

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

### Planning and Inspection Department

	0 Me: Dellinger De S: 109 Landing D					BUILDING ED: 08/06/2019 RES: 02/02/2020
APPLICANT:	DELLINGER, CLARE 107 WINDY POINT E SUFFOLK, VA 2343	DRIVE	c	10	ELLINGER, CLARENCE F 7 WINDY POINT DRIVE JFFOLK, VA 23435	1 JR
GENERAL, UNL	ICENSED:	J & T Cons P. O. box 1 Kill Devil H 252-489-39	1316 Iillsl, NC 27948		License: 000 Expires:	
PARCEL:						
PIN:	988415544957			Parcel Number:	003530000	
Address:	109 LANDING	DRE KILL DEV	VIL HILLS	7		
Addition:	LANDING SEC	TION 1. THE		Zoning: Block:	0 Lot(s):	21
Legal Desc						
FEES:		Paid	Due			
Building Permit	Fee - Minimum	\$150.00	\$0.00			
	Totals :	\$150.00	\$0.00			
PROJECT DESC					E OF PROPERTY, REF MIANING IN SAME FO AUG - 6 2019	
Printed by : Jordan Blyth	e on: 08/06/2019 12:07 PM					Page 1 of 3

### **BP2019-180**

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PROJECT NAME: DELLINGER DECK AND STAIR SITE ADDRESS: 109 LANDING DR E KILL DEVIL HILLS

EXPIRES: 02/02/2020

	DETAILS	
Permit		
Name	Value	
CAMA PERMIT	N	
CAMA EXEMPTION	N	
ZONING DISTRICT	RL	
PURPOSE	Residential Repair/Remodel	
FRONT YARD SETBACK	30	
SIDE YARD SETBACK	10	
REAR YARD SETBACK	20% Depth >30	
FLOOD ZONE	AE	
BASE FLOOD ELEVATION	8.00	
FINAL ELEVATION CERTIFICATE	N	
CONSTRUCTION COST	5000.00	
CONSTRUCTION TYPE	V	
OCCUPANCY TYPE	One & Two Family Dwelling	
	REQUIRED INSPECTIONS	
Zoning Final	Final	
	CONDITIONS	
	void if work or construction authorized is not commence of of 12 months at any time after work has started. uired.	ed within 6 months or if construction
Construction must meet all as	pect of Chapter 153 Zoning including lot coverage and s	setbacks.

EXPIRES: 02/02/2020

I hereby certify that I have read and examined this application and know the same to be true and correct. All provisions of Laws and Ordinances governing this type of work will be complied with whether specified herein or not. The granting of a permit does not presume to give authority to violate or cancel the provisions of any other state/logal law regulating construction or the performance of construction. Issued By: Date: 8/6, ellinger 2019 Contractor or Authorized Agent: Lalence

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### Town of Kill Devil Hills

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

AUG - 6 2019

### **Planning and Inspection Department**

Pet one Heller

# BP2019-179 PROJECT NAME: McCormick windows & siding SITE ADDRESS: 3303 BAY DR KILL DEVIL HILLS EXPIRES: 02/02/2020

APPLICANT:	McCormick, Samuel 3303 Bay Dr Kill Devil Hills, NC 2			OWNER:	McCormick, 3 3303 Bay Dr Kill Devil Hills	
CONTRACTOR		SAME AS 00000000 00000000,	APPLICANT			License: 123456 Expires: 04/30/2020
PARCEL:					1	
PIN:	98751683184	7		Parcel Number:	000202	2000
Address:	3303 BAY DR	KILL DEVIL HIL	LS			
				Zonii	ng:	
Addition:	ORVILLE BEA	CH WEST		Block	c: 0	Lot(s): 100
Legal Desc	ription:					
FEES:		Paid	Due			
Building Permit I Fee	Fee - Minimum	\$150.00	\$0.00			
	Totals :	\$150.00	\$0.00			

PROJECT DESCRIPTION: Replace windows and siding on south side of house

Printed by : CTHUMAN on: 08/06/2019 08:19 AM

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BP2019-179 PROJECT NAME: McCormick windows & siding SITE ADDRESS: 3303 BAY DR KILL DEVIL HILLS

ISSUED: 08/06/2019

EXPIRES: 02/02/2020

	DETAILS	
Permit		
Name	Value	
CAMA PERMIT	Ν	
CAMA EXEMPTION	Ν	
ZONING DISTRICT	RL	
PURPOSE	Residential Repair/Remodel	
FRONT YARD SETBACK	30	
SIDE YARD SETBACK	10	
REAR YARD SETBACK	20% Depth >30	
FLOOD ZONE	X	
FINAL ELEVATION CERTIFICATE	Ν	
CONSTRUCTION COST	5000.00	
	REQUIRED INSPECTIC	NS
Rough In	Final	
Zoning Final		
	CONDITIONS	
This permit becomes null an	CONDITIONS	commenced within 6 months or if construction
This permit becomes null an work is suspended for a per		commenced within 6 months or if construction arted.
This permit becomes null an work is suspended for a per	d void if work or construction authorized is no	commenced within 6 months or if construction arted.
This permit becomes null an work is suspended for a per	d void if work or construction authorized is no	commenced within 6 months or if construction arted.
work is suspended for a per hereby certify that I have	d void if work or construction authorized is no iod of 12 months at any time after work has st e read and examined this application a	arted. nd know the same to be true and correct.
hereby certify that I have lipeovisions of Laws an pecified herein or not	d void if work or construction authorized is no iod of 12 months at any time after work has st e read and examined this application a d Ordinances governing this type of w he granting of a permit does not presu	arted. nd know the same to be true and correct. ork will be complied with whether me to give authority to violate or cancel
hereby certify that I have lipecified herein or not	d void if work or construction authorized is no iod of 12 months at any time after work has st e read and examined this application a d Ordinances governing this type of w he granting of a permit does not presu	arted. nd know the same to be true and correct. ork will be complied with whether
hereby certify that I have line provisions of Laws and pecified herein or not T he provisions of any of	d void if work or construction authorized is no iod of 12 months at any time after work has st e read and examined this application a d Ordinances governing this type of w he granting of a permit does not presu	arted. nd know the same to be true and correct. ork will be complied with whether me to give authority to violate or cancel
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hereby certify that I have hereby certify that I have all provisions of Laws an pecified herein or not he provisions of any of ssued By:	d void if work or construction authorized is no iod of 12 months at any time after work has st e read and examined this application a d Ordinances governing this type of w he granting of a permit does not presu state local law regulating construction	arted. Ind know the same to be true and correct. ork will be complied with whether me to give authority to violate or cancel on or the performance of construction.
hereby certify that I have hereby certify that I have all provisions of Laws an pecified herein or not he provisions of any of ssued By:	d void if work or construction authorized is no iod of 12 months at any time after work has st e read and examined this application a d Ordinances governing this type of w he granting of a permit does not presu state local law regulating construction	arted. Ind know the same to be true and correct. ork will be complied with whether me to give authority to violate or cancel on or the performance of construction.
hereby certify that I have hereby certify that I have all provisions of Laws an pecified herein or not he provisions of any of ssued By:	d void if work or construction authorized is no iod of 12 months at any time after work has st e read and examined this application a d Ordinances governing this type of w he granting of a permit does not presu e state local law regulating construction Agent: Man Agent	arted. Ind know the same to be true and correct. ork will be complied with whether me to give authority to violate or cancel on or the performance of construction. Date: Same
hereby certify that I have hereby certify that I have pecified herein or not he provisions of any of ssued By:	d void if work or construction authorized is no iod of 12 months at any time after work has st e read and examined this application a d Ordinances governing this type of w he granting of a permit does not presu e state local law regulating construction Agent: Man Agent	arted. Ind know the same to be true and correct. ork will be complied with whether me to give authority to violate or cancel on or the performance of construction.
hereby certify that I have hereby certify that I have pecified herein or not he provisions of any of ssued By:	d void if work or construction authorized is no iod of 12 months at any time after work has st e read and examined this application a d Ordinances governing this type of w he granting of a permit does not presu e state local law regulating construction Agent: Man Agent	arted. Ind know the same to be true and correct. ork will be complied with whether me to give authority to violate or cancel on or the performance of construction. Date: Same Lagon



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### Town of Kill Devil Hills

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

### **Planning and Inspection Department**

BP2019-178 PROJECT NAME: Palmer steairs and handrails SITE ADDRESS: 1610 PRINCESS ANNE DR KILL DEVIL HILLS BUILDING ISSUED: 08/05/2019

EXPIRES: 02/01/2020

	Totals :	\$150.00	\$0.00			
Building Permit Fee	Fee - Minimum	\$150.00	\$0.00			
FEES:	_	Paid	Due			
Legal Desc	cription:				L. 1999.70	
Addition:	DELRAY BEA	CH RESUBDIV	•	Zoning: Block:	3	Lot(s): 12
Address:	1610 PRINCE	SS ANNE DR K	ILL DEVIL HII			
PIN:	98841046610			Parcel Number:	0031360	012
PARCEL:						
UNLICENSED -	- REMODELING:	Wernock, F 1603 Prince Kill Devil Hi				<b>License:</b> 0000000 Expires: 02/06/2020
APPLICANT:	PALMER, ROGER A 116 SHORE DRIVE EMPORIA, VA 2384		C	11	LMER, RO 6 SHORE D 1PORIA, VA	DRIVE
APPI ICANT.	PALMER ROGER	1			MER RO	GERA

PROJECT DESCRIPTION: Replace 2 sets of stairs and replace deck handrail

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AUG - 6 2019

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BP2019-178 PROJECT NAME: Palmer steairs and handrails SITE ADDRESS: 1610 PRINCESS ANNE DR KILL DEVIL HILLS

BUILDING ISSUED: 08/05/2019

EXPIRES: 02/01/2020

	DETAILS	
Permit		
Name	Value	
CAMA PERMIT	N	
CAMA EXEMPTION	N	
ZONING DISTRICT	RL	
PURPOSE	Residential Repair/Remodel	
FRONT YARD SETBACK	30	
SIDE YARD SETBACK	10	
REAR YARD SETBACK	20% Depth >30	
FLOOD ZONE	AE	
BASE FLOOD ELEVATION	8	
FINAL ELEVATION CERTIFICATE	Ν	
CONSTRUCTION COST	5000.00	
CONSTRUCTION TYPE	V	
Zoning Final	REQUIRED INSPEC	
	CONDITIONS	
	void if work or construction authorized is	
r work is suspended for a period hereby certify that I have All provisions of Laws and specified herein or not. The	read and examined this applicatio Ordinances governing this type of granting of a permit does not pro- restate local law regulating constru-	



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

### **Planning and Inspection Department**

AUG - 6 2019

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BP2019-177	BUILDING
PROJECT NAME: Windsor Piling Replacement	ISSUED: 08/05/2019
SITE ADDRESS: 3305 BRIGGS ST KILL DEVIL HILLS	
	EXPIRES: 02/01/2020

APPLICANT:	WINDSOR, ROBERT 8001 UNIVERSITY D RICHMOND, VA 2323	R.	C		WINDSOR, F 8001 UNIVER RICHMOND,	RSITY DR.
CONTRACTOR	Emanuelson and Dad 6705 CROATAN HW 6705 S. Croatan Hwy nags head, nc 27959 252-261-2215	Y SOUTH				
RESIDENTIAL,	LIMITED:	Emanuelso 6705 CRO/ 6705 S. Cro nags head, 252-261-22	ATAN HWY SC batan Hwy. nc 27959	ОЛТН		License: 79801 Expires: 01/01/2020
PARCEL:						
PIN:	988513041739			Parcel Number:	000010	000
Address:	3305 BRIGGS	ST KILL DEVIL	HILLS			
				Zoning	g:	
Addition:	ORVILLE BEAG	CH AMENDED	BLK 3	Block:	3	Lot(s): 11
Legal Desc	cription:					
FEES:		Paid	Due		1	
Building Permit Fee	Fee - Minimum	\$150.00	\$0.00			
	Totals :	\$150.00	\$0.00			

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### BP2019-177 PROJECT NAME: Windsor Piling Replacement SITE ADDRESS: 3305 BRIGGS ST KILL DEVIL HILLS

m. ;

BUILDING ISSUED: 08/05/2019

EXPIRES: 02/01/2020

I hereby certify that I have read and examined this application and know All provisions of Laws and Ordinances governing this type of work will be	e complied with whether
specified herein or not. The granting of a permit does not presume to give	
the provisions of any other state/local law regulating construction or the	performance of construction.
Issued By:	
Contractor or Authorized Agent:	Date: 8/7/19
	/ /

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### **Planning and Inspection Department**

#### **BP2019-181**

**PROJECT NAME:** TAYLOR PILING AND RAILING **SITE ADDRESS:** 328 SOTHEL ST W KILL DEVIL HILLS BUILDING ISSUED: 08/07/2019

EXPIRES: 02/03/2020

APPLICANT:	TAYLOR, JAMES E. 80 U.S. 13 SOUTH EURE, NC 27935	ARL			TAYLOR, JAN 80 U.S. 13 SC EURE, NC 27	HTUC
GENERAL:		Self UNKNOWI UNKNOWI 917-862-90	N, XX 00000			License: Unlicensed Expires: 12/31/2020
PARCEL:						
PIN:	98752092816	D		Parcel Number:	0005690	000
Address:	328 SOTHEL	ST W KILL DEV	IL HILLS			
				Zoning	g:	
Addition:	<b>VIRGINIA DAI</b>	RE SHORES		Block:	42	Lot(s): 33-35
Legal Descr	iption:					
FEES:		Paid	Due			
Building Permit F Fee	Fee - Minimum	\$150.00	\$0.00			
	Totals :	\$150.00	\$0.00			

AUG - 7 2019

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### BP2019-181

**PROJECT NAME:** TAYLOR PILING AND RAILING **SITE ADDRESS:** 328 SOTHEL ST W KILL DEVIL HILLS

EXPIRES: 02/03/2020

		DETAILS	
Permit			
Name	Value		
CAMA PERMIT	N		
CAMA EXEMPTION	N		
ZONING DISTRICT	RL		
PURPOSE	Residential Repair/Remodel		
FRONT YARD SETBACK	15		
SIDE YARD SETBACK	6		
REAR YARD SETBACK	20% Depth >30		
FLOOD ZONE	AE		
BASE FLOOD ELEVATION	8.00		
FINAL ELEVATION CERTIFICATE	Ν		
CONSTRUCTION COST	10000.00		100
CONSTRUCTION TYPE	V		
OCCUPANCY TYPE	One & Two Family Dwelling		

#### **REQUIRED INSPECTIONS**

**Zoning Final** 

Final

#### CONDITIONS

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

I hereby certify that I have read and examined this application and know the same to be true and correct. All provisions of Laws and Ordinances governing this type of work will be complied with whether specified herein or not. The granting of a permit does not presume to give authority to violate or cancel the provisions of any other state/local law regulating construction or the performance of construction. Issued By: Contractor or Authorized Agent: famely & Faughar Date:  $8 \int 2 \int 12$ 

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

### **Planning and Inspection Department**

### BP2019-182

PROJECT NAME: TARR STAIR AND RAILING SITE ADDRESS: 1509 PRINCESS ANNE DR KILL DEVIL HILLS BUILDING ISSUED: 08/08/2019

EXPIRES: 02/04/2020

APPLICANT:	Patricia Tarr 3301 Lawrenceville Kill Devil Hillsl, NC 2 609-335-8019			OWNER:	Patricia Tarr 3301 Lawren Kill Devil Hills 609-335-801	sl, NC 27948
GENERAL:		Self UNKNOWN UNKNOWN 917-862-90	, XX 00000			License: Unlicensed Expires: 12/31/2020
PARCEL:						
PIN:	98841155151	7		Parcel Number:	003131	000
Address:	1509 PRINCE	SS ANNE DR K	ILL DEVIL HI	LLS		
				Zonir	g:	
Addition:	W R DEATON	- DELRAY BEA	СН	Block	: 2	Lot(s): PT 15
Legal Desc	ription:					
FEES:		Paid	Due			
Building Permit Fee	Fee - Minimum	\$150.00	\$0.00			
	Totals :	\$150.00	\$0.00			

