-19 Date

[Signature] Signature of Permit Official
6-25-19 Date



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www.southernshores-nc.gov

**RESIDENTIAL
BUILDING/FLOODPLAIN DEVELOPMENT PERMIT
BUILDING PERMIT #10579**

Location: 77 Gravey Pond Lane

Parcel: 022475381 PIN: 986715644527
District: 20- SOUTHERN SHORES
Subdivision: CHICHAUK
LotBlkSect: LOT: 381 BLK: SEC:

**JOHNSON, DIANA LEA
107 ERIC NELSON RUN
YORKTOWN VA 23693**

PHONE #: 850-776-1017 CELL #:

BUSINESS NAME:
CONTRACTOR'S NAME: Shawn Johnson
ADDRESS: PO Box 2767
CITY, STATE, ZIP: Kitty Hawk, NC 27949
OFFICE#:
CELL#: 252-457-5174
FAX#:
EMAIL:

NC G.C. LICENSED CONTRACTOR: ___ YES ___ X NO
NC G.C. LICENSE NUMBER:
LIMITATION:
CLASSIFICATION:
QUALIFIER:

LIEN AGENT: n/a

DESCRIPTION OF WORK – (Any deviation from the Building Plan or Site Plan requires prior approval): Extend rear deck (22x8) for hot tub and construct new maximum 6'H retaining wall

SPECIAL CONDITIONS -

TYPE OF CONSTRUCTION: Addition (deck & Retaining wall)	TYPE OF FOUNDATION:	PERMIT TYPE: Residential
TOTAL HEATED/LIVING AREAS (SF):	HEAT: A/C:	RESIDENCE/2nd HOME/RENTAL: Residence
TOTAL NON-HEATED AREAS (SF):	INTERIOR WALLS:	PROPERTY USE: Single Family Dwelling
NUMBER OF STORIES:	EXTERIOR WALLS:	ZONING DISTRICT: RS-1
BEDROOMS:	FIREPLACE:	ZONING PERMIT #: 2019-50
SEPTIC CAPACITY # OF PERSONS:	ROOF:	DATE ISSUED: 6/27/2019
BATHS: ½ BATHS:	INSULATION:	CAMA PERMIT #: n/a
GARAGE: STORAGE BLDG:	ELEVATOR (SF):	DATE ISSUED:
STORAGE ENCLOSURE: POOL:	DECKS (SF):	SEPTIC PERMIT #: (stamped site plan)
FLOOD ZONE: Shaded X	PORCHES (SF):	DATE ISSUED: 6/21/2019
BASE FLOOD ELEVATION: PLUS 2FT=	WINDOWS MAKE:	
	TYPE:	

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TOTAL CONSTRUCTION COST	\$7,000		
HEATED/LIVING AREA (sf) (new square footage)		X .60/sf (single family) =	\$
		X .75/sf (all others) =	
NON-HEATED AREA (sf) (new square footage)	176	X .30/sf (single family) =	\$0
		X .35/sf (all others) =	
REMODEL/REPAIR/ALTERATION (no additional square footage)	\$	X \$10 per \$1,000 of cost =	\$
		Pool = \$125	\$
		Zoning Permit Fee = \$50	\$
		Plan Review Fee = \$150 or \$100	\$
		Minimum Permit Fee = \$100	\$100.00
		Homeowner's Recovery Fund \$10	\$
		TOTAL FEE	\$100.00

Shawn Johnson *6-27-19*
Applicant - Owner/Contractor (Please print and sign name) Date Issued

Burley Obertine *DU NK* *6-27-19*
Building/Code/Zoning Official Date Approved



**TOWN OF SOUTHERN SHORES
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(252) 261-2394 Ext 3 - Office (252) 255-0876 - Fax
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**RESIDENTIAL
BUILDING/FLOODPLAIN DEVELOPMENT PERMIT
BUILDING PERMIT #10575**

Location: 37 Cypress Lane
Parcel: 022726000 PIN: 986719617867
District: 20- SOUTHERN SHORES
Subdivision: SO/SH SOUNDSIDE BLKS 170-175
LotBlkSect: LOT: 2 BLK: 173 SEC:

TCB PROPERTIES LLC
11061 MILL POND LN
MECHANICSVILLE VA 23116

PHONE #:

CELL #:

BUSINESS NAME: JB Sims Construction Co, Inc
CONTRACTOR'S NAME: JB Sims
ADDRESS: 262 Wax Myrtle Trl
CITY, STATE, ZIP: Southern Shores, NC 27949
OFFICE#:
CELL#: 757-748-2150
FAX#:
EMAIL: jbsims1987@aol.com

NC G.C. LICENSED CONTRACTOR: YES NO
NC G.C. LICENSE NUMBER: 39307
LIMITATION: Limited
CLASSIFICATION: Residential
QUALIFIER: James Boyd Sims

LIEN AGENT: Investors Title Insurance Company Entry# 1046882
19 W. Hargett St., Suite 507 / Raleigh, NC 27601

DESCRIPTION OF WORK – (Any deviation from the Building Plan or Site Plan requires prior approval): Construction of a 14x28 unfinished storage building and new 572sf deck

SPECIAL CONDITIONS -

TYPE OF CONSTRUCTION: Accessory Storage Bldg & Deck Addition	TYPE OF FOUNDATION: Slab	PERMIT TYPE: Residential
TOTAL HEATED/LIVING AREAS (SF):	HEAT: A/C:	RESIDENTIAL TYPE: 2 nd Home
TOTAL NON-HEATED AREAS (SF): 572	INTERIOR WALLS:	PROPERTY USE: Single Family Dwelling
NUMBER OF STORIES:	EXTERIOR WALLS: Vinyl	ZONING DISTRICT: RS-1
BEDROOMS:	FIREPLACE:	ZONING PERMIT #: 2019-51
SEPTIC CAPACITY # OF PERSONS:	ROOF: Asphalt	DATE APPROVED: 6/28/2019
BATHS: ½ BATHS:	INSULATION:	CAMA PERMIT #: n/a
DETACHED GARAGE:	ELEVATOR (SF):	DATE ISSUED:
STORAGE BUILDING: 392 POOL:	DECKS (SF):	SEPTIC PERMIT #: 28816
FLOOD ZONE: AE	PORCHES (SF):	DATE ISSUED: 6/18/2019
BASE FLOOD ELEVATION: 7FT PLUS 2FT= 9FT	WINDOWS MAKE: Simonten	
	TYPE: Casement	

*****The owner and builder are responsible for the following: All work done shall comply with the State Building Code and all other applicable State and local laws. The applicant certifies that the information on this permit is correct; that he/she is the owner or duly authorized agent of owner; that all construction shall be as shown on the submitted plans and specifications; the he/she understands this permit is valid for 180 days to begin construction and may be revoked for failure to comply with applicable regulations and laws.**

TOTAL CONSTRUCTION COST	\$100,000		
HEATED/LIVING AREA (sf) (new square footage)		X .60/sf (single family) =	\$
		X .75/sf (all others) =	
NON-HEATED AREA (sf) (new square footage)	964	X .30/sf (single family) =	\$289.20
		X .35/sf (all others) =	
REMODEL/REPAIR/ALTERATION (no additional square footage)		X \$10 per \$1,000 of cost =	\$
		Pool = \$125	\$
		Zoning Permit Fee = \$50	\$50.00
		Plan Review Fee = \$150 or \$100	\$
		Minimum Permit Fee = \$100	\$
		Homeowner's Recovery Fund \$10	\$10.00
		TOTAL FEE	\$349.20

Applicant - Owner/Contractor (Please print and sign name)

Building/Code/Zoning Official

Date Issued

Date Approved

John Boyd Shelton

John Boyd Shelton

J.B.S.

6/28/19

6-28-19

TOWN OF SOUTHERN SHORES
 PLANNING AND CODE
 ENFORCEMENT
 5375 N Virginia Dare Trl
 Southern Shores NC 27949
 (252) 261-2394 ext 3 tel
 (252) 255-0876 fax
 www.southernshores-nc.gov



SUB-CONTRACTOR SIGN OFF AND/OR PERMIT

Date 6-28-19
 PROJECT ADDRESS 292 SEA DATS TRL
 Owner JOHN HLAVKA
 Mailing Address 31E 216 ST
 City, State, Zip EUCLID, OH 44123
 Phone 216-650-7674

Permit Number 10587
 Fee \$ 100

EXISTING Building Permit Number _____ NO FEE (if work is associated with a Building Permit) _____

ELECTRICAL = Licensee Name PRECISE NC License/Classification _____
 Company Name _____
 Address _____ Phone _____
 City State & zip _____ Estimated Project Cost _____
 Description of Work: _____

PLUMBING = Licensee Name _____ NC License/Classification _____
 Company Name _____
 Address _____ Phone _____
 City State & zip _____ Estimated Project Cost _____
 Description of Work: _____

GAS = Licensee Name _____ NC License/Classification _____
 Company Name _____
 Address _____ Phone _____
 City State & zip _____ Estimated Project Cost _____
 Description of Work: _____

MECHANICAL = Licensee Name ANTHONY R. PRITCHETT NC License/Classification 18066 H1 H2
 Company Name MASTER HEATING & COOLING
 Address PO BOX 707 Phone _____
 City State & zip KURTZ HAWK NC 27949 Estimated Project Cost \$16,400
 Description of Work: REPLACE LOWER LEVEL - HVAC SYSTEM
AMERICAN STANDARDS - 410A - 14 SEER 300V

FIRE SPRINKLER = Licensee Name _____ NC License/Classification _____
 Company Name _____
 Address _____ Phone _____
 City State & zip _____ Estimated Project Cost _____
 Description of Work: _____

I hereby certify that all information in this application is correct and all work will comply with the State Building Code and all other local laws and ordinances and regulations. The Inspection Department will be notified of any changes in the approved plans and specification for the project permitted herein.

Anthony Pritchett 6/28/19
 Signature of Licensee Date

Brendy Shepton 6-28-19
 Signature of Permit Official Date



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

PERMIT

Permit NO. **19136**
 Permit Type: Commercial
 Work Classification: [Permit Type]
 Permit Status: Pending

Issue Date: 6/3/2019

Expires: 11/30/2019
 Main Permit: Main Permit

Project Address

5300 The Woods Road
 Lot

Zoning

BC-2

Block

Subdivision

SUBDIVISION - NONE

PIN

986606488995

Flood Zone

X

Constuction Type

Repair/Replace

Building Code

BLDG2018

Owner Information

VIRGINIA ELECTRIC POWER COMPANY null

Address

C/O J J JOHNSON DONINION
 RES. P O BOX 26666
 RICHMOND VA 23219

Phone

Applicant Information

Virginia Electric & Power Company

Address

120 Tredegar Street
 Richmond, VA 23219

Phone

804-217-2825

Contractor(s)	Phone	Contractor Type	License Number	Construction Cost:	400000.00
Mid Atlantic Petroleum Service	(757)424-9726	General	41692	Unheated Sq. Feet	0.00
Mid Atlantic Petroleum Services, Inc. (EL)	(757)424-9726	Electrical	21632-U	Total Sq. Feet:	0.00

Description of Work: Demolition and removal of two existing above ground fuel tanks and associated equipment. Install a new 16k gallon split tank and associated fuel equipment.

Building Comments:

Permit Cost - \$2262.00

Planning Conditions:

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

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

Owner / Applicant / Contractor / Agent **Date**

Building Official **Date**



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

PERMIT

Permit NO. **19225**
 Permit Type: Residential
 Work Classification: [Permit Type]
 Permit Status: Pending

Issue Date: 6/3/2019

Expires: 11/30/2019
 Main Permit: Main Permit

Project Address

3872 O'Neal Lane

Lot
2

Flood Zone

AE

Owner Information

Jonathan P Askew & Elizabeth A Koester-Askew

Applicant Information

Jonathan Askew

Zoning

VR-1

Block

Constuction Type

Addition

Address

P O Box 3
 Kitty Hawk NC 27949

Address

P O Box 3
 Kiitty Hawk, NC 27949

Subdivision

NORA BAUM E W BAUM ETAL
 REV

PIN

987506374939

Building Code

BLDG2018

Phone

Phone

252-202-5193

Contractor(s)	Phone	Contractor Type	License Number	Construction Cost:	3500.00
Owner	000-000-0000	General	00000	Unheated Sq. Feet	168.00
				Total Sq. Feet:	0.00

Building Comments:

Permit Cost - \$65.00

Planning Conditions:

Flood Zone-AE; Elevation-8.3'+1'=9.3'; Map#-3720987500J; Effective-09/20/2006

Description of Work: Add a roof over existing deck

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

Owner / Applicant / Contractor / Agent **Date**

Building Official **Date**



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

PERMIT

Permit NO. **19226**
 Permit Type: Residential
 Work Classification: [Permit Type]
 Permit Status: Pending

Issue Date: 6/3/2019

Expires: 11/30/2019
 Main Permit: Main Permit

Project Address

3604 N Virginia Dare Trail

Lot

2 & 2A

Flood Zone

VE

Owner Information

Inland Sea Investments LLC

Applicant Information

Jeffrey Clark

Zoning

BR-1

Block

Constuction Type

Repair/Replace

Address

3924 Phlox Rd
 Raleigh NC 27616

Address

116 Parker Street
 Jarvisburg, NC 27947

Subdivision

KITTY DUNES WEST

PIN

987512966516

Building Code

BLDG2018

Phone

919-247-5920

Phone

252-312-5532

Contractor(s)	Phone	Contractor Type	License Number	Construction Cost:	Unheated Sq. Feet	Total Sq. Feet:
Jeffrey Lee Clark	252-312-5532	General	00000	7000.00	0.00	0.00

Building Comments:

Permit Cost - \$125.00

Planning Conditions:

Flood Zone-VE; Elevation-12'+1'=13'; Map#-3720877500J; Effective-09/20/2006; No solid risers on steps; There shall be no alteration of sand dunes which would increase potential flood damage; There shall be no fill used for structural support.

Description of Work: Repair and Replace existing beach accessway

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

Owner / Applicant / Contractor / Agent **Date**

Building Official **Date**



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

PERMIT

Permit NO. **19228**
 Permit Type:
 Work Classification: [Permit Type]
 Permit Status: Pending

Issue Date:

Expires: 12/1/2019

Main Permit: Main Permit

Project Address

4808 Elm Court

Lot

49

Flood Zone

Zoning

Block

Constuction Type

Subdivision

SEA SCAPE SEC 2

PIN

987609063220

Building Code

BLDG2018

Phone

Owner Information

Douglas Stoddart, Jr.

Address

4741 Vista Lane
 Kitty Hawk NC 27949

Applicant Information

Reliant Construction LLC

Address

4275 Worthington Lane
 Kitty Hawk, NC 27949

Phone

252-202-7007

Construction Cost: 125000.00

Unheated Sq. Feet 0.00

Total Sq. Feet: 0.00

Contractor(s)	Phone	Contractor Type	License Number
Reliant Construction, LLC	252-202-7007	General	62339
TBD	000-000-0000	Plumbing	00000
TBD	000-000-0000	Electrical	00000

Description of Work: Install 14 x 30 in-ground swimming pool, brick paver patio and pool house

Building Comments:

Permit Cost - \$850.00

Planning Conditions:

Flood Zone-AE; Elevation-8.3'+1'=9.3'; Map#-3720987600J; Effective-09/20/2206; Finished Elevation Certificate and As-Built Survey are required prior to Final Inspection. See Zoning Permit for additional requirements.

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

Owner / Applicant / Contractor / Agent _____ **Date** _____

Building Official _____ **Date** _____



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

PERMIT

Permit NO. **19237**
 Permit Type: Residential
 Work Classification: [Permit Type]
 Permit Status: Pending

Issue Date: 6/10/2019

Expires: 12/7/2019
 Main Permit: Main Permit

Project Address

4924 Palmer Drive
 Lot
 500

Flood Zone

X

Owner Information

William J & Cheryl J Riemke

Applicant Information

The Professional Handy Man - Miguel Morales

Zoning

BR-1

Block

Constuction Type

Repair/Replace

Address

11703 Rutherford Drive
 Fredericksburg VA 22407

Address

513 Burns Drive
 Kill Devil Hills, NC 27948

Subdivision

SEA SCAPE SEC 1

PIN

987605183203

Building Code

BLDG2018

Phone

Phone

252-573-9372

Construction Cost:	2400.00
Unheated Sq. Feet	0.00
Total Sq. Feet:	0.00

Contractor(s)	Phone	Contractor Type	License Number
Miguel Morales - The Professional Handy Man	252-573-9372	Other	0000

Building Comments:

Permit Cost - \$70.00

Planning Conditions:

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

Description of Work: Replace deck boards, handrails and stairs - No change in foot print

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

Owner / Applicant / Contractor / Agent _____ **Date** _____

Building Official _____ **Date** _____



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

PERMIT

Permit NO. **19238**
 Permit Type: Residential
 Work Classification: [Permit Type]
 Permit Status: Pending

Issue Date: 6/10/2019

Expires: 12/7/2019

Main Permit: Main Permit

Project Address

907 W Kitty Hawk Road
 Lot

Zoning

VR-1

Block

Subdivision

PIN

987505184763

Flood Zone

AE

Constuction Type

New Single-Family Home

Building Code

BLDG2018

Owner Information

Steven LaFrance

Address

407 W Atlantic Street
 Kill Devil Hills NC 27948

Phone

252-305-3282

Applicant Information

PSS Simpson Construction Co

Address

P O Box 713
 Kill Devil Hills, NC 27949

Phone

252-202-1280

Construction Cost: 35000.00

Unheated Sq. Feet 0.00

Total Sq. Feet: 0.00

Contractor(s)	Phone	Contractor Type	License Number
PSS Construction	252-202-1280	General	57425
TBD	000-000-0000	Electrical	00000
TBD	000-000-0000	Mechanical	00000
TBD	000-000-0000	Plumbing	00000

Description of Work: New SFR 2 bedrooms 1 bath - 600 heated sq ft; 160 sq

Building Comments:

Permit Cost - \$852.00 The following items are required: Duct Test required prior to Rough-In Inspection; Termite Affidavit required prior to Rough-In Inspection; Energy Paperwork required prior to Pre-Final Inspection; Address to be posted (minimum 4" numbers) prior to Pre-Final Inspection; Completed Septic Permit prior to Final Inspection;

Planning Conditions:

Flood Zone-AE; Elevation-8.3'+1'=9.3'; Map#-3720987500J; Effective-09/20/2006; The following items are required: Under Construction Elevation Certificate due prior to Rough-In Inspection; Height Certificate due prior to Rough-In Inspection; Finished Elevation Certificate due prior to Pre-Final Inspection; As-Built Survey due prior to Final Inspection;

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

Owner / Applicant / Contractor / Agent _____ Date _____

Building Official _____ Date _____



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

PERMIT

Permit NO. **19242**
 Permit Type: Residential
 Work Classification: [Permit Type]
 Permit Status: Pending

Issue Date: 6/12/2019

Expires: 12/9/2019

Main Permit: Main Permit

Project Address

4522 Seascape Drive
 Lot

Zoning

BR-1

Block

Subdivision

SEA SCAPE SEC 1

PIN

987610259097

Flood Zone

X

Constuction Type

Remodeling

Building Code

BLDG2018

Owner Information

LEONARD J ULICNY

Address

159 CREAM POT RD
 DURHAM CT 6422

Phone

Applicant Information

Sea Level Siding

Address

101 Azalea Court
 Kitty Hawk, NC 27949

Phone

252-207-2075

Construction Cost:	5047.00
Unheated Sq. Feet	0.00
Total Sq. Feet:	0.00

Contractor(s)	Phone	Contractor Type	License Number
Sea Level Siding	(252)255-4646	Other	00000

Building Comments:

Permit Cost - \$85.00

Description of Work: Enclose existing carport into garage

Planning Conditions:

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

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

Owner / Applicant / Contractor / Agent **Date**

Building Official **Date**



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

PERMIT

Permit NO. **19247**
 Permit Type: Residential
 Work Classification: [Permit Type]
 Permit Status: Open

Issue Date: 6/17/2019

Expires: 12/14/2019
 Main Permit: Main Permit

Project Address

4433 Ridge Road

Lot

6A

Flood Zone

AE

Owner Information

Noah & Corissa Snyder

Applicant Information

Noah Snyder

Zoning

VR-1

Block

Constuction Type

Accessory Structure

Address

4433 Ridge Road
 Kitty Hawk NC 27949

Address

4433 Ridge Road
 Kitty Hawk, NC 27949

Subdivision

JOHN L BEACHAM DIV OF LOT
 F&G

PIN

986618418644

Building Code

BLDG2018

Phone

2252-261-8710

Phone

252-202-2917

<u>Contractor(s)</u>	<u>Phone</u>	<u>Contractor Type</u>	<u>License Number</u>	<u>Construction Cost:</u>	<u>6000.00</u>
Owner	000-000-0000	General	00000	<u>Unheated Sq. Feet</u>	<u>288.00</u>
				<u>Total Sq. Feet:</u>	<u>0.00</u>

Building Comments:

Description of Work: Add 12 x 24 storage building - Renewal of expired permit

Permit Cost - \$80.00

Planning Conditions:

Flood Zone-AE; Elevation-8.3'+1'=9.3'; Map#3720986600J; Effective-09/20/2006; A Finished Elevation Certificate will be required before final inspection; If can be field confirmed that storage building does not encroach into side setback an As-Built Survey will not be required.

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

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

Owner / Applicant / Contractor / Agent **Date**

Building Official **Date**



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

PERMIT

Permit NO. **19250**
 Permit Type: Residential
 Work Classification: [Permit Type]
 Permit Status: Pending

Issue Date: 6/19/2019

Expires: 12/16/2019
 Main Permit: Main Permit

Project Address

104 Thickety Point Road
 Lot
 4

Zoning

VR-1

Block

Constuction Type

Elevator

Address

P O Box 529
 Kitty Hawk NC 27949

Address

121 Craigy Court
 Kill Devil Hills, NC 27948

Subdivision

B L C VENTURES SUBDIVISION

PIN

987510475252

Building Code

BLDG2018

Phone

Phone

252-441-7605

Flood Zone

AE

Owner Information

Frank M & Brenda D Chliszczyk

Applicant Information

Hunter Homes, Inc.

Construction Cost: 39000.00
Unheated Sq. Feet 0.00
Total Sq. Feet: 0.00

Contractor(s)	Phone	Contractor Type	License Number
Hunter Homes, Inc.	(252)441-7605	General	16132
TBD	000-000-0000	Electrical	00000

Building Comments:

Description of Work: Add a 1 story elevator and shaft to existing home

Permit Cost - \$365.00

Planning Conditions:

Flood Zone-AE; Elevation-8.3'+1'=9.3'; Map#-3720987500J; Effective-09/20/2006; Finished Elevation Certificate required prior to Final Inspection; Elevation of elevator equipment to be at or above 9.3' NAVD Datum; All materials below 9.3' NAVD must be floor resistant; If elevator cab is designed to provide access to areas below the 11' NAVD, it must be equipped with controls that prevent the cab from descending into floodwaters. Elevator shaft must either have flood openings at 1 square inch per square foot of enclosure or be engineered to resist flood loads.

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

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

Owner / Applicant / Contractor / Agent **Date**

Building Official **Date**



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

PERMIT

Permit NO. **19255**
 Permit Type: Residential
 Work Classification: [Permit Type]
 Permit Status: Pending

Issue Date: 6/20/2019

Expires: 12/17/2019
 Main Permit: Main Permit

Project Address

109 Harbour Bay Drive

Lot

32

Flood Zone

X

Owner Information

Freeman & Associates, Inc.

Applicant Information

Shifflette Corporation/Building Systems, Inc.

Zoning

BR-1

Block

Constuction Type

Remodeling

Address

P O Box 460
 Carrollton VA 23314

Address

2 Wild Flower Circle
 Hampton, VA 23669

Subdivision

HARBOUR BAY

PIN

987512768498

Building Code

BLDG2018

Phone

757-449-8950

Phone

757-561-6980

Construction Cost:	60000.00
Unheated Sq. Feet	840.00
Total Sq. Feet:	1354.00

Contractor(s)	Phone	Contractor Type	License Number
Shifflette Corporation/Building Systems, Inc.	757-561-6980	General	73991
TBD	000-000-0000	Mechanical	00000
TBD	000-000-0000	Plumbing	00000
TBD	000-000-0000	Electrical	00000

Description of Work: Enclose existing porches into heated space; Add garage space; Add decks; - 1354 heated sq ft; 360 sq ft of garage/carport; 120 sq ft of porch; 360 sq ft of deck

Building Comments:

Permit Cost - \$700.00

Planning Conditions:

Flood Zone-Shaded X; Map#-3720987500J; Effective-09/20/2006; Property owner responsibility not to exceed 30% lot coverage; An As-Built Survey required prior to Final Inspection.

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

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

Owner / Applicant / Contractor / Agent	Date
Building Official	Date



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

PERMIT

Permit NO. **19256**
 Permit Type: Residential
 Work Classification: [Permit Type]
 Permit Status: Open

Issue Date: 6/21/2019

Expires: 12/18/2019
 Main Permit: Main Permit

Project Address

4201 Poor Ridge Road
 Lot

Zoning

VR-1

Block

Subdivision

PIN

986508995066

Flood Zone

AE

Constuction Type

Repair/Replace

Building Code

BLDG2018

Owner Information

Colleen Hooper & Gerald W Myers

Address

4200 Poor Ridge Road
 Kitty Hawk NC 27949

Phone

Applicant Information

Shelby Hines

Address

4162 Poor Ridge Road
 Kitty Hawk, NC 27949

Phone

252-261-1424

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

Contractor(s)	Phone	Contractor Type	License Number
Shelby Hines	252-261-1424	General	00000

Building Comments:

Description of Work: Add 6 x 8 cover over existing stoop and remove and replace shingles

Permit Cost - \$70.00

Planning Conditions:

Flood Zone-AE; Elevation-8.3'+1'=9.3'; Map#-3720986500J; Effective-09/20/2006

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

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

Owner / Applicant / Contractor / Agent **Date**

Building Official **Date**



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

PERMIT

Permit NO. **19257**
 Permit Type: Commercial
 Work Classification: [Permit Type]
 Permit Status: Pending

Issue Date: 6/21/2019

Expires: 12/18/2019
 Main Permit: Main Permit

Project Address

3723 N Croatan Highway, Unit G

Lot

Parcel A

Flood Zone

X

Owner Information

Arabella Enterprises LLC

Applicant Information

R M Saunders General Contractor

Zoning

BC-1

Block

Constuction Type

Remodeling

Address

P O Box 1922
 Kill Devil Hills NC 27948

Address

P O Box 1922
 Kill Devil Hills, NC 27948

Subdivision

SUBDIVISION - NONE

PIN

987508871772

Building Code

BLDG2018

Phone

Phone

252-441-2544

Construction Cost:	5000.00
Unheated Sq. Feet	0.00
Total Sq. Feet:	0.00

Contractor(s)	Phone	Contractor Type	License Number
R. M. Saunders General Contractor, Inc.	(252)441-2544	General	32380
TBD	000-000-0000	Electrical	00000

Building Comments:

Description of Work: Construct walls for salt therapy rooms with electric

Permit Cost - \$285.00

Planning Conditions:

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

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

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

Owner / Applicant / Contractor / Agent _____ **Date** _____

Building Official _____ **Date** _____



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

PERMIT

Permit NO. **19252**
 Permit Type: Residential
 Work Classification: [Permit Type]
 Permit Status: Pending

Issue Date: 6/19/2019

Expires: 12/16/2019
 Main Permit: Main Permit

Project Address

4007 Parker Street

Lot

10

Flood Zone

X

Owner Information

Joseph A & Judith L McGee

Applicant Information

Cynergy Home Solutions, LLC

Zoning

BR-1

Block

F

Constuction Type

Repair/Replace

Address

4007 Parker Street
 Kitty Hawk NC 27949

Address

P O Box 153
 Powells Point, NC 27966

Subdivision

TED WOOD KITTY HAWK TERR
 ADD

PIN

987619503385

Building Code

BLDG2018

Phone

Phone

252-982-6807

Construction Cost: 22500.00

Unheated Sq. Feet: 0.00

Total Sq. Feet: 0.00

Contractor(s)	Phone	Contractor Type	License Number
Cynergy Solutions, LLC	252-982-6807	General	000000

Description of Work: Remove & Replacing Siding; Repair rotten sections; Remove and replace west side entry stairs and landing - No change in footprint

Building Comments:

Permit Cost - \$170.00

Planning Conditions:

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

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

Owner / Applicant / Contractor / Agent **Date**

Building Official **Date**



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

PERMIT

Permit NO. **19253**
 Permit Type: Residential
 Work Classification: [Permit Type]
 Permit Status: Pending

Issue Date: 6/19/2019

Expires: 12/16/2019

Main Permit: Main Permit

Project Address

4534 Hilltop Lane

Lot

23

Flood Zone

X

Owner Information

Anthony R Joseph & Mary E Lashley

Applicant Information

B & B Contractors

Zoning

BR-1

Block

7

Constuction Type

Addition

Address

4534 Hilltop Lane
 Kitty Hawk NC 27949

Address

P O Box 2998
 Kitty Hawk, NC 27949

Subdivision

KITTY HAWK WOODS-LINKSIDE
 WDS

PIN

987613243862

Building Code

BLDG2018

Phone

Phone

252-489-9551

Construction Cost: 105000.00

Unheated Sq. Feet 1056.00

Total Sq. Feet: 896.00

Contractor(s)	Phone	Contractor Type	License Number
B & B Contractors	(252)489-9551	General	60944
Air-O-Smith, Inc.	(252)261-5238	Mechanical	30070
Godfrey Electrical Service Inc.	252-202-1450		08204-L
Michael W. Askew Plumbing	(252)982-6230	Plumbing	09407

Description of Work: Add 10 x 16 deck to right side of garage ; Reissue expired permit for 2 story attached garage with 2 bedrooms and bath

Building Comments:

Permit Cost - \$360.00

Planning Conditions:

Flood Zone-Shaded X; Map#-3720987600J; Effective-09/20/2006; An As-Built Survey required prior to Final Inspection.

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

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

Owner / Applicant / Contractor / Agent **Date**

Building Official **Date**



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

PERMIT

Permit NO. **19259**
 Permit Type: Residential
 Work Classification: [Permit Type]
 Permit Status: Pending

Issue Date: 6/24/2019

Expires: 12/21/2019
 Main Permit: Main Permit

Project Address

4310 N Virginia Dare Trail
 Lot

Zoning

BC-1

Block

Subdivision

KITTY HAWK BEACH REV SEC A
 PIN

987615541098

Flood Zone

VE

Constuction Type

New Single-Family Home

Building Code

BLDG2018

Owner Information

J WILSON JR JONES

Address

701 E MAIN ST
 ELIZABETH CITY NC 27909

Phone

Applicant Information

Griggs & Company, Inc.

Address

148 Lucinda Lane
 Powells Point, NC 27966

Phone

252-491-8450

Construction Cost: 450200.00
Unheated Sq. Feet 1264.00
Total Sq. Feet: 2998.00

Contractor(s)	Phone	Contractor Type	License Number
Griggs & Co. Homes, Inc.	(252)491-8450	General	48170
TBD	000-000-0000	Mechanical	00000
TBD	000-000-0000	Plumbing	00000
TBD	000-000-0000	Fuel Piping	00000
TBD	000-000-0000	Electrical	00000

Description of Work: New SFR 6 bedrooms 4.5 baths - 2998 heated sq ft; 1264 sq ft of decks with in-ground pool

Building Comments:

Permit Cost - \$3550.00 The following items are required: Duct Test required before rough-in inspection; Termite Affidavit required before rough-in inspection; Energy Certificate required before pre-final inspection; Address posted (minimum 4" numbers) required before pre-final inspection; Completed Septic Permit required before final inspection

Planning Conditions:

Flood Zone-VE; Elevation-12'+1'=13'; Map#-3720987600J; Effective-09/20/2006; The following items are required: Under Construction Elevation Certificate required before rough-in inspection; Height Certificate required before rough-in inspection; Finished Elevation Certificate required before pre-final inspection; As-Built Survey required before final inspection; SEE ZONING/FLOODPLAIN PERMIT FOR ADDITIONAL REQUIREMENTS

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

Owner / Applicant / Contractor / Agent _____ **Date** _____



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

PERMIT

Permit NO. **19261**
 Permit Type: Residential
 Work Classification: [Permit Type]
 Permit Status: Pending

Issue Date: 6/24/2019

Expires: 12/21/2019
 Main Permit: Main Permit

Project Address

4820 Palmer Drive

Lot

504

Flood Zone

X

Owner Information

Charles M Erwin

Applicant Information

Charles Erwin

Zoning

BR-1

Block

Constuction Type

Remodeling

Address

4820 Palmer Drive
 Kitty Hawk NC 27949

Address

4820 Palmer Drive
 Kitty Hawk, NC 27949

Subdivision

SEA SCAPE SEC 1

PIN

987605171893

Building Code

BLDG2018

Phone

Phone

252-599-6487

Construction Cost:	2000.00
Unheated Sq. Feet	0.00
Total Sq. Feet:	340.00

Contractor(s)	Phone	Contractor Type	License Number
Owner	000-000-0000	General	00000
Owner	000-000-0000	Electrical	00000
Owner	000-000-0000	Mechanical	00000
Owner	000-000-0000	Plumbing	00000

Building Comments:

Permit Cost - \$313.00

Planning Conditions:

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

Description of Work: Convert a portion of existing garage space into a bedroom and bath

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

Owner / Applicant / Contractor / Agent **Date**

Building Official **Date**



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

PERMIT

Permit NO. **19265**
 Permit Type: Residential
 Work Classification: [Permit Type]
 Permit Status: Open

Issue Date: 6/26/2019

Expires: 12/23/2019
 Main Permit: Main Permit

Project Address

3804 Elijah Baum Road

Lot

W13

Flood Zone

AE

Owner Information

James M & Marjorie L Cromwell

Applicant Information

James M Cromwell

Zoning

VR-1

Block

Constuction Type

Raised Structure

Address

808 Costa Grand Drive
 Virginia Beach VA 23456

Address

808 Costa Grand Drive
 Virginia Beach, VA 23456

Subdivision

NORA BAUM E W BAUM ETAL
 REV

PIN

987510463407

Building Code

BLDG2018

Phone

Phone

757-509-2525

Construction Cost:	80000.00
Unheated Sq. Feet	0.00
Total Sq. Feet:	0.00

Contractor(s)	Phone	Contractor Type	License Number
Owner	000-000-0000	General	00000
TBD	000-000-0000	Electrical	00000
TBD	000-000-0000	Mechanical	00000
TBD	000-000-0000	Plumbing	00000

Building Comments:

Description of Work: Raise existing house 3'

Permit Cost - \$725.00 The following items are required: Termite Affidavit required after treatment.