AUG - 8 2019

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EXPIRES: 02/04/2020

I hereby certify that I have read and examined this application and know the same to be true and correct. All provisions of Laws and Ordinances governing this type of work will be complied with whether specified herein or not. The granting of a permit does not presume to give authority to violate or cancel the provisions of any other state/local law regulating construction or the performance of construction. Issued By: Date: 8 2019 8 Contractor or Authorized Agent:

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

### **Planning and Inspection Department**

### BP2019-188 PROJECT NAME: BERKLEY STAIR, DECKING, RAILING, AND

PILING SITE ADDRESS: 1712 CREEK ST KILL DEVIL HILLS BUILDING ISSUED: 08/14/2019

EXPIRES: 02/10/2020

APPLICANT:	KEN BERKLEY 1712 Creek St Kill Devil Hills, NC 27948			OWNER: KEN BERKLEY 1712 Creek St Kill Devil Hills, NC 27948				
BUILDER:		6442 Azale Manns Har	Professional Handyman 6442 Azalea Ln. Manns Harbor, NC 27953 952-573-9372			License: Unlicensed Expires:		
PARCEL:								
PIN:	988410266612	:		Parcel Number:	0026830	001		
Address:	1712 CREEK S	ST KILL DEVIL	HILLS					
				Zoning	g:			
Addition:	HIGH VIEW - H	EDRICKS ADD		Block:	С	Lot(s): 2	20	
Legal Desc	cription:							
FEES:		Paid	Due					
Building Permit Fee	Fee - Minimum	\$150.00	\$0.00					
	Totals :	\$150.00	\$0.00					

PROJECT DESCRIPTION: REPLACE DECKING, REBUILD 2 SETS OF EXTERIOR STAIRS, INSTALL 6X6 ROOF PILING

AUG 1 4 2019

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EXPIRES: 02/10/2020

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

at Issued By: mellen Contractor or Authorized Agent:

8/14/2019 Date:

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PROJECT NAME: WALLER DECK AND STAIR SITE ADDRESS: 223 SOTHEL ST E KILL DEVIL HILLS

**BP2019-183** 

### Town of Kill Devil Hills

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

AUG 1 5 2019

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top to

### **Planning and Inspection Department**

BUILDING ISSUED: 08/08/2019

EXPIRES: 02/04/2020

APPLICANT:	3511 BAINBRIDGE BLVD CHESAPEAKE, VA 23324					RIDGE BLVD E, VA 23324		
757-543-3228		9506 S Old nags head,	Surfside Construction 9506 S Old Oregon Inlet Rd. nags head, nc 27959 252-548-9253			757-543-3228 License: Unlicensed Expires: 01/26/2029		
PARCEL:								
PIN:	988513125899	)		Parcel Number:	000389	000		
Address:	223 SOTHEL	ST E KILL DEVI	L HILLS					
				Zoning	<b>;:</b>			
Addition:	VIRGINIA DAF	RE SHORES		Block:	7	Lot(s):	5-6	
Legal Desc	cription:							
FEES:		Paid	Due					
Building Permit Fee	Fee - Minimum	\$150.00	\$0.00					
	Totals :	\$150.00	\$0.00					

PROJECT DESCRIPTION: REBUILD REAR DECK AND STAIR IN SAME FOOTPRINT

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### **BP2019-183**

**PROJECT NAME:** WALLER DECK AND STAIR **SITE ADDRESS:** 223 SOTHEL ST E KILL DEVIL HILLS

EXPIRES: 02/04/2020

	DETAI	LS
Permit		
Name	Value	
CAMA PERMIT	Ν	
CAMA EXEMPTION	Ν	
ZONING DISTRICT	С	
PURPOSE	Residential Repair/Remodel	
FRONT YARD SETBACK	15	
SIDE YARD SETBACK	10	
REAR YARD SETBACK	20% Depth >30	
FLOOD ZONE	AE	
BASE FLOOD ELEVATION	9.00	
FINAL ELEVATION CERTIFICATE	Ν	
CONSTRUCTION COST	6000.00	
CONSTRUCTION TYPE	V	
OCCUPANCY TYPE	One & Two Family Dwelling	
	REQUIRED IN	SPECTIONS
Zoning Final		Final

### CONDITIONS

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

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

\* As-built survey will be required prior to Certificate of Occupancy or Certificate of Compliance.

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Page 2 of 3

EXPIRES: 02/04/2020

I hereby certify that I have read and examined this application and know the same to be true and correct. All provisions of Laws and Ordinances governing this type of work will be complied with whether specified herein or not. The granting of a permit does not presume to give authority to violate or cancel the provisions of any other state/local-law regulating construction or the performance of construction. Issued By: ( 1 Date: 8/15/19 Contractor or Authorized Agent:

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

### **Planning and Inspection Department**

	0 IE: GRADNEY STAIR: S: 2041 EDENTON ST					ISSUED	BUILDING : 08/21/2019 S: 02/17/2020
APPLICANT:	JUNIUS GRADNEY 2806 Hollister Avenue Norfolk, Va 23504		0	28	JNIUS GRADNE 06 Hollister Ave prfolk, Va 23504		
CONTRACTOR:	FIVE STAR CONSTRU 1004 INDIAN DR Kill Devil Hills, NC 2794 252-489-1252						
GENERAL, UNL	ICENSED:	1004 INDIAN	s, NC 27948	ION	Licen Expir	ise: XXX res:	
PARCEL:							
PIN:	987408987978			Parcel Number:	001260000		
Address:	2041 EDENTON	ST ST KILL D	EVIL HILLS				
Addition: Legal Descr	AVALON BEACH	ANNEX 2 & 3		Zoning: Block:	0	Lot(s):	810
FEES:		Paid	Due				· <u>·····</u> ·····
Building Permit F Fee	Fee - Minimum	\$150.00	\$0.00				
	Totals :	\$150.00	\$0.00				
AUG 2	1 2019	DECKING ANI	d Railing, f	REBUILD STAIRS	IN SAME FO	OTPRINT	
Exc.	A CONTRACTOR OF THE OWNER OWNE						
inted by : Jordan Blythe	e on: 08/21/2019 02:29 PM						Page 1 of 2

#### **BP2019-190**

**PROJECT NAME:** GRADNEY STAIRS AND RAILING **SITE ADDRESS:** 2041 EDENTON ST ST KILL DEVIL HILLS

EXPIRES: 02/17/2020

		DETAILS	
Permit			
Name	Value	_	
CAMA PERMIT	N		
CAMA EXEMPTION	N		
ZONING DISTRICT	RL		
PURPOSE	Residential Repair/Remodel		
FRONT YARD SETBACK	15		
SIDE YARD SETBACK	6		
REAR YARD SETBACK	20% Depth >30		
FLOOD ZONE	AE		
BASE FLOOD ELEVATION	8.00		
FINAL ELEVATION CERTIFICATE	Ν		
CONSTRUCTION COST	5000.00		
CONSTRUCTION TYPE	V		
OCCUPANCY TYPE	One & Two Family Dwelling		

### **REQUIRED INSPECTIONS**

**Zoning Final** 

Final

#### CONDITIONS

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

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

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### Town of Kill Devil Hills

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

#### **Planning and Inspection Department**

BP2019-189 PROJECT NAME: Dorman windows and siding SITE ADDRESS: 502 NIXONTON ST KILL DEVIL HILLS BUILDING ISSUED: 08/21/2019

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EXPIRES: 02/17/2020

APPLICANT:	DORMAN, ROBIN 502 Nixonton St Kill Devil Hills, NC 27948 906-430-1717			OWNER: DORMAN, ROBIN 502 Nixonton St Kill Devil Hills, NC 27948 906-430-1717			
CONTRACTOR		SAME AS / 0000000 00000000,	APPLICANT			License: 123456 Expires: 04/30/2020	
PARCEL:							
PIN:	987520826398	3		Parcel Number:	0010120	000	
Address:	502 NIXONTO	N ST KILL DEV	IL HILLS				
				Zoning	j:		
Addition:	MOOR SHORI	ES		Block:	0	Lot(s): 64	
Legal Desc	ription:						
FEES:		Paid	Due				
Building Permit Fee	Fee - Minimum	\$150.00	\$0.00				
	Totals :	\$150.00	\$0.00				

PROJECT DESCRIPTION: Remove and replace windows and siding

1-1

AUG 2 1 2019

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BP2019-189 PROJECT NAME: Dorman windows and siding SITE ADDRESS: 502 NIXONTON ST KILL DEVIL HILLS

BUILDING ISSUED: 08/21/2019

EXPIRES: 02/17/2020

	DETAILS	
Permit		
Name	Value	
CAMA PERMIT	Ν	
CAMA EXEMPTION	Ν	
ZONING DISTRICT	RL	
PURPOSE	Residential Repair/Remodel	
FRONT YARD SETBACK	30	
SIDE YARD SETBACK	8	
REAR YARD SETBACK	20% Depth >30	
FLOOD ZONE	AE	
BASE FLOOD ELEVATION	8	
FINAL ELEVATION CERTIFICATE	N	
CONSTRUCTION COST	30000.00	
T1.1	CONDITIONS	
work is suspended for a period		In the second seco
r work is suspended for a perio Must comply with Wind Borne hereby certify that I have All provisions of Laws and specified herein or not-Th	void if work or construction authorized is of of 12 months at any time after work ha Debris requirements as defined in NCBC read and examined this application Ordinances governing this type of e granting of a permit does not pre- r state/local law regulating constru-	s started.



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

### **Planning and Inspection Department**

BP2019-186 PROJECT NAME: Peggy Lee SITE ADDRESS: 306 FRESH POND DR E KILL DEVIL HILLS BUILDING ISSUED: 08/13/2019

EXPIRES: 02/09/2020

APPLICANT:	Simple Side Construct 308 W. Helga St. Kill Devil Hillsl, NC 279 252-564-8307		OWNER: Peggy Lee 451 Honey Locust Way CHESAPEAKE, VA 23320 757-436-8308						KE, VA 23320	
BUILDING LIMI	TED:	308 W. Hei	illsl, NC 27948		License: 78583 Expires:					
PARCEL:										
PIN:	989313143442			Parcel Number:	004959	000				
Address:	306 FRESH PO	ND DR E KILL	DEVIL HILLS							
A 1 1141				Zoning:						
	Addition: LAKE DRIVE DEVELOPMENT SEC 2			Block:	0	Lot(s): 33				
Legal Desc	cription:									
FEES:	E. Minimum	Paid	Due							
Building Permit Fee	Fee - Minimum	\$150.00	\$0.00							
	Totals :	\$150.00	\$0.00							
PROJECT DESC	CRIPTION: Add deck	to side of hous	se							
A	UG 2 0 2019									
	v									

EXPIRES: 02/09/2020

Date: 8-20-19

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

Contractor or Authorized Agent:

Issued By;

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BP2019-19 PROJECT NAI SITE ADDRES	91 ME: Foster Pilings S: 2003 BAY DR K	KILL DEVIL HILLS	;			ISSUED:	UILDING 08/23/2019 : 02/19/2020
APPLICANT:	FOSTER, KAREN LI 2003 BAY DRIVE KILL DEVIL HILLS, I			200	STER, KA 03 BAY DF L DEVIL H		
CONTRACTOR	Emanuelson and Da 6705 CROATAN HW 6705 S. Croatan Hw nags head, nc 27959 252-261-2215	VY SOUTH y.					
RESIDENTIAL,	LIMITED:	Emanuelsor 6705 CROA 6705 S. Cro nags head, 252-261-22	TAN HWY SC atan Hwy. nc 27959	DUTH		<b>License:</b> 79801 E <b>xpires:</b> 01/01/20	020
PARCEL:						14.100 Aug	
PIN:	988405070746	6		Parcel Number:	002023	000	
Address:	2003 BAY DR	KILL DEVIL HIL	LS	Humber.			
				Zoning:			
Addition:		CH ANNEX 2 & 3	3	Block:	0	Lot(s): 1	053
Legal Desc	cription:						
FEES: Building Permit Fee	Fee - Minimum	<u>Paid</u> \$150.00	<u>Due</u> \$0.00				
	Totals :	\$150.00	\$0.00				
PROJECT DESC	CRIPTION: Replace	2 pilings under h	nouse		AUG	2 6 2019	Page 1 o

BP2019-191 PROJECT NAME: Foster Pilings SITE ADDRESS: 2003 BAY DR KILL DEVIL HILLS

.

BUILDING ISSUED: 08/23/2019

EXPIRES: 02/19/2020

		DETAILS
Permit		
Name	Value	
CAMA PERMIT	N	
CAMA EXEMPTION	Ν	
ZONING DISTRICT	RL	
PURPOSE	Residential Repair/Remodel	
FRONT YARD SETBACK	30	
SIDE YARD SETBACK	8	
REAR YARD SETBACK	20% Depth >30	
HEALTH DEPARTMENT PERMIT #	28975	
FLOOD ZONE	AE	
BASE FLOOD ELEVATION	8.3	
FINAL ELEVATION CERTIFICATE	N	
CONSTRUCTION COST	2640.00	
LOT COVERAGE	24.00	
SURVEYOR NAME AND NUMBER	Kirk R. Foreman L-280	1
OCCUPANCY TYPE	One & Two Family Dwelling	

### **REQUIRED INSPECTIONS**

Slab/Foundation/Piling Zoning Final Final

#### CONDITIONS

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

or work is suspended for a period of 12 months at any time after work has started.

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

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Page 2 of 3

BP2019-191 PROJECT NAME: Foster Pilings SITE ADDRESS: 2003 BAY DR KILL DEVIL HILLS

EXPIRES: 02/19/2020

8/26/19

Date:

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

**Contractor or Authorized Agent:** 

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# Town of Kill Devil Hills

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

### **Planning and Inspection Department**

BP2019-19 PROJECT NAM SITE ADDRESS	<b>4</b> <b>IE:</b> Chambers stair <b>5:</b> 103 Aviation Ave	replacement . E. Kill Devil Hi	lls			BUILDING ISSUED: 08/26/2011 EXPIRES: 02/22/202
APPLICANT:	Chambers, Scott E. 112 Deer Run Road TOWNSEND, DE 19 302-242-8658	734	(	-	Chambers, Sco 112 Deer Run TOWNSEND, I 302-242-8658	Road
CONTRACTOR:	Gibbs, Clarence Po Box 2387 Manteo, NC 27954					
BUILDING UNLI	MITED:	Gibbs, Clar Po Box 238 Manteo, No	37			icense: 76990 xpires: 12/31/2019
PARCEL:						
PIN:	988419703837			Parcel Number:	00389300	01
Address:	103 Aviation A	ve. E. Kill Devil	Hills			
				Zoning		
Addition: Legal Descr	Kitty Hawk Sho	bres Revised		Block:	38	Lot(s): 14
EES:	<u> </u>	Paid	Due			
Building Permit F Fee	Fee - Minimum	\$150.00	\$0.00			
	Totals :	\$150.00	\$0.00			
PROJECT DESC	RIPTION: remove	and replace rear		ws nest		
		· 2				
		AUG 272	019			
inted by : CTHUMAN o	n: 08/26/2019 04:32 PM	," . , " .				Page 1

BP2019-194 PROJECT NAME: Chambers stair replacement SITE ADDRESS: 103 Aviation Ave. E. Kill Devil Hills

A ....