Planning Conditions:

Flood Zone-AE; Elevation-8.3'+1'=9.3'; Map#-3720987500J; Effective-09/20/2006; The following items are required: Finished Elevation Certificate prior to Pre-Final Inspection. Proposal to raise existing structure 3' does not meet current RFPE of 9.3'; however, the job is not a Substantial Improvement, so it is not required to be brought to today's flood standards. Structural Value-\$267,200; Current Project Cost-\$80,000; \$53,600 remaining before coming an Substantial Improvement.

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

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

Owner / Applicant / Contractor / Agent **Date**

Building Official **Date**



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

PERMIT

Permit NO. **19266**
 Permit Type: Residential
 Work Classification: [Permit Type]
 Permit Status: Pending

Issue Date: 6/27/2019

Expires: 12/24/2019
 Main Permit: Main Permit

Project Address

3802 N Virginia Dare Trail

Lot

1

Flood Zone

VE

Owner Information

SUN & SURF BEACH HOUSE LLC

Applicant Information

Precise Electrical Services

Zoning

BR-1

Block

Constuction Type

Repair/Replace

Address

405 JULE DR
 CHESAPEAKE VA 23322

Address

P O Box 1227
 Kill Devil Hills, NC 27948

Subdivision

N E HURDLE ESTATE

PIN

987508884474

Building Code

ELEC2017

Phone

757-469-4567

Phone

252-796-7900

Construction Cost:	1200.00
Unheated Sq. Feet	0.00
Total Sq. Feet:	0.00

Contractor(s)	Phone	Contractor Type	License Number
Precise Electrical Services	(252)796-7900	Electrical	26395-L

Description of Work: Replace meter base with less than 6' of exposed service cable and install ground rod

Building Comments:

Permit Cost - \$75.00

Planning Conditions:

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

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

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

Owner / Applicant / Contractor / Agent **Date**

Building Official **Date**



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

PERMIT

Permit NO. **19245**
 Permit Type: Residential
 Work Classification: [Permit Type]
 Permit Status: Open

Issue Date: 6/14/2019

Expires: 12/11/2019
 Main Permit: Main Permit

Project Address

203 Fonck Street

Lot

18

Flood Zone

AE

Owner Information

Katherine B & Leslie Susam Brittingham

Applicant Information

Kreiser Electric

Zoning

BR-1

Block

22

Constuction Type

Repair/Replace

Address

984 Edwin Drive
 Virginia Beach NC 23464

Address

3847 Ivy Lane
 Kitty Hawk, NC 27949

Subdivision

KITTY HAWK BEACH REV SEC A

PIN

987605290722

Building Code

ELEC2017

Phone

Phone

252-564-2367

Construction Cost:	1000.00
Unheated Sq. Feet	0.00
Total Sq. Feet:	0.00

Contractor(s)	Phone	Contractor Type	License Number
Kreiser Electric, Inc.	717-619-0021	Electrical	31684

Building Comments:

Permit cost - \$75.00

Planning Conditions:

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

**Description of Work: Replace
 200 amp meter base and service
 cable**

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

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

Owner / Applicant / Contractor / Agent **Date**

Building Official **Date**



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

PERMIT

Permit NO. **19230**
 Permit Type: Residential
 Work Classification: [Permit Type]
 Permit Status: Pending

Issue Date: 6/5/2019

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

Project Address

4433 Ridge Road

Lot

6A

Flood Zone

AE

Owner Information

Noah & Corissa Snyder

Applicant Information

LoWire Technologies

Zoning

VR-1

Block

Constuction Type

Electrical

Address

4433 Ridge Road
 Kitty Hawk NC 27949

Address

P O Box 2751
 Kill Devil Hills, NC 27948

Subdivision

JOHN L BEACHAM DIV OF LOT
 F&G

PIN

986618418644

Building Code

ELEC2017

Phone

2252-261-8710

Phone

252-449-4690

Construction Cost:	1000.00
Unheated Sq. Feet	0.00
Total Sq. Feet:	0.00

Contractor(s)	Phone	Contractor Type	License Number
LoWire Technologies	(252)449-4690	Electrical	19403-U

Building Comments:

Permit Cost - \$65.00

Planning Conditions:

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

Description of Work: Wire storage building

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

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

Owner / Applicant / Contractor / Agent **Date**

Building Official **Date**



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

PERMIT

Permit NO. **19231**
 Permit Type: Commercial
 Work Classification: [Permit Type]
 Permit Status: Pending

Issue Date: 6/5/2019

Expires: 12/2/2019

Main Permit: Main Permit

Project Address

4717 N Croatan Highway

Lot

45

Flood Zone

X

Owner Information

Jefferson K Emanuelson

Applicant Information

LoWire Technologies

Zoning

BC-1

Block

35

Constuction Type

Electrical

Address

4717 N Croatan Highway

Kitty Hawk NC 27949

Address

P O Box 2751

Kill Devil Hills, NC 27948

Subdivision

KITTY HAWK BEACH REV SEC A

PIN

987610370044

Building Code

ELEC2017

Phone

Phone

252-449-4690

Construction Cost:	2200.00
Unheated Sq. Feet	0.00
Total Sq. Feet:	0.00

Contractor(s)	Phone	Contractor Type	License Number
LoWire Technologies	(252)449-4690	Electrical	19403-U

Building Comments:

Permit Cost - \$75.00

Planning Conditions:

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

Description of Work: Change out utility meter base and main electric panel with breakers

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

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

Owner / Applicant / Contractor / Agent **Date**

Building Official **Date**



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

PERMIT

Permit NO. **19236**
 Permit Type: Commercial
 Work Classification: [Permit Type]
 Permit Status: Open

Issue Date: 6/7/2019

Expires: 12/4/2019
 Main Permit: Main Permit

Project Address

934 W Kitty Hawk Road
 Lot

Zoning

VC-1

Block

Subdivision

SUBDIVISION - NONE

PIN

987617002214

Flood Zone

AE

Constuction Type

Electrical

Building Code

ELEC2017

Owner Information

R & M Properties of North Carolina LLC

Address

P O Box 784
 Kitty Hawk NC 27949

Phone

Applicant Information

LoWire

Address

P O box 2751
 Kill Devil Hills, NC 27948

Phone

252-480-1998

Construction Cost:	1500.00
Unheated Sq. Feet	0.00
Total Sq. Feet:	0.00

Contractor(s)	Phone	Contractor Type	License Number
LoWire Technologies	(252)449-4690	Electrical	19403-U

Building Comments:

Permit Cost \$80.00

**Description of Work: Replace
 200 amp service disconnect**

Planning Conditions:

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

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

Owner / Applicant / Contractor / Agent _____ **Date** _____

Building Official _____ **Date** _____



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

PERMIT

Permit NO. **19232**
 Permit Type: Residential
 Work Classification: [Permit Type]
 Permit Status: Pending

Issue Date: 6/5/2019

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

Project Address

5218 Sycamore Lane
 Lot

Zoning

BR-1
 Block

Subdivision

SEA SCAPE SEC 3
 PIN
 986607794837

Flood Zone

AE

Constuction Type

Repair/Replace

Building Code

MECH2018

Owner Information

GUSTAV E II STEESE

Address

P O BOX 8009 DUCK STATION
 KITTY HAWK NC 27949

Phone

Applicant Information

North Carolina Air

Address

P O Box 2209
 Kitty Hawk, NC 27949

Phone

252-261-3013

Construction Cost:	4850.00
Unheated Sq. Feet	0.00
Total Sq. Feet:	0.00

Contractor(s)	Phone	Contractor Type	License Number
North Carolina Air Conditioning, Inc.	(252)261-3013	Mechanical	19037
North Carolina Air Conditioning Inc (EL)	(252)261-3013	Electrical	23856-L

Building Comments:

Permit Cost - \$50.00

Planning Conditions:

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

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

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

Owner / Applicant / Contractor / Agent _____ **Date** _____

Building Official _____ **Date** _____



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

PERMIT

Permit NO. **19233**
 Permit Type: Residential
 Work Classification: [Permit Type]
 Permit Status: Pending

Issue Date: 6/6/2019

Expires: 12/3/2019
 Main Permit: Main Permit

Project Address

3940 Tarkle Ridge Drive
 Lot
 61

Flood Zone

AE

Owner Information

TERRY L CASKEY

Applicant Information

Comfort First Heating & Cooling

Zoning

VR-1

Block

Constuction Type

Repair/Replace

Address

111 COURIER CT NE
 LEESBURG VA 20175

Address

148 Irie Lane
 Powells Point

Subdivision

KITTY HAWK LANDING SEC 5
PIN

986515548914

Building Code

MECH2018

Phone

805-804-2610

Phone

919-569-5161

Construction Cost:	2132.00
Unheated Sq. Feet	0.00
Total Sq. Feet:	0.00

Contractor(s)	Phone	Contractor Type	License Number
Comfort First Heating & Cooling Inc.	252-772-9991	Mechanical	33486
Comfort First Heating & Cooling, Inc. (EL)	(919)777-1777	Electrical	21474-U

Building Comments:

Permit Cost - \$50.00

Planning Conditions:

Flood Zone-AE; Elevation-8.3'+1'=9.3'; Map#-3720986500J; Effective-09/20/2006

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

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

Owner / Applicant / Contractor / Agent _____ **Date** _____

Building Official _____ **Date** _____



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

PERMIT

Permit NO. **19234**
 Permit Type: Residential
 Work Classification: [Permit Type]
 Permit Status: Open

Issue Date: 6/6/2019

Expires: 12/3/2019
 Main Permit: Main Permit

Project Address

3942 Smith Drive

Lot

Zoning

BR-1

Block

Subdivision

TED WOOD KITTY HAWK TERR
 ADD

PIN

987619507105

Flood Zone

X

Constuction Type

Repair/Replace

Building Code

MECH2018

Owner Information

THOMAS E HARLOW

Address

7742 ISLAND CREEK CT
 ALEXANDRIA VA 22315

Phone

Applicant Information

David Armstrong

Address

20 Albemarle Shores
 Columbia NC 27925

Phone

252-797-4177

<u>Contractor(s)</u>	<u>Phone</u>	<u>Contractor Type</u>	<u>License Number</u>	Construction Cost:	<u>7800.00</u>
David Armstrong, Jr. Services, LLC	252-796-4290	Mechanical	21460	Unheated Sq. Feet	<u>0.00</u>
Ace Mechanical OBX LLC (EL)	252-473-5465	Electrical	14118-U	Total Sq. Feet:	<u>0.00</u>

Description of Work: HVAC change out of a 2 (2 ton) systems

Building Comments:

Planning Conditions:

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

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

Owner / Applicant / Contractor / Agent _____ **Date** _____

Building Official _____ **Date** _____



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

PERMIT

Permit NO. **19235**
 Permit Type: Commercial
 Work Classification: [Permit Type]
 Permit Status: Open

Issue Date: 6/6/2019

Expires: 12/3/2019
 Main Permit: Main Permit

Project Address

3854 N Croatan Highway

Lot

5 , 6 & pt of 4

Flood Zone

X

Owner Information

Gray's Family Department Store, Inc.

Applicant Information

R A Hoy Heating & Air

Zoning

BC-1

Block

Constuction Type

Repair/Replace

Address

P O Box 1097
 Kitty Hawk NC 27949

Address

3908 N Croatan Highway
 Kitty Hawk, NC 27949

Subdivision

KEEPERS HILL

PIN

987507780929

Building Code

MECH2018

Phone

Phone

252-261-2008

Construction Cost:	7464.00
Unheated Sq. Feet	0.00
Total Sq. Feet:	0.00

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

Building Comments:

Permit Cost - \$50.00

Planning Conditions:

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

Description of Work: HVAC change out of a 5 ton system for front of store

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

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

Owner / Applicant / Contractor / Agent _____ **Date** _____

Building Official _____ **Date** _____



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

PERMIT

Permit NO. **19227**
 Permit Type: Residential
 Work Classification: [Permit Type]
 Permit Status: Pending

Issue Date: 6/4/2019

Expires: 12/1/2019
 Main Permit: Main Permit

Project Address

1104 Swordfish Way

Lot

Bldg 1100 Unit 1104

Flood Zone

X

Owner Information

Richard & Patricia Waters

Applicant Information

All-In-One Mechanical

Zoning

BR-2

Block

Constuction Type

Repair/Replace

Address

5016 Castle Point Court
 Glen Allen VA 23060

Address

P O Box 3392
 Kitty Hawk, NC 27949

Subdivision

SANDPIPER CAY CONDOS
 PHASE 10

PIN

98761841831804

Building Code

MECH2018

Phone

Phone

252-202-5350

Construction Cost:	5800.00
Unheated Sq. Feet	0.00
Total Sq. Feet:	0.00

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

Building Comments:

Permit Cost - \$50.00

Planning Conditions:

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

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

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

Owner / Applicant / Contractor / Agent _____ **Date** _____

Building Official _____ **Date** _____



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

PERMIT

Permit NO. **19223**
 Permit Type: Residential
 Work Classification: [Permit Type]
 Permit Status: Pending

Issue Date: 6/3/2019

Expires: 11/30/2019
 Main Permit: Main Permit

Project Address

4901 Lindbergh Avenue

Lot

32

Flood Zone

AE

Owner Information

James E & Doris S Crocker

Applicant Information

OBHC dba One Hour Heating & Air

Zoning

BR-1

Block

23

Constuction Type

Repair/Replace

Address

10225 Central Hill Road
 Windsor VA 23487

Address

P O Box 2600
 Kill Devil Hills, NC 27948

Subdivision

KITTY HAWK BEACH REV SEC A
PIN

987606287345

Building Code

MECH2019

Phone

Phone

252-441-1940

Construction Cost:	6704.00
Unheated Sq. Feet	0.00
Total Sq. Feet:	0.00

Contractor(s)	Phone	Contractor Type	License Number
OBHC, Inc. DBA One Hour Heating & Air Conditioning	(252)441-1740	Mechanical	12643
Fischer Building Company	(252)480-1288	Electrical	15973-U

Building Comments:

Permit Cost - \$50.00

Planning Conditions:

Flood Zone-AE; Elevation - 9'+1'=10'; Map#-3720987600J; Effective-09/20/2006

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

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

Owner / Applicant / Contractor / Agent _____ **Date** _____

Building Official _____ **Date** _____



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

PERMIT

Permit NO. **19224**
 Permit Type: Commercial
 Work Classification: [Permit Type]
 Permit Status: Pending

Issue Date: 6/3/2019

Expires: 11/30/2019
 Main Permit: Main Permit

Project Address

4607 N Croatan Highway

Lot

40R

Flood Zone

X

Owner Information

Lamb Family CRE LLC

Applicant Information

Atlantic Heating & Cooling

Zoning

BC-1

Block

36

Constuction Type

Repair/Replace

Address

P O Box 1030
 Kitty Hawk NC 27949

Address

P O Box 132
 Kill Devil Hills, NC 27948

Subdivision

KITTY HAWK BEACH REV SEC A

PIN

987610365074

Building Code

MECH2018

Phone

Phone

252-441-7642

Construction Cost:	2500.00
Unheated Sq. Feet	0.00
Total Sq. Feet:	0.00

Contractor(s)	Phone	Contractor Type	License Number
Atlantic Heating & Cooling Ltd	(252)441-7642	Mechanical	11618
Winston Peoples King	252-473-7745	Electrical	07274-L

Building Comments:

Description of Work: HVAC change out of a ductless mini-split for computer server room

Permit Cost - \$50.00

Planning Conditions:

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

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

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

Owner / Applicant / Contractor / Agent _____ **Date** _____

Building Official _____ **Date** _____



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

PERMIT

Permit NO. **19246**
 Permit Type: Commercial
 Work Classification: [Permit Type]
 Permit Status: Pending

Issue Date: 6/17/2019

Expires: 12/14/2019
 Main Permit: Main Permit

Project Address

4826 N Croatan Highway

Lot

214

Flood Zone

X

Owner Information

Beach Realty of NC, Inc.

Applicant Information

Delta T Heating & Air

Zoning

BC-1

Block

Constuction Type

Repair/Replace

Address

4826 N Croatan Highway

Kitty Hawk NC 27949

Address

162 Yaupon Trail

Southern Shores, NC 27949

Subdivision

KITTY HAWK BEACH SEC C

PIN

9876052772828

Building Code

MECH2018

Phone

Phone

252-261-0404

Construction Cost: 5800.00

Unheated Sq. Feet 0.00

Total Sq. Feet: 0.00

Contractor(s)	Phone	Contractor Type	License Number
Delta T Heating & Air Conditioning, Inc.	252-256-2436	Mechanical	23299
TBD	000-000-0000	Electrical	00000

Building Comments:

Permit Cost - \$50.00

Planning Conditions:

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

Description of Work: HVAC change out of a 4 ton system

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

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

Owner / Applicant / Contractor / Agent _____ **Date** _____

Building Official _____ **Date** _____



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

PERMIT

Permit NO. **19243**
 Permit Type: Residential
 Work Classification: [Permit Type]
 Permit Status: Open

Issue Date: 6/13/2019

Expires: 12/10/2019
 Main Permit: Main Permit

Project Address

4224 Poor Ridge Road
 Lot

Zoning

VR-1

Block

Subdivision

SUBDIVISION - NONE

PIN

986508993559

Flood Zone

AE

Constuction Type

Repair/Replace

Building Code

MECH2018

Owner Information

BONNIE S SCARBOROUGH

Address

PO BOX 313
 CANNELTON WV 25036

Phone

Applicant Information

Norris Mechanical LLC

Address

100 Freedom Avenue
 Powells Point, NC 27966

Phone

252-491-2673

Construction Cost:	7450.00
Unheated Sq. Feet	0.00
Total Sq. Feet:	0.00

Contractor(s)	Phone	Contractor Type	License Number
Norris Mechanical	(252)491-2673	Mechanical	11100
TBD	000-000-0000	Electrical	00000

Building Comments:

Permit Cost - \$50.00

**Description of Work: HVAC
 change out of a 3 ton system**

Planning Conditions:

Flood Zone-AE; Elevation-8.3'+1'=9.3'; Map#-3720986500J; Effective-09/20/2006

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

Owner / Applicant / Contractor / Agent **Date**

Building Official **Date**



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

PERMIT

Permit NO. **19244**
 Permit Type: Commercial
 Work Classification: [Permit Type]
 Permit Status: Pending

Issue Date: 6/13/2019

Expires: 12/10/2019
 Main Permit: Main Permit

Project Address

301 W Kitty Hawk Road
 Lot

Zoning

BR-1

Block

Subdivision

SUBDIVISION - NONE

PIN

987507589714

Flood Zone

X

Constuction Type

Repair/Replace

Building Code

MECH2018

Owner Information

Roman Catholic Diocese C/O Luis Rafael
 Zarama Bishop

Address

715 Nazareth Street

Phone

252-261-4700

Raleigh NC 27606

Applicant Information

Norris Mechanical

Address

100 Freedom Avenue

Phone

252-491-2673

Powells Point, NC 27966

Construction Cost: 18000.00

Unheated Sq. Feet 0.00

Total Sq. Feet: 0.00

Contractor(s)	Phone	Contractor Type	License Number
Norris Mechanical	(252)491-2673	Mechanical	11100
TBD	000-000-0000	Electrical	00000

Building Comments:

**Description of Work: HVAC
 change out of a 10 ton system**

Permit Cost - \$50.00

Planning Conditions:

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

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

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

Owner / Applicant / Contractor / Agent _____ **Date** _____

Building Official _____ **Date** _____



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

PERMIT

Permit NO. **19239**
 Permit Type: Residential
 Work Classification: [Permit Type]
 Permit Status: Pending

Issue Date: 6/11/2019

Expires: 12/8/2019

Main Permit: Main Permit

Project Address

4608 Seascape Drive

Lot

343

Flood Zone

X

Owner Information

Alan K Stegner & Charlotte A Pedigo

Applicant Information

All-In-One Mechancial

Zoning

BR-1

Block

Constuction Type

Repair/Replace

Address

101 Waters Edge Drive
 Chocowinity NC 27817

Address

P O Box 3392
 Kitty hawk, NC 27949

Subdivision

SEA SCAPE SEC 1

PIN

987610257610

Building Code

MECH2018

Phone

443-481-8269

Phone

252-202-5350

Construction Cost:	6200.00
Unheated Sq. Feet	0.00
Total Sq. Feet:	0.00

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

Building Comments:

Permit Cost - \$50.00

Planning Conditions:

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

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

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

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

Owner / Applicant / Contractor / Agent _____ **Date** _____

Building Official _____ **Date** _____



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

PERMIT

Permit NO. **19240**
 Permit Type: Residential
 Work Classification: [Permit Type]
 Permit Status: Pending

Issue Date: 6/11/2019

Expires: 12/8/2019
 Main Permit: Main Permit

Project Address

4307 Seascape Drive

Lot

436 PT 437

Flood Zone

X

Owner Information

TED LUCAS GORDON

Applicant Information

North Beach Services

Zoning

BR-1

Block

Constuction Type

Repair/Replace

Address

7606 HORNEBECK FARM RD
 LOUISVILLE KY 40291

Address

P O Box 181
 Kitty Hawk, NC 27949

Subdivision

SEA SCAPE SEC 1

PIN

987614430561

Building Code

MECH2018

Phone

502-554-8790

Phone

252-491-2878

Construction Cost:	2980.00
Unheated Sq. Feet	0.00
Total Sq. Feet:	0.00

Contractor(s)	Phone	Contractor Type	License Number
North Beach Services	(252)491-2878	Mechanical	22053
North Beach Services (Elect)	(252)491-2878	Electrical	24744-SP-PH

Building Comments:

Description of Work: HVAC change out of the air handler only

Permit Cost - \$50.00

Planning Conditions:

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

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

Owner / Applicant / Contractor / Agent _____ **Date** _____

Building Official _____ **Date** _____



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

PERMIT

Permit NO. **19241**
 Permit Type: Residential
 Work Classification: [Permit Type]
 Permit Status: Pending

Issue Date: 6/11/2019

Expires: 12/8/2019
 Main Permit: Main Permit

Project Address

3636 Poseidon Street
 Lot

Zoning

BR-1
 Block

Subdivision

KITTY DUNES EAST
 PIN
 987512960961

Flood Zone

AE

Constuction Type

Repair/Replace

Building Code

MECH2018

Owner Information

JAY S REILLY

Address

11988 FARRABOW LN
 WOODBRIDGE VA 22192

Phone

Applicant Information

American Refrigeration

Address

P O Box 835
 Nags Head, NC 27959

Phone

252-715-3335

Construction Cost:	10500.00
Unheated Sq. Feet	0.00
Total Sq. Feet:	0.00

Contractor(s)	Phone	Contractor Type	License Number
American Refrigeration & Heat Pump Repair L.L.C.	(252)305-4423	Mechanical	29031
Hask Electric, LLC	252-267-4767	Electrical	14104

Building Comments:

Description of Work: HVAC change out of a 4 ton system and a 2 ton heat pump only

Permit Cost - \$100.00

Planning Conditions:

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

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

Owner / Applicant / Contractor / Agent _____ **Date** _____

Building Official _____ **Date** _____



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

PERMIT

Permit NO. **19268**
 Permit Type: Residential
 Work Classification: [Permit Type]
 Permit Status: Pending

Issue Date: 6/27/2019

Expires: 12/24/2019
 Main Permit: Main Permit

Project Address

4212 Lindbergh Avenue

Lot

42

Flood Zone

AE

Owner Information

Robert R & Annie F Baker

Applicant Information

Beach Air Heating & Cooling

Zoning

BR-1

Block

40

Constuction Type

Repair/Replace

Address

6854 Fordwick Drive
 Norfolk VA 23518

Address

P O Box 1047
 Manteo, NC 27954

Subdivision

KITTY HAWK BEACH REV SEC A
PIN

98761552477

Building Code

MECH2018

Phone

Phone

252-473-1995

Construction Cost:	9119.00
Unheated Sq. Feet	0.00
Total Sq. Feet:	0.00

Contractor(s)	Phone	Contractor Type	License Number
Beach Air of The Outer Banks, LLC	252-473-1995	Mechanical	29768
TBD	000-000-0000	Electrical	00000

Building Comments:

Permit Cost - \$50.00

Planning Conditions:

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

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

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

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

Owner / Applicant / Contractor / Agent _____ **Date** _____

Building Official _____ **Date** _____



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

PERMIT

Permit NO. **19269**
 Permit Type: Residential
 Work Classification: [Permit Type]
 Permit Status: Pending

Issue Date: 6/28/2019

Expires: 12/25/2019
 Main Permit: Main Permit

Project Address

4520 Lindbergh Avenue

Lot

35

Flood Zone

X

Owner Information

Maria Louis Hicks Melvin & Robert Garland Hicks, Jr.

Zoning

BR-1

Block

37

Constuction Type

Repair/Replace

Address

5565 Whirlaway Road

Virginia Beach VA 23462

Address

3908 N Croatan Highway

Kitty Hawk, NC 27949

Subdivision

KITTY HAWK BEACH REV SEC A

PIN

987610359648

Building Code

MECH2018

Phone

Applicant Information

R A Hoy Heating & Air

Phone

252-261-2008

<u>Contractor(s)</u>	<u>Phone</u>	<u>Contractor Type</u>	<u>License Number</u>	<u>Construction Cost:</u>	<u>7225.00</u>
R. A. Hoy Heating & Air Conditioning, Inc.	(252)261-2008	Mechanical	13056	<u>Unheated Sq. Feet</u>	<u>0.00</u>
R A Hoy Heating & Air Conditioning, Inc.	(252)261-2008	Electrical	22222-L	<u>Total Sq. Feet:</u>	<u>0.00</u>

Building Comments:

Permit Cost - \$50.00

Planning Conditions:

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

Description of Work: HVAC change out of a 2.5 ton system for main level

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

Owner / Applicant / Contractor / Agent _____ **Date** _____

Building Official _____ **Date** _____



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

PERMIT

Permit NO. **19270**
 Permit Type: Residential
 Work Classification: [Permit Type]
 Permit Status: Pending

Issue Date: 6/28/2019

Expires: 12/25/2019
 Main Permit: Main Permit

Project Address

4200 Lindbergh Avenue

Lot

6

Flood Zone

AE

Owner Information

Martin K & Cathy S Deafenbaugh & Jaime D
 Dunn

Zoning

BR-1

Block

D

Constuction Type

Repair/Replace

Address

22 Colege Avenue

Annapolis MD 21401

Address

3908 N Croatan Highway

Kitty Hawk, NC 27949

Subdivision

SANDERLIN SHORES

PIN

987615526587

Building Code

MECH2018

Phone

443-822-5105

Applicant Information

R A Hoy Heating & Air

Phone

252-261-2008

<u>Contractor(s)</u>	<u>Phone</u>	<u>Contractor Type</u>	<u>License Number</u>	<u>Construction Cost:</u>	<u>6678.00</u>
R. A. Hoy Heating & Air Conditioning, Inc.	(252)261-2008	Mechanical	13056	<u>Unheated Sq. Feet</u>	<u>0.00</u>
R A Hoy Heating & Air Conditioning, Inc.	(252)261-2008	Electrical	22222-L	<u>Total Sq. Feet:</u>	<u>0.00</u>

Building Comments:

Permit Cost - \$50.00

Planning Conditions:

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

Description of Work: HVAC change out of a 1.5 ton system for top level

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

Owner / Applicant / Contractor / Agent **Date**

Building Official **Date**



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

PERMIT

Permit NO. **19254**
 Permit Type: Residential
 Work Classification: [Permit Type]
 Permit Status: Open

Issue Date: 6/20/2019

Expires: 12/17/2019
 Main Permit: Main Permit

Project Address

4120 N Virginia Dare Trail

Lot

WAS 27 & 28

Flood Zone

VE

Owner Information

THERESE M CARGILL

Applicant Information

Delta T Heating & Air

Zoning

BR-1

Block

Constuction Type

Repair/Replace

Address

4120 N VIRGINIA DARE TRL
 KITTY HAWK NC 27949

Address

162 Yaupon Trail
 Southern Shores, NC 27949

Subdivision

KITTY HAWK BEACH TERR

PIN

987619623059

Building Code

MECH2018

Phone

Phone

252-261-0404

Construction Cost:	500.00
Unheated Sq. Feet	0.00
Total Sq. Feet:	0.00

Contractor(s)	Phone	Contractor Type	License Number
Delta T Heating & Air Conditioning, Inc.	252-256-2436	Mechanical	23299
TBD	000-000-0000	Electrical	00000

Building Comments:

Description of Work: HVAC change out of lower level 2.5 heat pump system

Permit Cost \$50.00

Planning Conditions:

Flood Zone-VE; Elevation-12'+1'=13'; Map#-37502987600J; Effective-09/20/2006

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

Owner / Applicant / Contractor / Agent _____ **Date** _____

Building Official _____ **Date** _____



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

PERMIT

Permit NO. **19258**
 Permit Type: Residential
 Work Classification: [Permit Type]
 Permit Status: Open

Issue Date: 6/21/2019

Expires: 12/18/2019
 Main Permit: Main Permit

Project Address

402 First Flight Run

Lot

16

Flood Zone

X

Owner Information

Jonathan & Anne Ellis & Michael Stone
 Garrison

Zoning

BR-1

Block

3

Constuction Type

Repair/Replace

Address

12907 Scrimshaw Circle

Chester VA 23836

Address

3908 N Croatan Highway

Kitty Hawk, NC 27949

Subdivision

FIRST FLIGHT RIDGE

PIN

987511667759

Building Code

MECH2018

Phone

Phone

252-261-2008

Applicant Information

R A Hoy Heating & Air

Construction Cost: 5296.00

Unheated Sq. Feet 0.00

Total Sq. Feet: 0.00

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

Building Comments:

Description of Work: HVAC change out of a 2 ton mid level system

Permit Cost - \$50.00

Planning Conditions:

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

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

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

Owner / Applicant / Contractor / Agent _____ **Date** _____

Building Official _____ **Date** _____



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

PERMIT

Permit NO. **19248**
 Permit Type: Residential
 Work Classification: [Permit Type]
 Permit Status: Open

Issue Date: 6/18/2019

Expires: 12/15/2019
 Main Permit: Main Permit

Project Address

323 Oak Run

Lot

5

Flood Zone

X

Owner Information

Andrew P Sullivan

Applicant Information

R A Hoy Heating & Air

Zoning

BR-1

Block

Constuction Type

Repair/Replace

Address

323 Oak Run
 Kitty Hawk NC 27949

Address

3908 N Croatan Highway
 Kitty Hawk, NC 27949

Subdivision

OAK RUN

PIN

987507586192

Building Code

MECH2018

Phone

Phone

252-261-2008

Construction Cost:	6561.00
Unheated Sq. Feet	0.00
Total Sq. Feet:	0.00

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

Building Comments:

Permit Cost \$50.00

Planning Conditions:

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

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

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

Owner / Applicant / Contractor / Agent _____ **Date** _____

Building Official _____ **Date** _____



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

PERMIT

Permit NO. **19260**
 Permit Type: Commercial
 Work Classification: [Permit Type]
 Permit Status: Open

Issue Date: 6/24/2019

Expires: 12/21/2019
 Main Permit: Main Permit

Project Address

3809 N Croatan Highway, Ste A
 Lot

Zoning

BC-1

Block

Subdivision

SUBDIVISION - NONE

PIN

987508787453

Flood Zone

AE

Constuction Type

Repair/Replace

Building Code

PLUMB2018

Owner Information

Sea Dunes LLC

Address

4900 N Croatan Highway
 Kitty Hawk NC 27949

Phone

252-261-5500

Applicant Information

Soundside Plumbing, Inc.

Address

19 Palmetto Lane
 Southern Shores, NC 27949

Phone

252-202-7833

Construction Cost:	4000.00
Unheated Sq. Feet	0.00
Total Sq. Feet:	0.00

Contractor(s)	Phone	Contractor Type	License Number
Soundside Plumbing, Inc.	(252)202-7833	Plumbing	23465
TBD	000-000-0000	Fuel Piping	00000

Building Comments:

Description of Work: Replace electric hot water heater with tankless gas water heater and run natural gas line

Permit Cost - \$100.00

Planning Conditions:

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

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

Owner / Applicant / Contractor / Agent _____ **Date** _____

Building Official _____ **Date** _____



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

PERMIT

Permit NO. **19251**
 Permit Type: Residential
 Work Classification: [Permit Type]
 Permit Status: Pending

Issue Date: 6/19/2019

Expires: 12/16/2019
 Main Permit: Main Permit

Project Address

4028 Pineway Drive
 Lot

Zoning

VR-1

Block

Subdivision

KITTY HAWK LANDING SEC 3

PIN

986510465217

Building Code

Flood Zone

AE

Constuction Type

Residential Ramp

Owner Information

JAMES A DIXON

Address

4028 PINEWAY DR
 KITTY HAWK NC 27949

Phone

Applicant Information

James A Dixon

Address

4028 Pineway Drive
 Kitty Hawk, NC 27948

Phone

252-261-8910

Construction Cost: 700.00

Unheated Sq. Feet 0.00

Total Sq. Feet: 0.00

Contractor(s)	Phone	Contractor Type	License Number
Owner	000-000-0000	General	00000

Building Comments:

Description of Work: Add residential ramp on north side of existing house

Permit Cost - \$35.00 (Zoning Only)

Planning Conditions:

Flood Zone-AE; Elevation-8.3'+1'=9.3; Map#-3720986500J; Effective-09/20/2006; OWNER'S RESPONSIBILITY NOT TO EXCEED 30% LOT COVERAGE. As-Built Survey required prior to Final Inspection. If coverage can be verified that it does not exceed 30% or that the ramp does not encroach in side yard setback, an as-built survey may be waived.