BUILDING ISSUED: 08/26/2019

EXPIRES: 02/22/2020

I hereby certify that I have read and examined this application and know the same to be true and correct. All provisions of Laws and Ordinances governing this type of work will be complied with whether specified herein or not. The granting of a permit does not presume to give authority to violate or cancel
the provisions of any other state/local law regulating construction or the performance of construction.
Contractor or Authorized Agent: Date: S-27-19

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

### **Planning and Inspection Department**

BP2019-196 PROJECT NAME: DOMINGUEZ STAIRS AND DECKING SITE ADDRESS: 2010 HIGHVIEW ST KILL DEVIL HILLS						BUILDING ISSUED: 08/27/2019 EXPIRES: 02/23/2020		
APPLICANT:					ROSS, STEP 1123 PARRIS ROCKVILLE,	SH DRIVE		
		1004 INDIA Kill Devil Hi	FIVE STAR CONSTRUCTION 1004 INDIAN DR Kill Devil Hills, NC 27948 252-489-1252		License: XXX Expires:			
PARCEL:								
PIN:	988405089609	9		Parcel Number:	000911	000		
Address:	2010 HIGHVIE	W ST KILL DE	/IL HILLS					
				Zoning	g:			
Addition:	AVALON BEA	CH ANNEX 2 & 3	3	Block:	0	Lot(s):	1183	
Legal Desc	ription:							
FEES:		Paid	Due					
Building Permit	Fee - Minimum	\$150.00	\$0.00					
	Totals :	\$150.00	\$0.00					

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BP2019-196 PROJECT NAME: DOMINGUEZ STAIRS AND DECKING SITE ADDRESS: 2010 HIGHVIEW ST KILL DEVIL HILLS

EXPIRES: 02/23/2020

	DE	ETAILS
Permit		
Name	Value	
CAMA PERMIT	Ν	
CAMA EXEMPTION	Ν	
ONING DISTRICT	RL	
PURPOSE	Residential Repair/Remodel	
RONT YARD SETBACK	15	
SIDE YARD SETBACK	6	
REAR YARD SETBACK	20% Depth >30	
LOOD ZONE	Х	
FINAL ELEVATION CERTIFICATE	Ν	
CONSTRUCTION COST	5000.00	
CONSTRUCTION TYPE	V	
DCCUPANCY TYPE	One & Two Family Dwelling	
	REQUIRE	DINSPECTIONS
Zoning Final		Final
	CON	DITIONS
This nermit becomes null an		authorized is not commenced within 6 months or if construction
work is suspended for a per hereby certify that I hav Il provisions of Laws ar pecified herein or not. T	e read and examined this nd Ordinances governing he granting of a permit d er state/local law regulat	and work has started. a application and know the same to be true and correct. this type of work will be complied with whether oes not presume to give authority to violate or cancel ing construction or the performance of construction. Date: $\chi - 27-19$



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

### **Planning and Inspection Department**

### BP2019-193

**PROJECT NAME:** Nature Conservancy Shed **SITE ADDRESS:** 1200 BOUNDARY ST W KILL DEVIL HILLS BUILDING ISSUED: 08/26/2019

EXPIRES: 02/22/2020

APPLICANT:	NATURE CONSERVANCY OF 6114 FAYETTEVILLE RD SUITE 109 DURHAM, NC 27713		WNER: NATURE CONSERVANCY 6114 FAYETTEVILLE RD SUITE 109 DURHAM, NC 27713					
26 na		2604 S. Me nags head,	Ryan Waddell 2604 S. Memorial Blvd. 1ags head, nc 27959 252-599-1611				ense: 1234 ires:	
PARCEL:				-				
PIN:	988315644679	)		Parcel Number:	004889	000		
Address:	1200 BOUND	ARY ST W KILL	DEVIL HILLS	6				
				Zoning	g:			
Addition:	JESSE E BAU	M JR ESTATE		Block:	0	Lot(s):	PT 6	
Legal Desc	cription:							
FEES:		Paid	Due					
Building Permit Fee	Fee - Minimum	\$150.00	\$0.00					
	Totals :	\$150.00	\$0.00					
PROJECT DESC	CRIPTION: 20'x22'	open walled shee	ł					
		ş						
	AUG 29 20	)19						
rinted by : Jordan Blyth	ne on: 08/26/2019 01:48 PM						Page 1 of 5	

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EXPIRES: 02/22/2020

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

Issued By:

Contractor or Authorized Agent:

Date:

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### Town of Kill Devil Hills

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

#### **Planning and Inspection Department**

BP2019-197 PROJECT NAME: HY-TECH new windows and cedar shakes SITE ADDRESS: 1940 FIFTH ST W KILL DEVIL HILLS BUILDING ISSUED: 08/28/2019

EXPIRES: 02/24/2020

	Totals :	\$150.00	\$0.00			
Building Permit I Fee	Fee - Minimum	\$150.00	\$0.00			
EES:		Paid	Due			
		Detal.	Dur		+	
Legal Desc	ription:					
Addition:	WRIGHT'S SH	IORES		Block:	0	Lot(s): 53
				Zoning:		
Address:	1940 FIFTH S	T W KILL DEVIL	HILLS			
PIN:	98740897964	0		Parcel Number:	028428	3000
PARCEL:						
	2719 S Wrightsville nags head, nc 2795 252-475-4619					Expires: 12/31/2019
GENERAL:	JB UTZ CONSTRUCTION			L	License: none	
CONTRACTOR:	JB UTZ CONSTRUC 2719 S Wrightsville nags head, nc 2795 252-475-4619	Ave				
	202-7 10-0000			20		•
	4025 W Soundside I nags head, nc 2795 252-715-3990	RD		4( na	25 W Sour ags head, n 52-715-399	ic 27959
APPLICANT:	HY-TECH Srvices L	LC	C	WNER: H	Y-TECH Sr	vices LLC

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BP2019-197

PROJECT NAME: HY-TECH new windows and cedar shakes SITE ADDRESS: 1940 FIFTH ST W KILL DEVIL HILLS

EXPIRES: 02/24/2020

		DETAILS	
Permit			
Name	Value		
CAMA PERMIT	N		
CAMA EXEMPTION	N		
ZONING DISTRICT	RL		
PURPOSE	Residential Repair/Remodel		
FRONT YARD SETBACK	30		
SIDE YARD SETBACK	10		
REAR YARD SETBACK	20% Depth >30		
STREET SIDE SETBACK	15		
FLOOD ZONE	AE		
BASE FLOOD ELEVATION	9.0		
FINAL ELEVATION CERTIFICATE	Ν		
CONSTRUCTION COST	6500.00		
OCCUPANCY TYPE	One & Two Family Dwelling		

#### **REQUIRED INSPECTIONS**

**Zoning Final** 

Final

#### CONDITIONS

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

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

Page 2 of 3

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BP2019-197 PROJECT NAME: HY-TECH new windows and cedar shakes SITE ADDRESS: 1940 FIFTH ST W KILL DEVIL HILLS

BUILDING ISSUED: 08/28/2019

EXPIRES: 02/24/2020

I hereby certify that I have read and examined this application and know All provisions of Laws and Ordinances governing this type of work will b specified herein or not. The granting of a permit does not presume to giv the provisions of any other state/local law regulating construction or the	e complied with whether re authority to violate or cancel
Issued By:	alad m
Contractor or Authorized Agent:	Date: 4 24
00	

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

#### **Planning and Inspection Department**

	: 2904 VA DARE T	Diacement RLN KILL DE	/IL HILLS		_	BUILDING ISSUED: 08/28/2019 EXPIRES: 02/24/2020
	ROBERT V POLAND P O BOX 364 BOYKINS, VA 23827			OWNER:	ROBERT V P O BOX 30 BOYKINS, Y	64
	HONEY DO SERVIC 107 Fearing Place Wanchese, NC 27954 252-573-9416		una di davati dell'angli della de		and a second	
GENERAL:		HONEY DO 107 Fearing Wanchese, 252-573-94	NC 27954		21 21 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2	License: unlicensed Expires: 12/31/2019
PARCEL:						
PIN:	988513135154			Parcel Number:	00040	02000
Address:	2904 VA DARE	TRL N KILL D	EVIL HILLS			
				Zonin	-	
Addition: Legal Descri	VIRGINIA DAR	E SHORES		Block	: 8	Lot(s): 2
FEES:	•	Paid	Due			· · · · · · · · · · · · · · · · · · ·
Building Permit F Fee	ee - Minimum	\$150.00	\$0.00			
der « den den den hartsvärschingten die die der Vertransster voorstelliker voorstelliker die der die der die de	Totals :	\$150.00	\$0.00			
PROJECT DESCR	RIPTION: replace of	deck band, joist,	handrails an	d stairs to same	e footprint	
A	UG 29 2019	\$				
	9 4 - V					

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BP2019-185

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PROJECT NAME: Poland Deck Replacement SITE ADDRESS: 2904 VA DARE TRL N KILL DEVIL HILLS

EXPIRES: 02/24/2020

		DETAILS
Permit		
Name	Value	
CAMA PERMIT	N	
CAMA EXEMPTION	N	
ZONING DISTRICT	С	
PURPOSE	Residential Repair/Remodel	
FRONT YARD SETBACK	30	
SIDE YARD SETBACK	8	
REAR YARD SETBACK	20% Depth >30	
FLOOD ZONE	VE	
BASE FLOOD ELEVATION	11.0	
FINAL ELEVATION CERTIFICATE	Ν	
CONSTRUCTION COST	13000.00	
LOT COVERAGE	34.60	
SURVEYOR NAME AND NUMBER	WL Norris L-4554	
OCCUPANCY TYPE	One & Two Family Dwelling	

#### **REQUIRED INSPECTIONS**

Zoning Final

Final

#### CONDITIONS

	This permit becomes null and void if work or construction authorized is not commenced within 6 months or if construction
0	r work is suspended for a period of 12 months at any time after work has started.
*	Construction must meet all aspect of Chapter 153 Zoning including lot coverage and setbacks.
*	Zoning Final Inspection is required.

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Page 2 of 3

EXPIRES: 02/24/2020

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

Issued By: Mark Date: Contractor or Authorized Agent:

Printed by : Marty Shaw on: 08/28/2019 09:11 AM

Page 3 of 3



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

#### **Planning and Inspection Department**

#### **BP2019-192**

PROJECT NAME: LADD-BONE STAIR AND LANDING SITE ADDRESS: 203 WOODMERE AVE KILL DEVIL HILLS BUILDING ISSUED: 08/23/2019

EXPIRES: 02/19/2020

4	ADD-BONE, MYRA 729 N CROATAN H ITTY HAWK, NC 2	IIGHWAY	(	OWNER:	LADD-BONE, 4729 N CROA KITTY HAWK,	TAN HIGHWA	Y
GENERAL:		Self UNKNOWN UNKNOWN 917-862-90	, XX 00000			icense: Unlic xpires: 12/3	
PARCEL:							
PIN:	988415720738	3		Parcel Number:	0037220	00	
Address:	203 WOODME	ERE AVE KILL D	EVIL HILLS				
				Zoni	ing:		
Addition:	KITTY HAWK	SHORES - REV	SED	Bloc	:k: 19	Lot(s):	PT 5 & 6
Legal Descrip	tion:			r			
FEES:		Paid	Due		ar i suf		
Building Permit Fe Fee	e - Minimum	\$150.00	\$0.00				
	Totals :	\$150.00	\$0.00				

PROJECT DESCRIPTION: REBUILD EXTERIOR STAIR AND LANDING ON WEST SIDE OF PROPERTY

AUG 2 8 2019

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#### BP2019-192

**PROJECT NAME:** LADD-BONE STAIR AND LANDING **SITE ADDRESS:** 203 WOODMERE AVE KILL DEVIL HILLS

EXPIRES: 02/19/2020

		DETAILS	
Permit			
Name	Value		
CAMA PERMIT	Ν		
CAMA EXEMPTION	Ν		
ZONING DISTRICT	RL		
PURPOSE	Residential Repair/Remodel		
FRONT YARD SETBACK	30		
SIDE YARD SETBACK	8		
REAR YARD SETBACK	20% Depth >30		
FLOOD ZONE	AE		
BASE FLOOD ELEVATION	8.00		
FINAL ELEVATION CERTIFICATE	Ν		
CONSTRUCTION COST	3000.00		
CONSTRUCTION TYPE	V		
OCCUPANCY TYPE	One & Two Family Dwelling		

#### **REQUIRED INSPECTIONS**

**Zoning Final** 

Final

#### CONDITIONS

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

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

t Issued By: Date: **Contractor or Authorized Agent:** Printed by : Jordan Blythe on: 08/23/2019 12:02 PM Page 2 of 2



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

- 2 -

AUG - 6 2019

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### **Planning and Inspection Department**

DW2019-01 PROJECT NAM SITE ADDRESS	<b>I3</b> IE: Car Quest Parking L S: 1704 CROATAN HW	ot repaving Y S KILL DE	EVIL HILLS			DRIVEWAY ISSUED: 08/06/2019 EXPIRES: 02/02/2020
APPLICANT:	Murray, Nancy PO Box 875 Wanchese, NC 27954		c	WNER:	Murray, N PO Box 8 Wanchese	ancy 75 e, NC 27954
CONTRACTOR:	HATCHELL CONCRETE P O BOX 2405 MANTEO, NC 27954	INC				
GENERAL, UNL	IMITED-UNCLASSIFIED:	HATCHELL PO Box 240 Manteo, NC 252-202-150	27954	INC.		License: 34205 Expires: 12/31/2019
PARCEL:						
PIN:	989313042591			Parcel Number:	0084	446000
Address:	1704 CROATAN H	WY S KILL	DEVIL HILLS			
				Zonir	-	
Addition:	OCEAN ACRES T	RACT 3 SEC	1	Block	c D	Lot(s): 26
Legal Descr						
EES: Driveway Permit	Fee	Paid \$50.00	<b>Due</b> \$0.00			
	Totals :	\$50.00	\$0.00			
PROJECT DESC	RIPTION: replace exis space	ting asphalt p	parking lot wit	h concrete, ad	d handicar	p compliant ramp and parking
inted by : CTHUMAN or	n: 08/06/2019 02:27 PM					

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DW2019-013 PROJECT NAME: Car Quest Parking Lot repaving SITE ADDRESS: 1704 CROATAN HWY S KILL DEVIL HILLS

EXPIRES: 02/02/2020

	DETAILS	
Permit		
Name	Value	
DRIVEWAY INVERT 2	Ν	
CULVERT	Ν	
SURVEYOR NAME AND NUMBER	Michael D. Barr L-1756	
ZONING DISTRICT	С	
CONSTRUCTION COST	50000.00	
FLOOD ZONE	AE	
BASE FLOOD ELEVATION	9.0	
	REQUIRED INSPECTION	S
Zoning Final	Final	
	CONDITIONS	
Parking Lot must meet setbac roperty dated 3/3/77.	e. cks of 3 feet off of front and side property lines, d prior to Certificate of Occupancy or Certificate	
Parking Lot must meet setbac roperty dated 3/3/77. As-built survey will be require hereby certify that I have	cks of 3 feet off of front and side property lines,	e of Compliance. I know the same to be true and correct. k will be complied with whether
As-built survey will be require hereby certify that I have All provisions of Laws and	cks of 3 feet off of front and side property lines, d prior to Certificate of Occupancy or Certificate read and examined this application and	e of Compliance. I know the same to be true and correct. k will be complied with whether
estored to current existing state Parking Lot must meet setbac property dated 3/3/77. As-built survey will be require I hereby certify that I have All provisions of Laws and specified herein or not. Th the provisions of any othe	read and examined this application and Ordinances governing this type of wor e granting of a permit does not presume restrellocal law regulating construction	e of Compliance. I know the same to be true and correct. k will be complied with whether
estored to current existing state Parking Lot must meet setbac property dated 3/3/77. As-built survey will be require I hereby certify that I have All provisions of Laws and specified herein or not. The the provisions of any other Issued By:	read and examined this application and Ordinances governing this type of wor e granting of a permit does not presume restriction	e of Compliance. I know the same to be true and correct. k will be complied with whether e to give authority to violate or cancel or the performance of construction.