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

Owner / Applicant / Contractor / Agent **Date**

Building Official **Date**

TOWN OF NAGS HEAD
PO Box 99 Nags Head, NC 27959
Phone (252) 441-7016 Fax (252) 441-4290



Residential Project Approval
Application # 201900454

Property Address: 104 WEST BAY WINDS **PIN #:** 080006378967 **Parcel:** 024961011
Lot/Block/Sec: LOT: 11 BLK: SEC: **Subdivision:** BAYMEADOW PARCEL A
Zoning: VILLAGE DET RES SF 1 **Land Use:** SINGLE FAMILY DWELLING
Flood Zone: AE **Base Flood Elevation:** 9.0 **Regulatory Flood Elevation:** 10
Map Panel No: 0800 **Map Panel Date:** 09/20/2006 **Suffix:** J **Datum Used:** NAVD 1988

Owner Name: MILLER, GLENN T - MILLER, NANCY V
Owner Address: 2203 OLD CHURCH RD POWHATAN, VA 23139

Contractor Name: Keystone Custom Builders, LLC **Contractor Phone:**
Contractor Address: PO Box 3678 St Kill Devil Hills, NC 27948

Description: a 36"X12" window will be installed in the bathroom
Construction Value: \$1400 **Classification of Work:** RESIDENTIAL REMODEL

BUILDING INFORMATION

Permit #	Permit Description	Total Fees Paid/Due	Approved By:	Approved Date:
RE201901328	RES ADD-REM-REP-ACC	\$75.00	SS	06/04/2019

Conditions of Approval:
- Address #s on home if none are present. Call for framing and air sealing inspection. Leave widow information in tact on window.

FLOOD INFORMATION

Permit #	Permit Description	Total Fees Paid/Due	Approved By:	Approved Date:
FL201901327	FLOOD PERMIT	\$0.00	SS	06/04/2019

Conditions of Approval:

Additional Conditions:

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

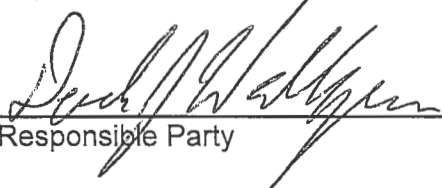
PLEASE NOTE:

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

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

I, the undersigned, understand that the issuance of a floodplain development permit approval is contingent upon the above information being correct and that the plans and supporting data have been or shall be provided as required, including but not limited to a proposed elevation certificate and or V-Zone certificate. Note: all elevation certificates must be signed by a professional engineer or registered land surveyor.

DECISION: Approved with Conditions (See above)

 01/10/19
Responsible Party Date

TOWN OF NAGS HEAD
PO Box 99 Nags Head, NC 27959
Phone (252) 441-7016 Fax (252) 441-4290



Residential Project Approval
Application # 201900458

Property Address: 3907 SOUTH VA DARE TRL PIN #: 989220816532 Parcel: 007723000
Lot/Block/Sec: LOT: BLK: SEC: Subdivision: SUBDIVISION - NONE
Zoning: LOW DENSITY RES DISTRICT Land Use: SINGLE FAMILY DWELLING
Flood Zone: VE Base Flood Elevation: 11.0 Regulatory Flood Elevation: 12
Map Panel No: 9892 Map Panel Date: 09/20/2006 Suffix: J Datum Used: NAVD 1988

Owner Name: MURPHY, W GUY - MURPHY, EDWARD W
Owner Address: 1018 US 17 SOUTH ELIZABETH CITY, NC 27909

Contractor Name: PROPERTY OWNER Contractor Phone:
Contractor Address: See Above 000, 00 00000

Description: Replace front steps in existing footprint
Construction Value: \$2800 Classification of Work: RESIDENTIAL REPAIR

BUILDING INFORMATION

Permit #	Permit Description	Total Fees Paid/Due	Approved By:	Approved Date:
RE201901330	RES ADD-REM-REP-ACC	\$105.00	SS	06/04/2019

Conditions of Approval:
- Address #s on home if none are present. Call for site visit to determine permit conditions. This was a SWO

FLOOD INFORMATION

Permit #	Permit Description	Total Fees Paid/Due	Approved By:	Approved Date:
FL201901329	FLOOD PERMIT	\$0.00	SS	06/04/2019

Conditions of Approval:

Additional Conditions:

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

PLEASE NOTE:

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

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

I, the undersigned, understand that the issuance of a floodplain development permit approval is contingent upon the above information being correct and that the plans and supporting data have been or shall be provided as required, including but not limited to a proposed elevation certificate and or V-Zone certificate. Note: all elevation certificates must be signed by a professional engineer or registered land surveyor.

DECISION: Approved with Conditions (See above)

W. Guy Murphy 6-7-19
Responsible Party Date

TOWN OF NAGS HEAD
PO Box 99 Nags Head, NC 27959
Phone (252) 441-7016 Fax (252) 441-4290



Residential Project Approval
Application # 201900463

Property Address: 2104 SOUTH VA DARE TRL **PIN #:** 989313231309 **Parcel:** 005576000
Lot/Block/Sec: LOT: 3 BLK: 5 SEC: 4 **Subdivision:** NAGS HEAD SHORES AMENDED SEC 4
Zoning: GENERAL COMMERCIAL DISTRICT **Land Use:** SINGLE FAMILY DWELLING
Flood Zone: AE **Base Flood Elevation:** 10.0 **Regulatory Flood Elevation:** 11
Map Panel No: 9893 **Map Panel Date:** 09/20/2006 **Suffix:** J **Datum Used:** NAVD 1988

Owner Name: CUTHRELL, CAMERON JAY - CUTHRELL, CHARLE
Owner Address: 105 REEDY CREEK DR ELIZABETH CITY, NC 27909

Contractor Name: PROPERTY OWNER **Contractor Phone:**
Contractor Address: See Above 000, 00 00000

Description: Repairing handrails on upper deck, repairing 1 of 3 exterior stair stringers damaged during removal for siding replacemen

Construction Value: \$400 **Classification of Work:** RESIDENTIAL REPAIR

BUILDING INFORMATION

Permit #	Permit Description	Total Fees Paid/Due	Approved By:	Approved Date:
RE201901332	RES ADD-REM-REP-ACC	\$75.00	SS	06/04/2019

Conditions of Approval:

- Address #s on home if none are present. SWO. Permit conditions shall be determined in field.

FLOOD INFORMATION

Permit #	Permit Description	Total Fees Paid/Due	Approved By:	Approved Date:
FL201901331	FLOOD PERMIT	\$0.00	SS	06/04/2019

Conditions of Approval:

Additional Conditions:

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

PLEASE NOTE:

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

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

I, the undersigned, understand that the issuance of a floodplain development permit approval is contingent upon the above information being correct and that the plans and supporting data have been or shall be provided as required, including but not limited to a proposed elevation certificate and or V-Zone certificate. Note: all elevation certificates must be signed by a professional engineer or registered land surveyor.

DECISION: Approved with Conditions (See above)

Responsible Party

Date

6/17/19

TOWN OF NAGS HEAD

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



Residential Project Approval Application # 201900461

Property Address: 4326 SOUTH HESPERIDES DR **PIN #:** 989112865205 **Parcel:** 007775000
Lot/Block/Sec: LOT: 15 BLK: SEC: E **Subdivision:** OLD NAGS HEAD COVE SEC E
Zoning: MEDIUM DENSITY RES DISTRICT **Land Use:** SINGLE FAMILY DWELLING
Flood Zone: X

Owner Name: GATES, SHELLI B
Owner Address: 4326 HESPRIDES DR NAGS HEAD, NC 27959

Contractor Name: REESE C. EVANS **Contractor Phone:** 252-202-7773
Contractor Address: 253 N Spot Rd Powells Point, NC 27966

Description: Enclose garage for 4th bdrm, bath, wetbar, laundry area & enclose 85 SF under deck for total 885 Heated SF addition; expand driveway

Construction Value: \$60000 **Classification of Work:** RESIDENTIAL ADDITION

BUILDING INFORMATION

Permit #	Permit Description	Total Fees Paid/Due	Approved By:	Approved Date:
RE201901348	RES ADD-REM-REP-ACC	\$295.00	SS	06/05/2019

Conditions of Approval:

- Call for site visit prior to starting job. Address #s on home if none are present. Provide separation from garage per code. Proof that slab has a vapor barrier under it. Smokes and co2 detectors to code throughout home. Provide heat source to code. Provide proper light and ventilation for new space.

PUBLIC WORKS INFORMATION

Permit #	Permit Description	Total Fees Paid/Due	Approved By:	Approved Date:
PW201901347	PW APPROVAL	\$25.00	RB	06/05/2019

Conditions of Approval:

- 36-4(f):max. driveway width is restricted to 26' w/a max. of 15R, min. driveway width is 12'
- 36-4(f):max. driveway apron shall be a min. of 10' in length, 4" thick, 3,000 psi conc. and designed for access purposes only. The driveway apron shall be sloped a min. of 1/4" per foot from the eop to a point 6' offset from the eop, creating a valley section within the driveway, (2" min.drop)
- All driveways constructed within the Town of Nags Head must be sloped away from the street 1/4-inch per foot for the first six (6) feet off the edge of the street. Contractor MUST call for an inspection AFTER driveway is formed-up and PRIOR to pouring concrete or laying asphalt.
- For Public Works related inspections please call the Public Works Department at 252-441-1122. Please call 24 hours in advance. CALL FOR PW FINAL INSPECTION.

ZONING INFORMATION

Permit #	Permit Description	Total Fees Paid/Due	Approved By:	Approved Date:
ZN201901346	ZONING PERMIT - RES	\$0.00	MK	06/05/2019

Conditions of Approval:

- Maximum driveway width 26 ft
- Any land disturbance shall be stabilized - call zoning for more details 252-449-6045
- Call zoning for final inspection 252-449-6045

Additional Conditions:

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

PLEASE NOTE:

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

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

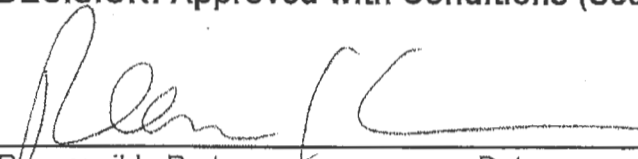
As per Town Code, contractors are responsible for any damage caused to Town owned facilities during construction on any site in Nags Head such as, but not limited to: multi-use path, streets, shoulders, swales, drainage facilities, water lines and related facilities.

(ZONING) RIGHT OF APPEAL


Pursuant to Section 48-594(b)(1) of the Nags Head Zoning Ordinance, you have the right to appeal this decision to the Nags Head Board of Adjustment within thirty (30) days of the date of this notice. This decision shall become final and unappealable if not appealed during this thirty (30) day period.

I, the undersigned, understand that the issuance of a floodplain development permit approval is contingent upon the above information being correct and that the plans and supporting data have been or shall be provided as required, including but not limited to a proposed elevation certificate and or V-Zone certificate. Note: all elevation certificates must be signed by a professional engineer or registered land surveyor.

DECISION: Approved with Conditions (See above)



Responsible Party



Date

TOWN OF NAGS HEAD

PO Box 99 Nags Head, NC 27959
Phone (252) 441-7016 Fax (252) 441-4290



**Residential Project Approval
Application # 201900468**

Property Address: 103 HILLSIDE CT **PIN #:** 080117213205 **Parcel:** 024961468

Lot/Block/Sec: LOT: 40 BLK: SEC: 3 **Subdivision:** RIDGES SEC 3, THE

Zoning: VILLAGE DET RES SF 2 **Land Use:** SINGLE FAMILY DWELLING

Flood Zone: X

Owner Name: SEGGERSON, SHARON ANN CORCORAN - TRUSTEE

Owner Address: 103 HILLSIDE CT #44 NAGS HEAD, NC 27959

Contractor Name: ISRIOLJON ORIPOV DBA CAROLINA COASTAL PA
252-305-5758

Contractor Phone:

Contractor Address: 105 LINKSIDE DR

Description: Enclose left side of carport, replace deck boards, rail caps stringers & stair treads, replace front door & side light

Construction Value: \$29749

Classification of Work: RESIDENTIAL REMODEL

BUILDING INFORMATION

Permit #	Permit Description	Total Fees Paid/Due	Approved By:	Approved Date:
RE201901345	RES ADD-REM-REP-ACC	\$195.00	SS	06/05/2019

Conditions of Approval:

- Address #s on home if none are present. Smokes and Co2 detectors to code throughout home. Proper separation for garage/storage and house? Wiring in garage/storage to code. All trades shall pull permits prior to starting work. Call for all required inspections.

ZONING INFORMATION

Permit #	Permit Description	Total Fees Paid/Due	Approved By:	Approved Date:
ZN201901344	ZONING PERMIT - RES	\$0.00	MK	06/05/2019

Conditions of Approval:

- call for final zoning inspection - all proposed work is within the existing footprint 252-449-6045

Additional Conditions:

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

PLEASE NOTE:

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

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

(ZONING) RIGHT OF APPEAL

Pursuant to Section 48-594(b)(1) of the Nags Head Zoning Ordinance, you have the right to appeal this decision to the Nags Head Board of Adjustment within thirty (30) days of the date of this notice. This decision shall become final and unappealable if not appealed during this thirty (30) day period.

I, the undersigned, understand that the issuance of a floodplain development permit approval is contingent upon the above information being correct and that the plans and supporting data have been or shall be provided as required, including but not limited to a proposed elevation certificate and or V-Zone certificate. Note: all elevation certificates must be signed by a professional engineer or registered land surveyor.

DECISION: Approved with Conditions (See above)

TOWN OF NAGS HEAD

PO Box 99 Nags Head, NC 27959
Phone (252) 441-7016 Fax (252) 441-4290



**Residential Project Approval
Application # 201900469**

Property Address: 210 WEST WINDJAMMER RD **PIN #:** 989215531617 **Parcel:** 029089000

Lot/Block/Sec: LOT: 107 BLK: SEC: 1 **Subdivision:** NORTH RIDGE ESTATES SEC 1

Zoning: SPECIAL PLANNED DEV DISTRICT **Land Use:** SINGLE FAMILY DWELLING **Flood Zone:** X

Owner Name: SHIREY, DAVID W - GILDA K SHIREY
Owner Address: 210 WINDJAMMER RD NAGS HEAD, NC 27959

Contractor Name: Beach Construction Group, LLC **Contractor Phone:**
Contractor Address: 1496 Colington Rd Kill Devil Hills, NC 27948

Description: Replace damaged siding & windows front & back of house, pati door, install door 1st level remove ground level door

Construction Value: \$29000 **Classification of Work:** RESIDENTIAL REPAIR

BUILDING INFORMATION

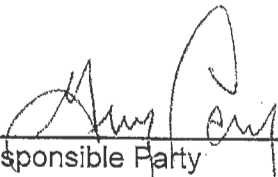
Permit #	Permit Description	Total Fees Paid/Due	Approved By:	Approved Date:
RE201901343	RES ADD-REM-REP-ACC	\$195.00	SS	06/05/2019

Conditions of Approval:
- Address #s on home if none are present. Review window and door handout we have provided.

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

PLEASE NOTE:
All work shall conform to all applicable North Carolina State Building codes and Ordinances of the Town of Nags Head and shall be the responsibility of the undersigned applicant.
In accordance with GS160A-418, a permit expires 6 months after the date of issuance if the work authorized by the permit has not been commenced. If, after commencement, the work is discontinued for a period of 12 months (no inspections have taken place) the permit immediately expires. No work authorized by a permit that has expired may be performed until a new permit has been issued.

DECISION: Approved with Conditions (See above)


Responsible Party 6/7/19
Date

TOWN OF NAGS HEAD
PO Box 99 Nags Head, NC 27959
Phone (252) 441-7016 Fax (252) 441-4290



**Residential Project Approval
Application # 201900470**

Property Address: 2610 SOUTH MEMORIAL AVE PIN #: 989206395891 Parcel: 005484000
Lot/Block/Sec: LOT: 7 BLK: 8 SEC: 2 Subdivision: NAGS HEAD SHORES AMENDED SEC 2
Zoning: GENERAL COMMERCIAL DISTRICT Land Use: SINGLE FAMILY DWELLING
Flood Zone: AE Base Flood Elevation: 10.0 Regulatory Flood Elevation: 11
Map Panel No: 9892 Map Panel Date: 09/20/2006 Suffix: J Datum Used: NAVD 1988

Owner Name: COWLEY, JOHN D JR - COWLEY, JOAN D
Owner Address: 1684 OLD BUCKROE RD HAMPTON, VA 23664

Contractor Name: PROPERTY OWNER Contractor Phone:
Contractor Address: See Above 000, 00 00000

Description: Repair upper deck railings & remove stairs to crow's nest Install barrier to crows nest preventing access
Construction Value: \$1000 Classification of Work: RESIDENTIAL REPAIR

BUILDING INFORMATION

Permit #	Permit Description	Total Fees Paid/Due	Approved By:	Approved Date:
RE201901342	RES ADD-REM-REP-ACC	\$75.00	SS	06/05/2019

Conditions of Approval:

- Address #s on home if none are present. SWO. Call for final inspection.

FLOOD INFORMATION

Permit #	Permit Description	Total Fees Paid/Due	Approved By:	Approved Date:
FL201901341	FLOOD PERMIT	\$0.00	SS	06/05/2019

Conditions of Approval:

Additional Conditions:

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

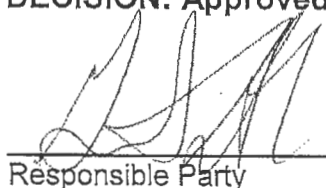
PLEASE NOTE:

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

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

I, the undersigned, understand that the issuance of a floodplain development permit approval is contingent upon the above information being correct and that the plans and supporting data have been or shall be provided as required, including but not limited to a proposed elevation certificate and or V-Zone certificate. Note: all elevation certificates must be signed by a professional engineer or registered land surveyor.

DECISION: Approved with Conditions (See above)


Responsible Party
6-7-19
Date

TOWN OF NAGS HEAD

PO Box 99 Nags Head, NC 27959
 Phone (252) 441-7016 Fax (252) 441-4290


Residential Project Approval
Application # 201900471

Property Address: 7000 SOUTH VA DARE TRL **PIN #:** 080011653116 **Parcel:** 006610000
Lot/Block/Sec: LOT: 1 BLK: 6 SEC: **Subdivision:** WHALEBONE BEACHES - COMP. MAP
Zoning: GENERAL COMMERCIAL DISTRICT **Land Use:** SINGLE FAMILY DWELLING
Flood Zone: AE **Base Flood Elevation:** 9.0 **Regulatory Flood Elevation:** 10
Map Panel No: 0800 **Map Panel Date:** 09/20/2006 **Suffix:** J **Datum Used:** NAVD 1988

Owner Name: SPLT & CO LLC
Owner Address: 530 ELIZABETH PL

Contractor Name: James Curtin **Contractor Phone:**
Contractor Address: PO Box 474 Kitty Hawk, NC 27949

Description: Demo existing 7x15 deck, stairs, rails, ect replace with 7x9 deck, rails, stairs, pilings & porch roof posts (existing roof)
Construction Value: \$4500 **Classification of Work:** RESIDENTIAL REPAIR

BUILDING INFORMATION

Permit #	Permit Description	Total Fees Paid/Due	Approved By:	Approved Date:
RE201901377	RES ADD-REM-REP-ACC	\$105.00	SS	06/07/2019

Conditions of Approval:
 - Address #s on home if none are present. Call for final inspection

FLOOD INFORMATION

Permit #	Permit Description	Total Fees Paid/Due	Approved By:	Approved Date:
FL201901375	FLOOD PERMIT	\$0.00	SS	06/07/2019

Conditions of Approval:

ZONING INFORMATION

Permit #	Permit Description	Total Fees Paid/Due	Approved By:	Approved Date:
ZN201901376	ZONING PERMIT - RES	0.00	KW	06/07/2019

Conditions of Approval:
 This property is a nonconforming cottage court and will be regulated pursuant to Town Code Section 48-128, Nonconforming Cottage Courts.
 Zoning is approved to remove the existing 7' x 15' deck, stairs and rails and replace with 7' x 9' deck, stairs and rails. No increase in the degree of nonconformity requested or approved.
 All work is within the existing footprint and reduction in nonconformity.
 Final Zoning Inspection required prior to issuance of Certificate of Occupancy.

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


PLEASE NOTE:
 All work shall conform to all applicable North Carolina State Building codes and Ordinances of the Town of Nags Head and shall be the responsibility of the undersigned applicant.
In accordance with GS160A-418, a permit expires 6 months after the date of issuance if the work authorized by the permit has not been commenced. If, after commencement, the work is discontinued for a period of 12 months (no inspections have taken place) the permit immediately expires. No work authorized by a permit that has expired may be performed until a new permit has been issued.

(ZONING) RIGHT OF APPEAL

Pursuant to Section 48-594(b)(1) of the Nags Head Zoning Ordinance, you have the right to appeal this decision to the Nags Head Board of Adjustment within thirty (30) days of the date of this notice. This decision shall become final and unappealable if not appealed during this thirty (30) day period.

I, the undersigned, understand that the issuance of a floodplain development permit approval is contingent upon the above information being correct and that the plans and supporting data have been or shall be provided as required, including but not limited to a proposed elevation certificate and or V-Zone certificate. Note: all elevation certificates must be signed by a professional engineer or registered land surveyor.

DECISION: Approved with Conditions (See above)

	6-10-2019
Responsible Party	Date

TOWN OF NAGS HEAD
PO Box 99 Nags Head, NC 27959
Phone (252) 441-7016 Fax (252) 441-4290



Residential Project Approval
Application # 201900473

Property Address: 10207 SOUTH BODIE ISLE CT **PIN #:** 071815638628 **Parcel:** 007471000

Lot/Block/Sec: LOT: 39 BLK: SEC: **Subdivision:** GOOSE WING

Zoning: MEDIUM DENSITY RES DISTRICT **Land Use:** SINGLE FAMILY DWELLING

Flood Zone: VE **Base Flood Elevation:** 11.0 **Regulatory Flood Elevation:** 12

Map Panel No: 0718 **Map Panel Date:** 09/20/2006 **Suffix:** J **Datum Used:** NAVD 1988

Owner Name: BRONDOS, MICHAEL DAVID CO-TRUSTEES - BR

Owner Address: 4652 PILTON PL HAYMARKET, VA 20169

Contractor Name: Sea Thru Construction, Inc. **Contractor Phone:** 252-202-4692

Contractor Address: PO Box 2471 KITTY HAWK, NC 27949

Description: Replace rails on top level east side deck

Construction Value: \$4200 **Classification of Work:** RESIDENTIAL REPAIR

BUILDING INFORMATION

Permit #	Permit Description	Total Fees Paid/Due	Approved By:	Approved Date:
RE201901374	RES ADD-REM-REP-ACC	\$105.00	SS	06/07/2019

Conditions of Approval:

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

FLOOD INFORMATION

Permit #	Permit Description	Total Fees Paid/Due	Approved By:	Approved Date:
FL201901373	FLOOD PERMIT	\$0.00	SS	06/07/2019

Conditions of Approval:

Additional Conditions:

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

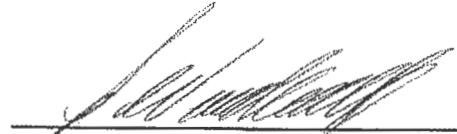
PLEASE NOTE:

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

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

I, the undersigned, understand that the issuance of a floodplain development permit approval is contingent upon the above information being correct and that the plans and supporting data have been or shall be provided as required, including but not limited to a proposed elevation certificate and or V-Zone certificate. Note: all elevation certificates must be signed by a professional engineer or registered land surveyor.

DECISION: Approved with Conditions (See above)



Responsible Party Date 6/13/19

TOWN OF NAGS HEAD
PO Box 99 Nags Head, NC 27959
Phone (252) 441-7016 Fax (252) 441-4290



Residential Project Approval
Application # 201900474

Property Address: 9829 SOUTH PELICAN CT **PIN #:** 071811565659 **Parcel:** 008043000
Lot/Block/Sec: LOT: 8 BLK: SEC: **Subdivision:** HIGH DUNES
Zoning: MEDIUM DENSITY RES DISTRICT **Land Use:** SINGLE FAMILY DWELLING
Flood Zone: VE **Base Flood Elevation:** 11.0 **Regulatory Flood Elevation:** 12
Map Panel No: 0718 **Map Panel Date:** 09/20/2006 **Suffix:** J **Datum Used:** NAVD 1988

Owner Name: CSBENZ, LLC
Owner Address: 1306 PRESTWICK CT CHESAPEAKE, VA 23320
Contractor Name: STAPLETON, TODD **Contractor Phone:** 252-202-8805
Contractor Address: 324 Live Oak Ct Kill Devil Hills, NC 27948

Description: Remove & replace North & South stairs & two storm doors in same footprint .
Construction Value: \$3600 **Classification of Work:** RESIDENTIAL REPAIR

BUILDING INFORMATION

Permit #	Permit Description	Total Fees Paid/Due	Approved By:	Approved Date:
RE201901372	RES ADD-REM-REP-ACC	\$105.00	SS	06/07/2019

Conditions of Approval:

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

FLOOD INFORMATION

Permit #	Permit Description	Total Fees Paid/Due	Approved By:	Approved Date:
FL201901371	FLOOD PERMIT	\$0.00	SS	06/07/2019

Conditions of Approval:

Additional Conditions:

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

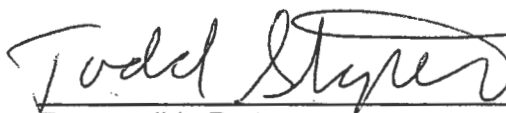
PLEASE NOTE:

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

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

I, the undersigned, understand that the issuance of a floodplain development permit approval is contingent upon the above information being correct and that the plans and supporting data have been or shall be provided as required, including but not limited to a proposed elevation certificate and or V-Zone certificate. Note: all elevation certificates must be signed by a professional engineer or registered land surveyor.

DECISION: Approved with Conditions (See above)

 June 7, 2019
Responsible Party Date

TOWN OF NAGS HEAD
PO Box 99 Nags Head, NC 27959
Phone (252) 441-7016 Fax (252) 441-4290



**Residential Project Approval
Application # 201900478**

Property Address: 2706 SOUTH VA DARE TRL PIN #: 989206491580 Parcel: 027446003
Lot/Block/Sec: LOT: 9 BLK: 6 SEC: 2 Subdivision: NAGS HEAD SHORES AMENDED SEC 2
Zoning: GENERAL COMMERCIAL DISTRICT Land Use: SINGLE FAMILY DWELLING
Flood Zone: AE Base Flood Elevation: 10.0 Regulatory Flood Elevation: 11
Map Panel No: 9892 Map Panel Date: 09/20/2006 Suffix: J Datum Used: NAVD 1998

Owner Name: FIRST EXTENDED SERVICE CORP OF VIRGINIA
Owner Address: P O BOX 439 SUFFOLK, VA 23439

Contractor Name: PROPERTY OWNER Contractor Phone:
Contractor Address: See Above 000, 00 00000

Description: Repair & replace upper deck
Construction Value: \$1000 Classification of Work: RESIDENTIAL REPAIR

BUILDING INFORMATION

Permit #	Permit Description	Total Fees Paid/Due	Approved By:	Approved Date:
RE201901416	RES ADD-REM-REP-ACC	\$75.00	SS	06/17/2019

Conditions of Approval:

FLOOD INFORMATION

Permit #	Permit Description	Total Fees Paid/Due	Approved By:	Approved Date:
FL201901415	FLOOD PERMIT	\$0.00	SS	06/17/2019

Conditions of Approval:

Additional Conditions:

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

PLEASE NOTE:

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

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

I, the undersigned, understand that the issuance of a floodplain development permit approval is contingent upon the above information being correct and that the plans and supporting data have been or shall be provided as required, including but not limited to a proposed elevation certificate and or V-Zone certificate. Note: all elevation certificates must be signed by a professional engineer or registered land surveyor.

DECISION: Approved with Conditions (See above)

Agay Carnett 7-1-19
Responsible Party Date

TOWN OF NAGS HEAD
PO Box 99 Nags Head, NC 27959
Phone (252) 441-7016 Fax (252) 441-4290



Residential Project Approval
Application # 201900483

Property Address: 10435 SOUTH COLONY SOUTH DR **PIN #:** 071820705560 **Parcel:** 007518061
Lot/Block/Sec: LOT: 61 BLK: SEC: **Subdivision:** BODIE ISLAND
Zoning: MEDIUM DENSITY RES DISTRICT **Land Use:** SINGLE FAMILY DWELLING
Flood Zone: AE **Base Flood Elevation:** 11.0 **Regulatory Flood Elevation:** 12
Map Panel No: 0718 **Map Panel Date:** 09/20/2006 **Suffix:** J **Datum Used:** NAVD 1988

Owner Name: BEAVERS, JOHN W JR
Owner Address: 718 JEFFERSON DR TURNERSVILLE, NJ 08012

Contractor Name: BILL GRAY DBA BEACH BUILDING SERVICES IN **Contractor Phone:**
252-455-8168
Contractor Address: 10424 S COLONY SOUTH NAGS HEAD, NC 27959

Description: Replace cedar shakes, replace some rails

Construction Value: \$22000 **Classification of Work:** RESIDENTIAL REPAIR

BUILDING INFORMATION

Permit #	Permit Description	Total Fees Paid/Due	Approved By:	Approved Date:
RE201901412	RES ADD-REM-REP-ACC	\$195.00	SS	06/17/2019

Conditions of Approval:

- Address #s on home if none are present. SWO. Call for final inspection.

FLOOD INFORMATION

Permit #	Permit Description	Total Fees Paid/Due	Approved By:	Approved Date:
FL201901411	FLOOD PERMIT	\$0.00	SS	06/17/2019

Conditions of Approval:

Additional Conditions:

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

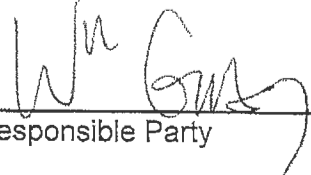
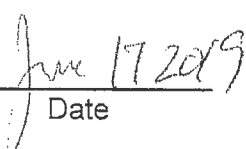
PLEASE NOTE:

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

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

I, the undersigned, understand that the issuance of a floodplain development permit approval is contingent upon the above information being correct and that the plans and supporting data have been or shall be provided as required, including but not limited to a proposed elevation certificate and or V-Zone certificate. Note: all elevation certificates must be signed by a professional engineer or registered land surveyor.

DECISION: Approved with Conditions (See above)


Responsible Party 
Date

TOWN OF NAGS HEAD
PO Box 99 Nags Head, NC 27959
Phone (252) 441-7016 Fax (252) 441-4290



Residential Project Approval
Application # 201900484

Property Address: 10204 SOUTH COLONY SOUTH DR PIN #: 071815633406 Parcel: 007508000
Lot/Block/Sec: LOT: 81 BLK: SEC: Subdivision: GOOSE WING
Zoning: MEDIUM DENSITY RES DISTRICT Land Use: SINGLE FAMILY DWELLING
Flood Zone: AE Base Flood Elevation: 10.0 Regulatory Flood Elevation: 11
Map Panel No: 0718 Map Panel Date: 09/20/2006 Suffix: J Datum Used: NAVD 1988

Owner Name: LONG, DAVID R - LONG, MARYELLEN P
Owner Address: 812 HARVEY RD WALLINGFORD, PA 19086

Contractor Name: BILL GRAY DBA BEACH BUILDING SERVICES IN Contractor Phone:
252-455-8168
Contractor Address: 10424 S COLONY SOUTH NAGS HEAD, NC 27959

Description: Replace decking & rails
Construction Value: \$7000 Classification of Work: RESIDENTIAL REPAIR

BUILDING INFORMATION

Permit #	Permit Description	Total Fees Paid/Due	Approved By:	Approved Date:
RE201901414	RES ADD-REM-REP-ACC	\$135.00	SS	06/17/2019

Conditions of Approval:
- Address #s on home if none are present. SWO. Call for final inspection

FLOOD INFORMATION

Permit #	Permit Description	Total Fees Paid/Due	Approved By:	Approved Date:
FL201901413	FLOOD PERMIT	\$0.00	SS	06/17/2019

Conditions of Approval:

Additional Conditions:

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

PLEASE NOTE:

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

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

I, the undersigned, understand that the issuance of a floodplain development permit approval is contingent upon the above information being correct and that the plans and supporting data have been or shall be provided as required, including but not limited to a proposed elevation certificate and or V-Zone certificate. Note: all elevation certificates must be signed by a professional engineer or registered land surveyor.