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

#### **Planning and Inspection Department**

DM2019-006 PROJECT NAME: Hale Demo SITE ADDRESS: 206 BICKETT ST E KILL DEVIL HILLS DEMOLITION ISSUED: 07/29/2019

EXPIRES: 01/25/2020

APPLICANT:	HALE, CECIL M III PO Box 1497 Kill Devil Hills, NC 279 252-449-2242	948	o	PC	ALE, CECIL D Box 1497 I Devil Hills 2-449-2242	, NC 27948	
CONTRACTOR:		SAME AS 0000000 00000000,	APPLICANT nc 00000			License: 1234 Expires: 04/30	
PARCEL:		A.F. 16 AU	· · · · · · · · · · · · · · · · · · ·		ET IN		
PIN:	988517212341			Parcel Number:	0003470	000	
Address:	206 BICKETT S	STE KILL DEV	IL HILLS				
				Zoning:			
Addition:	<b>VIRGINIA DAR</b>	E SHORES		Block:	1	Lot(s):	23-24
Legal Desc	ription:						
FEES:		Paid	Due				
Demolition		\$100.00	\$0.00				
	Totals :	\$100.00	\$0.00				
PROJECT DESC	RIPTION: Demo ex	isting building o	on property				
			DETAILS	3			
Permit							
Name	Val	ue					
ZONING DIST	RICT C						•
FLOOD ZONE	AE					2,	
CONSTRUCTIO	ON COST 900	0.00			-	A	
					AllG	- 7 2019	ł
					nou	1 2010	
Printed by : Meredith Gu	ns on: 08/06/2019 09:31 AM					nt. 	Page 1 of 2

#### DM2019-006 PROJECT NAME: Hale Demo SITE ADDRESS: 206 BICKETT ST E KILL DEVIL HILLS

DEMOLITION ISSUED: 07/29/2019

EXPIRES: 01/25/2020

#### **REQUIRED INSPECTIONS**

Final

#### CONDITIONS

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

Must use a North Carolina accredited contractor to remove and dispose of all asbestos material.

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

**Issued By:** 

**Contractor or Authorized Agent:** 

Date

Printed by : Meredith Guns on: 08/06/2019 09:31 AM



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### Town of Kill Devil Hills

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

#### **Planning and Inspection Department**

JUL 3 1 2019

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MC2019-232 PROJECT NAME: Gallop HVAC SITE ADDRESS: 1717 SUNSET AVE KILL DEVIL HILLS MECHANICAL

ISSUED: 07/31/2019

EXPIRES: 01/27/2020

APPLICANT:	Gallop, Courtney 6917 S Croatan Hwy nags head, nc 27959			6	allop, Court 917 S Croat ags head, no	an Hwy
MECHANICAL:		R A HOY PO Box 26 Kitty Hawk	5 , NC 27949			License: 13056 Expires: 12/31/2019
PARCEL:		. <u>.</u>				<u></u>
PIN:	988409059804	ŧ		Parcel Number:	002599	000
Address:	1717 SUNSET	AVE KILL DEV	/IL HILLS			
				Zoning:		
Addition:	CROATAN SH	ORES SUBDIV		Block:	18	Lot(s): 14
Legal Desci	iption:					
FEES:		Paid	Due			
Mechanical Pern	nit Fee	\$150.00	\$0.00			
	Totals :	\$150.00	\$0.00			

Printed by : CTHUMAN on: 07/31/2019 08:01 AM

#### MC2019-232 PROJECT NAME: Gallop HVAC SITE ADDRESS: 1717 SUNSET AVE KILL DEVIL HILLS

12.1

EXPIRES: 01/27/2020

	DETAILS
Permit	
Name	Value
PURPOSE	Residential Repair/Remodel
CONSTRUCTION COST	5828.00
CONSTRUCTION TYPE	V
FLOOD ZONE	AE
BASE FLOOD ELEVATION	8
NATURAL GAS SIGNOFF	N
	REQUIRED INSPECTIONS
Final	
	CONDITIONS
This permit becomes null and	void if work or construction authorized is not commenced within 6 months or if construction
r work is suspended for a period	od of 12 months at any time after work has started.

specified herein or not. The granting of a permit does not presume to give authority to violate or cancel the provisions of any other state/local law regulating construction or the performance of construction.

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Contractor or Authorized Agent:

Issued By:

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Page 2 of 2

Date: \_\_\_\_

Birthplace of Aviation Print CAROLINE	$\checkmark$	Kill Phone: 252-	PO BOX Devil Hills, 1 449-5318			AUG - 2 2019
MC2019-236 PROJECT NAME: Zhou SITE ADDRESS: 417 A		ILL DEVIL F	HILLS			MECHANICAL ISSUED: 08/02/2019 EXPIRES: 01/29/2020
APPLICANT: Zhou, Ri 417 W A Kill Devi	ui Aycock St I Hills, NC 27948		c	41	ou, Rui 7 W Aycock S Devil Hills, N	t C 27948
MECHANICAL:		R A HOY PO Box 265 Kitty Hawk, N	NC 27949			<b>ense:</b> 13056 bires: 12/31/2019
PARCEL:						
PIN: 988	3517001801			Parcel Number:	000649000	)
Address: 417	AYCOCK ST W	KILL DEVI	L HILLS			
				Zoning:		
Addition: VIR Legal Description:	GINIA DARE SH	ORES		Block:	52	Lot(s): 11,12,13
EES:		Paid	Due			
Mechanical Permit Fee	\$1	50.00	\$0.00			
	Totals : \$1	50.00	\$0.00			
PROJECT DESCRIPTION	: C/O 2.5 Ton H	VAC Syster	n			

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MC2019-236 PROJECT NAME: Zhou HVAC SITE ADDRESS: 417 AYCOCK ST W KILL DEVIL HILLS

MECHANICAL ISSUED: 08/02/2019

EXPIRES: 01/29/2020

	DETAILS	
Permit		
Name	Value	
PURPOSE	Residential Repair/Remodel	
CONSTRUCTION COST	6887.00	
CONSTRUCTION TYPE	V	
FLOOD ZONE	AE	
BASE FLOOD ELEVATION	8	
NATURAL GAS SIGNOFF	N	
	REQUIRED INSPECTIONS	
Final		
	CONDITIONS	
This permit becomes null and work is suspended for a perio	void if work or construction authorized is not comm d of 12 months at any time after work has started.	
hereby certify that I have All provisions of Laws and pecified herein or pot. Th	d of 12 months at any time after work has started. read and examined this application and kno Orainances governing this type of work wi granting of a permit does not presume to state local law regulating construction or the	ow the same to be true and correct. Il be complied with whether give authority to violate or cancel



\* .

## Town of Kill Devil Hills

PO BOX 1719 Kill Devil Hills, NC 27948 Phone: 252-449-5318 Fax: 252-441-4102 - 2 . R

AUG - 1 2019

#### **Planning and Inspection Department**

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MC2019-23 PROJECT NAI SITE ADDRES			MECHANICAI ISSUED: 08/01/201 EXPIRES: 01/28/202		
APPLICANT:	Armstrong, Stephen & Tammy 4000 Monaco CT CHESAPEAKE, VA 23321 757-582-1152	OWNER:	Armstrong, Stephen & Tammy 4000 Monaco CT CHESAPEAKE, VA 23321 757-582-1152		
MECHANICAL:	R A HOY PO Box 265 Kitty Hawk, NC 27	949	License: 13056 Expires: 12/31/2019		

rushaadaaradoodoo.axdin.eedootooloogoor%.dakaalaaaadaadhadkiikkatkatkory,d	Totals :	\$150.00	\$0.00				
Mechanical Perm	it Fee	\$150.00	\$0.00				
EES:		Paid	Due				
Legal Descri	iption:						
Addition:	Addition: DELRAY BEACH		CH RESUBDIV		3	Lot(s):	18
				Zoning:			
Address:	100 FIRST ST	E KILL DEVIL	HILLS				
PIN:	988410455899	9		Parcel Number:	0031360	018	
PARCEL:							

PROJECT DESCRIPTION: HVAC changout

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

#### MC2019-233 PROJECT NAME:

7

SITE ADDRESS: 100 FIRST ST E KILL DEVIL HILLS

#### MECHANICAL ISSUED: 08/01/2019

EXPIRES: 01/28/2020

	DETAILS	
Permit		
Name	Value	
PURPOSE	Residential Repair/Remodel	
CONSTRUCTION COST	6588.00	
CONSTRUCTION TYPE	V	
FLOOD ZONE	AE	
BASE FLOOD ELEVATION	9	
NATURAL GAS SIGNOFF	N	
OCCUPANCY TYPE	One & Two Family Dwelling	
	REQUIRED INSPECTIONS	
Final		
	CONDITIONS	
	void if work or construction authorized is not comme d of 12 months at any time after work has started.	nced within 6 months or if construction
work is suspended for a pend	d of 12 months at any time aller work has statted.	

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

**Issued By:** ale ( Date: 8 19 Contractor or Authorized Agent:

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

Page 2 of 2



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### Town of Kill Devil Hills

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

#### **Planning and Inspection Department**

AUG - 2 2019

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# MC2019-237

PROJECT NAME: HUGGINS HVAC SITE ADDRESS: 201 FOURTH ST W KILL DEVIL HILLS

#### MECHANICAL ISSUED: 08/02/2019

EXPIRES: 01/29/2020

APPLICANT:	Huggins, Haley 201 WEST Fourth S Kill Devil Hillsl, NC 2		C	20	luggins, Ha 01 WEST I ill Devil Hil	aley Fourth ST IIsl, NC 27948	
MECHANICAL:		P.O. Box 2	ONS HEATING 44 or, NC 27964	& COOLING		License: 19091 Expires: 12/31/2019	
PARCEL:							
PIN:	988406288233	1		Parcel Number:	00221	0000	
Address:	201 FOURTH	ST W KILL DEV	IL HILLS				
				Zoning:			
Addition:	WRIGHT'S SH	ORES SEC 2		Block:	0	Lot(s): 1	
Legal Desc	ription:						
EES:		Paid	Due				
Mechanical Perr	nit Fee	\$150.00	\$0.00				
	Totals :	\$150.00	\$0.00				
PROJECT DESC	RIPTION: INSTAL	2-TON SPLIT S	SYSTEM				
, nted by : Jordan Blyth	e on: 08/02/2019 02:15 PM					Pa	ge 1 of

#### MC2019-237

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PROJECT NAME: HUGGINS HVAC SITE ADDRESS: 201 FOURTH ST W KILL DEVIL HILLS

EXPIRES: 01/29/2020

		DETAILS
Permit		
Name	Value	
PURPOSE	Residential Repair/Remodel	
CONSTRUCTION COST	5170.00	
CONSTRUCTION TYPE	V	
FLOOD ZONE	AE	
BASE FLOOD ELEVATION	8.00	
NATURAL GAS SIGNOFF	N	
OCCUPANCY TYPE	One & Two Family Dwelling	

#### **REQUIRED INSPECTIONS**

Final

#### CONDITIONS

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

I hereby certify that I have read and examined this application and All provisions of Laws and Ordinances governing this type of we specified herein or not. The granting of a permit does not presure the provisions of any other state/local law regulating construction Issued By:	ork will be complied with whether me to give authority to violate or cancel on or the performance of construction.
Contractor or Authorized Agent:	Date: 8-2-19
Printed by : Jordan Blythe on: 08/02/2019 02:15 PM	Page 2 of 2

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### Town of Kill Devil Hills

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

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#### **Planning and Inspection Department**

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MC2019-235 PROJECT NAME:
SITE ADDRESS: 2035 YORKTOWN KILL DEVIL HILLS

MECHANICAL ISSUED: 08/02/2019

EXPIRES: 01/29/2020

APPLICANT:	HOLDERMAN, MICI 4744 CONDOR DR. CHESAPEAKE, VA		(	4	744 CONDO	N, MICHAEL D DR DR. KE, VA 23321
MECHANICAL:		P.O. Box 2	ONS HEATING 44 or, NC 27964	& COOLING		License: 19091 Expires: 12/31/2019
PARCEL:						
PIN:	98840509945			Parcel Number:	001472	000
Address:	2035 YORKTO	WN KILL DEVI	L HILLS			
				Zoning	:	
Addition:		CH ANNEX 2 &	3	Block:	0	Lot(s): 1344
Legal Desc	ription:					
FEES:		Paid	Due			
Mechanical Perr	nit Fee	\$150.00	\$0.00			
ng Jaung Pang Sang Sang Sang Sang Sang Sang Sang S	Totals :	\$150.00	\$0.00			
PROJECT DESC	RIPTION: HVAC c	nangout				

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### MC2019-235

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t,

PROJECT NAME: SITE ADDRESS: 2035 YORKTOWN KILL DEVIL HILLS

EXPIRES: 01/29/2020

	DETAILS	
Permit		
Name	Value	· · ·
PURPOSE	Residential Repair/Remodel	
CONSTRUCTION COST	6380.00	
CONSTRUCTION TYPE	V	
FLOOD ZONE	AE	
BASE FLOOD ELEVATION	8	
NATURAL GAS SIGNOFF	N	
OCCUPANCY TYPE	One & Two Family Dwelling	

Final

### CONDITIONS

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

I hereby certify that I have read and examined this application and know the same to be true All provisions of Laws and Ordinances governing this type of work will be complied with we specified herein or not. The granting of a permit does not presume to give authority to violate the provisions of any other state/local law regulating construction or the performance of con- lssued By:	hether ate or cancel
Contractor or Authorized Agent: Date: Date:	2-19
Printed by : Marty Shaw on: 08/02/2019 08:46 AM	Page 2 of 2



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

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#### **Planning and Inspection Department**

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	40 ME: GOLASA HVAC SS: 3122 BATH ST 1		LS		MECHANICAL ISSUED: 08/06/2019 EXPIRES: 02/02/2020
APPLICANT:	Golasa Holdings, LL0 PO Box 120 kitty hawk, nc 27949 252-480-0009 ex.21	C	c	PC	olasa Holdings, LLC 9 Box 120 Iy hawk, nc 27949 2-480-0009 ex.21
MECHANICAL	H-3:		NG AND SON marle Curch rd. NC 27925 316		License: 22516 Expires: 12/31/2019
PARCEL:					
PIN:	987516825878	1		Parcel Number:	001022000
Address:	3122 BATH ST	KILL DEVIL H	ILLS		
				Zoning:	
Addition:	MOOR SHORE	ES		Block:	0 Lot(s): 77
Legal Desc					
FEES: Mechanical Per	mit Fee	<u>Paid</u> \$150.00	<u>Due</u> \$0.00		
	Totals :	\$150.00	\$0.00		
	CRIPTION: HVAC C				

#### MC2019-240

2

PROJECT NAME: GOLASA HVAC SITE ADDRESS: 3122 BATH ST KILL DEVIL HILLS

EXPIRES: 02/02/2020

#### DETAILS Permit Name Value PURPOSE Residential Repair/Remodel CONSTRUCTION COST 4500.00 CONSTRUCTION TYPE V FLOOD ZONE Х NATURAL GAS SIGNOFF N OCCUPANCY TYPE One & Two Family Dwelling

#### REQUIRED INSPECTIONS

Final

#### CONDITIONS

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

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

Printed by : Jordan Blythe on: 08/06/2019 08:29 AM

Page 2 of 2



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

#### **Planning and Inspection Department**

MC2019-238 PROJECT NAME: Cole HVAC SITE ADDRESS: 406 PALMETTO ST W KILL DEVIL HILLS MECHANICAL ISSUED: 08/02/2019

EXPIRES: 01/29/2020

APPLICANT:	Cole, Donald 249 W Freemason St # NORFOLK, VA 23510	\$224	(		Cole, Donald 249 W Freem NORFOLK, V	nason St #224
H3, CLASS 1:		P.O. Box 1		G AND COOLING		License: 12643 Expires: 12/31/2019
PARCEL:						
PIN:	988517003439			Parcel Number:	026660	021
Address:	406 PALMETTO	ST W KILL D	EVIL HILLS			
				Zoning	g:	
Addition:	VIRGINIA DARE	SHORES		Block:	51	Lot(s): 21-24
Legal Desc	ription:					
FEES:		Paid	Due			
Mechanical Perr	nit Fee	\$150.00	\$0.00			
	Totals :	\$150.00	\$0.00			

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#### MC2019-238 PROJECT NAME: Cole HVAC SITE ADDRESS: 406 PALMETTO ST W KILL DEVIL HILLS

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#### MECHANICAL ISSUED: 08/02/2019

EXPIRES: 01/29/2020

	DETAILS	
Permit		
Name	Value	
PURPOSE	Residential Repair/Remodel	
CONSTRUCTION COST	6457.55	
CONSTRUCTION TYPE	V	
FLOOD ZONE	AE	
BASE FLOOD ELEVATION	8	
NATURAL GAS SIGNOFF	N	
	REQUIRED INSPECTIONS	
Final		
hereby certify that I have lipecified herein or pot. Th	CONDITIONS void if work or construction authorized is not commenced w od of 12 months at any time after work has started. read and examined this application and know the so Ordinances governing this type of work will be co e granting of a permit does not presume to give au	same to be true and correct. Inplied with whether Ithority to violate or cancel
hereby certify that I have All provisions of Laws and specified herein or pot. Th	void if work or construction authorized is not commenced work of 12 months at any time after work has started. read and examined this application and know the solution of the construction of a permit does not presume to give authorized law regulating construction or the period	same to be true and correct. Implied with whether Ithority to violate or cancel
hereby certify that I have All provisions of Laws and specified herein or pot. Th he provisions of any othe ssued By:	void if work or construction authorized is not commenced work of 12 months at any time after work has started. read and examined this application and know the solution of the construction of a permit does not presume to give authorized law regulating construction or the period	same to be true and correct. Emplied with whether of construction.



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### Town of Kill Devil Hills

PO BOX 1719 Kill Devil Hills, NC 27948 Phone: 252-449-5318 Fax: 252-441-4102 AUG - 9 2019

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#### **Planning and Inspection Department**

MC2019-242 PROJECT NAME: Samford HVAC SITE ADDRESS: 314 AYCOCK ST W KILL DEVIL HILLS MECHANICAL ISSUED: 08/09/2019

EXPIRES: 02/05/2020

APPLICANT:	CYNTHIA SAMFOR 149 Moycok Landind Moyock, NC 27958 757-297-6871		c	14 M	YNTHIA SA 49 Moycok I loyock, NC 2 57-297-687	andind DR 27958
MECHANICAL,	H-2, H-3:	P.O. Box 1	HEATING AND 32 ills, NC 27948	D COOLING		L <b>icense:</b> 11618 Expires: 12/31/2019
PARCEL:						
PIN:	988517015245	5		Parcel Number:	000593	000
Address:	314 AYCOCK	ST W KILL DEV	IL HILLS			
				Zoning:		
Addition:	VIRGINIA DAF	RE SHORES		Block:	46	Lot(s): 26-28
Legal Desc	cription:					
FEES:		Paid	Due			
Mechanical Per	mit Fee	\$150.00	\$0.00			
	Totals :	\$150.00	\$0.00			
		on HVAC System				· · · · · · · · · · · · · · · · · · ·

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#### MC2019-242 PROJECT NAME: Samford HVAC SITE ADDRESS: 314 AYCOCK ST W KILL DEVIL HILLS

EXPIRES: 02/05/2020

	DETAILS	
Permit		
Name	Value	
PURPOSE	Residential Repair/Remodel	
CONSTRUCTION COST	4950.00	
CONSTRUCTION TYPE	V	
FLOOD ZONE	AE	
BASE FLOOD ELEVATION	8	
NATURAL GAS SIGNOFF	N	
	REQUIRED INSPECTIONS	
Final		
	CONDITIONS	
This servet becomes pull and	d void if work or construction authorized is not comme	and within 6 months or if construction
Il provisions of Laws and pecified herein or not. Th	read and examined this application and know d Ordinances governing this type of work will be granting of a permit does not presume to g er state/logal law regulating construction or th	be complied with whether ive authority to violate or cancel
All provisions of Laws and pecified herein or not. The he provisions of any other ssued By:	d Ordinances governing this type of work will ne granting of a permit does not presume to g er state/local law regulating construction or th	be complied with whether ive authority to violate or cancel
All provisions of Laws and specified herein or not. The	d Ordinances governing this type of work will ne granting of a permit does not presume to g er state/local law regulating construction or th	be complied with whether ive authority to violate or cancel e performance of construction.



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

AUG 1 2 2019

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#### **Planning and Inspection Department**

MECHANICAL MC2019-244 PROJECT NAME: HESSON HVAC ISSUED: 08/12/2019 SITE ADDRESS: 1803 VA DARE TRL N KILL DEVIL HILLS EXPIRES: 02/08/2020 **APPLICANT:** HESSON, LAREN R OWNER: HESSON, LAREN R SHARON L HOUSLEY SHARON L HOUSLEY 2600 DEERFIELD CRES 2600 DEERFIELD CRES CHESAPEAKE, VA 23321 CHESAPEAKE, VA 23321 PLUMBING, MECHANICAL: NORRIS MECHANICAL License: 11100 Expires: 12/31/2019 P.O. Box 217 HARBINGER, NC 27941 252-491-2673 PARCEL: Parcel PIN: 988406485482C5 028038000 Number: 1803 VA DARE TRL N KILL DEVIL HILLS Address: Zoning: UT 5 LTS 12-Addition: CASA DEL SOL CONDOS Block: D Lot(s): 13 PT 1 Legal Description: FEES: Due Paid Mechanical Permit Fee \$150.00 \$0.00 Totals : \$0.00 \$150.00 PROJECT DESCRIPTION: HVAC CHANGE OUT

Printed by : Jordan Blythe on: 08/12/2019 12:42 PM

#### MC2019-244

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PROJECT NAME: HESSON HVAC SITE ADDRESS: 1803 VA DARE TRL N KILL DEVIL HILLS

#### MECHANICAL ISSUED: 08/12/2019

EXPIRES: 02/08/2020

		DETAILS	
Permit			
Name	Value		
PURPOSE	Residential Repair/Remodel		
CONSTRUCTION COST	5750.00		
CONSTRUCTION TYPE	V		
FLOOD ZONE	VE		
BASE FLOOD ELEVATION	11.00		
NATURAL GAS SIGNOFF	Ν		
OCCUPANCY TYPE	Residential		

#### **REQUIRED INSPECTIONS**

Final

#### CONDITIONS

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

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

Issued By: Contractor or Authorized Agent: Klenser

Date: 8-12-19

Printed by : Jordan Blythe on: 08/12/2019 12:42 PM

Page 2 of 2



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## Town of Kill Devil Hills

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

#### **Planning and Inspection Department**

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AUG 1 2 2019

MC2019-234 PROJECT NAME: SITE ADDRESS: 528 Archdale St. Kill Devil Hills MECHANICAL ISSUED: 08/01/2019

EXPIRES: 01/28/2020

APPLICANT:	Veazey, Linda Barne Po Box 145 Colonial Hts., Va 238		C	F	Ve <mark>aze</mark> y, Linda Po Box 145 Colonial Hts., N	
MECHANICAL:	in Minis Anno 1974 ann an Anna Anna Anna Anna Anna Anna A	PO BOX 33	VK, NC 27949	.L		icense: 27675 xpires: 12/31/2019
PARCEL:						
PIN:	987520911077	,		Parcel Number:	0007150	03
Address:	528 Archdale S	St. Kill Devil Hills	3			
				Zoning	:	
Addition:	VIRGINIA DAF	RE SHORES		Block:	70	Lot(s): 33,34,35
Legal Descr	iption:					
FEES:		Paid	Due		1	
Mechanical Pern	nit Fee	\$150.00	\$0.00			
	Totals :	\$150.00	\$0.00			

Printed by : Marty Shaw on: 08/01/2019 01:32 PM



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

#### **Planning and Inspection Department**

MC2019-246 MECHANICAL PROJECT NAME: KAM-MAK HVAC ISSUED: 08/13/2019 SITE ADDRESS: 509 MUSTIAN ST KILL DEVIL HILLS EXPIRES: 02/09/2020 APPLICANT: KAM-MAK PROPERTIES LLC OWNER: KAM-MAK PROPERTIES LLC **PO BOX 281 PO BOX 281** Kill Devil Hillsl, NC 27948 Kill Devil Hillsl, NC 27948 License: 13056 Expires: 12/31/2019 **MECHANICAL:** RAHOY PO Box 265 Kitty Hawk, NC 27949 PARCEL: Parcel PIN: 988308796131 029822071 Number: 509 MUSTIAN ST KILL DEVIL HILLS Address: Zoning: Addition: **KITTY HAWK SHORES - REVISED** Block: 11&12 67 Lot(s): Legal Description: FEES: Paid Due **Mechanical Permit Fee** \$0.00 \$150.00 Totals : \$150.00 \$0.00

PROJECT DESCRIPTION: TOP LEVEL HVAC CHANGE OUT

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Printed by : Jordan Blythe on: 08/13/2019 09:17 AM

#### MC2019-246

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PROJECT NAME: KAM-MAK HVAC SITE ADDRESS: 509 MUSTIAN ST KILL DEVIL HILLS

EXPIRES: 02/09/2020

		DETAILS
Permit		
Name	Value	
PURPOSE	Commercial Repair/Remodel	
CONSTRUCTION COST	5583.00	
CONSTRUCTION TYPE	V	
FLOOD ZONE	AE	
BASE FLOOD ELEVATION	9.00	
NATURAL GAS SIGNOFF	Ν	
OCCUPANCY TYPE	Business	

CONDITIONS

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

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

**Issued By:** Date: 8-13-19 6 **Contractor or Authorized Agent:** 

Printed by : Jordan Blythe on: 08/13/2019 09:17 AM

Page 2 of 2



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### Town of Kill Devil Hills

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

#### **Planning and Inspection Department**

MC2019-24 PROJECT NAM SITE ADDRESS		CT KILL DEVI	L HILLS			MECHANICAL ISSUED: 08/13/2019 EXPIRES: 02/09/2020
APPLICANT:	Perry, James 3118 NORTH CROAT KILL DEVIL HILLS, NO 252-202-3051			3 <sup>.</sup> K	erry, James 118 NORTH CRO ILL DEVIL HILLS 52-202-3051	
MECHANICAL:		American F P.O. Box 8 nags head 252-305-5	nc 27959			ise: 29031 es: 12/31/2019
PARCEL:						
PIN:	988513037971			Parcel Number:	003041000	
Address:	3128 SEA WING	G CT KILL DE	VIL HILLS			
				Zoning:		
Addition:				Block:	0	Lot(s): 18
Legal Desc	ription:					
FEES:		Paid	Due			
Mechanical Perr	nit Fee	\$150.00	\$0.00			
Pathon and a dealer of a shark and a shark a shark and a shark a shark and a shark and a shark and a shark a sh	Totals :	\$150.00	\$0.00			
PROJECT DESC	RIPTION: HVAC ch	angout				
	( page )					

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Printed by : Marty Shaw on: 08/13/2019 08:58 AM

#### MC2019-245 PROJECT NAME:

SITE ADDRESS: 3128 SEA WING CT KILL DEVIL HILLS

#### MECHANICAL ISSUED: 08/13/2019

EXPIRES: 02/09/2020

		DETAILS	
Permit			
Name	Value		
PURPOSE	Residential Repair/Remodel		
CONSTRUCTION COST	5400.00		
CONSTRUCTION TYPE	V		
FLOOD ZONE	AE		
BASE FLOOD ELEVATION	9		
NATURAL GAS SIGNOFF	N		
OCCUPANCY TYPE	One & Two Family Dwelling		

#### REQUIRED INSPECTIONS

Final

#### CONDITIONS

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

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

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Date:

Contractor or Authorized Agent:

Printed by : Marty Shaw on: 08/13/2019 08:58 AM

Page 2 of 2



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

#### **Planning and Inspection Department**

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ME	CHANICAL

MC2019-250 PROJECT NAME: WHITLEY HVAC SITE ADDRESS: 707 AVALON DR W KILL DEVIL HILLS

ISSUED: 08/14/2019

EXPIRES: 02/10/2020

	Whitley, Wayne 44 Spindrift Trl kitty hawk, nc 27949		(	44	/hitley, Way Spindrift 1 tty hawk, no	[r]	
ELECTRICAL, P	LUMBING AND HEA	TING: NORTH BE P.O. Box 1 Kitty Hawk, 252-491-28	81 NC 27949	ES		License: 2474 Expires: 04/2	
PARCEL:							
PIN:	988405094689	)		Parcel Number:	003061	000	
Address:	707 AVALON	DR W KILL DEV	/IL HILLS				
				Zoning:			
Addition:	AVALON BEA	CH		Block:	0	Lot(s):	197&198
Legal Desci	ription:						
FEES:		Paid	Due				
Mechanical Pern	nit Fee	\$150.00	\$0.00				
	Totals :	\$150.00	\$0.00				
PROJECT DESC		HANGE OUT					

#### MC2019-250

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PROJECT NAME: WHITLEY HVAC SITE ADDRESS: 707 AVALON DR W KILL DEVIL HILLS

EXPIRES: 02/10/2020

		DETAILS	
Permit			
Name	Value		
PURPOSE	Residential Repair/Remodel		
CONSTRUCTION COST	5900.00		
CONSTRUCTION TYPE	V		
FLOOD ZONE	AE		
BASE FLOOD ELEVATION	8.00		
NATURAL GAS SIGNOFF	N		
OCCUPANCY TYPE	One & Two Family Dwelling		

#### **REQUIRED INSPECTIONS**

Final

#### CONDITIONS

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

All provisions of Laws and Ordinand specified herein or not. The granting	es governing this type of worl of a permit does not presume	know the same to be true and correct. k will be complied with whether to give authority to violate or cancel or the performance of construction.
Issued By:	Shy	Date:8/14/19
inted by : Jordan Blythe on: 08/14/2019 09:35 AM		Page 2 of a



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

#### **Planning and Inspection Department**

MC2019-247 PROJECT NAME: IHLE HVAC SITE ADDRESS: 1522 KETCH LN KILL DEVIL HILLS			MECHANICAL ISSUED: 08/13/2019 EXPIRES: 02/09/2020		
APPLICANT:	JUDY IHLE 1522 Ketch Ln. KILL DEVIL HILLS, NC 2		NER:	JUDY IHLE 1522 Ketch Ln. KILL DEVIL HILLS, NC 27948	
CONTRACTOR:		GREGORY MECHANICAL UNKNOWN UNKNOWN, XX 00000 252-202-4329		License: 21287 Expires: 12/31/2019	
PARCEL:					
PIN:	988413149116		Parcel Number:	026985000	
Address:	1522 KETCH LN	KILL DEVIL HILLS			

Tota	als : \$150.00	\$0.00				
Mechanical Permit Fee	\$150.00	\$0.00				
FEES:	Paid	Due				
Legal Description:						
Addition: FIRST FLIGHT VLG PH A SEC 3			Block:	0	Lot(s): 60	
			Zoning:			

PROJECT DESCRIPTION: HVAC CHANGE OUT

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Printed by : Jordan Blythe on: 08/13/2019 12:54 PM

### MC2019-247

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PROJECT NAME: IHLE HVAC SITE ADDRESS: 1522 KETCH LN KILL DEVIL HILLS

EXPIRES: 02/09/2020

		DETAILS	
Permit			
Name	Value		
PURPOSE	Residential Repair/Remodel		
CONSTRUCTION COST	3000.00		
CONSTRUCTION TYPE	V		
FLOOD ZONE	AE		
BASE FLOOD ELEVATION	8.00		
NATURAL GAS SIGNOFF	N		
OCCUPANCY TYPE	One & Two Family Dwelling		

#### **REQUIRED INSPECTIONS**

Final

#### CONDITIONS

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

All provisions of Laws and Ordinances specified herein or not. The granting of	s governing this type of of a permit does not pres	and know the same to be true and correct. work will be complied with whether sume to give authority to violate or cancel ction or the performance of construction.
Issued By:	<u></u>	
Contractor or Authorized Agent:	AW	Date: 13/aug/15
/		