DECISION: Approved with Conditions (See above)

Responsible Party

Date

TOWN OF NAGS HEAD

PO Box 99 Nags Head, NC 27959
Phone (252) 441-7016 Fax (252) 441-4290



**Residential Project Approval
Application # 201900477**

Property Address: 132 LONE CEDAR CT **PIN #:** 080018411204 **Parcel:** 007104022
Lot/Block/Sec: LOT: 16 BLK: SEC: **Subdivision:** THE LONE CEDAR VILLAGE
Zoning: LOW DENSITY RES DISTRICT **Land Use:** SINGLE FAMILY DWELLING, LARGE
Flood Zone: AE

Owner Name: SAUNDERS, ROBERT SHELDON - SAUNDERS, JEA
Owner Address: PO BOX 578 PLYMOUTH, NC 27962

Contractor Name: Bill Froehlich **Contractor Phone:** 252-207-7999
Contractor Address: PO Box 3337 Kill Devil Hills, NC 27948

Description: Construct bulkhead 107' and extend pier
Construction Value: \$7500 **Classification of Work:** RESIDENTIAL ACC STRUCTURE

BUILDING INFORMATION

Permit #	Permit Description	Total Fees Paid/Due	Approved By:	Approved Date:
RE201901433	RES ADD-REM-REP-ACC	\$135.00	SS	06/18/2019

Conditions of Approval:
- Address #@s on home if none are present. Call for material check. Call for final inspection

ZONING INFORMATION

Permit #	Permit Description	Total Fees Paid/Due	Approved By:	Approved Date:
ZN201901432	ZONING PERMIT - RES	\$0.00	MK	06/18/2019

Conditions of Approval:
- Erosion and sedimentation control measures required - silt fencing and stabilization required 21 days after any land disturbance - Call final Zoning 252-449-6045 for seeding specs or stabilization requirements

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

PLEASE NOTE:
All work shall conform to all applicable North Carolina State Building codes and Ordinances of the Town of Nags Head and shall be the responsibility of the undersigned applicant.
In accordance with GS160A-418, a permit expires 6 months after the date of issuance if the work authorized by the permit has not been commenced. If, after commencement, the work is discontinued for a period of 12 months (no inspections have taken place) the permit immediately expires. No work authorized by a permit that has expired may be performed until a new permit has been issued.

(ZONING) RIGHT OF APPEAL
Pursuant to Section 48-594(b)(1) of the Nags Head Zoning Ordinance, you have the right to appeal this decision to the Nags Head Board of Adjustment within thirty (30) days of the date of this notice. This decision shall become final and unappealable if not appealed during this thirty (30) day period.

I, the undersigned, understand that the issuance of a floodplain development permit approval is contingent upon the above information being correct and that the plans and supporting data have been or shall be provided as required, including but not limited to a proposed elevation certificate and or V-Zone certificate. Note: all elevation certificates must be signed by a professional engineer or registered land surveyor.

DECISION: Approved with Conditions (See above)

 6-18-19
Responsible Party Date

TOWN OF NAGS HEAD

PO Box 99 Nags Head, NC 27959

Phone (252) 441-7016 Fax (252) 441-4290

**Commercial Project Approval****Application # 201900488**
Property Address: 9408 SOUTH OLD OREGON INLET RD **PIN #:** 071918305014 **Parcel:** 007970028

Lot/Block/Sec: LOT: 28 BLK: SEC: **Subdivision:** HOLLYWD BCH RECOMB/SO CREEK AC

Zoning: MEDIUM DENSITY RES DISTRICT **Land Use:** SINGLE FAMILY DWELLING

Flood Zone: AE **Base Flood Elevation:** 11.0 **Regulatory Flood Elevation:** 12

Map Panel No: 0719 **Map Panel Date:** 09/20/2006 **Suffix:** J **Datum Used:** NAVD 1988

Owner Name: TAYLOR JR, LARRY BRADFORD

Owner Address: 809 LOS CONAES WAY

Contractor Name: BARNES, LAWRENCE COOPER **Contractor Phone:** 252-202-4162

Contractor Address: 136 SCHOOLHOUSE RD

Description: Build ground level 12x12 wood platform for hot tub, install electrical for hot tub

Construction Value: \$2800 **Classification of Work:** RESIDENTIAL ACC STRUCTURE
BUILDING INFORMATION

Permit #	Permit Description	Total Fees Paid/Due	Approved By:	Approved Date:
RE201901440	RES ADD-REM-REP-ACC	\$105.00	SS	06/18/2019

Conditions of Approval:

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

FLOOD INFORMATION

Permit #	Permit Description	Total Fees Paid/Due	Approved By:	Approved Date:
FL201901439	FLOOD PERMIT	\$0.00	SS	06/18/2019

Conditions of Approval:**ZONING INFORMATION**

Permit #	Permit Description	Total Fees Paid/Due	Approved By:	Approved Date:
ZN201901438	ZONING PERMIT - RES	0.00	MK	06/18/2019

Conditions of Approval:

add 12 x 12 platform - additional lot coverage (26.1 %) lot coverage must maintain setbacks

Additional Conditions:

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

PLEASE NOTE:

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

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I, the undersigned, understand that the issuance of a floodplain development permit approval is contingent upon the above information being correct and that the plans and supporting data have been or shall be provided as

TOWN OF NAGS HEAD
PO Box 99 Nags Head, NC 27959
Phone (252) 441-7016 Fax (252) 441-4290



**Residential Project Approval
Application # 201900485**

Property Address: 109 LONE CEDAR CT **PIN #:** 080018405869 **Parcel:** 007104026
Lot/Block/Sec: LOT: 20 BLK: SEC: **Subdivision:** THE LONE CEDAR VILLAGE
Zoning: LOW DENSITY RES DISTRICT **Land Use:** SINGLE FAMILY DWELLING
Flood Zone: AE **Base Flood Elevation:** 10.0 **Regulatory Flood Elevation:** 11
Map Panel No: 0800 **Map Panel Date:** 09/20/2006 **Suffix:** J **Datum Used:** NAVD 1988

Owner Name: VIDA, MICHAEL J
Owner Address: PO BOX 711491 HERNDON, VA 20171

Contractor Name: Granplan Restorations, LLC **Contractor Phone:** 252-305-6881
Contractor Address: PO BOX 1411 Manteo, NC 27954

Description: Repair drywall, flooring, plumbing cabinets, doors, trim and painting to 2 levels of the house (water damage)

Construction Value: \$38000 **Classification of Work:** RESIDENTIAL REPAIR

BUILDING INFORMATION

Permit #	Permit Description	Total Fees Paid/Due	Approved By:	Approved Date:
RE201901435	RES ADD-REM-REP-ACC	\$225.00	SS	06/18/2019

Conditions of Approval:

- Address #s on home if none are present. Pull electrical permit. Have electrician check out wire for potential water damage. Call for final inspection

FLOOD INFORMATION

Permit #	Permit Description	Total Fees Paid/Due	Approved By:	Approved Date:
FL201901434	FLOOD PERMIT	\$0.00	SS	06/18/2019

Conditions of Approval:

Additional Conditions:

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

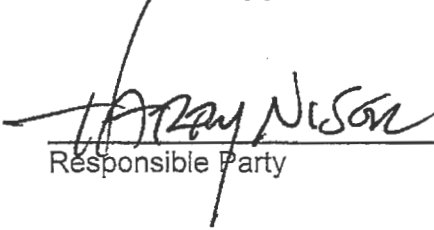
PLEASE NOTE:

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

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

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DECISION: Approved with Conditions (See above)


Responsible Party

June 25th, 2019
Date

TOWN OF NAGS HEAD

PO Box 99 Nags Head, NC 27959

Phone (252) 441-7016 Fax (252) 441-4290


**Residential Project Approval
Application # 201900481**
Property Address: 5103 SOUTH VA DARE TRL **PIN #:** 080114237164 **Parcel:** 000380026

Lot/Block/Sec: LOT: 9 BLK: SEC: **Subdivision:** DUNERIDGE ESTATES

Zoning: VILLAGE ATTACHED SF 5 **Land Use:** SINGLE FAMILY DWELLING, LARGE

Flood Zone: VE **Base Flood Elevation:** 11.0 **Regulatory Flood Elevation:** 12

Map Panel No: 0801 **Map Panel Date:** 09/20/2006 **Suffix:** J **Datum Used:** NAVD 1988

Owner Name: TEQUILA ACRES LLC

Owner Address: 2700 OCEAN SHORE AVE VIRGINIA BEACH, VA 23451

Contractor Name: **Contractor Phone:**
Contractor Address:
Description: Add on to existing upper deck heated enclosure tie in with access from existing bathroom increasing 40 sq ft

Construction Value: \$11200 **Classification of Work:** RESIDENTIAL ADDITION

BUILDING INFORMATION

Permit #	Permit Description	Total Fees Paid/Due	Approved By:	Approved Date:
RE201901481	RES ADD-REM-REP-ACC	\$165.00	SS	06/21/2019

Conditions of Approval:

- Address #s on home if none are present. R 38 in ceiling. R 15 in walls. R 19 in floor. Provide heat load calcs. Smokes and Co2 detectors to code throughout home. Subs shall pull permits before starting work. Call for final inspection

FLOOD INFORMATION

Permit #	Permit Description	Total Fees Paid/Due	Approved By:	Approved Date:
FL201901480	FLOOD PERMIT	\$0.00	CT	06/21/2019

Conditions of Approval:
ZONING INFORMATION

Permit #	Permit Description	Total Fees Paid/Due	Approved By:	Approved Date:
ZN201901479	ZONING PERMIT - RES	0.00	MK	06/21/2019

Conditions of Approval:

Additional heated living 40 sqft must comply with Chapter 48- Zoning - all proposed work within existing footprint
Call for final zoning inspection 252-449-6045

Additional Conditions:

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

PLEASE NOTE:

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

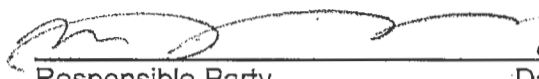
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(ZONING) RIGHT OF APPEAL

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I, the undersigned, understand that the issuance of a floodplain development permit approval is contingent upon the above information being correct and that the plans and supporting data have been or shall be provided as required, including but not limited to a proposed elevation certificate and or V-Zone certificate. Note: all elevation certificates must be signed by a professional engineer or registered land surveyor.

DECISION: Approved with Conditions (See above)

 6-21-19
Responsible Party Date

TOWN OF NAGS HEAD
 PO Box 99 Nags Head, NC 27959
 Phone (252) 441-7016 Fax (252) 441-4290



Residential Project Approval
Application # 201900491

Property Address: 2710 SOUTH VA DARE TRL **PIN #:** 989206492421 **Parcel:** 027446001
Lot/Block/Sec: LOT: 7 BLK: 6 SEC: 2 **Subdivision:** NAGS HEAD SHORES AMENDED SEC 2
Zoning: GENERAL COMMERCIAL DISTRICT **Land Use:** SINGLE FAMILY DWELLING
Flood Zone: AE **Base Flood Elevation:** 10.0 **Regulatory Flood Elevation:** 11
Map Panel No: 9892 **Map Panel Date:** 09/20/2006 **Suffix:** J **Datum Used:** NAVD 1988

Owner Name: SMITH, M KATHLEEN - SMITH, PETER H
Owner Address: 2710 S VIRGINIA DARE TRL NAGS HEAD, NC 27959

Contractor Name: R. Schwartz Construction **Contractor Phone:**
Contractor Address: PO Box 1186 Kill Devil Hills, NC 27948

Description: Install 2 new slider doors & 3 mulled window units
Construction Value: \$17239 **Classification of Work:** RESIDENTIAL REPAIR

BUILDING INFORMATION

Permit #	Permit Description	Total Fees Paid/Due	Approved By:	Approved Date:
RE201901475	RES ADD-REM-REP-ACC	\$165.00	SS	06/21/2019

Conditions of Approval:
 - Review window and door handout we have provided. Call for final inspection

FLOOD INFORMATION

Permit #	Permit Description	Total Fees Paid/Due	Approved By:	Approved Date:
FL201901474	FLOOD PERMIT	\$0.00	CT	06/21/2019

Conditions of Approval:

Additional Conditions:

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

PLEASE NOTE:

All work shall conform to all applicable North Carolina State Building codes and Ordinances of the Town of Nags Head and shall be the responsibility of the undersigned applicant.
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DECISION: Approved with Conditions (See above)

[Handwritten Signature]
 Responsible Party 6-21-19
 Date

TOWN OF NAGS HEAD
PO Box 99 Nags Head, NC 27959
Phone (252) 441-7016 Fax (252) 441-4290



Residential Project Approval
Application # 201900492

Property Address: 2214 SOUTH VA DARE TRL PIN #: 989313224596 Parcel: 005594000
Lot/Block/Sec: LOT: 8 BLK: 6 SEC: 4 Subdivision: NAGS HEAD SHORES AMENDED SEC 4
Zoning: GENERAL COMMERCIAL DISTRICT Land Use: SINGLE FAMILY DWELLING
Flood Zone: AE Base Flood Elevation: 10.0 Regulatory Flood Elevation: 11
Map Panel No: 9893 Map Panel Date: 09/20/2006 Suffix: J Datum Used: NAVD 1988

Owner Name: PHILLIPS, W RAY - VERONICA H PHILLIPS
Owner Address: 32462 WALNUT HILL RD WAVERLY, VA 23890

Contractor Name: MORRIS CONSTRUCTION COMPANY LLC Contractor Phone: 252-715-1194
Contractor Address: P O BOX 1189 KITTY HAWK, NC 27949

Description: Replace decking boards & rails on upper East deck (facing house)
Construction Value: \$5700 Classification of Work: RESIDENTIAL REPAIR

BUILDING INFORMATION

Permit #	Permit Description	Total Fees Paid/Due	Approved By:	Approved Date:
RE201901473	RES ADD-REM-REP-ACC	\$135.00	SS	06/21/2019

Conditions of Approval:

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

FLOOD INFORMATION

Permit #	Permit Description	Total Fees Paid/Due	Approved By:	Approved Date:
FL201901472	FLOOD PERMIT	\$0.00	CT	06/21/2019

Conditions of Approval:

Additional Conditions:

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

PLEASE NOTE:

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

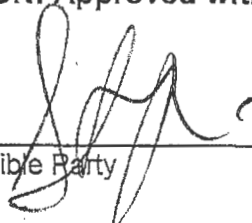
In accordance with GS160A-418, a permit expires 6 months after the date of issuance if the work authorized by the permit has not been commenced. If, after commencement, the work is discontinued for a period of 12 months (no inspections have taken place) the permit immediately expires. No work authorized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

I, the undersigned, understand that the issuance of a floodplain development permit approval is contingent upon the above information being correct and that the plans and supporting data have been or shall be provided as required, including but not limited to a proposed elevation certificate and or V-Zone certificate. Note: all elevation certificates must be signed by a professional engineer or registered land surveyor.

DECISION: Approved with Conditions (See above)

Responsible Party

Date

 6/24/19

TOWN OF NAGS HEAD
PO Box 99 Nags Head, NC 27959
Phone (252) 441-7016 Fax (252) 441-4290



Residential Project Approval
Application # 201900493

Property Address: 9200 SOUTH OLD OREGON INLET RD **PIN #:** 071918226033 **Parcel:** 007970065
Lot/Block/Sec: LOT: 65 BLK: SEC: **Subdivision:** HOLLYWD BCH RECOMB/SO CREEK AC
Zoning: MEDIUM DENSITY RES DISTRICT **Land Use:** SINGLE FAMILY DWELLING, LARGE
Flood Zone: AE **Base Flood Elevation:** 11.0 **Regulatory Flood Elevation:** 12
Map Panel No: 0719 **Map Panel Date:** 09/20/2006 **Suffix:** J **Datum Used:** NAVD 1988

Owner Name: ALEXANDER, PAUL M - FORVOUR, KATHLEEN B
Owner Address: 10 PINEWOOD CT SICKLERVILLE, NJ 08081

Contractor Name: Beach Construction Group, LLC **Contractor Phone:**
Contractor Address: 1496 Colington Rd Kill Devil Hills, NC 27948

Description: Sheathing & framing rot

Construction Value: \$14900 **Classification of Work:** RESIDENTIAL REPAIR

BUILDING INFORMATION

Permit #	Permit Description	Total Fees Paid/Due	Approved By:	Approved Date:
RE201901477	RES ADD-REM-REP-ACC	\$165.00	SS	06/21/2019

Conditions of Approval:

- Address #s on home if none are present. Call for inspection of repairs before covering. Call for final inspection.

FLOOD INFORMATION

Permit #	Permit Description	Total Fees Paid/Due	Approved By:	Approved Date:
FL201901476	FLOOD PERMIT	\$0.00	CT	06/21/2019

Conditions of Approval:

Additional Conditions:

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

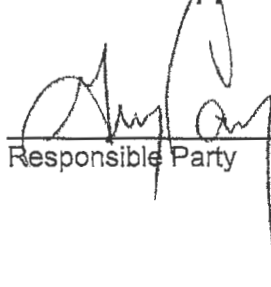
PLEASE NOTE:

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DECISION: Approved with Conditions (See above)


Responsible Party 6/24/19
Date

TOWN OF NAGS HEAD
PO Box 99 Nags Head, NC 27959
Phone (252) 441-7016 Fax (252) 441-4290



Residential Project Approval
Application # 201900496

Property Address: 2512 SOUTH MEMORIAL AVE **PIN #:** 989318303304 **Parcel:** 005502000
Lot/Block/Sec: LOT: 6 BLK: 9 SEC: 2 **Subdivision:** NAGS HEAD SHORES AMENDED SEC 2
Zoning: HIGH DENSITY RES DISTRICT **Land Use:** SINGLE FAMILY DWELLING
Flood Zone: AE **Base Flood Elevation:** 10.0 **Regulatory Flood Elevation:** 11
Map Panel No: 9893 **Map Panel Date:** 09/20/2006 **Suffix:** J **Datum Used:** NAVD 1988

Owner Name: FREEMAN, RONALD L - FREEMAN, CAROL A
Owner Address: 11446 SAVANNAH DR. FREDERICKSBURG, VA 22407

Contractor Name: REYNOLDS, BILLY **Contractor Phone:**
Contractor Address: 1608 CLEARWATER LN CHESAPEAKE, VA 23322

Description: Replace decking, railing, stair treads

Construction Value: \$5000 **Classification of Work:** RESIDENTIAL REPAIR

BUILDING INFORMATION

Permit #	Permit Description	Total Fees Paid/Due	Approved By:	Approved Date:
RE201901471	RES ADD-REM-REP-ACC	\$105.00	SS	06/21/2019

Conditions of Approval:

- Address #s on home if none are present. Rails shall be built to today's code. Call for final inspection.

FLOOD INFORMATION

Permit #	Permit Description	Total Fees Paid/Due	Approved By:	Approved Date:
FL201901470	FLOOD PERMIT	\$0.00	CT	06/21/2019

Conditions of Approval:

Additional Conditions:

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

PLEASE NOTE:

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

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

I, the undersigned, understand that the issuance of a floodplain development permit approval is contingent upon the above information being correct and that the plans and supporting data have been or shall be provided as required, including but not limited to a proposed elevation certificate and or V-Zone certificate. Note: all elevation certificates must be signed by a professional engineer or registered land surveyor.

DECISION: Approved with Conditions (See above)

Responsible Party _____ Date _____

TOWN OF NAGS HEAD
PO Box 99 Nags Head, NC 27959
Phone (252) 441-7016 Fax (252) 441-4290



Residential Project Approval
Application # 201900497

Property Address: 114 OVERLOOK CT **PIN #:** 080118206546 **Parcel:** 024961260
Lot/Block/Sec: LOT: 60 BLK: SEC: 2 **Subdivision:** RIDGES SEC 2, THE
Zoning: VILLAGE DET RES SF 2 **Land Use:** SINGLE FAMILY DWELLING **Flood Zone:** X

Owner Name: MCCORMICK, CAROLYN E
Owner Address: 114 OVERLOOK CT NAGS HEAD, NC 27959

Contractor Name: PROPERTY OWNER **Contractor Phone:**
Contractor Address: See Above

Description: Due to rot & termites removing 21 windows and replacing 19 w /pella, new siding on North & South side, painting exterior
Construction Value: \$27893 **Classification of Work:** RESIDENTIAL REPAIR

BUILDING INFORMATION

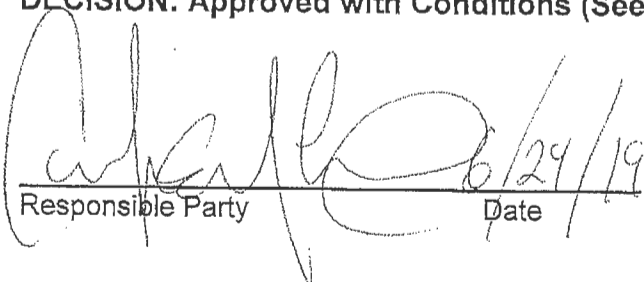
Permit #	Permit Description	Total Fees Paid/Due	Approved By:	Approved Date:
RE201901478	RES ADD-REM-REP-ACC	\$195.00	CT	06/21/2019

Conditions of Approval:
- Review window and door handout we have provided.

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

PLEASE NOTE:
All work shall conform to all applicable North Carolina State Building codes and Ordinances of the Town of Nags Head and shall be the responsibility of the undersigned applicant.
In accordance with GS160A-418, a permit expires 6 months after the date of issuance if the work authorized by the permit has not been commenced. If, after commencement, the work is discontinued for a period of 12 months (no inspections have taken place) the permit immediately expires. No work authorized by a permit that has expired may be performed until a new permit has been issued.

DECISION: Approved with Conditions (See above)



Responsible Party Date 6/29/19

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



Residential Project Approval
Application # 201900495

Property Address: 425 RIDGEVIEW WAY **PIN #:** 989108776734 **Parcel:** 006749048
Lot/Block/Sec: LOT: 9 BLK: SEC: 5 **Subdivision:** SOUTHRIDGE - SEC 5
Zoning: MEDIUM DENSITY RES DISTRICT **Land Use:** VACANT
Flood Zone: AE **Base Flood Elevation:** 9.0 **Regulatory Flood Elevation:** 10
Map Panel No: 9891 **Map Panel Date:** 09/20/2006 **Suffix:** J **Datum Used:** NAVD 1988

Owner Name: BYRUM, LEAMON V - BYRUM, MELANIE B
Owner Address: 141 SHERIFF GARRETT RD AHOSKIE, NC 27910

Contractor Name: SANDY BOTTOM HOMES CORPORATION **Contractor Phone:** 757-448-8162
Contractor Address: 400 DaVinci Ln Kitty Hawk, NC 27949

Description: Construct new Single Family Dwelling on piling foundation, 4 bedrooms & 3 baths

Construction Value: \$200000 **Classification of Work:** NEW RESIDENTIAL

BUILDING INFORMATION

Permit #	Permit Description	Total Fees Paid/Due	Approved By:	Approved Date:
BR201901490	B-RESIDENTIAL NEW CONST SFD	\$2203.58	SS	06/24/2019

Conditions of Approval:

- Address #s on home. Call for all required inspections. All subs shall pull permits prior to starting work. Under construction and finished construction flood elevation certificates are required.

FLOOD INFORMATION

Permit #	Permit Description	Total Fees Paid/Due	Approved By:	Approved Date:
FL201901488	FLOOD PERMIT	\$0.00	SS	06/24/2019

Conditions of Approval:

PUBLIC WORKS INFORMATION

Permit #	Permit Description	Total Fees Paid/Due	Approved By:	Approved Date:
PW201901489	PW APPROVAL RES NEW/ADDITION	\$1319.71	RB	06/24/2019

Conditions of Approval:

- All driveways constructed within the Town of Nags Head must be sloped away from the street 1/4-inch per foot for the first six (6) feet off the edge of the street. Contractor MUST call for an inspection AFTER driveway is formed-up and PRIOR to pouring concrete or laying asphalt.
- See Public Works Approval handout for detailed project information
- For Public Works related inspections please call the Public Works Department at 252-441-1122. Please call 24 hours in advance. CALL FOR PW FINAL INSPECTION.

ZONING INFORMATION

Permit #	Permit Description	Total Fees Paid/Due	Approved By:	Approved Date:
ZN201901487	ZONING PERMIT - RES	\$0.00	MK	06/24/2019

Conditions of Approval:

- Silt fencing required, construction entrance and stabilization within 21 days of completion of any land disturbance
- Foundation survey with post fill elevations to ensure compliance with amount proposed
- Stabilization - contact zoning for seed schedule
- As-built survey required
- Final Zoning Required 252-449-6045

Additional Conditions:

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

PLEASE NOTE:

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

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

As per Town Code, contractors are responsible for any damage caused to Town owned facilities during construction on any site in Nags Head such as, but not limited to: multi-use path, streets, shoulders, swales, drainage facilities, water lines and related facilities.

(ZONING) RIGHT OF APPEAL

Pursuant to Section 48-594(b)(1) of the Nags Head Zoning Ordinance, you have the right to appeal this decision to the Nags Head Board of Adjustment within thirty (30) days of the date of this notice. This decision shall become final and unappealable if not appealed during this thirty (30) day period.

I, the undersigned, understand that the issuance of a floodplain development permit approval is contingent upon the above information being correct and that the plans and supporting data have been or shall be provided as required, including but not limited to a proposed elevation certificate and or V-Zone certificate. Note: all elevation certificates must be signed by a professional engineer or registered land surveyor.

DECISION: Approved with Conditions (See above)



Responsible Party

6-24-19

Date

TOWN OF NAGS HEAD
PO Box 99 Nags Head, NC 27959
Phone (252) 441-7016 Fax (252) 441-4290



Residential Project Approval
Application # 201900498

Property Address: 10102 SOUTH COLONY SOUTH DR **PIN #:** 071815640047 **Parcel:** 009050000

Lot/Block/Sec: LOT: 119 BLK: SEC: **Subdivision:** OCEAN COLONY SOUTH

Zoning: MEDIUM DENSITY RES DISTRICT **Land Use:** SINGLE FAMILY DWELLING

Flood Zone: AE **Base Flood Elevation:** 10.0 **Regulatory Flood Elevation:** 11

Map Panel No: 0718 **Map Panel Date:** 09/20/2006 **Suffix:** J **Datum Used:** NAVD 1988

Owner Name: CAVE CONSTRUCTION INC

Owner Address: 104 RIVERVIEW DR

Contractor Name: PROPERTY OWNER

Contractor Phone:

Contractor Address: See Above

Description: Concrete underneath of existing house & building 299 sq ft of storage with 1 door

Construction Value: \$9000

Classification of Work: RESIDENTIAL REMODEL

BUILDING INFORMATION

Permit #	Permit Description	Total Fees Paid/Due	Approved By:	Approved Date:
RE201901507	RES ADD-REM-REP-ACC	\$135.00	SS	06/24/2019

Conditions of Approval:

- Address #s on home if none are present. Storage shall not exceed 300 square feet using siding to siding measurement. All material below the RFE of 11 feet shall be pressure treated. New flood elevation certificate is required. Install flood vents to code. Light, switch and receptacle required in new storage. Call for final inspection

FLOOD INFORMATION

Permit #	Permit Description	Total Fees Paid/Due	Approved By:	Approved Date:
FL201901506	FLOOD PERMIT	\$0.00	SS	06/24/2019

Conditions of Approval:

ZONING INFORMATION

Permit #	Permit Description	Total Fees Paid/Due	Approved By:	Approved Date:
ZN201901505	ZONING PERMIT - RES	0.00	MK	06/24/2019

Conditions of Approval:

If any land disturbance please put up Erosion and sedimentation control measures - silt fencing and stabilize area within 21 calendar days
Max height 35 ft - must maintain setbacks
As-built survey required
Call for final zoning inspection 252-449-6045

Additional Conditions:

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

PLEASE NOTE:

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


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

(ZONING) RIGHT OF APPEAL

Pursuant to Section 48-594(b)(1) of the Nags Head Zoning Ordinance, you have the right to appeal this decision to the Nags Head Board of Adjustment within thirty (30) days of the date of this notice. This decision shall become final and unappealable if not appealed during this thirty (30) day period.

I, the undersigned, understand that the issuance of a floodplain development permit approval is contingent upon the above information being correct and that the plans and supporting data have been or shall be provided as required, including but not limited to a proposed elevation certificate and or V-Zone certificate. Note: all elevation certificates must be signed by a professional engineer or registered land surveyor.

DECISION: Approved with Conditions (See above)


Responsible Party


Date

TOWN OF NAGS HEAD
PO Box 99 Nags Head, NC 27959
Phone (252) 441-7016 Fax (252) 441-4290



Residential Project Approval
Application # 201900499

Property Address: 4327 SOUTH HESPERIDES DR **PIN #:** 989112867200 **Parcel:** 007819000

Lot/Block/Sec: LOT: 61 BLK: SEC: E **Subdivision:** OLD NAGS HEAD COVE SEC E

Zoning: MEDIUM DENSITY RES DISTRICT **Land Use:** SINGLE FAMILY DWELLING **Flood**
Zone: X

Owner Name: MERTZ, TERI L

Owner Address: 4327 S HESPERIDES DR NAGS HEAD, NC 27959

Contractor Name: POWER HOME SOLAR **Contractor Phone:** 704-635-2144

Contractor Address: 919 North Main St Ste 200

Description: 13 roof mounted modules, grid tied 3.90kw solar installation

Construction Value: \$21177 **Classification of Work:** RESIDENTIAL REMODEL

BUILDING INFORMATION

Permit #	Permit Description	Total Fees Paid/Due	Approved By:	Approved Date:
RE201901497	RES ADD-REM-REP-ACC	\$195.00	SS	06/24/2019

Conditions of Approval:

- Address #s on home if none are present. Pull electrical permit. Installation of Solar system shall comply with Article 690 of the 2017 NEC. Call for final inspections

Additional Conditions:

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

PLEASE NOTE:

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

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

DECISION: Approved with Conditions (See above)

Rashuna Carr 06/26/2019
Responsible Party Date

TOWN OF NAGS HEAD
PO Box 99 Nags Head, NC 27959
Phone (252) 441-7016 Fax (252) 441-4290



Residential Project Approval
Application # 201900503

Property Address: 2900 SOUTH LOST COLONY DR **PIN #:** 989210275409 **Parcel:** 005785012

Lot/Block/Sec: LOT: 12 BLK: C SEC: **Subdivision:** VISTA COLONY PLACE

Zoning: MEDIUM DENSITY RES DISTRICT **Land Use:** SINGLE FAMILY DWELLING **Flood**
Zone: X

Owner Name: WEAVER, DONALD W - WEAVER, LYNETTE M
Owner Address: PO BOX 625 KILL DEVIL HILLS, NC 27948

Contractor Name: PROPERTY OWNER **Contractor Phone:**
Contractor Address: See Above

Description: Repair steps & risers on front & rear deck

Construction Value: \$6000 **Classification of Work:** RESIDENTIAL REPAIR

BUILDING INFORMATION

Permit #	Permit Description	Total Fees Paid/Due	Approved By:	Approved Date:
RE201901486	RES ADD-REM-REP-ACC	\$135.00	SS	06/24/2019

Conditions of Approval:

- Address #s on home if none are present. Review stair handout we have provided. Call Steve if you have questions 252 449 2005. Call for final inspections.

Additional Conditions:

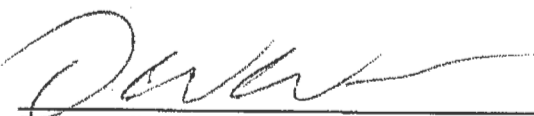
CALL FOR ALL REQUIRED INSPECTIONS; All new work to meet current code; FINAL INSPECTION REQUIRED PRIOR TO ISSUANCE OF CERTIFICATION OF COMPLIANCE

PLEASE NOTE:

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

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

DECISION: Approved with Conditions (See above)


Responsible Party Date 7/8/2019

TOWN OF NAGS HEAD
PO Box 99 Nags Head, NC 27959
Phone (252) 441-7016 Fax (252) 441-4290



**Residential Project Approval
Application # 201900505**

Property Address: 7203 SOUTH VA DARE TRL **PIN #:** 080015734726 **Parcel:** 008869000
Lot/Block/Sec: LOT: 2 BLK: 9 SEC: **Subdivision:** WHALEBONE BEACHES - COMP. MAP
Zoning: COMMERCIAL/RESIDENTIAL DISTRICT **Land Use:**
Flood Zone: VE **Base Flood Elevation:** 11.0 **Regulatory Flood Elevation:** 12
Map Panel No: 0800 **Map Panel Date:** 09/20/2006 **Suffix:** J **Datum Used:** NAVD 1988

Owner Name: NAGABHIRAVA, SARAT - HATHWAR, VASANTHA
Owner Address: 1297 KNIGHTS BRIDGE LN

Contractor Name: RCI CUSTOM CONSTRUCTION, INC **Contractor Phone:** 252-202-1097
Contractor Address: 35 SKYLINE RD

Description: Repair fallen deck new ledger stairs/screws & lag new bolt in piling, add to 8 pilings, new floor deck boards

Construction Value: \$5000 **Classification of Work:** RESIDENTIAL REPAIR

BUILDING INFORMATION

Permit #	Permit Description	Total Fees Paid/Due	Approved By:	Approved Date:
RE201901524	RES ADD-REM-REP-ACC	\$105.00	SS	06/25/2019

Conditions of Approval:

- Address #s installed per TONH ordinance if none currently present. Review deck and stair handouts we have provided. All work shall meet current codes. Call for final inspection
-

FLOOD INFORMATION

Permit #	Permit Description	Total Fees Paid/Due	Approved By:	Approved Date:
FL201901523	FLOOD PERMIT	\$0.00	SS	06/25/2019

Conditions of Approval:

ZONING INFORMATION

Permit #	Permit Description	Total Fees Paid/Due	Approved By:	Approved Date:
ZN201901522	ZONING PERMIT - RES	0.00	MK	06/25/2019

Conditions of Approval:

Must comply with CAMA Exemption 19-53. All within the existing footprint, no additional lot coverage. Call for final zoning inspection 252-449-6045

Additional Conditions:

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

PLEASE NOTE:

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

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

(ZONING) RIGHT OF APPEAL

Pursuant to Section 48-594(b)(1) of the Nags Head Zoning Ordinance, you have the right to appeal this decision to the Nags Head Board of Adjustment within thirty (30) days of the date of this notice. This decision shall become final and unappealable if not appealed during this thirty (30) day period.