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Page 2 of 2



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## Town of Kill Devil Hills

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

#### **Planning and Inspection Department**

MC2019-24 PROJECT NAM SITE ADDRESS		L DEVIL HILLS			ISSUED:	ANICAL 08/08/2019 02/04/2020
APPLICANT:	BRUMBELOE, JAMES T 1507 KETCH LANE KILL DEVIL HILLS, NC 27	'948-8435	OWNER:	1507 KETC	OE, JAMES T CH LANE L HILLS, NC 27948-84	135
MECHANICAL:		ALL SEASONS HEA P.O. Box 244 Point Harbor, NC 279 491-9232			License: 19091 Expires: 12/31/20	19
PARCEL:		080				
PIN:	988414236809		Parcel Number:	02696	51000	
Address:	1507 KETCH LN K	ILL DEVIL HILLS				
			Zonir	ng:		
Addition:	FIRST FLIGHT VLC	PHASEC 3	Block	k: 0	Lot(s): 19	9
Legal Desci	ription:					

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

PROJECT DESCRIPTION: HVAC changout

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AUG 1 3 2019

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Printed by : Marty Shaw on: 08/08/2019 04:26 PM

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SITE ADDRESS: 1507 KETCH LN KILL DEVIL HILLS

EXPIRES: 02/04/2020

		DETAILS	
Permit			
Name	Value		
PURPOSE	Residential Repair/Remodel		
CONSTRUCTION COST	5270.00		
CONSTRUCTION TYPE	V		
FLOOD ZONE	AE		
BASE FLOOD ELEVATION	8		
NATURAL GAS SIGNOFF	N		
OCCUPANCY TYPE	One & Two Family Dwelling		

#### **REQUIRED INSPECTIONS**

Final

#### CONDITIONS

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

specified herein or not. The granting of a permit does not the provisions of any other state/local law regulating cons	
Issued By:	Date: 8-13-19
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PO BOX 1719 Kill Devil Hills, NC 27948 Phone: 252-449-5318 Fax: 252-441-4102

### **Planning and Inspection Department**

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MC2019-248 PROJECT NAME: MILTEER HVAC SITE ADDRESS: 402 HELGA ST W KILL DEVIL HILLS MECHANICAL ISSUED: 08/14/2019

EXPIRES: 02/10/2020

APPLICANT:	MILTEER, MICHAEL 413 MEADOW LANE FRANKLIN, VA 2385		c	4	IILTEER, M 13 MEADO RANKLIN, Y	W LANE	
PLUMBING, M	ECHANICAL:	P.O. Box 21	R, NC 27941			License: 11100 Expires: 12/31	
PARCEL:							
PIN:	987516837486			Parcel Number:	000277	000	
Address:	402 HELGA S	W KILL DEVIL	HILLS				
				Zoning:			
Addition:	ORVILLE BEA	CH WEST		Block:	0	Lot(s):	192
Legal Desc	cription:						
FEES:		Paid	Due				
Mechanical Per	mit Fee	\$150.00	\$0.00				
	Totals :	\$150.00	\$0.00				
PROJECT DES	CRIPTION: HVAC C	HANGE OUT					
<sup>9</sup> rinted by : Jordan Blyth	ne on: 08/14/2019 08:18 AM						Page 1 of 2

#### MC2019-248

PROJECT NAME: MILTEER HVAC SITE ADDRESS: 402 HELGA ST W KILL DEVIL HILLS

EXPIRES: 02/10/2020

		DETAILS	
Permit			
Name	Value		
PURPOSE	Residential Repair/Remodel		
CONSTRUCTION COST	7000.00		
CONSTRUCTION TYPE	V		
FLOOD ZONE	х		
NATURAL GAS SIGNOFF	Ν		
OCCUPANCY TYPE	One & Two Family Dwelling		

#### **REQUIRED INSPECTIONS**

Final

#### CONDITIONS

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

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

**Contractor or Authorized Agent:** 

Printed by : Jordan Blythe on: 08/14/2019 08:18 AM

Page 2 of 2

Date: 8-14-19



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

#### **Planning and Inspection Department**

MC2019-252 PROJECT NAME: SOLTZ HVAC SITE ADDRESS: 1706 APACHE ST KILL DEVIL HILLS

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Printed by : Jordan Blythe on: 08/16/2019 11:58 AM

MECHANICAL ISSUED: 08/16/2019

EXPIRES: 02/12/2020

APPLICANT:	SOLTZ, JOSEPH 1706 APACHE STRI KILL DEVIL HILLS, N				SOLTZ, JOS 1706 APACH KILL DEVIL H	
MECHANICAL,	H-3, I:	P.O. Box 7	HEATING AND 07 , NC 27949	COOLING		License: 18066 Expires: 12/31/2019
PARCEL:						
PIN:	988409159921			Parcel Number:	002360	011
Address:	1706 APACHE	ST KILL DEVI	L HILLS			
				Zoning	r:	
Addition:	APACHE STR	EET		Block:	0	Lot(s): 9
Legal Desc	cription:					
FEES:		Paid	Due			
Mechanical Per	mit Fee	\$150.00	\$0.00			
	Totals :	\$150.00	\$0.00			
	CRIPTION: HVAC C	HANGE OUT				and the second s



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

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#### **Planning and Inspection Department**

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#### MC2019-249 PROJECT NAME: REMUS HVAC SITE ADDRESS: 541 PARKWOOD DR KILL DEVIL HILLS

MECHANICAL ISSUED: 08/14/2019

EXPIRES: 02/10/2020

	BRADLEY REMUS 299 KIRE LANE GOLD BOND, VA 24 252-256-2041	150	C	2	RADLEY RI 99 KIRE LA 90LD BOND 52-256-204	NE 0, VA 24150
MECHANICAL,	H-2, H-3:	P.O. Box 13	HEATING ANE 32 ills, NC 27948	O COOLING		License: 11618 Expires: 12/31/2019
PARCEL:						
PIN:	988417223076	3		Parcel Number:	004046	033
Address:	541 PARKWO	OD DR KILL DE	VIL HILLS			
				Zoning	:	
Addition: Legal Desc	WRIGHT WOO	DS		Block:	0	Lot(s): 33
FEES:		Paid	Due			
Mechanical Per	mit Fee	\$150.00	\$0.00			
	Totals :	\$150.00	\$0.00			
		\$150.00				

#### MC2019-249

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PROJECT NAME: REMUS HVAC SITE ADDRESS: 541 PARKWOOD DR KILL DEVIL HILLS

EXPIRES: 02/10/2020

		DETAILS	
Permit			
Name	Value		
PURPOSE	Residential Repair/Remodel		
CONSTRUCTION COST	4990.00		
CONSTRUCTION TYPE	V		
FLOOD ZONE	AE		
BASE FLOOD ELEVATION	8.00		
NATURAL GAS SIGNOFF	N		
OCCUPANCY TYPE	One & Two Family Dwelling		

### **REQUIRED INSPECTIONS**

Final

#### CONDITIONS

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I hereby certify that I have read and examined this application and know the same to be true and correct. All provisions of Laws and Ordinances governing this type of work will be complied with whether specified herein or not. The granting of a permit does not presume to give authority to violate or cancel the provisions of any other state/local law regulating construction or the performance of construction.
Issued By: Contractor or Authorized Agent: Diabath Date: 6/6/19
Contractor or Authorized Agent: 11/2010 200 Date: 0/19/19

Printed by : Jordan Blythe on: 08/14/2019 09:21 AM



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

### **Planning and Inspection Department**

	<b>53</b> ME: EYE MINI SPLIT S: 115 OCEAN BAY		EVIL HILLS		MECHANICAL ISSUED: 08/16/2019 EXPIRES: 02/12/2020
APPLICANT:	ALLEN EYE 3997 DIXIE RIDGE R PENN LAIRD, VA 22		C	399	LEN EYE 197 DIXIE RIDGE RUN ENN LAIRD, VA 22846
H-3, CLASS I:		UNKNOW	EATING AND CO N N, XX 00000	OOLING	License: 22354 Expires: 12/31/2019
PARCEL:					
PIN:	988420708542			Parcel Number:	003863000
Address:	115 OCEAN B	AY BLVD KILL	DEVIL HILLS		
Addition: Legal Desc		SHORES - REV	ISED	Zoning: Block:	36 Lot(s): 20
FEES:		Paid	Due		
Mechanical Per	mit Fee	\$150.00	\$0.00		
	Totals :	\$150.00	\$0.00		
PROJECT DESC	CRIPTION: INSTALL	L MIN SPLIT SY	STEM UPPE	RFLOOR	

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Printed by : Jordan Blythe on: 08/16/2019 12:15 PM

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#### MC2019-253

PROJECT NAME: EYE MINI SPLIT SITE ADDRESS: 115 OCEAN BAY BLVD KILL DEVIL HILLS

#### MECHANICAL ISSUED: 08/16/2019

EXPIRES: 02/12/2020

		DETAILS	
Permit			
Name	Value		
PURPOSE	Residential Repair/Remodel		
CONSTRUCTION COST	1930.00		
CONSTRUCTION TYPE	V		
FLOOD ZONE	AE		
BASE FLOOD ELEVATION	8.00		
NATURAL GAS SIGNOFF	Ν		
OCCUPANCY TYPE	One & Two Family Dwelling		

#### **REQUIRED INSPECTIONS**

Final

#### CONDITIONS

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

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

Date:

Printed by : Jordan Blythe on: 08/16/2019 12:15 PM



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

#### **Planning and Inspection Department**

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MC2019-257 PROJECT NAME: Crain HVAC SITE ADDRESS: 1207 EIGHTH AVE KILL DEVIL HILLS MECHANICAL ISSUED: 08/21/2019

EXPIRES: 02/17/2020

Crain, Kevin 8134 Crandleberry Drive Crain, Kevin 8134 Crandleberry Drive APPLICANT: OWNER: MECHANICSVILLE, VA 23111 MECHANICSVILLE, VA 23111 H3, CLASS 1: OUTER BANKS HEATING AND COOLING License: 12643 Expires: 12/31/2019 P.O. Box 1415 Nags Head, NC 27959 441-1740 PARCEL: Parcel PIN: 988312756170 Number: Address: 1207 EIGHTH AVE KILL DEVIL HILLS Zoning: Lot(s): Addition: Block: Legal Description: Eight Avenue Townhomes Unit C FEES: Paid Due **Mechanical Permit Fee** \$150.00 \$0.00 Totals : \$150.00 \$0.00 PROJECT DESCRIPTION: C/O 2.5 Ton HVAC System DETAILS Permit Name Value PURPOSE Residential Repair/Remodel CONSTRUCTION COST 6171.00 CONSTRUCTION TYPE V FLOOD ZONE Х NATURAL GAS SIGNOFF Ν Printed by : CTHUMAN on: 08/21/2019 04:11 PM Page 1 of 2 MC2019-257 PROJECT NAME: Crain HVAC SITE ADDRESS: 1207 EIGHTH AVE KILL DEVIL HILLS

EXPIRES: 02/17/2020

#### **REQUIRED INSPECTIONS**

Final

#### CONDITIONS

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

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

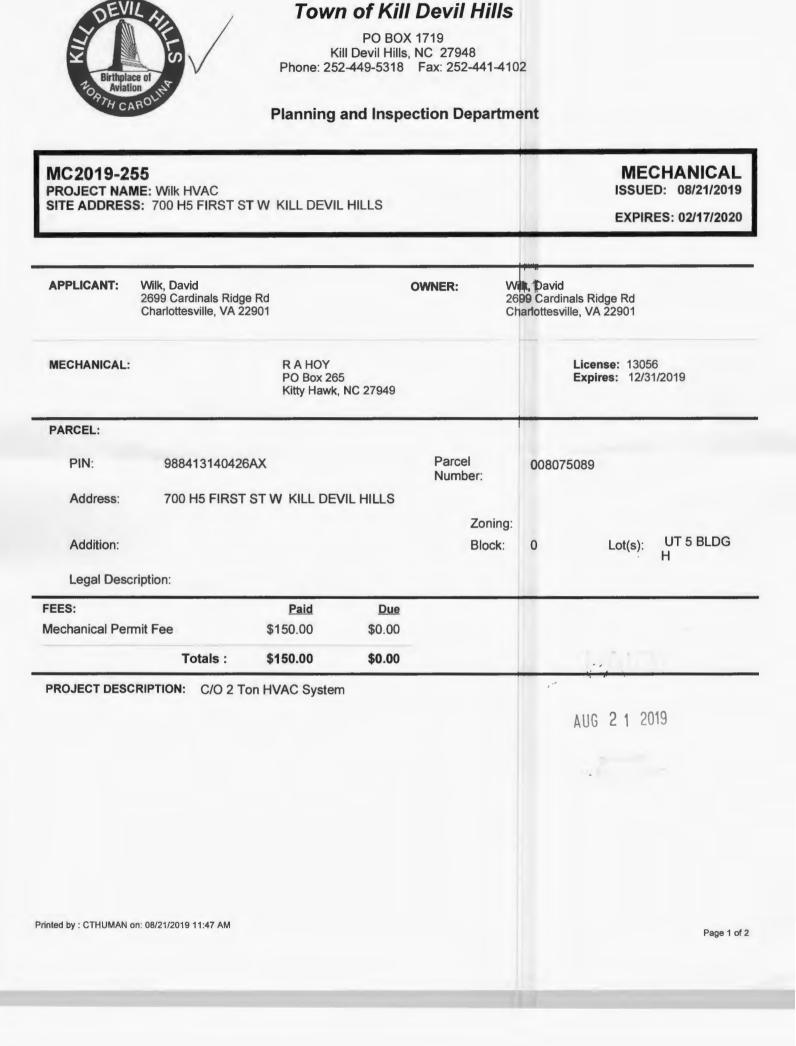
**Issued By:** 

Contractor or Authorized Agent:

Dong Med

Date: 8.22.19

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MC2019-255 PROJECT NAME: Wilk HVAC SITE ADDRESS: 700 H5 FIRST ST W KILL DEVIL HILLS

EXPIRES: 02/17/2020

Permit         Name       Value         PURPOSE       Residential Repair/Remodel         CONSTRUCTION COST       5000.00         CONSTRUCTION TYPE       V         FLOOD ZONE       AE         BASE FLOOD ELEVATION       8         NATURAL GAS SIGNOFF       N         REQUIRED INSPECTIONS         Final       CONDITIONS         This permit becomes null and void if work or construction authorized is not commenced within 6 months or if construction or work is suspended for a period of 12 months at any time after work has started.         Interesty certify that I have read and examined this application and know the same to be true and correct All provisions of Laws and Ordinance governing this type of work will be complied with whether specified herein or net. The granting of a permit does not presume to give authority to violate or cancel the provisions of any other station of a permit does not presume to give authority to violate or cancel the provisions of any other station of a permit does not presume to give authority to violate or cancel the provisions of any other station of a month at any time after work has started.         Staued By:	Name       Value         PURPOSE       Residential Repair/Remodel         CONSTRUCTION COST       5000.00         CONSTRUCTION TYPE       V         FLOOD ZONE       AE         BASE FLOOD ELEVATION       8         NATURAL GAS SIGNOFF       N         REQUIRED INSPECTIONS         Final         CONDITIONS         This permit becomes null and void if work or construction authorized is not commenced within 6 months or if construction or work is suspended for a period of 12 months at any time after work has started.         Intereby certify that I have read and examined this application and know the same to be true and correct All provisions of Laws and Ordinance geverning this type of work will be complied with whether specified herein or not. The erantury of a permit does not presume to give authority to violate or cancel the provisions of Laws and Ordinance geverning this type of work will be complied with whether specified herein or not. The erantury of a permit does not presume to give authority to violate or cancel the provisions of any other statelloop faw regulating construction or the performance of construction.         ssued By:       Wather and the performance of construction.		DETAILS	
PURPOSE Residential Repair/Remodel CONSTRUCTION COST 5000.00 CONSTRUCTION TYPE V FLOOD ZONE AE BASE FLOOD ELEVATION 8 NATURAL GAS SIGNOFF N REQUIRED INSPECTIONS Final This permit becomes null and void if work or construction authorized is not commenced within 6 months or if construction r work is suspended for a period of 12 months at any time after work has started.	PURPOSE Residential Repair/Remodel CONSTRUCTION COST 5000.00 CONSTRUCTION TYPE V FLOOD ZONE AE BASE FLOOD ELEVATION 8 NATURAL GAS SIGNOFF N REQUIRED INSPECTIONS Final This permit becomes null and void if work or construction authorized is not commenced within 6 months or if construction r work is suspended for a period of 12 months at any time after work has started.			
Repair/Remodel         CONSTRUCTION COST       5000.00         CONSTRUCTION TYPE       V         FLOOD ZONE       AE         BASE FLOOD ELEVATION       8         NATURAL GAS SIGNOFF       N         REQUIRED INSPECTIONS         Final         CONDITIONS         This permit becomes null and void if work or construction authorized is not commenced within 6 months or if construction r work is suspended for a period of 12 months at any time after work has started.         Nereby certify that I have read and examined this application and know the same to be true and correct NII provisions of Laws and Ordinances governing this type of work will be complied with whether specified herein or net. The granting of a permit does not presume to give authority to violate or cancel he provisions of Laws and Ordinances governing this type of work will be complied with whether specified herein or net. The granting of a permit does not presume to give authority to violate or cancel he provisions of Laws and Ordinance governing this type of work will be complied with whether specified herein or net. The granting of a permit does not presume to give authority to violate or cancel he provisions of Laws and Ordinance governing the synthese construction or the performance of construction.         State Construction or the performance of construction.	Repair/Remodel         CONSTRUCTION COST       5000.00         CONSTRUCTION TYPE       V         FLOOD ZONE       AE         BASE FLOOD ELEVATION       8         NATURAL GAS SIGNOFF       N         REQUIRED INSPECTIONS         Final         CONDITIONS         This permit becomes null and void if work or construction authorized is not commenced within 6 months or if construction r work is suspended for a period of 12 months at any time after work has started.         Nereby certify that I have read and examined this application and know the same to be true and correct NII provisions of Laws and Ordinances governing this type of work will be complied with whether specified herein or net. The granting of a permit does not presume to give authority to violate or cancel he provisions of Laws and Ordinances governing this type of work will be complied with whether specified herein or net. The granting of a permit does not presume to give authority to violate or cancel he provisions of Laws and Ordinance governing this type of work will be complied with whether specified herein or net. The granting of a permit does not presume to give authority to violate or cancel he provisions of Laws and Ordinance governing the synthese construction or the performance of construction.         State Construction or the performance of construction.			
CONSTRUCTION COST 5000.00 CONSTRUCTION TYPE V FLOOD ZONE AE BASE FLOOD ELEVATION 8 NATURAL GAS SIGNOFF N	CONSTRUCTION COST 5000.00 CONSTRUCTION TYPE V FLOOD ZONE AE BASE FLOOD ELEVATION 8 NATURAL GAS SIGNOFF N	PURPOSE		
FLOOD ZONE       AE         BASE FLOOD ELEVATION       8         NATURAL GAS SIGNOFF       N         REQUIRED INSPECTIONS         Final       CONDITIONS         This permit becomes null and void if work or construction authorized is not commenced within 6 months or if construction rwork is suspended for a period of 12 months at any time after work has started.         hereby certify that I have read and examined this application and know the same to be true and correct NI provisions of Laws and Ordinances governing this type of work will be complied with whether pecified herein or pet. The granting of a permit does not presume to give authority to violate or cancel he provisions of any other statehoral naw regulating construction or the performance of construction.         sued By:	FLOOD ZONE       AE         BASE FLOOD ELEVATION       8         NATURAL GAS SIGNOFF       N         REQUIRED INSPECTIONS         Final       CONDITIONS         This permit becomes null and void if work or construction authorized is not commenced within 6 months or if construction rwork is suspended for a period of 12 months at any time after work has started.         hereby certify that I have read and examined this application and know the same to be true and correct NI provisions of Laws and Ordinances governing this type of work will be complied with whether pecified herein or pet. The granting of a permit does not presume to give authority to violate or cancel he provisions of any other statehoral naw regulating construction or the performance of construction.         sued By:	CONSTRUCTION COST		
BASE FLOOD ELEVATION 8 NATURAL GAS SIGNOFF N REQUIRED INSPECTIONS Final CONDITIONS This permit becomes null and void if work or construction authorized is not commenced within 6 months or if construction rwork is suspended for a period of 12 months at any time after work has started. hereby certify that I have read and examined this application and know the same to be true and correct II provisions of Laws and Ordinances governing this type of work will be complied with whether specified herein or pet. The granting of a permit does not presume to give authority to violate or cancel he provisions of any other stational law regulating construction or the performance of construction. ssued By:	BASE FLOOD ELEVATION 8 NATURAL GAS SIGNOFF N REQUIRED INSPECTIONS Final CONDITIONS This permit becomes null and void if work or construction authorized is not commenced within 6 months or if construction rwork is suspended for a period of 12 months at any time after work has started. hereby certify that I have read and examined this application and know the same to be true and correct II provisions of Laws and Ordinances governing this type of work will be complied with whether specified herein or pet. The granting of a permit does not presume to give authority to violate or cancel he provisions of any other stational law regulating construction or the performance of construction. ssued By:	CONSTRUCTION TYPE	V	
NATURAL GAS SIGNOFF         N           REQUIRED INSPECTIONS           Final         CONDITIONS           This permit becomes null and void if work or construction authorized is not commenced within 6 months or if construction work is suspended for a period of 12 months at any time after work has started.           hereby certify that I have read and examined this application and know the same to be true and correct. It provisions of Laws and Ordinance governing this type of work will be complied with whether pecified herein or not. The granting of a permit does not presume to give authority to violate or cancel he provisions of any other state local law regulating construction or the performance of construction.           swed By:	NATURAL GAS SIGNOFF         N           REQUIRED INSPECTIONS           Final         CONDITIONS           This permit becomes null and void if work or construction authorized is not commenced within 6 months or if construction work is suspended for a period of 12 months at any time after work has started.           hereby certify that I have read and examined this application and know the same to be true and correct. It provisions of Laws and Ordinance governing this type of work will be complied with whether pecified herein or not. The granting of a permit does not presume to give authority to violate or cancel he provisions of any other state local law regulating construction or the performance of construction.           swed By:	FLOOD ZONE	AE	
REQUIRED INSPECTIONS         Final         CONDITIONS         This permit becomes null and void if work or construction authorized is not commenced within 6 months or if construction rwork is suspended for a period of 12 months at any time after work has started.         hereby certify that I have read and examined this application and know the same to be true and correct and provisions of Laws and Ordinances governing this type of work will be complied with whether specified herein or net. The granting of a permit does not presume to give authority to violate or cancel he provisions of any other stational law regulating construction or the performance of construction.         ssued By:	REQUIRED INSPECTIONS         Final         CONDITIONS         This permit becomes null and void if work or construction authorized is not commenced within 6 months or if construction rwork is suspended for a period of 12 months at any time after work has started.         hereby certify that I have read and examined this application and know the same to be true and correct and provisions of Laws and Ordinances governing this type of work will be complied with whether specified herein or net. The granting of a permit does not presume to give authority to violate or cancel he provisions of any other stational law regulating construction or the performance of construction.         ssued By:	BASE FLOOD ELEVATION	8	
Final CONDITIONS This permit becomes null and void if work or construction authorized is not commenced within 6 months or if construction r work is suspended for a period of 12 months at any time after work has started. Thereby certify that I have read and examined this application and know the same to be true and correct Ill provisions of Laws and Ordinances governing this type of work will be complied with whether specified herein or net. The granting of a permit does not presume to give authority to violate or cancel the provisions of any other statellocal law regulating construction or the performance of construction. Sued By:	Final CONDITIONS This permit becomes null and void if work or construction authorized is not commenced within 6 months or if construction r work is suspended for a period of 12 months at any time after work has started. Thereby certify that I have read and examined this application and know the same to be true and correct Ill provisions of Laws and Ordinances governing this type of work will be complied with whether specified herein or net. The granting of a permit does not presume to give authority to violate or cancel the provisions of any other statellocal law regulating construction or the performance of construction. Sued By:	NATURAL GAS SIGNOFF	Ν	
CONDITIONS This permit becomes null and void if work or construction authorized is not commenced within 6 months or if construction r work is suspended for a period of 12 months at any time after work has started.  hereby certify that I have read and examined this application and know the same to be true and correct All provisions of Laws and Ordinances governing this type of work will be complied with whether specified herein or net. The granting of a permit does not presume to give authority to violate or cancel he provisions of any other statellocal law regulating construction or the performance of construction. ssued By:	CONDITIONS This permit becomes null and void if work or construction authorized is not commenced within 6 months or if construction r work is suspended for a period of 12 months at any time after work has started.  hereby certify that I have read and examined this application and know the same to be true and correct All provisions of Laws and Ordinances governing this type of work will be complied with whether specified herein or net. The granting of a permit does not presume to give authority to violate or cancel he provisions of any other statellocal law regulating construction or the performance of construction. ssued By:		REQUIRED INSPECTIONS	
This permit becomes null and void if work or construction authorized is not commenced within 6 months or if construction r work is suspended for a period of 12 months at any time after work has started. hereby certify that I have read and examined this application and know the same to be true and correct All provisions of Laws and Ordinances governing this type of work will be complied with whether specified herein or not. The granting of a permit does not presume to give authority to violate or cancel the provisions of any other statellocal law regulating construction or the performance of construction. ssued By:	This permit becomes null and void if work or construction authorized is not commenced within 6 months or if construction r work is suspended for a period of 12 months at any time after work has started. hereby certify that I have read and examined this application and know the same to be true and correct All provisions of Laws and Ordinances governing this type of work will be complied with whether specified herein or not. The granting of a permit does not presume to give authority to violate or cancel the provisions of any other statellocal law regulating construction or the performance of construction. ssued By:	Final		
All provisions of Laws and Ordinances governing this type of work will be complied with whether specified herein or not. The granting of a permit does not presume to give authority to violate or cancel the provisions of any other statellocal law regulating construction or the performance of construction. ssued By:	All provisions of Laws and Ordinances governing this type of work will be complied with whether specified herein or not. The granting of a permit does not presume to give authority to violate or cancel the provisions of any other statellocal law regulating construction or the performance of construction. ssued By:		CONDITIONS	
Contractor or Authorized Agent: Knh Gallage Date: 8/21/19	Contractor or Authorized Agent: Knh Gallage Date: 8/21/9		void if work or construction authorized is not comm	enced within 6 months or if construction
		hereby certify that I have All provisions of Laws and specified herein or not. The he provisions of any othe	read and examined this application and known of or discussion of the provided	w the same to be true and correct be complied with whether give authority to violate or cancel he performance of construction.
		hereby certify that I have All provisions of Laws and specified herein or not. The the provisions of any other ssued By:	read and examined this application and known of a permit does not presume to a permit does not presume to a statellocal law regulating construction or the statellocal law regulating constructing construction or th	w the same to be true and correct be complied with whether give authority to violate or cancel he performance of construction.



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

## Planning and Inspection Department

	RLS Kill Devil	Hills		MECHANICAL ISSUED: 08/21/2019 EXPIRES: 02/17/2020
O BOX 622			OWNER:	Shelton, Michael PO BOX 622 nags head, nc 27959
				License: 13056 Expires: 12/31/2019
989313144047	09		Parcel Number:	
2010 VA DARE	TRLS Kill Dev	/il Hills		
			Zonin	ıg:
			Block	: Lot(s):
tion: Hughes Re	etreat Condo, Ur	nit 301		
	Paid	Due		
Fee	\$150.00	\$0.00		
Totals :	\$150.00	\$0.00		
	helton, Michael O BOX 622 ags head, nc 27959 989313144047 2010 VA DARE tion: Hughes Re	2010 VA DARE TRL S Kill Devil helton, Michael O BOX 622 ags head, nc 27959 R A HOY PO Box 263 Kitty Hawk, 98931314404709 2010 VA DARE TRL S Kill Devint tion: Hughes Retreat Condo, Unit Paid Fee \$150.00	2010 VA DARE TRL S Kill Devil Hills helton, Michael O BOX 622 ags head, nc 27959 R A HOY PO Box 265 Kitty Hawk, NC 27949 98931314404709 2010 VA DARE TRL S Kill Devil Hills tion: Hughes Retreat Condo, Unit 301 <u>Paid Due</u> \$150.00 \$0.00	2010 VA DARE TRL S Kill Devil Hills helton, Michael O BOX 622 ags head, nc 27959 R A HOY PO Box 265 Kitty Hawk, NC 27949 98931314404709 98931314404709 Parcel Number: 2010 VA DARE TRL S Kill Devil Hills Zonin Block tion: Hughes Retreat Condo, Unit 301 Fee \$150.00 \$0.00

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## MC2019-258

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PROJECT NAME: SITE ADDRESS: 2010 VA DARE TRL S Kill Devil Hills

EXPIRES: 02/17/2020

	DETAILS	
Permit		
Name	Value	
PURPOSE	Residential Repair/Remodel	
CONSTRUCTION COST	6000.00	
CONSTRUCTION TYPE	V	
FLOOD ZONE	AE	
BASE FLOOD ELEVATION	10	
NATURAL GAS SIGNOFF	N	
OCCUPANCY TYPE	Residential	
	REQUIRED INSPECTIONS	
Final		
	CONDITIONS	
work is suspended for a period	void if work or construction authorized is not commend of of 12 months at any time after work has started. read and examined this application and know	the same to be true and correct.
r work is suspended for a perio hereby certify that I have All provisions of Laws and specified herein or not. Th	void if work or construction authorized is not commend od of 12 months at any time after work has started. read and examined this application and know to l Ordinances governing this type of work will b e granting of a permit does not presume to give r state local law regulating construction or the	the same to be true and correct. be complied with whether re authority to violate or cancel
hereby certify that I have All provisions of Laws and pecified herein or not. Th he provisions of any othe ssued By:	void if work or construction authorized is not commend of 12 months at any time after work has started.	the same to be true and correct. The complied with whether the authority to violate or cancel performance of construction.



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

#### **Planning and Inspection Department**

#### MC2019-259

PROJECT NAME: DEAL HEAT PUMP REPLACEMENT SITE ADDRESS: 1700 VA DARE TRL N KILL DEVIL HILLS MECHANICAL ISSUED: 08/26/2019

EXPIRES: 02/22/2020

APPLICANT:	CAROL AND DAVIS I 2001 BANDENTON V APEX, NC 27502		c		CAROL AND I 2001 BANDEN APEX, NC 275	TON WAY	
H3, CLASS 1:		P.O. Box 14		G AND COOLING		icense: 1264 xpires: 12/3	
PARCEL:							
PIN:	988410478172			Parcel Number:	0028920	00	
Address:	1700 VA DARE	TRL N KILL D	EVIL HILLS				
				Zoning			
Addition:	CROATAN SHO	DRES		Block:	н	Lot(s):	PT 18 & 19
Legal Desc	cription:						
FEES:		Paid	Due				
Mechanical Per	mit Fee	\$150.00	\$0.00				
	Totals :	\$150.00	\$0.00				
PROJECT DESC	CRIPTION: Replace	heat pump syst	em		4 .	π	
					2 6 2019		
					5		
rinted by : Jordan Blyth	he on: 08/26/2019 01:30 PM						Page 1 of 2

## MC2019-259

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PROJECT NAME: DEAL HEAT PUMP REPLACEMENT SITE ADDRESS: 1700 VA DARE TRL N KILL DEVIL HILLS

EXPIRES: 02/22/2020

	DETAILS	
Permit		
Name	Value	
PURPOSE	Residential Repair/Remodel	
CONSTRUCTION COST	3400.00	
CONSTRUCTION TYPE	V	
FLOOD ZONE	AE	
BASE FLOOD ELEVATION	8.00	
NATURAL GAS SIGNOFF	N	
OCCUPANCY TYPE	One & Two Family Dwelling	
	REQUIRED INSPECTIONS	
Final		
This permit becomes null and work is suspended for a perior hereby certify that I have All provisions of Laws and pecified herein or not. Th	CONDITIONS	w the same to be true and correct I be complied with whether give authority to violate or cancel
This permit becomes null and or work is suspended for a perio hereby certify that I have All provisions of Laws and specified herein or not. Th	read and examined this application and known of a permit does not presume to granting of a permit does not presume to granting of a permit does not presume to granting of a permit does not presume to grant state/local law regulating construction or t	w the same to be true and correct. I be complied with whether give authority to violate or cancel
This permit becomes null and or work is suspended for a period hereby certify that I have All provisions of Laws and specified herein or not. The the provisions <del>of any othe</del> ssued By:	read and examined this application and known of a permit does not presume to granting of a permit does not presume to granting of a permit does not presume to granting of a permit does not presume to grant state/local law regulating construction or t	w the same to be true and correct. I be complied with whether give authority to violate or cancel he performance of construction.