TOWN OF NAGS HEAD
PO Box 99 Nags Head, NC 27959
Phone (252) 441-7016 Fax (252) 441-4290



Residential Project Approval
Application # 201900510

Property Address: 241 WEST BARRACUDA DR **PIN #:** 989112859975 **Parcel:** 006531000
Lot/Block/Sec: LOT: 87 BLK: SEC: F **Subdivision:** OLD NAGS HEAD COVE SEC F
Zoning: MEDIUM DENSITY RES DISTRICT **Land Use:** SINGLE FAMILY DWELLING
Flood Zone: AE **Base Flood Elevation:** 9.0 **Regulatory Flood Elevation:** 10
Map Panel No: 9891 **Map Panel Date:** 09/20/2006 **Suffix:** J **Datum Used:** NAVD 1988

Owner Name: WILT, BARBARA J - TAYLOR, DEBORAH S
Owner Address: 336 DANDY POINT DR HAMPTON, VA 23664
Contractor Name: SALTY SOULS INC **Contractor Phone:** 252-564-5101
Contractor Address: P. O. BOX 69 NAGS HEAD, NC 27959

Description: Build new ext stairs from SE corner of upper deck to ground level remove 2 piles @ add 2 N side of driveway
Construction Value: \$6500 **Classification of Work:** RESIDENTIAL REMODEL

BUILDING INFORMATION

Permit #	Permit Description	Total Fees Paid/Due	Approved By:	Approved Date:
RE201901547	RES ADD-REM-REP-ACC	\$135.00	SS	06/27/2019

Conditions of Approval:
- Address #s on home if none are present. Review stair handout we have provided. Call for piling inspection. Call for final inspection

FLOOD INFORMATION

Permit #	Permit Description	Total Fees Paid/Due	Approved By:	Approved Date:
FL201901546	FLOOD PERMIT	\$0.00	SS	06/27/2019

Conditions of Approval:

ZONING INFORMATION

Permit #	Permit Description	Total Fees Paid/Due	Approved By:	Approved Date:
ZN201901545	ZONING PERMIT -.RES	0.00	MK	06/27/2019

Conditions of Approval:
Must maintain setbacks
Call for final zoning inspection 252-449-6045

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

PLEASE NOTE:
All work shall conform to all applicable North Carolina State Building codes and Ordinances of the Town of Nags Head and shall be the responsibility of the undersigned applicant.
In accordance with GS160A-418, a permit expires 6 months after the date of issuance if the work authorized by the permit has not been commenced. If, after commencement, the work is discontinued for a period of 12 months (no inspections have taken place) the permit immediately expires. No work authorized by a permit that has expired may be performed until a new permit has been issued.

(ZONING) RIGHT OF APPEAL
Pursuant to Section 48-594(b)(1) of the Nags Head Zoning Ordinance, you have the right to appeal this decision to the Nags Head Board of Adjustment within thirty (30) days of the date of this notice. This decision shall become final and unappealable if not appealed during this thirty (30) day period.



Commercial Project Approval
Application # 201900448

Property Address: SOUTH LINKS DR **PIN #:** 080117012851 **Parcel:** 024961519
Lot/Block/Sec: LOT: BLK: SEC: **Subdivision:** SUBDIVISION - NONE
Zoning: VILLAGE RECREATION DISTRICT **Land Use:** PRIVATE ESTUARINE ACCESS
Flood Zone: X **Base Flood Elevation:** 0.0 **Regulatory Flood Elevation:**
Map Panel No: **Map Panel Date:** **Suffix:** **Datum Used:**

Owner Name: VILLAGE AT NAGS HEAD - PROPERTY OWNERS A
Owner Address: P O BOX 1807 NAGS HEAD, NC 27959

Contractor Name: SAWYERS RESIDENTIAL & MARINE CONSTRUCTIO **Contractor Phone:**
252-945-4710
Contractor Address: 596 GODLEY RD GRIMESLAND, NC 27837-9162

Description: Repair decking & framing on pier
Construction Value: \$25000 **Classification of Work:** COMMERCIAL REPAIR

BUILDING INFORMATION

Permit #	Permit Description	Total Fees Paid/Due	Approved By:	Approved Date:
CA201901353	COMM ADD-REM-REP-ACC	\$195.00	SS	06/05/2019

Conditions of Approval:
- Call for material check. Call for final inspection

ZONING INFORMATION

Permit #	Permit Description	Total Fees Paid/Due	Approved By:	Approved Date:
ZN201901354	ZONING PERMIT - COMM	\$0.00	KW	06/05/2019

Conditions of Approval:
- Permit is for the repair of decking and framing on pier following storms Florence/Michael.
- All work must be in compliance the CAMA Certification of Exemption issued on 5/24/19.
- Final Zoning Inspection required prior to issuance of Certificate of Occupancy.

Additional Conditions:

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

PLEASE NOTE:

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

I, the undersigned, understand that the issuance of a floodplain development permit approval is contingent upon the above information being correct and that the plans and supporting data have been or shall be provided as required, including but not limited to a proposed elevation certificate and or V-Zone certificate. Note: all elevation certificates must be signed by a professional engineer or registered land surveyor.

DECISION: Approved with Conditions (See above)


Responsible Party 6/6/19
Date

TOWN OF NAGS HEAD

PO Box 99 Nags Head, NC 27959
Phone (252) 441-7016 Fax (252) 441-4290



**Commercial Project Approval
Application # 201900449**

Property Address: WEST SOUND BREEZE LN **PIN #:** 080005283838 **Parcel:** 024961517
Lot/Block/Sec: LOT: SOUTH SOUND ACCESS BLK: SEC: **Subdivision:** SUBDIVISION - NONE
Zoning: VILLAGE RECREATION DISTRICT **Land Use:** PRIVATE ESTUARINE ACCESS
Flood Zone: AE **Base Flood Elevation:** 9.0 **Regulatory Flood Elevation:**
Map Panel No: **Map Panel Date:** **Suffix:** **Datum Used:**

Owner Name: VILLAGE AT NAGS HEAD - PROPERTY OWNERS A
Owner Address: P O BOX 1807 NAGS HEAD, NC 27959

Contractor Name: SAWYERS RESIDENTIAL & MARINE CONSTRUCTIO **Contractor Phone:**
252-945-4710
Contractor Address: 596 GODLEY RD GRIMESLAND, NC 27837-9162

Description: Repair decking & framing on pier
Construction Value: \$24550 **Classification of Work:** COMMERCIAL REPAIR

BUILDING INFORMATION

Permit #	Permit Description	Total Fees Paid/Due	Approved By:	Approved Date:
CA201901356	COMM ADD-REM-REP-ACC	\$195.00	SS	06/05/2019

Conditions of Approval:
- Call for material check. Call for final inspection

ZONING INFORMATION

Permit #	Permit Description	Total Fees Paid/Due	Approved By:	Approved Date:
ZN201901355	ZONING PERMIT - COMM	\$0.00	KW	06/05/2019

Conditions of Approval:
- Zoning approved for repairs to framing and decking on piers following storms Florence & Michael.
- All work must comply with CAMA Certification of Exemption issued 5/24/19.
- Final Zoning Inspection required prior to issuance of Certificate of Occupancy.

Additional Conditions:

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

PLEASE NOTE:

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

I, the undersigned, understand that the issuance of a floodplain development permit approval is contingent upon the above information being correct and that the plans and supporting data have been or shall be provided as required, including but not limited to a proposed elevation certificate and or V-Zone certificate. Note: all elevation certificates must be signed by a professional engineer or registered land surveyor.

DECISION: Approved with Conditions (See above)

George B. Sawyer 6/6/19

TOWN OF NAGS HEAD

PO Box 99 Nags Head, NC 27959
Phone (252) 441-7016 Fax (252) 441-4290



**Commercial Project Approval
Application # 201900453**

Property Address: 5000 SOUTH CROATAN HWY **PIN #:** 080113133277 **Parcel:** 029099000

Lot/Block/Sec: LOT: 3 & 4 BLK: SEC: **Subdivision:** OUTER BANKS MALL

Zoning: VILLAGE COMMERCIAL 1 **Land Use:** RETAIL

Flood Zone: X

Owner Name: NAGS HEAD COMPANY LLC
Owner Address: PO BOX 108 HENDERSON, NC 27536

Contractor Name: Ad Light Signs **Contractor Phone:** 252-202-4625
Contractor Address: 600 W Boundary St Kill Devil Hills, NC 27948

Description: OBX Mall Installation of lighted sign with raceway to store front (elect to follow) for Christmas Mouse
Construction Value: \$17368 **Classification of Work:** COMMERCIAL SIGN

BUILDING INFORMATION

Permit #	Permit Description	Total Fees Paid/Due	Approved By:	Approved Date:
SG201901379	BUILDING SIGN PERMIT	\$75.00	SS	06/07/2019

Conditions of Approval:

ZONING INFORMATION

Permit #	Permit Description	Total Fees Paid/Due	Approved By:	Approved Date:
ZS201901378	ZONING - COMMERCIAL SIGN	\$75.00	KW	06/07/2019

Conditions of Approval:

- Electrical Permit required; Must comply with all conditions of Electrical Permit
- Building Permit required; Must comply with all conditions of Building Permit
- Zoning is approved for the installation of internally illuminated wall signage for Christmas Mouse within unit 2223, Outer Banks Mall.
- Wall signage is temporary signage for tenant following fire damaged business. If tenant renews lease within Outer Banks Mall review of signage area/allotment will be required and may result in the removal of sign area.
- Final Zoning Inspection required prior to issuance of Certificate of Compliance.

Additional Conditions:

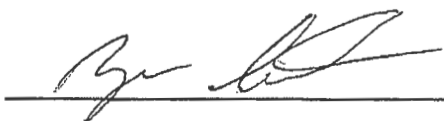
CALL FOR ALL REQUIRED INSPECTIONS; All new work to meet current code; FINAL INSPECTION REQUIRED PRIOR TO ISSUANCE OF CERTIFICATION OF COMPLIANCE

PLEASE NOTE:

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

I, the undersigned, understand that the issuance of a floodplain development permit approval is contingent upon the above information being correct and that the plans and supporting data have been or shall be provided as required, including but not limited to a proposed elevation certificate and or V-Zone certificate. Note: all elevation certificates must be signed by a professional engineer or registered land surveyor.

DECISION: Approved with Conditions (See above)

 6/17/19

TOWN OF NAGS HEAD

PO Box 99 Nags Head, NC 27959
 Phone (252) 441-7016 Fax (252) 441-4290


**Commercial Project Approval
 Application # 201900451**

Property Address: 3917 SOUTH CROATAN HWY **PIN #:** 989220813188 **Parcel:** 007706000

Lot/Block/Sec: LOT: BLK: SEC: **Subdivision:** SUBDIVISION - NONE

Zoning: GENERAL COMMERCIAL DISTRICT **Land Use:** OFFICE/RETAIL

Flood Zone: AE **Base Flood Elevation:** 10.0 **Regulatory Flood Elevation:** 11

Map Panel No: 9892 **Map Panel Date:** 9/20/2006 **Suffix:** J **Datum Used:**

Owner Name: JOCKEY'S RIDGE CROSSING, LLC
Owner Address: PO BOX 1839 NAGS HEAD, NC 27959

Contractor Name: H & W SERVICES GROUP, LLC **Contractor Phone:** 252-423-0744
Contractor Address: 1053 MARTINS POINT RD

Description: Repair framing, roofing & siding, no change in site conditions or use.

Construction Value: \$61200 **Classification of Work:** COMMERCIAL REPAIR

BUILDING INFORMATION

Permit #	Permit Description	Total Fees Paid/Due	Approved By:	Approved Date:
CA201901446	COMM ADD-REM-REP-ACC	\$315.00	CT	06/19/2019

Conditions of Approval:

- Owner/Contractor may be required to supply additional engineering analysis for conditions exposed during demolition/reconstruction if conditions exceed prescriptive requirement of NC Building Code.

FLOOD INFORMATION

Permit #	Permit Description	Total Fees Paid/Due	Approved By:	Approved Date:
FL201901447	FLOOD PERMIT	\$0.00	CT	06/19/2019

Conditions of Approval:
ZONING INFORMATION

Permit #	Permit Description	Total Fees Paid/Due	Approved By:	Approved Date:
ZN201901448	ZONING PERMIT - COMM	0.00	KW	06/19/2019

Conditions of Approval:

Zoning permit is approved to rehab the existing structure only, no change in use or site conditions.
 All work to be completed within the existing footprint of the 30 x 36 building.
 Final Zoning Inspection required prior to issuance of Certificate of Compliance.

Additional Conditions:

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

PLEASE NOTE:

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

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

(ZONING) RIGHT OF APPEAL

Pursuant to Section 48-594(b)(1) of the Nags Head Zoning Ordinance, you have the right to appeal this decision to the Nags Head Board of Adjustment within thirty (30) days of the date of this notice. This decision shall become final and unappealable if not appealed during this thirty (30) day period.

TOWN OF NAGS HEAD

PO Box 99 Nags Head, NC 27959
Phone (252) 441-7016 Fax (252) 441-4290



**Commercial Project Approval
Application # 201900482**

Property Address: 7575 SOUTH VA DARE TRL **PIN #:** 080018402120 **Parcel:** 007099000

Lot/Block/Sec: LOT: BLK: SEC: **Subdivision:** SUBDIVISION - NONE

Zoning: GENERAL COMMERCIAL DISTRICT **Land Use:** RESTAURANT

Flood Zone: VE

Owner Name: TALE OF THE WHALE - RESTAURANT

Owner Address: BOX 98 NAGS HEAD, NC 27959

Contractor Name: ADP Swimming Pools & Construction, LLC **Contractor Phone:** 252-305-8088

Contractor Address: 801 Indian Dr Kill Devil Hills, NC 27948

Description: 72 lf pier with benches & lights, extend bulkhead return on West side, extend bulkhead on East side & build 20' return

Construction Value: \$25000 **Classification of Work:** COMMERCIAL ACC STRUCTURE

BUILDING INFORMATION

Permit #	Permit Description	Total Fees Paid/Due	Approved By:	Approved Date:
CA201901469	COMM ADD-REM-REP-ACC	\$195.00	CT	06/21/2019

Conditions of Approval:

ZONING INFORMATION

Permit #	Permit Description	Total Fees Paid/Due	Approved By:	Approved Date:
ZN201901468	ZONING PERMIT - COMM	\$0.00	KW	06/21/2019

Conditions of Approval:

- Zoning is approved for the extension of the existing pier 72 linear feet and construction of four transient boat slips.
- All work must be consistent with the June 5, 2019 Board of Commissioners approved Conditional Use/Site Plan Amendment. Any deviation will require additional review.
- Provide copy of "No Wake Signage" for review prior to purchase or installation, must include language specifying that users of the facility must maintain a No Wake Speed for 600 ft.
- Request lighting inspection/audit when installed.
- All work must comply with CAMA Major Permit 10-19.
- Final Zoning Inspection required prior to issuance of Certificate of Occupancy.

Additional Conditions:

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

PLEASE NOTE:

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

I, the undersigned, understand that the issuance of a floodplain development permit approval is contingent upon the above information being correct and that the plans and supporting data have been or shall be provided as required, including but not limited to a proposed elevation certificate and or V-Zone certificate. Note: all elevation certificates must be signed by a professional engineer or registered land surveyor.

DECISION: Approved with Conditions (See above)



Commercial Project Approval
Application # 201900486

Property Address: 3022 SOUTH CROATAN HWY **PIN #:** 989210366847 **Parcel:** 005701000

Lot/Block/Sec: LOT: BLK: SEC: **Subdivision:** SUBDIVISION - NONE

Zoning: GENERAL COMMERCIAL DISTRICT **Land Use:** INSTITUTIONAL

Flood Zone: X

Owner Name: PIRATE'S QUAY LLC
Owner Address: P O BOX 120 KITTY HAWK, NC 27949

Contractor Name: **Contractor Phone:**
Contractor Address:

Description: Hood install fire suppression system hot water heater sink & lines conn to grease trap as lines to oven, fryer tile, count

Construction Value: \$28100 **Classification of Work:** COMMERCIAL REMODEL

BUILDING INFORMATION

Permit #	Permit Description	Total Fees Paid/Due	Approved By:	Approved Date:
CA201901467	COMM ADD-REM-REP-ACC	\$195.00	CT	06/21/2019

Conditions of Approval:

ZONING INFORMATION

Permit #	Permit Description	Total Fees Paid/Due	Approved By:	Approved Date:
ZN201901466	ZONING PERMIT - COMM	\$0.00	KW	06/21/2019

Conditions of Approval:

- Zoning is approved to convert unit into Take-Out Pizza Restaurant only.
- All work shall occur within the existing footprint, no increase in footprint or lot coverage approved.
- Shall be Take Out Only, NO Customer Service Area is permitted, NO indoor or outdoor seating permitted.
- Minimum of 1 parking space for Customer Waiting Area, Minimum of 1 parking space per employee with a minimum of 2. Minimum of 3 parking spaces required for this use, additional parking is available therefore existing onsite parking is compliant.
- Must comply with Dare County Health Department Permit 28722.
- Any signage requires additional review and approval.
- Final Zoning Inspection required prior to issuance of Certificate of Occupancy.

Additional Conditions:

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

PLEASE NOTE:

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

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

I, the undersigned, understand that the issuance of a floodplain development permit approval is contingent upon the above information being correct and that the plans and supporting data have been or shall be provided as required, including but not limited to a proposed elevation certificate and or V-Zone certificate. Note: all elevation certificates must be signed by a professional engineer or registered land surveyor.

DECISION: Approved with Conditions (See above)

TOWN OF NAGS HEAD
PO Box 99 Nags Head, NC 27959
Phone (252) 441-7016 Fax (252) 441-4290



Commercial Project Approval
Application # 201900480

Property Address: 107 WEST GRAY EAGLE ST PIN #: 08001563442400 Parcel: 029686999
Lot/Block/Sec: LOT: COMMON ELEMENT BLK: SEC: Subdivision: LANDINGS AT SUGAR CREEK, THE
Zoning: GENERAL COMMERCIAL DISTRICT Land Use: RESTAURANT
Flood Zone: AE

Owner Name: THE LANDINGS AT SUGAR CREEK UNIT OWNERS
Owner Address: SUGAR CREEK OWNERS ASSOC. INC MANTEO, NC 27954

Contractor Name: Emanuelson & Dad, Inc Contractor Phone: 252-261-2212
Contractor Address: 6705 S Croatan Hwy Nags Head, NC 27959

Description: Replace storm damaged 6x16 pier section, replace 12x16 storm damaged platform
Construction Value: \$3620 Classification of Work: COMMERCIAL REPAIR

BUILDING INFORMATION

Permit #	Permit Description	Total Fees Paid/Due	Approved By:	Approved Date:
CA201901465	COMM ADD-REM-REP-ACC	\$105.00	CT	06/21/2019

Conditions of Approval:

ZONING INFORMATION

Permit #	Permit Description	Total Fees Paid/Due	Approved By:	Approved Date:
ZN201901464	ZONING PERMIT - COMM	\$0.00	KW	06/21/2019

Conditions of Approval:

- Zoning is approved for repairs to sugar creek condo HOA pier to include replacing 6 x 16 section of pier and 12 x 16 platform, no expansion permitted.
- Must comply with all provisions of CAMA Certification of Exemption issued 1-31-19 - Florence.
- Any deviation from approved scope of work will require additional review and approval.
- Final zoning and CAMA inspection required prior to issuance of Certificate of Occupancy.

Additional Conditions:

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


PLEASE NOTE:

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

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

I, the undersigned, understand that the issuance of a floodplain development permit approval is contingent upon the above information being correct and that the plans and supporting data have been or shall be provided as required, including but not limited to a proposed elevation certificate and or V-Zone certificate. Note: all elevation certificates must be signed by a professional engineer or registered land surveyor.

DECISION: Approved with Conditions (See above)


Responsible Party
6/21/19
Date

TOWN OF NAGS HEAD

PO Box 99 Nags Head, NC 27959
Phone (252) 441-7016 Fax (252) 441-4290



**Commercial Project Approval
Application # 201900487**

Property Address: 5401 SOUTH CROATAN HWY **PIN #:** 080118227049 **Parcel:** 026404000
Lot/Block/Sec: LOT: BLK: SEC: **Subdivision:** SUBDIVISION - NONE
Zoning: VILLAGE INSTITUTIONAL **Land Use:** MUNICIPAL FACILITY
Flood Zone: AE **Base Flood Elevation:** 9.0 **Regulatory Flood Elevation:** 12
Map Panel No: 0709 **Map Panel Date:** 09/20/2006 **Suffix:** Datum Used: NAVD-88

Owner Name: TOWN OF NAGS HEAD
Owner Address: P O BOX 99 NAGS HEAD, NC 27959

Contractor Name: Emanuelson & Dad, Inc **Contractor Phone:** 252-261-2212
Contractor Address: 6705 S Croatan Hwy Nags Head, NC 27959

Description: Sm bulkhead area S North Shore Rd Replace 107' of damaged bulkhead
Construction Value: \$15563 **Classification of Work:** COMMERCIAL REPAIR

BUILDING INFORMATION

Permit #	Permit Description	Total Fees Paid/Due	Approved By:	Approved Date:
CA201901460	COMM ADD-REM-REP-ACC	\$0.00	CT	06/21/2019

Conditions of Approval:

FLOOD INFORMATION

Permit #	Permit Description	Total Fees Paid/Due	Approved By:	Approved Date:
FL201901459	FLOOD PERMIT	\$0.00	CT	06/21/2019

Conditions of Approval:

ZONING INFORMATION

Permit #	Permit Description	Total Fees Paid/Due	Approved By:	Approved Date:
ZN201901458	ZONING PERMIT - COMM	0.00	KW	06/21/2019

Conditions of Approval:

Zoning permit is approved to replace approximately 107 feet of storm damaged bulkhead. Must comply with all provisions of CAMA General Permit No. 737333A (Florence). Any deviation from approved scope of work will require additional review. Final Zoning Inspection required upon completion.

Additional Conditions:

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

PLEASE NOTE:

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

(ZONING) RIGHT OF APPEAL

Pursuant to Section 48-594(b)(1) of the Nags Head Zoning Ordinance, you have the right to appeal this decision to the Nags Head Board of Adjustment within thirty (30) days of the date of this notice. This decision shall become final and unappealable if not appealed during this thirty (30) day period.

TOWN OF NAGS HEAD
PO Box 99 Nags Head, NC 27959
Phone (252) 441-7016 Fax (252) 441-4290



**Commercial Project Approval
Application # 201900494**

Property Address: 4711 SOUTH CROATAN HWY **PIN #:** 08010915030603 **Parcel:** 008712003
Lot/Block/Sec: LOT: UNIT 3, BLDG A BLK: SEC: **Subdivision:** CROATAN CENTRE
Zoning: GENERAL COMMERCIAL DISTRICT **Land Use:** SHOPPING CENTER
Flood Zone: AE

Owner Name: ELLIOTT & ASSOCIATES INC
Owner Address: PO BOX 61007 RICHMOND, VA 23261

Contractor Name: TALLEY SIGN COMPANY **Contractor Phone:** 757-287-4631
Contractor Address: 1044 RURITAN BLVD CHESAPEAKE, VA 23324

Description: Croatan Center Unit 3 Install 34.6 sq ft wall sign with face lit channel letters
Construction Value: \$750 **Classification of Work:** COMMERCIAL SIGN

BUILDING INFORMATION

Permit #	Permit Description	Total Fees Paid/Due	Approved By:	Approved Date:
SG201901463	BUILDING SIGN PERMIT	\$75.00	CT	06/21/2019

Conditions of Approval:

ZONING INFORMATION

Permit #	Permit Description	Total Fees Paid/Due	Approved By:	Approved Date:
ZS201901462	ZONING - COMMERCIAL SIGN	\$75.00	KW	06/21/2019

Conditions of Approval:

- Electrical Permit required; Must comply with all conditions of Electrical Permit
- Building Permit required; Must comply with all conditions of Building Permit
- Zoning approved for 34 sf. internally illuminated channel letter wall sign.
- Final Zoning Inspection required prior to issuance of Certificate of Compliance.

Additional Conditions:

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

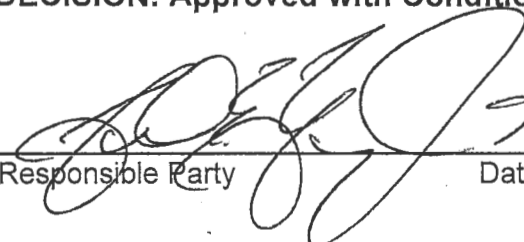
PLEASE NOTE:

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

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

I, the undersigned, understand that the issuance of a floodplain development permit approval is contingent upon the above information being correct and that the plans and supporting data have been or shall be provided as required, including but not limited to a proposed elevation certificate and or V-Zone certificate. Note: all elevation certificates must be signed by a professional engineer or registered land surveyor.

DECISION: Approved with Conditions (See above)


Responsible Party Date: 7-10-19

TOWN OF NAGS HEAD
PO Box 99 Nags Head, NC 27959
Phone (252) 441-7016 Fax (252) 441-4290



Commercial Project Approval
Application # 201900506

Property Address: 5515 SOUTH VA DARE TRL PIN #: 080118315552D1 Parcel: 012214000
Lot/Block/Sec: LOT: UNIT D-1 BLK: SEC: Subdivision: ADMIRALS VIEW CONDOMINIUM
Zoning: COMMERCIAL/RESIDENTIAL DISTRIC Land Use: MULTI-FAMILY DWELLING
Flood Zone: VE Base Flood Elevation: 11.0 Regulatory Flood Elevation: 12
Map Panel No: 0801 Map Panel Date: 09/20/2006 Suffix: J Datum Used: NAVD 1988

Owner Name: DIRICKSON, A G MASON
Owner Address: 4245 SPRING RUN RD

Contractor Name: JETTY CONSTRUCTION, LLC Contractor Phone: 252-715-1452
Contractor Address: 1002 W DEAN ST KILL DEVIL HILLS, NC 27948

Description: Admirals View D-1 Installation of impact glass slider & window, HVAC install new duct board, main supply, flex lines

Construction Value: \$25000 Classification of Work: COMMERCIAL REPAIR

BUILDING INFORMATION

Permit #	Permit Description	Total Fees Paid/Due	Approved By:	Approved Date:
CA201901532	COMM ADD-REM-REP-ACC	\$195.00	SS	06/26/2019

Conditions of Approval:

- Address #s on unit. All subs shall pull permits prior to starting work. Call for final inspection

FLOOD INFORMATION

Permit #	Permit Description	Total Fees Paid/Due	Approved By:	Approved Date:
FL201901531	FLOOD PERMIT	\$0.00	SS	06/26/2019

Conditions of Approval:

Additional Conditions:

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

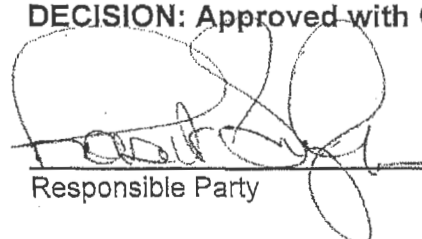
PLEASE NOTE:

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

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

I, the undersigned, understand that the issuance of a floodplain development permit approval is contingent upon the above information being correct and that the plans and supporting data have been or shall be provided as required, including but not limited to a proposed elevation certificate and or V-Zone certificate. Note: all elevation certificates must be signed by a professional engineer or registered land surveyor.

DECISION: Approved with Conditions (See above)


Responsible Party
Date: 6/26/19



TOWN OF NAGS HEAD
 PO Box 99 Nags Head, NC 27959
 Phone (252) 441-7016 Fax (252) 441-4290

Commercial Project Approval
Application # 201900507

Property Address: 6317 SOUTH VA DARE TRL **PIN #:** 08000758216405 **Parcel:** 028945000
Lot/Block/Sec: LOT: UNIT 201 BLK: SEC: A **Subdivision:** DUNES LANTERN CONDOS
Zoning: COMMERCIAL/RESIDENTIAL DISTRIC **Land Use:** MULTI-FAMILY DWELLING
Flood Zone: VE **Base Flood Elevation:** 11.0 **Regulatory Flood Elevation:** 12
Map Panel No: 0800 **Map Panel Date:** 09/20/2006 **Suffix:** J **Datum Used:** NAVD 1988

Owner Name: SNYDER, TIMOTHY W - SNYDER, MARIE C
Owner Address: 24468 TUBA CT ALDIE, VA 20105

Contractor Name: JETTY CONSTRUCTION, LLC **Contractor Phone:** 252-715-1452
Contractor Address: 1002 W DEAN ST KILL DEVIL HILLS, NC 27948

Description: Dune Lantern #201 Installation of 2 impact glass sliding doors & new HVAC
Construction Value: \$10000 **Classification of Work:** COMMERCIAL REPAIR

BUILDING INFORMATION

Permit #	Permit Description	Total Fees Paid/Due	Approved By:	Approved Date:
CA201901534	COMM ADD-REM-REP-ACC	\$135.00	SS	06/26/2019

Conditions of Approval:

- Address #s on unit. All subs shall pull permits prior to starting work. Call for final inspection

FLOOD INFORMATION

Permit #	Permit Description	Total Fees Paid/Due	Approved By:	Approved Date:
FL201901533	FLOOD PERMIT	\$0.00	SS	06/26/2019

Conditions of Approval:

Additional Conditions:

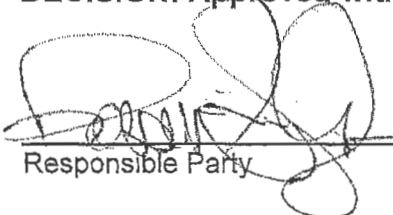
CALL FOR ALL REQUIRED INSPECTIONS; All new work to meet current code; FINAL INSPECTION REQUIRED PRIOR TO ISSUANCE OF CERTIFICATION OF COMPLIANCE

PLEASE NOTE:

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

I, the undersigned, understand that the issuance of a floodplain development permit approval is contingent upon the above information being correct and that the plans and supporting data have been or shall be provided as required, including but not limited to a proposed elevation certificate and or V-Zone certificate. Note: all elevation certificates must be signed by a professional engineer or registered land surveyor.

DECISION: Approved with Conditions (See above)


 Responsible Party _____ Date 6/26/19

TOWN OF NAGS HEAD

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

**Building Permit****RE2018-2081**

Owner Name: Lively, Robert Mitchell - Lively, Christine M	Owner 208 E Gallery Row
Owner Phone: 252 267 4016	Address: Nags Head NC 27959
Parcel PIN: 989318216590	Zoning: Imported Default District
Address: 207 E Gallery Row E	
Subdivision: NAGS HEAD SHORES REVISED BLK H	Lot/Block/Sec: LOT: 1-2 BLK: H SEC:
Contractor Name: OBX Finish Carpentry	Contractor 4320 Johnston Ln
Contractor Phone: 252 267 4016	Address: KITTYHAWK NC 27949

Description: Remove & replace rails, partitions, decking & stairs to front & rear entry

Construction Value: 8600.00	Construction Type: Repair
Foundation Type:	Heated Space: 0 Unheated Space: 0
	# of Bedrooms: 0 # of Baths: 0

Zoning Permit: see file	FEMA Flood Zone: AE
Septic Permit: na	BFE: 10
CAMA Permit: na	Flood Permit: 2018.2082
PW Permit#: na	

Conditions:

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

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

Total Fees Paid/Due: 135.00	Invoice #: 2019-00055
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- All work shall conform to all applicable North Carolina State Building codes and Ordinances of the Town of Nags Head and shall be the responsibility of the undersigned applicant.
- All work shall conform to the plans and specifications provided with the application.
- Any damage to the multi-use path or adjoining right-of-way shall be immediately repaired by the owner and/or applicant.

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

Building Inspector	06/10/2019	Responsible Party	Date
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This permit only authorizes work expressly identified in the building permit application, unless otherwise specified herein. The work done shall comply with the State Building Code and all other applicable Federal, State and local laws. The approval and issuance of this permit conveys no rights or guarantees for any future proposed modifications of this permit or the issuance of new permits for any future proposed use and development of the property.



Department of Community Development
 PO Box 8369
 1200 Duck Road
 Town of Duck, North Carolina 27949
 (252) 255-1234

Date Issued: JUN 03 2019

Permit #: JUN 03 2019
 LD19-000020

Land Disturbance Permit

Project Address: 108 SANDY RIDGE RD

PIN #: 985908890170

Property Owner: MILLER, SCOTT

Mailing Address: 3210 ANTLER DR
 DOYLESTOWN, PA 18902

Contractor:

Company Name:

Contact Name: MILLER, SCOTT

Classification:

Phone: 267-221-3316

Address: 3210 ANTLER DR

NC State License #:

Email:

DOYLESTOWN, PA 18902

Expiration Date:

Description of Work: Add second bordered drive aisle entrance and parking to accommodate 3 parking spaces. Small retaining wall along north side of parking area.

Permit Amount: 25.00

Land Disturbing Activity:

Parking	Driveway	New Septic	Stormwater Conveyance	Grading/Filling
Landscaping/Minor Grading	Irrigation	Septic Repair	Stormwater Retention	Vegetation Removal

Proposed Finished Grade (ft.):

N/A:

Driveway:

Parking:

Other:

Vegetation Management (Sq.Ft.):

N/A:

Required Coverage: 0.0

Area Preserved:

Required Plantings:

Estimated Project Cost:

\$2500.00

Permit Conditions:

- Any change or changes in the plans for development, construction or land use activities will require a re-evaluation and modification of this permit.
- Concrete driveway limited to 20 feet in width.
- All parking outside of 20 feet wide drive aisle to be gravel or semi-permeable material shall be bordered in a manner which retains the stone in the driveway area.
- Driveways and associated parking areas shall be located no closer than 5 feet to a side or rear lot line.
- No grading activity may take place within 5 feet of any lot line, except as specifically authorized and shown on approved site plan to directly match adjacent grades.
- As-built Survey required prior to CO.
- ROC/gravel surface is counted toward lot coverage. Total lot coverage cannot exceed 30%.

All provisions of laws and ordinances governing this type of work will be complied with whether specified herein or not. All land disturbing activities in association with this permit must meet the applicable land disturbing provisions of the Town of Duck Zoning Ordinance Section 156.128. The granting of this permit does not presume to give authority to violate or cancel the provisions of any other state or local law regulation. When property validated this is your permit.

5/26/2019

Applicant Signature

Date



Department of Community Development
 PO Box 8369
 1200 Duck Road
 Town of Duck, North Carolina 27949
 (252) 255-1234

Date Issued:

Permit # 04-2019
 B19-000158

Building/Floodplain Development Permit

Project Address: 104 DUCK RIDGE VILLAGE CT
Property Owner: POWER, KAREN

PIN #: 985912759677
Mailing Address: 103 DUCK RIDGE VILLAGE CT
 DUCK, NC 27949

Contractor:
Company Name: Olin Finch & Co.
Phone: 252-202-9879
Email: marcemurray@gmail.com

Contact Name: Marc Murray
Address: 116 Sandy Ridge Road
 Duck, NC 27949

Classification: General Contractor
NC State License #: 52567
Expiration Date:

Description of Work: Construction of new single family residential dwelling with detached garage, pool, parking, gazebo and septic, per submitted plan.

Use: Single Family
Structure/Work Type:
 Primary Structure: 1. New Construction
 Pool/Hot Tub: Pool Only
 Deck:
 Demo:

Accessory Building:
Bukhead (L.F.):
Pier (L.F.):
House Moving:

Permit Amount:
 2,222.15

Proposed Area Schedule (Sq.Ft.):
 Heated: 2,267 Unheated: 84 Accessory Heated: Accessory Unheated: 312

Proposed Finished Grade (ft.):
 N/A: House: 10.6 Pool: 10 Driveway: 9.8 Parking: 9 Other:

Floodplain Development:
 Flood Zone: AE-7 Structure Value: \$438,200.00 Storage Below BFE:

Vegetation Management (Sq.Ft.):
 N/A: Required Coverage: 2173.65 Area Preserved: 2920 Required Plantings: -746.3499999999999

Project Cost Estimate:

Building	Electrical	Mechanical	Plumbing	Gas	Other	Total
\$438,200.00	\$22,000.00	\$14,000.00	\$12,800.00	\$2,000.00	\$0.00	\$489,000.00

- Permit Conditions:**
- Any change or changes in the plans for development, construction or land use activities will require a re-evaluation and modification of this permit.
 - The erection (including excavation), demolition, alteration or repair of any building in a residential or business district other than between the hours of 7 am and 6 pm, Monday through Saturday is prohibited.
 - No land disturbing activity within 5 feet of property line.
 - No areas of fill, including graded and leveled areas, may exceed 3 in depth.
 - Stabilize all disturbed areas prior to CO.
 - Vegetation canopy at completion of development and prior to CO must be greater than or equal to 15% coverage of Net Lot Area. or MMV (enter s.f.).
 - All principal and accessory structures must meet MBL setbacks.
 - Pool fence height limited to six (6) feet above adjacent grade.
 - Provide Final As-Built Survey with Updated Coverage Breakdown.
 - Under construction and final elevation certificate required prior to CO.
 - Call for final inspection.

This permit is issued on the expressed condition that all information is correct and all work will comply with the State Building Code and all other applicable State and Local laws, ordinances and regulations. All provisions of laws and ordinances governing this type of work will be complied with whether specified herein or not.

Applicant Signature

5/4/2010
 Date



Department of Community Development
 PO Box 8369, 1200 Duck Road
 Town of Duck, North Carolina 27949
 (252) 255-1234

Date Issued:

JUN 04 2019

Permit #: B19-000159

Building Permit

Project Address: 1269 DUCK RD
Property Owner: LOWOOD EDUCATIONAL CENTER LLC

PIN #: 995015624755
Mailing Address: 1841 BRYANTS CORNER RD
 HARTLY, DE 19953

Contractor/Company Name: Costin Creations, LLC
Phone: (252) 261-5177
Email: travis@costincreations.com

Contact Name: Travis Costin
Address: 109 Jaycrest Road
 Duck, NC 27949

Classification: General Contractor
NC State License #: 68905
Expiration Date:

Description of Work: Convert 807 sf of garage to heated recreation room

Use:
 Single Family

Structure/Work Type:
 Primary Structure: 3.Remodel
 Pool/Hot Tub:
 Deck:
 Demo:

Permit Amount:
 \$438.50

Accessory Building:
 Bukhead (L.F.):
 Pier (L.F.):
 House Moving:

Proposed Area Schedule (Sq.Ft.): Heated: Unheated: Remodel Heated: 807 Remodel Unheated:

Proposed Finished Grade (ft.): N/A: House: Pool: Driveway: Parking: Other:

Vegetation Management (Sq.Ft.): N/A: Area Preserved: Required Coverage: 0.0 Required Plantings: 0.0

Project Cost Estimate:	Building	Electrical	Mechanical	Plumbing	Gas	Other	Total
	\$60,000.00	\$2,000.00	\$3,000.00	\$0.00	\$0.00	\$0.00	\$65,000.00

Permit Conditions:

- Any change or changes in the plans for development, construction or land use activities will require a re-evaluation and modification of this permit.
- The erection (including excavation), demolition, alteration or repair of any building in a residential or business district other than between the hours of 7 am and 6 pm, Monday through Saturday is prohibited.
- Concrete driveway limited to 20 in width.
- Driveways and associated parking areas shall be located no closer than 5 feet to a side or rear lot line.
- All parking outside of 20 feet wide drive aisle to be gravel or semi-permeable material shall be bordered in a manner which retains the stone in the driveway area.
- Stabilize all disturbed areas prior to CO.
- As-built Survey required prior to CO;
- Approved home occupation is limited to 25% of the heated area. Any increase or changes to the approved home occupation require re-evaluation and approval.
- Typical Trade inspections required.
- Call for final inspection.

This permit is issued on the expressed condition that all information is correct and all work will comply with the State Building Code and all other applicable State and Local laws, ordinances and regulations. All provisions of laws and ordinances governing this type of work will be complied with whether specified herein or not.

Applicant Signature: Travis Costin Date: 6/4/19



Department of Community Development
 PO Box 8369
 1200 Duck Road
 Town of Duck, North Carolina 27949
 (252) 255-1234

Date issued:
JUN 05 2019

Permit #:
 B19-000164

Building/Floodplain Development Permit

Project Address: 131 7 GEORGETOWN SANDS RD
Property Owner: SMITH, RONALD JAMES

PIN #: 986917115983
Mailing Address: 109 WATCH HARBOUR CIRCLE
 SMITHFIELD, VA 23430

Contractor:

Company Name: Todd Coyle Construction, LLC
Phone: (252) 261-9728
Email: tccllc@charter.net

Contact Name: Todd Coyle
Address: P O Box 1094
 Kitty Hawk, NC 27949

Classification: General Contractor
NC State License #: 60830 - U
Expiration Date:

Description of Work: Replace 275 sf of existing deck surface as well as 90 lf of existing railing; construct 90 sf of lattice

Use: Other
Permit Amount: 110.00

Structure/Work Type:
 Primary Structure:
 Pool/Hot Tub:
 Deck: Repair
 Demo:
 Accessory Building:
 Bulkhead (L.F.):
 Pier (L.F.):
 House Moving:

Proposed Area Schedule (Sq.Ft.): Heated: Unheated: Remodel Heated: Remodel Unheated: 275

Proposed Finished Grade (ft.): N/A: House: Pool: Driveway: Parking: Other:

Floodplain Development: Flood Zone: AE-9 Structure Value: Storage Below BFE:

Vegetation Management (Sq.Ft.): N/A: Required Coverage: 0.0 Area Preserved: Required Plantings: 0.0

Project Cost Estimate:	Building	Electrical	Mechanical	Plumbing	Gas	Other	Total
	\$10,000.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$10,000.00

Permit Conditions:

- Any change or changes in the plans for development, construction or land use activities will require a re-evaluation and modification of this permit.
- The erection (including excavation), demolition, alteration or repair of any building in a residential or business district other than between the hours of 7 am and 6 pm, Monday through Saturday is prohibited.
- Repair & maintenance only
- 2- 3/8" bolts required per post. All spacing of openings shall be constructed so that a 4" sphere cannot pass through.
- No change to coverage or footprint.
- Call for final inspection.

This permit is issued on the expressed condition that all information is correct and all work will comply with the State Building Code and all other applicable State and Local laws, ordinances and regulations. All provisions of laws and ordinances governing this type of work will be complied with whether specified herein or not.

6/5/19

Applicant Signature

Date



Department of Community Development
 PO Box 8369, 1200 Duck Road
 Town of Duck, North Carolina 27949
 (252) 255-1234

Date Issued:
JUN 05 2019
 Permit #:
 B19-000165

Building Permit

Project Address: 118 SPINDRIFT LN
Property Owner: TAYLOR, JAN

PIN #: 995016726934
Mailing Address: 55 LAFAYETTE ST NO 2
 ARLINGTON, MA 02474

Contractor/Company Name: Stan White Realty and Construction
Phone: (252) 261-4614
Email: cmfunk@outerbanksrentals.com

Contact Name: CM Funk
Address: P.O. Drawer 1447
 Nage Head, NC 27959

Classification: General Contractor
NC State License #:
Expiration Date:

Description of Work: Install 2 exterior deck joists sistered to existing joists; add blocking between joists near entry door; replace deck boards as needed

Use: Other	Structure/Work Type: Primary Structure: Pool/Hot Tub: Deck: Repair Demo:	Accessory Building: Bukhead (L.F.): Pier (L.F.): House Moving:
Permit Amount: \$110.00		

Proposed Area Schedule (Sq.Ft.):	Heated:	Unheated:	Accessory Heated:	Accessory Unheated:
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Proposed Finished Grade (ft.):	N/A: <input checked="" type="checkbox"/>	House:	Pool:	Driveway:	Parking:	Other:
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Vegetation Management (Sq.Ft.):	N/A: <input checked="" type="checkbox"/>	Area Preserved:	Required Coverage: 0.0	Required Plantings: 0.0
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Project Cost Estimate:	Building \$400.00	Electrical \$0.00	Mechanical \$0.00	Plumbing \$0.00	Gas \$0.00	Other \$0.00	Total \$400.00
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Permit Conditions:

- Any change or changes in the plans for development, construction or land use activities will require a re-evaluation and modification of this permit.
- The erection (including excavation), demolition, alteration or repair of any building in a residential or business district other than between the hours of 7 am and 6 pm, Monday through Saturday is prohibited.
- Repair & maintenance only
- No change to coverage or footprint.
- Call for final inspection.

This permit is issued on the expressed condition that all information is correct and all work will comply with the State Building Code and all other applicable State and Local laws, ordinances and regulations. All provisions of laws and ordinances governing this type of work will be complied with whether specified herein or not.


 Applicant Signature

6-5-19
 Date



Department of Community Development
 PO Box 8369
 1200 Duck Road
 Town of Duck, North Carolina 27949
 (252) 255-1234

Date Issued:
JUN 05 2019
 Permit #:
 B19-000156

Building/Floodplain Development Permit

Project Address: 110 WAXWING CT
 Property Owner: SMITH, ROBERT J

PIN #: 995118420451
 Mailing Address: 8621 REDWOOD DR
 VIENNA, VA 22180

Contractor:
 Company Name: Ken Green & Associates
 Phone: (252) 491-8127
 Email: kgreen@kg-a.com

Contact Name: Ken Green
 Address: P.O. Box 372
 Harbinger, NC 27941

Classification: General Contractor
 NC State License #: 68343
 Expiration Date:

Description of Work: Remove and replace decking and railings on beach walkway adding 12' to the existing walkway.

Use: Other
 Permit Amount: 100.00

Structure/Work Type:
 Primary Structure:
 Pool/Hot Tub:
 Deck: Repair
 Demo:

Accessory Building:
 Bulkhead (L.F.):
 Pier (L.F.):
 House Moving:

Proposed Area Schedule (Sq.Ft.): Heated: Unheated: Remodel Heated: Remodel Unheated: 328

Proposed Finished Grade (ft.): N/A: House: Pool: Driveway: Parking: Other:

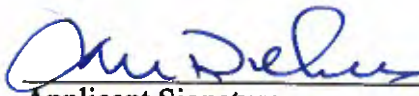
Floodplain Development: Flood Zone: VE-12 Structure Value: Storage Below BFE:


Vegetation Management (Sq.Ft.): N/A: Required Coverage: 0.0 Area Preserved: Required Plantings: 0.0

Project Cost Estimate:	Building	Electrical	Mechanical	Plumbing	Gas	Other	Total
	\$2,624.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$2,624.00

- Permit Conditions:
- Any change or changes in the plans for development, construction or land use activities will require a re-evaluation and modification of this permit.
 - The erection (including excavation), demolition, alteration or repair of any building in a residential or business district other than between the hours of 7 am and 6 pm, Monday through Saturday is prohibited.
 - Call for on-site visit prior to the start of construction.
 - Project is exempt from CAMA Minor Permit requirements pursuant to 15A NCAC 7K.0207 provided accessway remains less than 6 feet in width and is constructed so as to make negligible alteration to the dune.
 - Call for final inspection.

This permit is issued on the expressed condition that all information is correct and all work will comply with the State Building Code and all other applicable State and Local laws, ordinances and regulations. All provisions of laws and ordinances governing this type of work will be complied with whether specified herein or not.


 Applicant Signature


 Date



Department of Community Development
PO Box 8369
1200 Duck Road
Town of Duck, North Carolina 27949
(252) 255-1234

Date Issued:
06/05/2019

Permit #:
TR19-000153

Electrical Trade Permit

Project Address: 1259 DUCK RD

PIN #: 995020707934B1

Property Owner: DARE COUNTY

Mailing Address: UNKNOWN

Permit Types:

Plumbing Electrical Mechanical Gas

Contractor:

Company Name: R.A. Hoy Heating & A/C

Phone: (252) 261-2008

NC State License #: 13056

Contact Name: Douglas Wakeley

P.O. Box 179

Address:

Kitty Hawk, NC 27949

Description of Work: C/O 2.5 TON 14 SEER TRANE SYSTEM POLICE DEPT WITH T6 WIFI THERMOSTAT

Project Cost Estimate: 5,952.00

Permit Amount: 0.00

I hereby certify that all the information provided by me in support of this application is true and accurate to the best of my knowledge. I certify that I will comply with all applicable state and local laws and regulations pertaining to the work for which this permit is issued, and that I possess all trade contractor licenses required by the NC General Statutes and the NC Administrative Code. If I resign or am no longer affiliated with this project, I will notify the local authority (Town of Duck Building Inspector) immediately by phone or in person and in writing within three (3) working days.

Robin Guller 6/6/19
Applicant Signature Date



Department of Community Development
 PO Box 8369
 1200 Duck Road
 Town of Duck, North Carolina 27949
 (252) 255-1234

Date Issued:
JUN 06 2019

Permit #:
 LD19-000021

and Disturbance Permit

Project Address: 1174 DUCK RD
Property Owner: WINE DUCKS LLC
PIN #: 985916834244
Mailing Address: 1174 DUCK RD
 DUCK, NC 27949

Contractor:
Company Name: H and H Land Development
Phone: (252) 261-5413
Email:
Contact Name: Terry Lamb
Address: 313 Ascension Dr
 Kitty Hawk, NC 27948
Classification: Plumbing Contractor
NC State License #:
Expiration Date:

Description of Work: Installing a spoils tank on the south side of the building to catch oils from spa pedicures chairs and treatment room sinks; will help the new EZ Treat system run without odor

Permit Amount: 25.00

Kind Disturbing Activity:

<input type="checkbox"/> Parking	<input checked="" type="checkbox"/> Driveway	<input type="checkbox"/> New Septic	<input type="checkbox"/> Stormwater Conveyance	<input checked="" type="checkbox"/> Grading/Filling
<input type="checkbox"/> Landscaping/Minor Grading	<input type="checkbox"/> Irrigation	<input type="checkbox"/> Septic Repair	<input type="checkbox"/> Stormwater Retention	<input type="checkbox"/> Vegetation Removal

Proposed Finished Grade (ft.): N/A: Driveway: Parking: Other:

Vegetation Management (Sq.Ft.): N/A: Required Coverage: 0.0 Area Preserved: Required Plantings: [BPermit::3182::12921]

Estimated Project Cost: 11000

- Permit Conditions:**
- Any change or changes in the plans for development, construction or land use activities will require a re-evaluation and modification of this permit.
 - The erection (including excavation), demolition, alteration or repair of any building in a residential or business district other than between the hours of 7 am and 6 pm, Monday through Saturday is prohibited.
 - Area over the buried tank must be restored to its current uses for parking/access.
 - All plumbing lines within the CAMA Area of Environmental Concern (AEC) must be hand dug. No use of heavy land disturbing equipment authorized with in the AEC.

provisions of laws and ordinances governing this type of work will be complied with whether specified herein or not. All land disturbing activities in association with this permit must meet the applicable land disturbing provisions of the Town of Duck Zoning Ordinance Section 156.128. The granting of a permit does not presume to give authority to violate or cancel the provisions of any other state or local law regulation. When properly validated this is a permit.

Judith M. Jahn 6.6.19
 Applicant Signature Date



Department of Community Development
 PO Box 8369, 1200 Duck Road
 Town of Duck, North Carolina 27949
 (252) 255-1234

Date Issued: JUN 07 2019
 Permit #: B19-000155

Building Permit

Project Address: 1177 DUCK RD
Property Owner: SCARBOROUGH FAIRE IN DUCK LLC

PIN #: 985916838822
Mailing Address: 140 CULPEPER ST
 WARRENTON, VA 20186

Contractor/Company Name: W.M. Dunn Construction
Phone: (252) 261-1542
Email: mike@wmdunnconstruction.com

Contact Name: W.M. Dunn
Address: 4800 Capri Terrace
 Kitty Hawk, NC 27949

Classification: General Contractor
NC State License #: 70411
Expiration Date: 12/31/2011

Description of Work: Build out of OBX Frozen Yogurt; minor framing, trim, electrical, plumbing, and finishes- painting, flooring, cabinetry

Use:
 Commercial

Structure/Work Type:
 Primary Structure: 3.Remodel
 Pool/Hot Tub:
 Deck:
 Demo:

Accessory Building:
 Bukhead (L.F.):
 Pier (L.F.):
 House Moving:

Permit Amount:
 \$880.00

Proposed Area Schedule (Sq.Ft.): Heated: Unheated: Remodel Heated: 1100 Remodel Unheated:

Proposed Finished Grade (ft.): N/A: House: Pool: Driveway: Parking: Other:

Vegetation Management (Sq.Ft.): N/A: Area Preserved: Required Coverage: 0.0 Required Plantings: 0.0

Project Cost Estimate:	Building	Electrical	Mechanical	Plumbing	Gas	Other	Total
	\$17,000.00	\$5,000.00	\$1,000.00	\$1,000.00	\$0.00	\$0.00	\$24,000.00

Permit Conditions:

- Any change or changes in the plans for development, construction or land use activities will require a re-evaluation and modification of this permit.
- The erection (including excavation), demolition, alteration or repair of any building in a residential or business district other than between the hours of 7 am and 6 pm, Monday through Saturday is prohibited.
- No change to coverage or footprint.
- New signs will require a separate sign permit.
- Typical Trade inspections required.
- Call for final inspection.

This permit is issued on the expressed condition that all information is correct and all work will comply with the State Building Code and all other applicable State and Local laws, ordinances and regulations. All provisions of laws and ordinances governing this type of work will be complied with whether specified herein or not.


 Applicant Signature

6/07/19
 Date



Department of Community Development
PO Box 8369
1200 Duck Road
Town of Duck, North Carolina 27949
(252) 255-1234

Date Issued:
06/07/2019

Permit #:
TR19-000154

Electrical Trade Permit

Project Address: 158 SCHOONER RIDGE DR

Property Owner: SUMMER, BARBARA L

PIN #: 986909053514

Mailing Address: 3 WEST DR
MANHASSET, NY 11030

Permit Types:

Plumbing Electrical Mechanical Gas

Contractor:

Company Name: David Creecy

Phone: (252) 441-8955

NC State License #: 55113

Contact Name: David Creecy

226 Rhodoms Drive

Address:

Kill Devil Hills, NC 27948

Description of Work: Hot tub change out

Project Cost Estimate: 500.00

Permit Amount: 130.00

I hereby certify that all the information provided by me in support of this application is true and accurate to the best of my knowledge. I certify that I will comply with all applicable state and local laws and regulations pertaining to the work for which this permit is issued, and that I possess all trade contractor licenses required by the NC General Statutes and the NC Administrative Code. If I resign or am no longer affiliated with this project, I will notify the local authority (Town of Duck Building Inspector) immediately by phone or in person and in writing within three (3) working days.


Applicant Signature

6-7-19
Date



Department of Community Development
PO Box 8369
1200 Duck Road
Town of Duck, North Carolina 27949
(252) 255-1234

Date Issued:
06/07/2019

Permit #:
TR19-000155

Electrical Trade Permit

Project Address: 101 PLOVER DR
Property Owner: HOBBS, OMEY DEWEY JR

PIN #: 985920926052
Mailing Address: 300 LINDEN ST
WOODLAND, NC 27897

Permit Types:

Plumbing Electrical Mechanical Gas

Contractor:

Company Name: David Creecy
Phone: (252) 441-6955

Contact Name: David Creecy
226 Rhodoms Drive
Address:
Kill Devil Hills, NC 27948

NC State License #: 55113

Description of Work: Hot tub chang eout

Project Cost Estimate: 500.00

Permit Amount: 130.00

I hereby certify that all the information provided by me in support of this application is true and accurate to the best of my knowledge. I certify that I will comply with all applicable state and local laws and regulations pertaining to the work for which this permit is issued, and that I possess all trade contractor licenses required by the NC General Statutes and the NC Administrative Code. If I resign or am no longer affiliated with this project, I will notify the local authority (Town of Duck Building Inspector) immediately by phone or in person and in writing within three (3) working days.

Applicant Signature _____

Date _____



Department of Community Development
PO Box 8369
1200 Duck Road
Town of Duck, North Carolina 27949
(252) 255-1234

Date Issued:
06/07/2019

Permit #:
TR19-000156

Mechanical Trade Permit

Project Address: 114 CARROL DR
Property Owner: SHANER, CAROLYN S

PIN #: 995007572973
Mailing Address: 15 DORSEY PL
FORT WASHINGTON, PA 19034

Permit Types:

Plumbing Electrical Mechanical Gas

Contractor:

Company Name: All Seasons Heating & Cooling
Phone: (252) 491-9232

Contact Name: Joe Simpson
P.O. Box 244

NC State License #: H3Class1: 19091

Address:
Point Harbor, NC 27964

Description of Work: Replace downstairs system with a 2.5 ton split system heat pump and air handler

Project Cost Estimate: 6,140.00

Permit Amount: 160.00

I hereby certify that all the information provided by me in support of this application is true and accurate to the best of my knowledge. I certify that I will comply with all applicable state and local laws and regulations pertaining to the work for which this permit is issued, and that I possess all trade contractor licenses required by the NC General Statutes and the NC Administrative Code. If I resign or am no longer affiliated with this project, I will notify the local authority (Town of Duck Building Inspector) immediately by phone or in person and in writing within three (3) working days.

Applicant Signature

Date

6-7-19



Department of Community Development
PO Box 8369
1200 Duck Road
Town of Duck, North Carolina 27949
(252) 255-1234

Date Issued:
06/10/2019

Permit #:
TR19-000157

Mechanical Trade Permit

Project Address: 107 SEA COLONY DR
Property Owner: CRAWFORD, EDITH RATCLIFFE

PIN #: 985912778309

Mailing Address: 106 CHARNWOOD RD
RICHMOND, VA 23229

Permit Types:

Plumbing Electrical Mechanical Gas

Contractor:

Company Name: Atlantic Heating & Cooling, LTD

Phone: (252) 441-7642

NC State License #: 9665, H2, H3, Class 1

Contact Name: Henry Liverman

P.O. Box 132

Address:

Kill Devil Hills, NC 27948

Description of Work: Remove/replace the indoor/outdoor sections of the HVAC system using 14 SEER 3 ton Goodman heat pump/air handler.

Project Cost Estimate: 6,070.00

Permit Amount: 160.00

I hereby certify that all the information provided by me in support of this application is true and accurate to the best of my knowledge. I certify that I will comply with all applicable state and local laws and regulations pertaining to the work for which this permit is issued, and that I possess all trade contractor licenses required by the NC General Statutes and the NC Administrative Code. If I resign or am no longer affiliated with this project, I will notify the local authority (Town of Duck Building Inspector) immediately by phone or in person and in writing within three (3) working days.


Applicant Signature

6/10/19
Date



Department of Community Development
 PO Box 8369
 1200 Duck Road
 Town of Duck, North Carolina 27949
 (252) 255-1234

Date Issued:
JUN 10 2019
 Permit #:
 B19-000168

Building/Floodplain Development Permit

Project Address: 1536 DUCK RD
 Property Owner: LANMAN, BART

PIN #: 995114236901
 Mailing Address: 1233 CAVENDISH DR
 SILVER SPRING, MD 20905

Contractor:

Company Name: Beachcraft, LLC
 Phone: (252) 441-0718
 Email: beachcraftllc@yahoo.com

Contact Name: Brian McIver
 Address: 604 W. Landing Drive
 Kill Devil Hills, NC 27948

Classification: General Contractor
 NC State License #: 58810
 Expiration Date: 12/31/2012

Description of Work: Install deck on ground floor; lattice wall on north end of deck; install three overhead lights; walkway

Use:
 Other

Structure/Work Type:
 Primary Structure:
 Pool/Hot Tub:
 Deck: New
 Demo:

Accessory Building:
 Bukhead (L.F.):
 Pier (L.F.):
 House Moving:

Permit Amount:
 473.00

Proposed Area Schedule (Sq.Ft.): Heated: Unheated: 1,280 Accessory Heated: Accessory Unheated:

Proposed Finished Grade (ft.): N/A: House: Pool: Driveway: Parking: Other:

Floodplain Development: Flood Zone: AE-8 Structure Value: Storage Below BFE:

Vegetation Management (Sq.Ft.): N/A: Required Coverage: 0.0 Area Preserved: Required Plantings: 0.0

Project Cost Estimate:	Building	Electrical	Mechanical	Plumbing	Gas	Other	Total
	\$17,800.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$17,800.00

Permit Conditions:

- Any change or changes in the plans for development, construction or land use activities will require a re-evaluation and modification of this permit.
- The erection (including excavation), demolition, alteration or repair of any building in a residential or business district other than between the hours of 7 am and 6 pm, Monday through Saturday is prohibited.
- Conditions associated with Building permit B18-0095 remain in effect.
- Conditions associated with CAMA Minor Permit D-2019-421 apply.

This permit is issued on the expressed condition that all information is correct and all work will comply with the State Building Code and all other applicable State and Local laws, ordinances and regulations. All provisions of laws and ordinances governing this type of work will be complied with whether specified herein or not.

B. D. Maxwell 6/10/2019
 Applicant Signature Date



Department of Community Development
 PO Box 8369, 1200 Duck Road
 Town of Duck, North Carolina 27949
 (252) 255-1234

Date Issued: JUN 10 2019

Permit #: B19-000167

Building Permit

Project Address: 158 SCARBOROUGH LN
Property Owner: FOUR SANDS ASSOCIATES

PIN #: 986913036749
Mailing Address: P O BOX 543
 KITTY HAWK, NC 27949

Contractor/Company Name: Fulcher Homes
Phone: (252) 261-3316
Email: fulcheroc@earthlink.net

Contact Name: O.C. Fulcher
Address: P.O. Box 543
 Kitty Hawk, NC 27949

Classification: General Contractor
NC State License #: Unlimited: 17852
Expiration Date:

Description of Work: Installation of one 6x6 TW piling to support a mid-level stair landing

Use:
 Other

Structure/Work Type:
 Primary Structure:
 Pool/Hot Tub:
 Deck: **Repair**
 Demo:

Accessory Building:
 Bulkhead (L.F.):
 Pier (L.F.):
 House Moving:

Permit Amount:
 \$110.00

Proposed Area Schedule (Sq.Ft.): Heated: Unheated: Accessory Heated: Accessory Unheated:

Proposed Finished Grade (ft.): N/A: House: Pool: Driveway: Parking: Other:

Vegetation Management (Sq.Ft.): N/A: Area Preserved: Required Coverage: 0.0 Required Plantings: 0.0

Project Cost Estimate:	Building	Electrical	Mechanical	Plumbing	Gas	Other	Total
	\$275.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$275.00

Permit Conditions:

- Any change or changes in the plans for development, construction or land use activities will require a re-evaluation and modification of this permit.
- The erection (including excavation), demolition, alteration or repair of any building in a residential or business district other than between the hours of 7 am and 6 pm, Monday through Saturday is prohibited.
- Repair & maintenance only
- No change to coverage or footprint.
- Call for final inspection.

This permit is issued on the expressed condition that all information is correct and all work will comply with the State Building Code and all other applicable State and Local laws, ordinances and regulations. All provisions of laws and ordinances governing this type of work will be complied with whether specified herein or not.

O.C. Fulcher 6/10/19
 Applicant Signature Date



Department of Community Development
PO Box 8369
1200 Duck Road
Town of Duck, North Carolina 27949
(252) 255-1234

Date Issued:
06/11/2019

Permit #:
TR19-000158

Plumbing Trade Permit

Project Address: 127 PLOVER DR
Property Owner: ROBINSON, JACK D

PIN #: 986917027006
Mailing Address: 8407 OAK DR
BRANDYWINE, MD 20613

Permit Types:

Plumbing Electrical Mechanical Gas

Contractor:

Company Name: H and H Land Development
Phone: (252) 261-5413

Contact Name: Terry Lamb
313 Ascension Dr
Address:
Kitty Hawk , NC 27948

NC State License #:

Description of Work: Replace water line as the old one busted; replace with pvc pipe

Project Cost Estimate: 1,000.00

Permit Amount: 100.00

I hereby certify that all the information provided by me in support of this application is true and accurate to the best of my knowledge. I certify that I will comply with all applicable state and local laws and regulations pertaining to the work for which this permit is issued, and that I possess all trade contractor licenses required by the NC General Statutes and the NC Administrative Code. If I resign or am no longer affiliated with this project, I will notify the local authority (Town of Duck Building Inspector) immediately by phone or in person and in writing within three (3) working days.

Applicant Signature

Date



Department of Community Development
PO Box 8369
1200 Duck Road
Town of Duck, North Carolina 27949
(252) 255-1234

Date Issued:
06/11/2019

Permit #:
TR19-000159

Mechanical Trade Permit

Project Address: 126 FLIGHT DR

Property Owner: RUPERT, GERALD L SR CO-TRUSTEES

PIN #: 995007591056

Mailing Address: 12300 BLAKELY CT
SILVER SPRING, MD 20904

Permit Types:

Plumbing Electrical Mechanical Gas

Contractor:

Company Name: Surfside

Phone: (252) 261-4949

NC State License #: 20077

Contact Name: Cliff Leonard

P.O. Box 3057

Address:

Kill Devil Hills, NC 27948

Description of Work: Change out 2.5 ton heat pump and air handler; Install Carrier 14 SEER equipment

Project Cost Estimate: 5,875.00

Permit Amount: 160.00

I hereby certify that all the information provided by me in support of this application is true and accurate to the best of my knowledge. I certify that I will comply with all applicable state and local laws and regulations pertaining to the work for which this permit is issued, and that I possess all trade contractor licenses required by the NC General Statutes and the NC Administrative Code. If I resign or am no longer affiliated with this project, I will notify the local authority (Town of Duck Building Inspector) immediately by phone or in person and in writing within three (3) working days.

Applicant Signature _____

Date _____



Department of Community Development
PO Box 8369
1200 Duck Road
Town of Duck, North Carolina 27949
(252) 255-1234

Date Issued:
06/12/2019
Permit #:
TR19-000161

Mechanical Trade Permit

Project Address: 141 BAYBERRY DR
Property Owner: CECCHETTINI, KAREN COLQUITT

PIN #: 985912987501
Mailing Address: 8324 APPLE ORCH
RALEIGH, NC 27815

Permit Types:

Plumbing Electrical Mechanical Gas

Contractor:

Company Name: North Beach Services Heating and Cooling
Phone: (252) 491-2878

Contact Name: Gabby Willis
PO Box 181

NC State License #:

Address:
Kitty Hawk , NC 27949

Description of Work: Replacement HVAC system with Trane 14 Seer 1.5 ton heat pump and matching air handler

Project Cost Estimate: 5,256.00

Permit Amount: 180.00

I hereby certify that all the information provided by me in support of this application is true and accurate to the best of my knowledge. I certify that I will comply with all applicable state and local laws and regulations pertaining to the work for which this permit is issued, and that I possess all trade contractor licenses required by the NC General Statutes and the NC Administrative Code. If I resign or am no longer affiliated with this project, I will notify the local authority (Town of Duck Building Inspector) immediately by phone or in person and in writing within three (3) working days.


Applicant Signature 6/12/19
Date



Department of Community Development
PO Box 8369
1200 Duck Road
Town of Duck, North Carolina 27949
(252) 255-1234

Date Issued:
06/12/2019

Permit #:
TR19-000162

T-Pole Trade Permit

Project Address: 151 MARLIN CT

Property Owner: NELSEN, BRIAN

PIN #: 986909063320

Mailing Address: 6312 31ST ST N
ARLINGTON, VA 22207

Permit Types:

Plumbing Electrical Mechanical Gas

Contractor:

Company Name: Todd Coyle Construction, LLC

Phone: (252) 261-9728

NC State License #: 60830 - U

Contact Name: Todd Coyle

P O Box 1094

Address:

Kitty Hawk, NC 27949

Description of Work: T-Pole

Project Cost Estimate: 100.00

Permit Amount: 75.00

I hereby certify that all the information provided by me in support of this application is true and accurate to the best of my knowledge. I certify that I will comply with all applicable state and local laws and regulations pertaining to the work for which this permit is issued, and that I possess all trade contractor licenses required by the NC General Statutes and the NC Administrative Code. If I resign or am no longer affiliated with this project, I will notify the local authority (Town of Duck Building Inspector) immediately by phone or in person and in writing within three (3) working days.


Applicant Signature

6/12/19
Date



Department of Community Development
PO Box 8369
1200 Duck Road
Town of Duck, North Carolina 27949
(252) 255-1234

Date Issued:
06/12/2019

Permit #:
TR19-000163

T-Pole Trade Permit

Project Address: 104 DUCK RIDGE VILLAGE CT

Property Owner: POWER, KAREN

PIN #: 985912759677

Mailing Address: 103 DUCK RIDGE VILLAGE CT
DUCK, NC 27949

Permit Types:

Plumbing Electrical Mechanical Gas

Contractor:

Company Name: Olin Finch & Co.

Phone: 252-202-9879

NC State License #: 52567

Contact Name: Marc Murray

116 Sandy Ridge Road

Address:

Duck, NC 27949

Description of Work: T-Pole

Project Cost Estimate: 100.00

Permit Amount: 75.00

I hereby certify that all the information provided by me in support of this application is true and accurate to the best of my knowledge. I certify that I will comply with all applicable state and local laws and regulations pertaining to the work for which this permit is issued, and that I possess all trade contractor licenses required by the NC General Statutes and the NC Administrative Code. If I resign or am no longer affiliated with this project, I will notify the local authority (Town of Duck Building Inspector) immediately by phone or in person and in writing within three (3) working days.

Applicant Signature

Date



Department of Community Development
PO Box 8369
1200 Duck Road
Town of Duck, North Carolina 27949
(252) 255-1234

Date Issued:
06/13/2019

Permit #:
TR19-000164

Electrical Trade Permit

Project Address: 1386 A DUCK RD
Property Owner: RICHMAN, HOWARD R

PIN #: 995010459858
Mailing Address: 15312 BAILEY S LN
SILVER SPRING, MD 20906

Permit Types:

Plumbing Electrical Mechanical Gas

Contractor:

Company Name: Angel Advanced Technologies, LLC
Phone: (252) 256-2773

Contact Name: Matius Antonio Florez
125 S. Albetuck Road

NC State License #: 30701L

Address:
Point Harbor, NC 27964

Description of Work: Add undercabinet lighting in the kitchen and add a dedicated microwave circuit. Rewire outlets from the backsplash.

Project Cost Estimate: 1,200.00

Permit Amount: 130.00

I hereby certify that all the information provided by me in support of this application is true and accurate to the best of my knowledge. I certify that I will comply with all applicable state and local laws and regulations pertaining to the work for which this permit is issued, and that I possess all trade contractor licenses required by the NC General Statutes and the NC Administrative Code. If I resign or am no longer affiliated with this project, I will notify the local authority (Town of Duck Building Inspector) immediately by phone or in person and in writing within three (3) working days.

Applicant Signature

Date



Department of Community Development
 PO Box 8369
 1200 Duck Road
 Town of Duck, North Carolina 27949
 (252) 255-1234

Date Issued:

JUN 13 2019

Permit #: 819-000146

Building/Floodplain Development Permit

Project Address: 1560 DUCK RD
 Property Owner: TP PARCELS LLC

PIN #: 995113243954
 Mailing Address: 1100 C S. STRATFORD RD SUITE 3
 WINSTON SALEM, NC 27103

Contractor:

Company Name: Renaissance Construction Company, Inc.
 Phone: (252) 305-4461
 Email: david@renconstructobx.com

Contact Name: David Pennington
 Address: P.O. Box 1411
 Manteo, NC 27954

Classification: General Contractor
 NC State License #:
 Expiration Date:

Description of Work: new 5 bedroom single family dwelling with elevator

Use:
 Single Family

Structure/Work Type:
 Primary Structure: 1.New Construction
 Pool/Hot Tub:
 Deck: New
 Demo:

Accessory Building:
 Bukhead (L.F.):
 Pier (L.F.): 116
 House Moving:

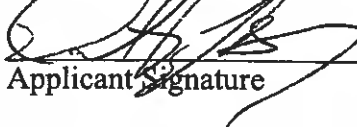
Permit Amount:
 2,717.70

Proposed Area Schedule (Sq.Ft.):	Heated: 2,468	Unheated: 1,558	Accessory Heated:	Accessory Unheated: 192			
Proposed Finished Grade (ft.):	N/A:	House:	Pool:	Driveway:	Parking:	Other:	
Floodplain Development:	Flood Zone: AE-8	Structure Value:	Storage Below BFE:				
Vegetation Management (Sq.Ft.):	N/A:	Required Coverage: 3331.2	Area Preserved: 0	Required Plantings: 3331.2			
Project Cost Estimate:	Building	Electrical	Mechanical	Plumbing	Gas	Other	Total
	\$431,835.00	\$12,977.00	\$15,925.00	\$20,739.00	\$0.00	\$0.00	\$481,476.00

Permit Conditions:

- Any change or changes in the plans for development, construction or land use activities will require a re-evaluation and modification of this permit.
- Install properly toed-in erosion control fencing around perimeter of development prior to commencing work; maintain at all times.
- The erection (including excavation), demolition, alteration or repair of any building in a residential or business district other than between the hours of 7 am and 6 pm, Monday through Saturday is prohibited.
- No land disturbing activity within 5 feet of property line.
- No additional fill is permitted.
- Stabilize all disturbed areas prior to CO.
- Vegetation canopy at completion of development and prior to CO must be greater than or equal to 15% coverage of Net Lot Area. or 3,331 s.f.
- This area is prone to significant stormwater drainage issues. The driveway apron must contain a culvert of sufficient size to convey stormwater from one side of the driveway to the other without backing up.
- All parking outside of 20 feet wide drive aisle to be gravel or semi-permeable material shall be bordered in a manner which retains the stone in the driveway area.
- Height certificate required prior to CO.
- All utilities must be elevated to the minimum regulatory flood protection elevation (BFE + 1).
- Elevation Certificate required prior rough in and CO.
- Provide Final As-Built Survey with Updated Coverage Breakdown.
- Conditions associated with CAMA General Permit 72607 apply.
- Must comply with all standards and conditions of ACOE General Permit SAW-2017-02155.

This permit is issued on the expressed condition that all information is correct and all work will comply with the State Building Code and all other applicable State and Local laws, ordinances and regulations. All provisions of laws and ordinances governing this type of work will be complied with whether specified herein or not.

 Applicant Signature
 6-13-19 Date



Department of Community Development
 PO Box 8369
 1200 Duck Road
 Town of Duck, North Carolina 27949
 (252) 255-1234

Date Issued:
JUN 14 2019
 Permit #:
 B19-000163

Building/Floodplain Development Permit

Project Address: 143 DUCK LANDING LN
 Property Owner: RUSSELL, C EDWARD JR EUX

PIN #: 986913044921
 Mailing Address: PO BOX 3700
 NORFOLK, VA 23514

Contractor:
 Company Name: Costin Creations, LLC
 Phone: (252) 261-5177
 Email: travis@costincreations.com

Contact Name: Travis Costin
 Address: 109 Jaycrest Road
 Duck, NC 27949

Classification: General Contractor
 NC State License #: 68905
 Expiration Date:

Description of Work: New 7 BR SFD with pool and elevator

Use: Single Family
 Structure/Work Type: Primary Structure: 1.New Construction
 Pool/Hot Tub: Pool Only
 Deck:
 Demo:

Permit Amount: 3,932.50

Accessory Building:
 Bukhead (L.F.):
 Pier (L.F.):
 House Moving:

Proposed Area Schedule (Sq.Ft.): Heated: 4,267 Unheated: 1,497 Accessory Heated: Accessory Unheated:

Proposed Finished Grade (ft.): N/A: House: 10.1 Pool: 9.8 Driveway: 7.5 - 9.8 Parking: 7.8- 9.8 Other:

Floodplain Development: Flood Zone: AE-9 Structure Value: Storage Below BFE:

Vegetation Management (Sq.Ft.): N/A: Required Coverage: 1926.0 Area Preserved: Required Plantings: 1926.0

Project Cost Estimate:	Building	Electrical	Mechanical	Plumbing	Gas	Other	Total
	\$705,000.00	\$30,000.00	\$30,000.00	\$30,000.00	\$0.00	\$0.00	\$795,000.00

- Permit Conditions:
- Any change or changes in the plans for development, construction or land use activities will require a re-evaluation and modification of this permit.
 - The erection (including excavation), demolition, alteration or repair of any building in a residential or business district other than between the hours of 7 am and 6 pm, Monday through Saturday is prohibited.
 - No land disturbing activity within 5 feet of property line.
 - Stabilize all disturbed areas prior to CO.
 - Vegetation canopy at completion of development and prior to CO must be greater than or equal to 15% coverage of Net Lot Area. or TR (enter s.f.).
 - Concrete driveway limited to 20 in width.
 - All parking outside of 20 feet wide drive aisle to be gravel or semi-permeable material shall be bordered in a manner which retains the stone in the driveway area.
 - Pool fence height limited to six (6) feet above adjacent grade.
 - Height certificate required prior to CO.
 - Provide Final As-Built Survey with Updated Coverage Breakdown.
 - Finished construction elevation certificate required prior to CO. All utilities must be located above RFPE (BFE + 1 = 1')

This permit is issued on the expressed condition that all information is correct and all work will comply with the State Building Code and all other applicable State and Local laws, ordinances and regulations. All provisions of laws and ordinances governing this type of work will be complied with whether specified herein or not.


 Applicant Signature

6/14/19
 Date



Department of Community Development
 PO Box 8369
 1200 Duck Road
 Town of Duck, North Carolina 27949
 (252) 255-1234

Date Issued:

JUN 14 2019

Permit #:
 B19-000170

Building/Floodplain Development Permit

Project Address: 1386 A DUCK RD
 Property Owner: RICHMAN, HOWARD R

PIN #: 995010459858
 Mailing Address: 15312 BAILEY S LN
 SILVER SPRING, MD 20906

Contractor:

Company Name: With a Twist
 Phone:
 Email: withatwist@embarqmail.com

Contact Name: Michele Darden
 Address: 2300 N Croatan Hwy
 Kill Devil Hills, NC 27948

Classification: Citizen
 NC State License #:
 Expiration Date:

Description of Work: Kitchen remodel; remove cabinets, plumbing and electrical work; add under cabinet lighting

Use:
 Single Family

Structure/Work Type:
 Primary Structure: 3.Remodel
 Pool/Hot Tub:
 Deck:
 Demo:

Accessory Building:
 Bukhead (L.F.):
 Pier (L.F.):
 House Moving:

Permit Amount:
 125.00

Proposed Area Schedule (Sq.Ft.): Heated: Unheated: Remodel Heated: Remodel Unheated: 140

Proposed Finished Grade (ft.): N/A: House: Pool: Driveway: Parking: Other:

Floodplain Development: Flood Zone: AE-7 Structure Value: Storage Below BFE:

Vegetation Management (Sq.Ft.): N/A: Required Coverage: 0.0 Area Preserved: Required Plantings: 0.0

Project Cost Estimate:	Building	Electrical	Mechanical	Plumbing	Gas	Other	Total
	\$26,326.00		\$0.00		\$0.00	\$0.00	\$26,326.00

Permit Conditions:

- Any change or changes in the plans for development, construction or land use activities will require a re-evaluation and modification of this permit.
- The erection (including excavation), demolition, alteration or repair of any building in a residential or business district other than between the hours of 7 am and 6 pm, Monday through Saturday is prohibited.
- No change to coverage or footprint.
- Sub-contractors must obtain separate permits for trade related work.
- Call for final inspection.

This permit is issued on the expressed condition that all information is correct and all work will comply with the State Building Code and all other applicable State and Local laws, ordinances and regulations. All provisions of laws and ordinances governing this type of work will be complied with whether specified herein or not.

M. Darden June 14, 19
 Applicant Signature Date



Department of Community Development
PO Box 8369
1200 Duck Road
Town of Duck, North Carolina 27949
(252) 255-1234

Date Issued:
06/14/2019
Permit #:
TR19-000165

Mechanical Trade Permit

Project Address: 135 COOK DR
Property Owner: BERRY, DOUGLAS

PIN #: 985912985881
Mailing Address: 3216 ROCKHILL RD
PERKIOMENVILLE, PA 18074

Permit Types:

Plumbing Electrical Mechanical Gas

Contractor:

Company Name: One Hour Heating & Air Conditioning
Phone: (252) 441-1740

Contact Name: Brian McDonald
P.O. Box 1415

NC State License #: 12643

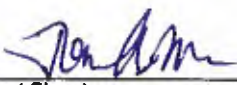
Address:
Nags Head, NC 27959

Description of Work: Replace Hvac with 15 seer 2.5 ton Carrier air handler and heat pump

Project Cost Estimate: 8,159.79

Permit Amount: 160.00

I hereby certify that all the information provided by me in support of this application is true and accurate to the best of my knowledge. I certify that I will comply with all applicable state and local laws and regulations pertaining to the work for which this permit is issued, and that I possess all trade contractor licenses required by the NC General Statutes and the NC Administrative Code. If I resign or am no longer affiliated with this project, I will notify the local authority (Town of Duck Building Inspector) immediately by phone or in person and in writing within three (3) working days.


Applicant Signature 6-14-19
Date



Department of Community Development
PO Box 8369
1200 Duck Road
Town of Duck, North Carolina 27949
(252) 255-1234

Date Issued:
06/14/2019
Permit #:
TR19-000166

Mechanical Trade Permit

Project Address: 124 BRANDON CT
Property Owner: MACBRIDE, MARSHA J

PIN #: 985920907388
Mailing Address: 1219 EARNESTINE ST
MC LEAN, VA 22101

Permit Types:

Plumbing | Electrical | Mechanical | Gas

Contractor:

Company Name: One Hour Heating & Air Conditioning
Phone: (252) 441-1740

Contact Name: Brian McDonald
P.O. Box 1415

NC State License #: 12643

Address:
Nags Head, NC 27959

Description of Work: Replace Hvac with 14 seer 4 ton Carrier air handler and heat pump

Project Cost Estimate: 7,471.00

Permit Amount: 160.00

I hereby certify that all the information provided by me in support of this application is true and accurate to the best of my knowledge. I certify that I will comply with all applicable state and local laws and regulations pertaining to the work for which this permit is issued, and that I possess all trade contractor licenses required by the NC General Statutes and the NC Administrative Code. If I resign or am no longer affiliated with this project, I will notify the local authority (Town of Duck Building Inspector) immediately by phone or in person and in writing within three (3) working days.

Jon A. Mosler 6-14-19
Applicant Signature Date



Department of Community Development
PO Box 8369
1200 Duck Road
Town of Duck, North Carolina 27949
(252) 255-1234

Date Issued:
06/14/2019

Permit #:
TR19-000167

Electrical Trade Permit

Project Address: 126 SHEARWATER WAY

Property Owner: OLD, G RAY

PIN #: 995118407830

Mailing Address: 733 FENTRESS RD
CHESAPEAKE, VA 23322

Permit Types:

Plumbing Electrical Mechanical Gas

Contractor:

Company Name: Brett Connors Electrical

Phone: (252) 453-8043

NC State License #: 18647-I

Contact Name: Brett Connors

P.O. Box 1054

Address:

Grandy, NC 27939

Description of Work: Replace rusted out 200 amp outside panel

Project Cost Estimate: 2,000.00

Permit Amount: 100.00

I hereby certify that all the information provided by me in support of this application is true and accurate to the best of my knowledge. I certify that I will comply with all applicable state and local laws and regulations pertaining to the work for which this permit is issued, and that I possess all trade contractor licenses required by the NC General Statutes and the NC Administrative Code. If I resign or am no longer affiliated with this project, I will notify the local authority (Town of Duck Building Inspector) immediately by phone or in person and in writing within three (3) working days.

Brett Connors 6-14-19
Applicant Signature Date



Department of Community Development
PO Box 8369
1200 Duck Road
Town of Duck, North Carolina 27949
(252) 255-1234

Date Issued:
06/14/2019
Permit #:
TR19-000168

Mechanical Trade Permit

Project Address: 100 East CHARLES JENKINS LN
Property Owner: CONNOR, DAVID F

PIN #: 986917107105
Mailing Address: 12709 OXON RD
HERNDON, VA 20171

Permit Types:

Plumbing Electrical Mechanical Gas

Contractor:

Company Name: R.A. Hoy Heating & A/C
Phone: (252) 261-2008

Contact Name: Douglas Wakeley
P.O. Box 179

NC State License #: 13056


Address:
Kitty Hawk, NC 27949

Description of Work: C/O 2 TON 14 SEER TRANE SYSTEM MID/GROUND LEVEL WITH T6 WIFI THERMOSTAT & 2.5 TON 14 SEER TRANE SYSTEM TOP LEVEL WITH T6 WIFI THERMOSTAT

Project Cost Estimate: 11,752.00

Permit Amount: 220.00

I hereby certify that all the information provided by me in support of this application is true and accurate to the best of my knowledge. I certify that I will comply with all applicable state and local laws and regulations pertaining to the work for which this permit is issued, and that I possess all trade contractor licenses required by the NC General Statutes and the NC Administrative Code. If I resign or am no longer affiliated with this project, I will notify the local authority (Town of Duck Building Inspector) immediately by phone or in person and in writing within three (3) working days.


Applicant Signature

6/14/19
Date



Department of Community Development
 PO Box 8369
 1200 Duck Road
 Town of Duck, North Carolina 27949
 (252) 255-1234

Date Issued:

JUN 17 2019

Permit #:
 B19-000166

Building/Floodplain Development Permit

Project Address: 116 FLIGHT DR
 Property Owner: LANE, GERALD M

PIN #: 995006487958
 Mailing Address: 209 LOOKOUT DR
 OAKDALE, PA 15071

Contractor:

Company Name: Gregory Butcher
 Phone: 252-207-8727
 Email: dbutcher@cbseaside.com

Contact Name: Gregory Butcher
 Address: 119 Lee Court
 Kill Devils Hill, NC 27948

Classification: General Contractor
 NC State License #: 47105
 Expiration Date: 03/07/2012

Description of Work: Build a 20x10 unfinished storage enclosure under existing deck area. To be built with pressure treated framing members and will have two flood vent openings

Use:
 Single Family

Structure/Work Type:
 Primary Structure: **3.Remodel**
 Pool/Hot Tub:
 Deck:
 Demo:

Accessory Building:
 Bulkhead (L.F.):
 Pier (L.F.):
 House Moving:

Permit Amount:
 125.00

Proposed Area Schedule (Sq.Ft.):	Heated:	Unheated: 200	Accessory Heated:	Accessory Unheated:			
Proposed Finished Grade (ft.):	N/A: <input checked="" type="checkbox"/>	House:	Pool:	Driveway:	Parking:	Other:	
Floodplain Development:	Flood Zone: AE-9	Structure Value:	Storage Below BFE: <input checked="" type="checkbox"/>				
Vegetation Management (Sq.Ft.):	N/A: <input checked="" type="checkbox"/>	Required Coverage: 0.0	Area Preserved:	Required Plantings: 0.0			
Project Cost Estimate:	Building	Electrical	Mechanical	Plumbing	Gas	Other	Total
	\$9,500.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$9,500.00

Permit Conditions:

- Any change or changes in the plans for development, construction or land use activities will require a re-evaluation and modification of this permit.
- The erection (including excavation), demolition, alteration or repair of any building in a residential or business district other than between the hours of 7 am and 6 pm, Monday through Saturday is prohibited.
- Elevation Certificate required prior to CO.
- Call for final inspection.

This permit is issued on the expressed condition that all information is correct and all work will comply with the State Building Code and all other applicable State and Local laws, ordinances and regulations. All provisions of laws and ordinances governing this type of work will be complied with whether specified herein or not.

Gregory Butcher 06/17/19
 Applicant Signature Date



Department of Community Development
 PO Box 8369
 1200 Duck Road
 Town of Duck, North Carolina 27949
 (252) 255-1234

Date Issued:
 06/18/2019

Permit #:
 LD19-000023

Land Disturbance/Floodplain Development Permit

Project Address: 100 Skimmer Way
 Property Owner: MORRISON, LILIAS

PIN #: 009457000

Mailing Address: PO BOX 146
 HARBINGER, NC 27941

Contractor:

Company Name: Julie's OED
 Phone: (252) 480-9280
 Email: joshua@julesoed.com

Contact Name: Josh Boyd
 Address: 101 E Helga St
 Kill Devil Hills, NC 27948

Classification: Landscaper
 NC State License #:
 Expiration Date:

Description of Work: Remove old shrubs and remove soil from property

Permit Amount: 25.00

Land Disturbing Activity:

Parking	Driveway	New Septic	Stormwater Conveyance	<input checked="" type="checkbox"/> Grading/Filling
<input checked="" type="checkbox"/> Landscaping/Minor Grading	Irrigation	Septic Repair	Stormwater Retention	<input checked="" type="checkbox"/> Vegetation Removal

Proposed Finished Grade (ft.):

N/A: Driveway: Parking: Other:

Floodplain Development:

Flood Zone: AE-8 BFE: 8

Vegetation Management (Sq.Ft.):

N/A: Required Coverage: 0.0 Area Preserved: Required Plantings:

Estimated Project Cost: 2000

Permit Conditions:

- The erection (including excavation), demolition, alteration or repair of any building in a residential or business district other than between the hours of 7 am and 6 pm, Monday through Saturday is prohibited.
- Any change or changes in the plans for development, construction or land use activities will require a re-evaluation and modification of this permit.

All provisions of laws and ordinances governing this type of work will be complied with whether specified herein or not. All land disturbing activities in association with this permit must meet the applicable land disturbing provisions of the Town of Duck Zoning Ordinance Section 156.128. The granting of this permit does not presume to give authority to violate or cancel the provisions of any other state or local law regulation. When properly validated this is your permit.

Applicant Signature:  Date: 6/18/19



Department of Community Development
 PO Box 8369
 1200 Duck Road
 Town of Duck, North Carolina 27949
 (252) 255-1234

Date Issued:

JUN 19 2019

Permit #:
 LD19-000024

Land Disturbance Permit

Project Address: 109 WOOD DUCK DR
Property Owner: BONARD, MARIE C

PIN #: 995015640789
Mailing Address: 3705 LINDA LN
 ANNANDALE, VA 22003

Contractor:

Company Name: Andy's Toolbox, LLC
Phone: (252) 261-0432
Email: andy@andys-toolbox.net

Contact Name: Andrew McConaughy
Address: P.O. Box 2557
 Kitty Hawk, NC 27949

Classification: Unlicensed Contractor
NC State License #:
Expiration Date:

Description of Work: Re-grade front yard; move soil which is encroaching upon driveway and spread it near front west property line

Permit Amount: 25.00

Land Disturbing Activity:

<input type="checkbox"/> Parking	<input type="checkbox"/> Driveway	<input type="checkbox"/> New Septic	<input type="checkbox"/> Stormwater Conveyance	<input checked="" type="checkbox"/> Grading/Filling
<input type="checkbox"/> Landscaping/Minor Grading	<input type="checkbox"/> Irrigation	<input type="checkbox"/> Septic Repair	<input type="checkbox"/> Stormwater Retention	<input type="checkbox"/> Vegetation Removal

Proposed Finished Grade (ft.): N/A: Driveway: Parking: Other:

Vegetation Management (Sq.Ft.): N/A: Required Coverage: 0.0 Area Preserved: Required Plantings:

Estimated Project Cost: 800

Permit Conditions:

- Any change or changes in the plans for development, construction or land use activities will require a re-evaluation and modification of this permit.
- The erection (including excavation), demolition, alteration or repair of any building in a residential or business district other than between the hours of 7 am and 6 pm, Monday through Saturday is prohibited.
- Stabilize all disturbed areas prior to CO.
- Call for inspection once stabilization has been completed.

All provisions of laws and ordinances governing this type of work will be complied with whether specified herein or not. All land disturbing activities in association with this permit must meet the applicable land disturbing provisions of the Town of Duck Zoning Ordinance Section 156.128. The granting of this permit does not presume to give authority to violate or cancel the provisions of any other state or local law regulation. When properly validated this is your permit.

Andrew McConaughy 6/19/19
 Applicant Signature Date



Department of Community Development
 PO Box 8369
 1200 Duck Road
 Town of Duck, North Carolina 27949
 (252) 255-1234

Date Issued:
JUN 19 2019
 Permit #:
 B19-000161

Building/Floodplain Development Permit

Project Address: 151 MARLIN CT
 Property Owner: NELSEN, BRIAN

PIN #: 986909063320
 Mailing Address: 6312 31ST ST N
 ARLINGTON, VA 22207

Contractor:

Company Name: Todd Coyle Construction, LLC
 Phone: (252) 261-9728
 Email: tccllc@charter.net

Contact Name: Todd Coyle
 Address: P O Box 1094
 Kitty Hawk, NC 27949

Classification: General Contractor
 NC State License #: 60830 - U
 Expiration Date:

Description of Work: New 7 BR SFD with pool, hot tub, concrete pool deck, dune walkway and deck, driveway, parking and septic

Use:
 Single Family

Structure/Work Type:
 Primary Structure: 1.New Construction
 Pool/Hot Tub: Pool + Portable Hot Tub
 Deck: New
 Demo:

Accessory Building:
 Bukhead (L.F.):
 Pier (L.F.):
 House Moving:

Permit Amount:
 \$4,528.75

Proposed Area Schedule (Sq.Ft.):	Heated: 4,894	Unheated: 1,679	Accessory Heated:	Accessory Unheated:			
Proposed Finished Grade (ft.):	N/A:	House:	Pool: 14	Driveway:	Parking:	Other:	
Floodplain Development:	Flood Zone: VE-12	Structure Value:	Storage Below BFE:				
Vegetation Management (Sq.Ft.):	N/A:	Required Coverage: 2,577	Area Preserved: 0	Required Plantings: 2,577			
Project Cost Estimate:	Building	Electrical	Mechanical	Plumbing	Gas	Other	Total
	\$1,000,000.00	\$45,000.00	\$25,000.00	\$50,000.00	\$5,000.00	\$0.00	\$1,125,000.00

Permit Conditions:

- Any change or changes in the plans for development, construction or land use activities will require a re-evaluation and modification of this permit.
- Call for final inspection
- No land disturbing activity within 5 feet of property line.
- Stabilize all disturbed areas prior to CO.
- Vegetation canopy at completion of development and prior to CO must be greater than or equal to 15% coverage of Net Lot Area. or 2,577 s.f. Credit will not be provided for retention of existing vegetation in oceanfront areas within the CAMA small structure setback.
- Pool fence height limited to six (6) feet above adjacent grade.
- Submit truss plans for floor system before framing inspection. *[Signature]* (Initial).
- All principal and accessory structures must meet MBL setbacks.
- Building mechanical units can be located no closer than 5 feet from any property line.
- Building mechanicals must meet the two (2) free and clear of obstruction requirements, i.e. 2 foot above highest adjacent grade.
- *[Signature]* (Initial).
- Elevation Certificate Required prior to Rough In and CO.
- Height certificate required prior to CO.
- As-built Survey required prior to CO.
- Conditions associated with CAMA Minor Permit D-2019-422 apply.

This permit is issued on the expressed condition that all information is correct and all work will comply with the State Building Code and all other applicable State and Local laws, ordinances and regulations. All provisions of laws and ordinances governing this type of work will be complied with whether specified herein or not.

[Signature]
 Applicant Signature
 6/19/19
 Date



Department of Community Development
 PO Box 8369, 1200 Duck Road
 Town of Duck, North Carolina 27949
 (252) 255-1234

Date Issued:
JUN 19 2019
 Permit #:
 B19-000162

Building Permit

Project Address: 1203 DUCK RD
Property Owner: TOWNEBANK

PIN #: 985916843991L1
Mailing Address: ATTN: ESCROW SERVICES
 PO BOX 5310
 GLEN ALLEN, VA 23058

Contractor/Company Name: Sussex Development Corporation **Contact Name:** Danielle Hangen **Classification:** General Contractor
Phone: **Address:** 109 S. Lynnhaven Road, Suite 200 **NC State License #:**
Email: projects@sussexdevelopment.com **Virginia Beach, VA 23452** **Expiration Date:**

Description of Work: Remodel of an existing commercial building into a new Towne Bank branch

Use: Commercial **Structure/Work Type:** Primary Structure: 3.Remodel
Permit Amount: \$2,018.40 **Pool/Hot Tub:** **Accessory Building:**
Deck: Bukhead (L.F.):
Demo: Pier (L.F.):
 House Moving:

Proposed Area Schedule (Sq.Ft.): Heated: Unheated: Remodel Heated: 2,523 Remodel Unheated:

Proposed Finished Grade (ft.): N/A: ✓ House: Pool: Driveway: Parking: Other:

Vegetation Management (Sq.Ft.): N/A: ✓ Area Preserved: Required Coverage: 0.0 Required Plantings: 0.0

Project Cost Estimate:	Building	Electrical	Mechanical	Plumbing	Gas	Other	Total
	\$354,000.00	\$63,000.00	\$7,500.00	\$25,000.00	\$0.00	\$0.00	\$449,500.00

Permit Conditions:

- Any change or changes in the plans for development, construction or land use activities will require a re-evaluation and modification of this permit.
- The erection (including excavation), demolition, alteration or repair of any building in a residential or business district other than between the hours of 7 am and 6 pm, Monday through Saturday is prohibited.
- No change to coverage or footprint.
- A separate permit will be required signs.
- Typical trade inspections.
- This is a Substantial Improvement Project. Other areas of the building may require upgrading to meet current building codes including structural, mechanical and egress standards.
- Call for final inspection.

This permit is issued on the expressed condition that all information is correct and all work will comply with the State Building Code and all other applicable State and Local laws, ordinances and regulations. All provisions of laws and ordinances governing this type of work will be complied with whether specified herein or not.

Re Horton
 Applicant Signature 6/19/19
 Date



Department of Community Development
PO Box 8369
1200 Duck Road
Town of Duck, North Carolina 27949
(252) 255-1234

Date Issued:
06/19/2019
Permit #:
TR19-000160

Electrical Trade Permit

Project Address: 102 VIREO WAY

Property Owner: DAUGHERTY FAMILY REALTY HOLDINGS, LLC

PIN #: 995114335385

Mailing Address: 29 FLORAL ST
CHATHAM, NJ 07928

Permit Types:

Plumbing Electrical Mechanical Gas

Contractor:

Company Name: BRS Electrical Services, Inc.

Phone: (252) 441-5334

NC State License #: 23077-U

Contact Name: BRS Electrical Services, INC Brad Smith

PO Box 2108

Address:

Kill Devil Hills, NC 27939

Description of Work: Replace meterbase and service feeder

Project Cost Estimate: 2,200.00

Permit Amount: 100.00

I hereby certify that all the information provided by me in support of this application is true and accurate to the best of my knowledge. I certify that I will comply with all applicable state and local laws and regulations pertaining to the work for which this permit is issued, and that I possess all trade contractor licenses required by the NC General Statutes and the NC Administrative Code. If I resign or am no longer affiliated with this project, I will notify the local authority (Town of Duck Building Inspector) immediately by phone or in person and in writing within three (3) working days.

Applicant Signature _____

Date _____



Department of Community Development
PO Box 8369
1200 Duck Road
Town of Duck, North Carolina 27949
(252) 255-1234

Date Issued:
06/19/2019
Permit #:
TR19-000169

Mechanical Trade Permit

Project Address: 117 B313 SEA COLONY DR
Property Owner: LENTHALL, NANCY

PIN #: 98590897572245
Mailing Address: 305 E MCGINNIS CIR
NORFOLK, VA 23502

Permit Types:

Plumbing Electrical Mechanical Gas

Contractor:

Company Name: North Beach Services Heating and Cooling
Phone: (252) 491-2878

Contact Name: Gabby Willis

PO Box 181

Address:

Kitty Hawk, NC 27949

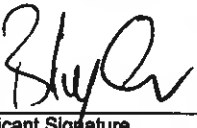
NC State License #:

Description of Work: Replacement of a/c unit with York 1.5 ton ac cooling unit

Project Cost Estimate: 2,598.00

Permit Amount: 160.00

I hereby certify that all the information provided by me in support of this application is true and accurate to the best of my knowledge. I certify that I will comply with all applicable state and local laws and regulations pertaining to the work for which this permit is issued, and that I possess all trade contractor licenses required by the NC General Statutes and the NC Administrative Code. If I resign or am no longer affiliated with this project, I will notify the local authority (Town of Duck Building Inspector) immediately by phone or in person and in writing within three (3) working days.


Applicant Signature

6/21/19
Date



Department of Community Development
PO Box 8369
1200 Duck Road
Town of Duck, North Carolina 27949
(252) 255-1234

Date Issued:
06/20/2019

Permit #:
TR19-000170

Electrical Trade Permit

Project Address: 1174 DUCK RD
Property Owner: WINE DUCKS LLC

PIN #: 985916834244
Mailing Address: 1174 DUCK RD
DUCK, NC 27949

Permit Types:

Plumbing Electrical Mechanical Gas

Contractor:

Company Name: BRS Electrical Services, Inc.
Phone: (252) 441-5334

Contact Name: BRS Electrical Services, INC Brad Smith
PO Box 2108

NC State License #: 23077-U

Address:
Kill Devil Hills, NC 27939

Description of Work: Wiring of new EZ Treat system; repair of existing lighting conduits

Project Cost Estimate: 20,000.00

Permit Amount: 130.00

I hereby certify that all the information provided by me in support of this application is true and accurate to the best of my knowledge. I certify that I will comply with all applicable state and local laws and regulations pertaining to the work for which this permit is issued, and that I possess all trade contractor licenses required by the NC General Statutes and the NC Administrative Code. If I resign or am no longer affiliated with this project, I will notify the local authority (Town of Duck Building Inspector) immediately by phone or in person and in writing within three (3) working days.

Applicant Signature

Date



Department of Community Development
PO Box 8369
1200 Duck Road
Town of Duck, North Carolina 27949
(252) 255-1234

Date Issued:
06/21/2019
Permit #:
TR19-000172

Mechanical Trade Permit

Project Address: 135 MARTIN LN
Property Owner: KLINE, EDWARD

PIN #: 995114247288
Mailing Address: 8016 BUCKHALL RD
MANASSAS, VA 20111

Permit Types:

Plumbing Electrical Mechanical Gas

Contractor:

Company Name: R.A. Hoy Heating & A/C
Phone: (252) 261-2008

NC State License #: 13056

Contact Name: Douglas Wakeley
P.O. Box 179
Address:
Kitty Hawk, NC 27949

Description of Work: C/O 2 TON 14 SEER TRANE SYSTEM WITH T6 THERMOSTAT

Project Cost Estimate: 5,924.00

Permit Amount: 160.00

I hereby certify that all the information provided by me in support of this application is true and accurate to the best of my knowledge. I certify that I will comply with all applicable state and local laws and regulations pertaining to the work for which this permit is issued, and that I possess all trade contractor licenses required by the NC General Statutes and the NC Administrative Code. If I resign or am no longer affiliated with this project, I will notify the local authority (Town of Duck Building Inspector) immediately by phone or in person and in writing within three (3) working days.

Rob Gully 6/21/19
Applicant Signature Date



Department of Community Development
PO Box 8369
1200 Duck Road
Town of Duck, North Carolina 27949
(252) 255-1234

Date Issued:
06/21/2019

Permit #:
TR19-000173

Mechanical Trade Permit

Project Address: 120 VIREO WAY
Property Owner: LLEWELLYN, RONALD L

PIN #: 995114332681
Mailing Address: 905 VIRGINIA AVE
FRONT ROYAL, VA 22630

Permit Types:

Plumbing Electrical Mechanical Gas

Contractor:

Company Name: R.A. Hoy Heating & A/C
Phone: (252) 261-2008

NC State License #: 13056

Contact Name: Douglas Wakeley
P.O. Box 179

Address:
Kitty Hawk, NC 27949

Description of Work: C/O 2 TON 16 SEER TRANE OUTDOOR UNIT ONLY

Project Cost Estimate: 4,200.00

Permit Amount: 160.00

I hereby certify that all the information provided by me in support of this application is true and accurate to the best of my knowledge. I certify that I will comply with all applicable state and local laws and regulations pertaining to the work for which this permit is issued, and that I possess all trade contractor licenses required by the NC General Statutes and the NC Administrative Code. If I resign or am no longer affiliated with this project, I will notify the local authority (Town of Duck Building Inspector) immediately by phone or in person and in writing within three (3) working days.

 6/21/19
Applicant Signature Date



Department of Community Development
PO Box 8369
1200 Duck Road
Town of Duck, North Carolina 27949
(252) 255-1234

Date Issued:
06/21/2019
Permit #:
TR19-000174

Mechanical Trade Permit

Project Address: 135 SHIPS WATCH DR
Property Owner: SHIPS WATCH ASSOCIATION

PIN #: 98590888640
Mailing Address: 1251 DUCK RD
KITTY HAWK, NC 27949

Permit Types:

Plumbing Electrical Mechanical Gas

Contractor:

Company Name: North Beach Services Heating and Cooling
Phone: (252) 491-2878

Contact Name: Gabby Willis
PO Box 181

NC State License #:

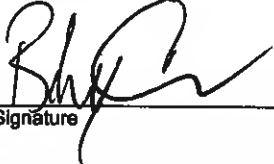
Address:
Kitty Hawk, NC 27949

Description of Work: Replacement of lower level HVAC system with Trane heat pump and air handler

Project Cost Estimate: 4,833.00

Permit Amount: 160.00

I hereby certify that all the information provided by me in support of this application is true and accurate to the best of my knowledge. I certify that I will comply with all applicable state and local laws and regulations pertaining to the work for which this permit is issued, and that I possess all trade contractor licenses required by the NC General Statutes and the NC Administrative Code. If I resign or am no longer affiliated with this project, I will notify the local authority (Town of Duck Building Inspector) immediately by phone or in person and in writing within three (3) working days.


Applicant Signature _____ Date 6/21/19



Department of Community Development
 PO Box 8369
 1200 Duck Road
 Town of Duck, North Carolina 27949
 (252) 255-1234

Date Issued:

JUN 21 2019

Permit #:
 B19-000174

Building/Floodplain Development Permit

Project Address: 111 ROYAL TERN LN
Property Owner: JOHNSON, BETTY

PIN #: 995118305707
Mailing Address: 3521 FRANCES BERKELY
 WILLIAMSBURG, VA 23188

Contractor:

Company Name: Beach Constructoin Group, LLC
Phone: (252) 441-8224
Email: liz@beachpainting.com

Contact Name: Elizabeth Brauer
Address: 1496 Colington Rd.
 Kill Devil Hills, NC 27948

Classification: General Contractor
NC State License #:
Expiration Date:

Description of Work: Remove and rebuild front and back entry stairs, pickets and rails. No change in structure/ footprint.

Use:
 Other

Structure/Work Type:

Primary Structure:
 Pool/Hot Tub:
 Deck: **Repair**
 Demo:

Accessory Building:
 Bukhead (L.F.):
 Pier (L.F.):
 House Moving:

Permit Amount:
 110.00

Proposed Area Schedule (Sq.Ft.): Heated: Unheated: Accessory Heated: Accessory Unheated:

Proposed Finished Grade (ft.): N/A: House: Pool: Driveway: Parking: Other:

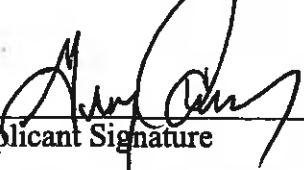
Floodplain Development: Flood Zone: AE-7 Structure Value: Storage Below BFE:

Vegetation Management (Sq.Ft.): N/A: Required Coverage: 0.0 Area Preserved: Required Plantings: 0.0

Project Cost Estimate:	Building	Electrical	Mechanical	Plumbing	Gas	Other	Total
	\$15,000.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$15,000.00

- Permit Conditions:**
- Any change or changes in the plans for development, construction or land use activities will require a re-evaluation and modification of this permit.
 - The erection (including excavation), demolition, alteration or repair of any building in a residential or business district other than between the hours of 7 am and 6 pm, Monday through Saturday is prohibited.
 - Repair & maintenance only
 - No change to coverage or footprint.
 - 2- 3/8" bolts required per post. All spacing of openings shall be constructed so that a 4" sphere cannot pass through.
 - Call for final inspection.

This permit is issued on the expressed condition that all information is correct and all work will comply with the State Building Code and all other applicable State and Local laws, ordinances and regulations. All provisions of laws and ordinances governing this type of work will be complied with whether specified herein or not.


 Applicant Signature

6/21/19
 Date



Department of Community Development
 PO Box 8369
 1200 Duck Road
 Town of Duck, North Carolina 27949
 (252) 255-1234

Date Issued:

JUN 25 2019

Permit #:
 LD19-000022

Land Disturbance/Floodplain Development Permit

Project Address: 1314 DUCK RD
Property Owner: NOR BANKS INC

PIN #: 995015620790
Mailing Address: 1310 DUCK RD
 KITTY HAWK, NC 27949

Contractor:

Company Name:

Contact Name: NOR BANKS INC

Classification:

Phone:

Address: 1310 DUCK RD

NC State License #:

Email:

KITTY HAWK, NC 27949

Expiration Date:

Description of Work: Pavers/ landscaping improvements

Permit Amount: 25.00

Land Disturbing Activity:

- | | | | | |
|---|-------------------------------------|--|--|---|
| <input type="checkbox"/> Parking | <input type="checkbox"/> Driveway | <input type="checkbox"/> New Septic | <input type="checkbox"/> Stormwater Conveyance | <input type="checkbox"/> Grading/Filling |
| <input checked="" type="checkbox"/> Landscaping/Minor Grading | <input type="checkbox"/> Irrigation | <input type="checkbox"/> Septic Repair | <input type="checkbox"/> Stormwater Retention | <input type="checkbox"/> Vegetation Removal |

Proposed Finished Grade (ft.):

N/A:

Driveway:

Parking:

Other:

Floodplain Development:

Flood Zone: AE-7

BFE: 7

Vegetation Management (Sq.Ft.):

N/A:

Required Coverage: 0.0

Area Preserved:

Required Plantings::

Estimated Project Cost: \$3200.00

Permit Conditions:

- The erection (including excavation), demolition, alteration or repair of any building in a residential or business district other than between the hours of 7 am and 6 pm, Monday through Saturday is prohibited.
- Any change or changes in the plans for development, construction or land use activities will require a re-evaluation and modification of this permit.
- Stabilize all disturbed areas prior to CO.
- An as-built survey will not be required for this permit, but an updated survey documenting lot coverage may be required in association with future development.
- Conditions associated with CAMA Minor Permit D-2019-423 apply. Coverage within the CAMA AEC may not exceed 30%.

All provisions of laws and ordinances governing this type of work will be complied with whether specified herein or not. All land disturbing activities in association with this permit must meet the applicable land disturbing provisions of the Town of Duck Zoning Ordinance Section 156.128. The granting of this permit does not presume to give authority to violate or cancel the provisions of any other state or local law regulation. When properly validated this is your permit.


 Applicant Signature


 Date



Department of Community Development
 PO Box 8369
 1200 Duck Road
 Town of Duck, North Carolina 27949
 (252) 255-1234

Date Issued:

JUN 25 2019

Permit #:
 B19-000173

Building/Floodplain Development Permit

Project Address: 1245 218 DUCK RD
Property Owner: ALL HANS ON DECK LLC

PIN #: 98590898258018
Mailing Address: 4134 KOTTLER DR
 LAFAYETTE HILL, PA 19444

Contractor:
Company Name: Albemarle Contracting Services
Phone: (252) 599-2999
Email: acs.obx@charter.net

Contact Name: Jason James
Address: P.O. Box 1771
 Nags Head, NC 27959

Classification: General Contractor
NC State License #: 58406
Expiration Date: 12/31/2014

Description of Work: Remodel kitchen, bath, new floors, paint and trim; new cabinets and countertops

Use:
 Multi Family

Structure/Work Type:
 Primary Structure: 3.Remodel
 Pool/Hot Tub:
 Deck:
 Demo:

Accessory Building:
 Bukhead (L.F.):
 Pier (L.F.):
 House Moving:

Permit Amount:
 290.00

Proposed Area Schedule (Sq.Ft.): Heated: Unheated: Remodel Heated: 350 Remodel Unheated:

Proposed Finished Grade (ft.): N/A: House: Pool: Driveway: Parking: Other:

Floodplain Development: Flood Zone: VE-12 Structure Value: Storage Below BFE:

Vegetation Management (Sq.Ft.): N/A: Required Coverage: 0.0 Area Preserved: Required Plantings: 0.0

Project Cost Estimate:	Building	Electrical	Mechanical	Plumbing	Gas	Other	Total
	\$80,000.00	\$5,000.00	\$0.00	\$5,000.00	\$0.00	\$0.00	\$90,000.00

Permit Conditions:

- Any change or changes in the plans for development, construction or land use activities will require a re-evaluation and modification of this permit.
- Repair & maintenance only
- No change to coverage or footprint.
- Typical trade inspections required.
- Call for final inspection.

This permit is issued on the expressed condition that all information is correct and all work will comply with the State Building Code and all other applicable State and Local laws, ordinances and regulations. All provisions of laws and ordinances governing this type of work will be complied with whether specified herein or not.

Applicant Signature

Date

6/25/19



Department of Community Development
 PO Box 8369, 1200 Duck Road
 Town of Duck, North Carolina 27949
 (252) 255-1234

Date Issued:
JUN 25 2019
 Permit #: B19-000171

Building Permit

Project Address: 130 COOK DR
Property Owner: EARP, EDWINA

PIN #: 985912961997
Mailing Address: 900 BOXWOOD AVE
 WESTMINSTER, MD 21157

Contractor/Company Name: Aubrey C. Kitchin
Phone: (252) 202-8520
Email:

Contact Name: Aubrey Kitchin
Address: 114 Seahawk Drive West
 Duck, NC 27949

Classification: General Contractor
NC State License #: 16865
Expiration Date: 12/31/2010

Description of Work: Replace plumbing fixtures in two bathrooms and refinish three bedroom ceilings

Use:
 Single Family

Structure/Work Type:
 Primary Structure: 3.Remodel
 Pool/Hot Tub:
 Deck:
 Demo:

Accessory Building:
 Bukhead (L.F.):
 Pier (L.F.):
 House Moving:

Permit Amount:
 \$110.00

Proposed Area Schedule (Sq.Ft.): Heated: Unheated: Accessory Heated: Accessory Unheated:

Proposed Finished Grade (ft.): N/A: House: Pool: Driveway: Parking: Other:

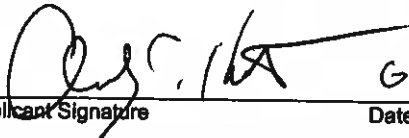
Vegetation Management (Sq.Ft.): N/A: Area Preserved: Required Coverage: 0.0 Required Plantings: 0.0

Project Cost Estimate:	Building	Electrical	Mechanical	Plumbing	Gas	Other	Total
	\$6,000.00	\$0.00	\$0.00	\$5,100.00	\$0.00	\$0.00	\$11,100.00

Permit Conditions:

- Any change or changes in the plans for development, construction or land use activities will require a re-evaluation and modification of this permit.
- The erection (including excavation), demolition, alteration or repair of any building in a residential or business district other than between the hours of 7 am and 6 pm, Monday through Saturday is prohibited.
- No change to coverage or footprint.
- Typical trade inspections required.
- Call for final inspection.

This permit is issued on the expressed condition that all information is correct and all work will comply with the State Building Code and all other applicable State and Local laws, ordinances and regulations. All provisions of laws and ordinances governing this type of work will be complied with whether specified herein or not.


 Applicant Signature 6-25-19
 Date



Department of Community Development
PO Box 8369
1200 Duck Road
Town of Duck, North Carolina 27949
(252) 255-1234

Date Issued:
06/25/2019

Permit #:
TR19-000175

Mechanical Trade Permit

Project Address: 113 BALDPATE DR
Property Owner: MOORE, GERALD N

PIN #: 995015634916
Mailing Address: 180 BANYAN BAY DR
SAINT PETERSBURG, FL 33705

Permit Types:

Plumbing Electrical Mechanical Gas

Contractor:

Company Name: Master Heating & Cooling, Inc.
Phone: (252) 255-0095

Contact Name: Susan or Elaine Master Heating & Cooling, Inc.
P.O. Box 707

NC State License #: 18066

Address:
Kitty Hawk, NC 27949

Description of Work: Replacement of 2.5 Ton HVAC heat pump system at the top level, 14 SEER, R410A refrigerant, Brand Lennox

Project Cost Estimate: 3,500.00

Permit Amount: 160.00

I hereby certify that all the information provided by me in support of this application is true and accurate to the best of my knowledge. I certify that I will comply with all applicable state and local laws and regulations pertaining to the work for which this permit is issued, and that I possess all trade contractor licenses required by the NC General Statutes and the NC Administrative Code. If I resign or am no longer affiliated with this project, I will notify the local authority (Town of Duck Building Inspector) immediately by phone or in person and in writing within three (3) working days.

Applicant Signature

Date

Susan Mitchell 6/28/19



Department of Community Development
PO Box 8369
1200 Duck Road
Town of Duck, North Carolina 27949
(252) 255-1234

Date Issued:
06/26/2019

Permit #:
TR19-000176

Mechanical Trade Permit

Project Address: 110 BLUE HERON LN
Property Owner: ANSTROM, S DECKER TTEE

PIN #: 995118412867
Mailing Address: 2929 38TH ST NW
WASHINGTON, DC 20016

Permit Types:

Plumbing Electrical Mechanical Gas

Contractor:

Company Name: Delta T
Phone: (252) 256-2436

Contact Name: Edwin Miller
162 Yaupon Trail

NC State License #: 23299 Class III

Address:
Kitty Hawk, NC 27949

Description of Work: Upper level air handler replacement with an American Standard system; new drain pan outdoor unit

Project Cost Estimate: 3,600.00

Permit Amount: 160.00

I hereby certify that all the information provided by me in support of this application is true and accurate to the best of my knowledge. I certify that I will comply with all applicable state and local laws and regulations pertaining to the work for which this permit is issued, and that I possess all trade contractor licenses required by the NC General Statutes and the NC Administrative Code. If I resign or am no longer affiliated with this project, I will notify the local authority (Town of Duck Building Inspector) immediately by phone or in person and in writing within three (3) working days.


Applicant Signature

26 Jun 19
Date



Department of Community Development
 PO Box 8369
 1200 Duck Road
 Town of Duck, North Carolina 27949
 (252) 255-1234

Date Issued:
JUN 26 2019

Permit #:
 B18-000289

Building/Floodplain Development Permit

Project Address: 116 SEABREEZE DR
 Property Owner: WARREN, ROBERT M

PIN #: 986917019745
 Mailing Address: 2810 CHARTER DR
 MIDLOTHIAN, VA 23113

Contractor:
 Company Name: 3 Pony Property Services
 Phone:
 Email: obx3pony@gmail.com

Contact Name: Brian Huber
 Address: PO Box 1881
 Kill Devil Hills, NC 27948

Classification: General Contractor
 NC State License #:
 Expiration Date:

Description of Work: Add partial roof over existing front deck

Use:
 Single Family

Structure/Work Type:
 Primary Structure: 2.Addition
 Pool/Hot Tub:
 Deck: Repair
 Demo:

Permit Amount:
 125.00

Accessory Building:
 Bukhead (L.F.):
 Pier (L.F.):
 House Moving:

Proposed Area Schedule (Sq.Ft.):	Heated:	Unheated: 128	Accessory Heated:	Accessory Unheated:		
Proposed Finished Grade (ft.):	N/A: <input checked="" type="checkbox"/>	House:	Pool:	Driveway:	Parking:	Other:

Floodplain Development: Flood Zone: AE-9 Structure Value: Storage Below BFE:

Vegetation Management (Sq.Ft.): N/A: Required Coverage: 0.0 Area Preserved: Required Plantings: 0.0

Project Cost Estimate:	Building	Electrical	Mechanical	Plumbing	Gas	Other	Total
	\$3,500.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$3,500.00

- Permit Conditions:
- Any change or changes in the plans for development, construction or land use activities will require a re-evaluation and modification of this permit.
 - The erection (including excavation), demolition, alteration or repair of any building in a residential or business district other than between the hours of 7 am and 6 pm, Monday through Saturday is prohibited.
 - Provide Final As-Built Survey with Updated Coverage Breakdown. _____ (Initial)
 - Call for final inspection.

This permit is issued on the expressed condition that all information is correct and all work will comply with the State Building Code and all other applicable State and Local laws, ordinances and regulations. All provisions of laws and ordinances governing this type of work will be complied with whether specified herein or not.

[Signature]
 Applicant Signature
 6-26-19
 Date



Department of Community Development
 PO Box 8369
 1200 Duck Road
 Town of Duck, North Carolina 27949
 (252) 255-1234

Date issued:

JUN 26 2019
 Permit #:
 B19-000175

Building/Floodplain Development Permit

Project Address: 106 GANNET LN
 Property Owner: RASKIN, JAMES

PIN #: 995114320500
 Mailing Address: 5215 NEW PROSPECT CT
 ELLICOTT CITY, MD 21043

Contractor:
 Company Name: Ken Green & Associates
 Phone: (252) 491-8127
 Email: kgreen@kg-a.com

Contact Name: Ken Green
Address: P.O. Box 372
 Harbinger, NC 27941

Classification: General Contractor
NC State License #: 68343
Expiration Date:

Description of Work: Addendum to Permit B19-0148; Replace 2nd floor deck and railings

Use: Other

Structure/Work Type:
 Primary Structure:
 Pool/Hot Tub:
 Deck: Repair
 Demo:

Accessory Building:
 Bukhead (L.F.):
 Pier (L.F.):
 House Moving:

Permit Amount:
 100.00

Proposed Area Schedule (Sq.Ft.): Heated: Unheated: Remodel Heated: Remodel Unheated: 126

Proposed Finished Grade (ft.): N/A: House: Pool: Driveway: Parking: Other:

Floodplain Development: Flood Zone: AE-7 Structure Value: Storage Below BFE:

Vegetation Management (Sq.Ft.): N/A: Required Coverage: 0.0 Area Preserved: Required Plantings: 0.0

Project Cost Estimate:	Building	Electrical	Mechanical	Plumbing	Gas	Other	Total
	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$2400.00

Permit Conditions:

- Any change or changes in the plans for development, construction or land use activities will require a re-evaluation and modification of this permit.
- The erection (including excavation), demolition, alteration or repair of any building in a residential or business district other than between the hours of 7 am and 6 pm, Monday through Saturday is prohibited.
- Repair & maintenance only
- No change to coverage or footprint.
- 2- 3/8" bolts required per post. All spacing of openings shall be constructed so that a 4" sphere cannot pass through.
- Call for final inspection.

This permit is issued on the expressed condition that all information is correct and all work will comply with the State Building Code and all other applicable State and Local laws, ordinances and regulations. All provisions of laws and ordinances governing this type of work will be complied with whether specified herein or not.


 Applicant Signature

6-27-19
 Date



Department of Community Development
PO Box 8369
1200 Duck Road
Town of Duck, North Carolina 27949
(252) 255-1234

Date Issued:
06/27/2019

Permit #:
TR19-000178

Mechanical Trade Permit

Project Address: 1367 DUCK RD

Property Owner: HARRIS, JACK

PIN #: 995010468868

Mailing Address: 10612 KRENMORE LN
CHESTER, VA 23831

Permit Types:

Plumbing Electrical Mechanical Gas

Contractor:

Company Name: Surfside

Phone: (252) 261-4949

NC State License #: 20077

Contact Name: Cliff Leonard

P.O. Box 3057

Address:

Kill Devil Hills, NC 27948

Description of Work: Change out 1.5 ton heat pump and air handler

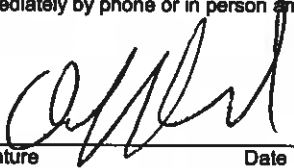
Project Cost Estimate: 5,875.00

Permit Amount: 160.00

I hereby certify that all the information provided by me in support of this application is true and accurate to the best of my knowledge. I certify that I will comply with all applicable state and local laws and regulations pertaining to the work for which this permit is issued, and that I possess all trade contractor licenses required by the NC General Statutes and the NC Administrative Code. If I resign or am no longer affiliated with this project, I will notify the local authority (Town of Duck Building Inspector) immediately by phone or in person and in writing within three (3) working days.

Applicant Signature

Date

 6/27/19



Department of Community Development
PO Box 8369
1200 Duck Road
Town of Duck, North Carolina 27949
(252) 255-1234

Date Issued:
06/28/2019
Permit #:
TR19-000177

Mechanical Trade Permit

Project Address: 139 SCHOONER RIDGE DR
Property Owner: KAVIT, GARY S

PIN #: 986909050278
Mailing Address: 715 KANAWAH RUN
YORKTOWN, VA 23693

Permit Types:

Plumbing Electrical Mechanical Gas

Contractor:

Company Name: Master Heating & Cooling, Inc.
Phone: (252) 255-0095

Contact Name: Susan or Elaine Master Heating & Cooling, Inc.
P.O. Box 707

NC State License #: 18066

Address:
Kitty Hawk, NC 27949

Description of Work: Replacement of the Top Level Heat Pump System

Project Cost Estimate: 6,550.00

Permit Amount: 160.00

I hereby certify that all the information provided by me in support of this application is true and accurate to the best of my knowledge. I certify that I will comply with all applicable state and local laws and regulations pertaining to the work for which this permit is issued, and that I possess all trade contractor licenses required by the NC General Statutes and the NC Administrative Code. If I resign or am no longer affiliated with this project, I will notify the local authority (Town of Duck Building Inspector) immediately by phone or in person and in writing within three (3) working days.

Susan Pritchett 6/28/19
Applicant Signature Date



Department of Community Development
PO Box 8369
1200 Duck Road
Town of Duck, North Carolina 27949
(252) 255-1234

Date Issued:
06/28/2019

Permit #:
TR19-000179

Mechanical Trade Permit

Project Address: 134 CARROL DR
Property Owner: SMITH, RICHARD W

PIN #: 995007579773
Mailing Address: 320 N CHURCH ST
HERTFORD, NC 27944

Permit Types:

Plumbing Electrical Mechanical Gas

Contractor:

Company Name: North Beach Services Heating and Cooling
Phone: (252) 491-2878

Contact Name: Gabby Willis
PO Box 181

NC State License #:

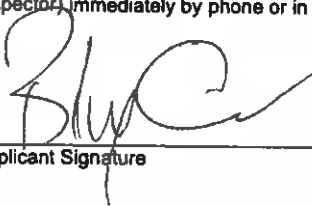
Address:
Kitty Hawk, NC 27949

Description of Work: Replacement HVAC system with Trane 14 Seer 2.5 ton heat pump and matching air handler

Project Cost Estimate: 5,700.00

Permit Amount: 160.00

I hereby certify that all the information provided by me in support of this application is true and accurate to the best of my knowledge. I certify that I will comply with all applicable state and local laws and regulations pertaining to the work for which this permit is issued, and that I possess all trade contractor licenses required by the NC General Statutes and the NC Administrative Code. If I resign or am no longer affiliated with this project, I will notify the local authority (Town of Duck Building Inspector) immediately by phone or in person and in writing within three (3) working days.


Applicant Signature


Date



Department of Community Development
PO Box 8369
1200 Duck Road
Town of Duck, North Carolina 27949
(252) 255-1234

Date Issued:
06/28/2019
Permit #:
TR19-000180

Mechanical Trade Permit

Project Address: 1171 DUCK RD
Property Owner: SCARBOROUGH LANE SHOPPES LLC

PIN #: 985916835584
Mailing Address: 6477 COLLEGE PARK SQ
VIRGINIA BEACH, VA 23464

Permit Types:

Plumbing Electrical Mechanical Gas

Contractor:

Company Name: R.A. Hoy Heating & A/C
Phone: (252) 261-2008
NC State License #: 13056

Contact Name: Douglas Wakeley
P.O. Box 179
Address:
Kitty Hawk, NC 27949

Description of Work: C/O 4 TON 14 SEER TRANE SYSTEM WITH T6 THERMOSTAT

Project Cost Estimate: 6,607.00

Permit Amount: 160.00

I hereby certify that all the information provided by me in support of this application is true and accurate to the best of my knowledge. I certify that I will comply with all applicable state and local laws and regulations pertaining to the work for which this permit is issued, and that I possess all trade contractor licenses required by the NC General Statutes and the NC Administrative Code. If I resign or am no longer affiliated with this project, I will notify the local authority (Town of Duck Building Inspector) immediately by phone or in person and in writing within three (3) working days.

 6-28-19
Applicant Signature Date



Department of Community Development
PO Box 8369
1200 Duck Road
Town of Duck, North Carolina 27949
(252) 255-1234

Date Issued:
06/28/2019
Permit #:
TR19-000181

Mechanical Trade Permit

Project Address: 126 SCARBOROUGH LN
Property Owner: PECORARO, THOMAS A

PIN #: 985916937567
Mailing Address: 13426 RIPPLING BROOK DR
SILVER SPRING, MD 20906

Permit Types:

Plumbing Electrical Mechanical Gas

Contractor:

Company Name: R.A. Hoy Heating & A/C
Phone: (252) 261-2008
NC State License #: 13056


Contact Name: Douglas Wakeley
P.O. Box 179
Address:
Kitty Hawk, NC 27949

Description of Work: C/O 2 TON 18 SEER TRANE SYSTEM & 4 TON 18 SEER TRANE SYSTEM TOP & GROUND LEVELS WITH (2) XL850 THERMOSTATS

Project Cost Estimate: 24,250.00

Permit Amount: 220.00

I hereby certify that all the information provided by me in support of this application is true and accurate to the best of my knowledge. I certify that I will comply with all applicable state and local laws and regulations pertaining to the work for which this permit is issued, and that I possess all trade contractor licenses required by the NC General Statutes and the NC Administrative Code. If I resign or am no longer affiliated with this project, I will notify the local authority (Town of Duck Building Inspector) immediately by phone or in person and in writing within three (3) working days.

 6-28-19
Applicant Signature Date



Department of Community Development
PO Box 8369
1200 Duck Road
Town of Duck, North Carolina 27949
(252) 255-1234

Date Issued:
06/28/2019

Permit #:
TR19-000182

Mechanical Trade Permit

Project Address: 163 SCHOONER RIDGE DR

PIN #: 986909055745

Property Owner: Du Plessis, Kirk N

Mailing Address: 634 Maple St
INDIANA, PA 15701

Permit Types:

Plumbing Electrical Mechanical Gas

Contractor:

Company Name: Airbenders Heating and Air

Contact Name: Cory Scott

Phone:

121 Ferry Dock Rd

NC State License #: 34076

Address:

Knotts Island, NC 27950

Description of Work: Change out downstairs 2 ton 14 SEER heat pump and air handlers w/ 10 KW heat strip

Project Cost Estimate: 5,558.00

Permit Amount: 160.00

I hereby certify that all the information provided by me in support of this application is true and accurate to the best of my knowledge. I certify that I will comply with all applicable state and local laws and regulations pertaining to the work for which this permit is issued, and that I possess all trade contractor licenses required by the NC General Statutes and the NC Administrative Code. If I resign or am no longer affiliated with this project, I will notify the local authority (Town of Duck Building Inspector) immediately by phone or in person and in writing within three (3) working days.


Applicant Signature

6-28-19
Date



Department of Community Development
PO Box 8369
1200 Duck Road
Town of Duck, North Carolina 27949
(252) 255-1234

Date Issued:
06/28/2019

Permit #:
TR19-000183

Mechanical Trade Permit

Project Address: 1187 DUCK RD
Property Owner: F E G DEVELOPMENT COMPANY

PIN #: 985916845329
Mailing Address: 129 TALL PINE LN
KITTY HAWK, NC 27949

Permit Types:

Plumbing Electrical Mechanical Gas

Contractor:

Company Name: Delta T
Phone: (252) 256-2436

Contact Name: Edwin Miller
162 Yaupon Trail

NC State License #: 23299 Class III

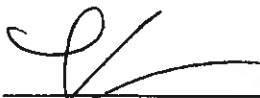
Address:
Kitty Hawk, NC 27949

Description of Work: Add a 3 ton Mitsubishi ductless heat pump at Pizzaz Pizza

Project Cost Estimate: 5,000.00

Permit Amount: 130.00

I hereby certify that all the information provided by me in support of this application is true and accurate to the best of my knowledge. I certify that I will comply with all applicable state and local laws and regulations pertaining to the work for which this permit is issued, and that I possess all trade contractor licenses required by the NC General Statutes and the NC Administrative Code. If I resign or am no longer affiliated with this project, I will notify the local authority (Town of Duck Building Inspector) immediately by phone or in person and in writing within three (3) working days.


Applicant Signature

28 Jun 19
Date



Department of Community Development
PO Box 8369
1200 Duck Road
Town of Duck, North Carolina 27949
(252) 255-1234

Date Issued:
06/28/2019
Permit #:
TR19-000184

Plumbing Trade Permit

Project Address: 1177 DUCK RD
Property Owner: STORY, WALTER E

PIN #: 985916838822
Mailing Address: 140 CULPEPER ST
WARRENTON, VA 20186

Permit Types:

Plumbing Electrical Mechanical Gas

Contractor:

Company Name: Action Plumbing
Phone: (252) 441-9992

Contact Name: John Osborn
P.O. Box 3129

NC State License #: 19207

Address:
Kitty Hawk, NC 27949

Description of Work:

Material and labor for complete plumbing project for Lovie's salon set up; Install 50 gallon electric water to fulfill hot water demand; remove old heater in attic; set new heater in back area with cut offs and thermal expansion tank; remove and re-pipe water lines for new water heater; Install freestanding laundry tub with faucet; rough in and trim out for customer provided hair wash sinks; will open drywall if needed to rework plumbing in restroom wall but others will repair drywall

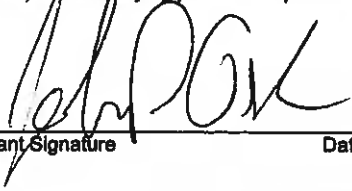
Project Cost Estimate: 4,665.00

Permit Amount: 160.00

I hereby certify that all the information provided by me in support of this application is true and accurate to the best of my knowledge. I certify that I will comply with all applicable state and local laws and regulations pertaining to the work for which this permit is issued, and that I possess all trade contractor licenses required by the NC General Statutes and the NC Administrative Code. If I resign or am no longer affiliated with this project, I will notify the local authority (Town of Duck Building Inspector) immediately by phone or in person and in writing within three (3) working days.

Applicant Signature

Date

 6-28-19