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

#### Planning and Inspection Department

	60 ME: Vollbrecht HVA SS: 107 AVALON DR		HILLS		MECHANICAL ISSUED: 08/27/2019 EXPIRES: 02/23/2020
APPLICANT:	Robert Vollbrecht 414 Mowbray Arch NORFOLK, VA 2350 757-621-2796	07		41- NC	bert Vollbrecht 4 Mowbray Arch DRFOLK, VA 23507 7-621-2796
MECHANICAL,	PLUMBING, ELECTR	2039 Newb			LC License: 20044 H-3, P, 22217-L Expires: 12/31/2019
PARCEL:	· · · · ·				
PIN:	988517202617	7		Parcel Number:	001693000
Address:	107 AVALON	DR E KILL DEV	IL HILLS		
				Zoning:	
Addition:	AVALON BEA	СН		Block:	0 Lot(s): 38
Legal Desc	cription:				
FEES:		Paid	Due		
Mechanical Per	mit Fee	\$150.00	\$0.00		
	Totals :	\$150.00	\$0.00		

PAID

AUG 2 8 2019

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#### MC2019-260 PROJECT NAME: Vollbrecht HVAC SITE ADDRESS: 107 AVALON DR E KILL DEVIL HILLS

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EXPIRES: 02/23/2020

	DETAILS	
Permit		
Name	Value	
PURPOSE	Residential Repair/Remodel	
CONSTRUCTION COST	6575.00	
CONSTRUCTION TYPE	V	
FLOOD ZONE	AE	
BASE FLOOD ELEVATION	9	
NATURAL GAS SIGNOFF	Ν	
	REQUIRED INSPECTION	S
Final		
	CONDITIONS	
	void if work or construction authorized is not c od of 12 months at any time after work has star	
hereby certify that I have NII provisions of Laws and pecified herein or not. Th	read and examined this application and Ordinances governing this type of wor of granting of a permit does not presum	know the same to be true and correct. k will be complied with whether to give authority to violate or cancel
hereby certify that I have All provisions of Laws and specified herein or not. The he provisions of any othe	read and examined this application and	know the same to be true and correct. k will be complied with whether to give authority to violate or cancel
hereby certify that I have All provisions of Laws and specified herein or not. The he provisions of any othe	read and examined this application and Ordinances governing this type of wor of granting of a permit does not presum	know the same to be true and correct. k will be complied with whether to give authority to violate or cancel
hereby certify that I have All provisions of Laws and specified herein or not. Th	read and examined this application and localized of a permit does not presum state/local law regulating construction	know the same to be true and correct. k will be complied with whether to give authority to violate or cancel
hereby certify that I have All provisions of Laws and specified herein or not. Th he provisions of any othe ssued By:	read and examined this application and localized of a permit does not presum state/local law regulating construction	know the same to be true and correct. k will be complied with whether to give authority to violate or cancel or the performance of construction.
hereby certify that I have All provisions of Laws and specified herein or not. Th he provisions of any othe ssued By:	read and examined this application and localized of a permit does not presum state/local law regulating construction	know the same to be true and correct. k will be complied with whether to give authority to violate or cancel or the performance of construction.
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hereby certify that I have hereby certify that I have all provisions of Laws and pecified herein or not. The he provisions of any other ssued By:	read and examined this application and localized of a permit does not presum state/local law regulating construction	know the same to be true and correct. k will be complied with whether to give authority to violate or cancel or the performance of construction.
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hereby certify that I have All provisions of Laws and pecified herein or not. Th he provisions of any othe ssued By:	read and examined this application and localized of a permit does not presum state/local law regulating construction	know the same to be true and correct. k will be complied with whether to give authority to violate or cancel or the performance of construction.
hereby certify that I have All provisions of Laws and pecified herein or not. The he provisions of any othe ssued By:	read and examined this application and Ordinances governing this type of wor e granting of a permit does not presum state/local law regulating construction	know the same to be true and correct. k will be complied with whether to give authority to violate or cancel or the performance of construction.

MC2019-2 PROJECT NAI SITE ADDRES		.N KILL DEVIL I	HILLS			MECHANICAL ISSUED: 08/28/2019 EXPIRES: 02/24/2020
APPLICANT:	RALPH W LEARY 800 Frances Ln Kill Devil Hills, NC 27	7948		80	LPH W LEARY 0 Frances Ln I Devil Hills, NC	
H-3, CLASS I:		AIR-O-SMI 330 North I Southern S 252-261-52	Dogwood Trail hores, NC 279	949		nse: 30070 res: 12/31/2019
PARCEL:	0	10 m -				
PIN:	988405172597	7		Parcel Number:	028433000	
Address:	800 FRANCES	S LN KILL DEVI	L HILLS			
Addition:	WRIGHT'S SH			Zoning: Block:	0	Lot(s): 97
Legal Desc				DIOCK.	0	Lou(s). 37
EES:		Paid	Due			
Mechanical Per	mit Fee	\$150.00	\$0.00			
kkés, késésépi séripe ja, artantapa, kés, artakén kesetékenék	Totals :	\$150.00	\$0.00			· · · ·
PROJECT DESC	CRIPTION: Install m	ini-split system.				8
						AUG 28 2019

#### MC2019-262 PROJECT NAME:

SITE ADDRESS: 800 FRANCES LN KILL DEVIL HILLS

#### MECHANICAL ISSUED: 08/28/2019

EXPIRES: 02/24/2020

1

#### DETAILS

Permit	
Name	Value
PURPOSE	Residential Repair/Remodel
CONSTRUCTION COST	9600.00
CONSTRUCTION TYPE	V
FLOOD ZONE	Х
NATURAL GAS SIGNOFF	N
OCCUPANCY TYPE	One & Two Family Dwelling

#### **REQUIRED INSPECTIONS**

Final

#### CONDITIONS

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

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

Issued By:

Contractor or Authorized Agent:

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Date: 8/28/19

Printed by : Marty Shaw on: 08/28/2019 02:33 PM



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

#### **Planning and Inspection Department**

MC2019-261 PROJECT NAME: SITE ADDRESS: 312 ST LOUIS ST KILL DEVIL HILLS MECHANICAL ISSUED: 08/28/2019

EXPIRES: 02/24/2020

APPLICANT:	PAGE, DANNY P 1317 WHISPER DRI VIRGINIA BEACH, V		c		PAGE, DANN 1317 WHISP VIRGINIA BE	
MECHANICAL,	, H-2, H-3:	P.O. Box 1	HEATING AND 32 ills, NC 27948	COOLING		License: 11618 Expires: 12/31/2019
PARCEL:						
PIN:	987516848442	2		Parcel Number:	002955	000
Address:	312 ST LOUIS	ST KILL DEVIL	HILLS			
				Zoning	<b>j</b> :	
Addition:	ORVILLE BEA	CH WEST		Block:	0	Lot(s): 72
Legal Des	cription:					
FEES:		Paid	Due			
Mechanical Per	rmit Fee	\$150.00	\$0.00			
	Totals :	\$150.00	\$0.00			

PROJECT DESCRIPTION: HVAC changeout

AUG 2 8 2019

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Printed by : Marty Shaw on: 08/28/2019 09:45 AM

#### MC2019-261 PROJECT NAME:

SITE ADDRESS: 312 ST LOUIS ST KILL DEVIL HILLS

#### MECHANICAL ISSUED: 08/28/2019

EXPIRES: 02/24/2020

### DETAILS Permit Name Value PURPOSE Residential Repair/Remodel 4850.00 CONSTRUCTION COST V CONSTRUCTION TYPE FLOOD ZONE Х NATURAL GAS SIGNOFF N OCCUPANCY TYPE One & Two Family Dwelling **REQUIRED INSPECTIONS** Final CONDITIONS This permit becomes null and void if work or construction authorized is not commenced within 6 months or if construction or work is suspended for a period of 12 months at any time after work has started.

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

**Contractor or Authorized Agent:** 

Date: 6/28/10

Printed by : Marty Shaw on: 08/28/2019 09:45 AM



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## Town of Kill Devil Hills

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

#### **Planning and Inspection Department**

MC2019-263 PROJECT NAME: DUVALL HVAC SITE ADDRESS: 503 QUAIL LN KIL	L DEVIL HILLS		MECHANICAL ISSUED: 08/29/2019 EXPIRES: 02/25/2020
APPLICANT: DUVAL, DOUG 503 QUAIL LANE KILL DEVIL HILLS, NC	27948	5	UVAL, DOUG 03 QUAIL LANE ILL DEVIL HILLS, NC 27948
MECHANICAL H-3, CLASS 1:	Anderson Heating and PO Box 396 Kitty Hawk, NC 27949 252-619-3105		License: 31438 Expires: 12/31/2019
PARCEL:			
PIN: 988315734244		Parcel Number:	004890004
Address: 503 QUAIL LN K	ILL DEVIL HILLS		
		Zoning:	
Addition: Legal Description:		Block:	G Lot(s): 4
FEES:	Paid Due		
Mechanical Permit Fee	\$150.00 \$0.00	0	
Totals :	\$150.00 \$0.00	0	
PROJECT DESCRIPTION: HVAC CH.	ANGE OUT		11(1)
			AUG 2 9 2019

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MC2019-263 PROJECT NAME: DUVALL HVAC SITE ADDRESS: 503 QUAIL LN KILL DEVIL HILLS

EXPIRES: 02/25/2020

	DETAILS	
Permit		
Name	Value	
PURPOSE	Residential Repair/Remodel	
CONSTRUCTION COST	11000.00	
CONSTRUCTION TYPE	V	
FLOOD ZONE	х	
NATURAL GAS SIGNOFF	N	
OCCUPANCY TYPE	One & Two Family Dwelling	
	REQUIRED INSPECTI	SNC
Final		
work is suspended for a peri hereby certify that I have	od of 12 months at any time after work has read and examined this application d Ordinances governing this type of	and know the same to be true and correct. work will be complied with whether
r work is suspended for a peri hereby certify that I have	read and examined this application d Ordinances governing this type of the granting of a permit does not pres	started. and know the same to be true and correct.
hereby certify that I have All provisions of Laws and specified herein or not. The he provisions of any other ssued By:	read and examined this application d Ordinances governing this type of the granting of a permit does not pres	and know the same to be true and correct. work will be complied with whether ume to give authority to violate or cancel tion or the performance of construction.



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

AUG 1 4 2019

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#### **Planning and Inspection Department**

OP2019-049

PROJECT NAME: Jimy Rivera SITE ADDRESS: 503 THIRD ST W KILL DEVIL HILLS OCCUPANCY ISSUED: 08/13/2019

EXPIRES:

#### PARENT PERMIT #: BJ2018-243

APPLICANT:	Rivera, Jimy 425 Linda Drive WASHINGTON, NC 252-423-1043	27889		OWNER:	Rivera, Jimy 425 Linda Driva WASHINGTON 252-423-1043		
GENERAL:		Self UNKNOWN UNKNOWN 917-862-90	V, XX 00000		Li	cense: Unlicense kpires: 12/31/20	
PARCEL:							
PIN:	98840926396	9		Parcel Number:	02405700	00	
Address:	503 THIRD ST	W KILL DEVIL	HILLS				
				Zonin	g:		
Addition:	CROATAN SH	IORES INC SEC	: 1	Block	: 6	Lot(s): 2	
Legal Desc	cription:						
FEES:	····	Paid	Due				
Certificate of Oc	ccupancy Fee	\$50.00	\$0.00				
Residential Tras	sh Can	\$106.75	\$0.00				
	Totals :	\$156.75	\$0.00				

PROJECT DESCRIPTION: New 4 Bedroom SFD

Printed by : Marty Shaw on: 08/13/2019 04:36 PM

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OP2019-049 PROJECT NAME: Jimy Rivera SITE ADDRESS: 503 THIRD ST W KILL DEVIL HILLS

EXPIRES:

Permit         Name       Value         # OTTASH CANS       1         PURPOSE       Residential New         ZONING DISTRICT       RL         FLOOD ZONE       X         OCCUPANCY TYPE       One & Two Family         Dwelling       Doelling             TONDITIONS              hereby certify that I have read and examined this application and know the same to be true and correct.         A provisions of Laws and Ordinances governing this type of work will be complied with whether specified herein or not. The granting of a permit does not presume to give authority to violate or cancel he provisions of au ofner state/local law regulating construction or the performance of construction.          saud By:		DETAILS	
# OF TRASH CANS       1         PURPOSE       Residential New         ZONING DISTRICT       RL         FLOOD ZONE       X         OCCUPANCY TYPE       One & Two Family         Dwelling       Dwelling	Permit		
PURPOSE       Residential New         ZONING DISTRICT       RL         FLOOD ZONE       X         OCCUPANCY TYPE       One & Two Family         Dwelling       Dwelling    hereby certify that I have read and examined this application and know the same to be true and correct all provisions of Laws and Ordinances governing this type of work will be complied with whether pecified herein or not. The granting of a permit does not presume to give authority to violate or cancel he provisions of any other state/local law regulating construction or the performance of construction.         ssued By:	Name	Value	
ZONING DISTRICT       RL         FLOOD ZONE       X         DOCCUPANCY TYPE       One & Two Family         Dwelling	# OF TRASH CANS	1	
PLOOD ZONE       X         DOCUPANCY TYPE       Date Two Family Detelling         CONDITIONS	PURPOSE	Residential New	
DOCUPANCY TYPE Determining Develling DOCUPANCY TYPE Develling DOCUPANCY TYPE CONDITIONS Development De	ZONING DISTRICT	RL	
Dwelling  CONDITIONS  hereby certify that I have read and examined this application and know the same to be true and correct il provisions of Laws and Ordinances governing this type of work will be complied with whether pecified herein or not. The granting of a permit does not presume to give authority to violate or cancel ne provisions of any other state/local law regulating construction or the performance of construction.  sued By:	FLOOD ZONE	x	
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esued By:	pecified herein or not.	The granting of a permit does not presume to	give authority to violate or cancel
ontractor or Authorized Agent: <u>Jimp Rivera</u> Date: <u>B-14-19</u>	ne provisions of any of	ther state/local law regulating construction or	the performance of construction.
red by : Marty Shaw or: 08/13/2019 04:38 PM	sued By:	A	
ted by : Marty Shaw or: 08/13/2019 04:38 PM	V		
ted by : Marty Shaw or: 08/13/2019 04:38 PM			
red by : Marty Shaw on: 08/13/2019 04:36 PM	ontractor or Authorize	Agent: Jimy Rivera	Date: <u>9-14-19</u>
ted by : Marty Shaw on: 08/13/2019 04:38 PM	contractor or Authorize	Agent: Jimy Rivera	Date: <u>9-14-19</u>
ted by : Marty Shaw on: 08/13/2019 04:36 PM	contractor or Authorize	Agent: Jimy Rivera	Date: <u>8-14-19</u>
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ted by : Marty Shaw on: 08/13/2019 04:36 PM Page 2 o	contractor or Authorize	Agent: <u>JimpRivera</u>	Date: <u>9-14-14</u>
nted by : Marty Shaw on: 08/13/2019 04:36 PM Page 2 o	contractor or Authorize	Agent: <u>Jimp Rivera</u>	Date: <u>8-14-19</u>
Page 2 o	Contractor or Authorize	Agent: <u>JimpRivera</u>	Date: <u>9-14-14</u>
			Date: <u>9-14-14</u>
			Date: <u>9-14-14</u>



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

### **Planning and Inspection Department**

SITE ADDRESS	E: John and Mary 5: 234 EDEN ST S		- HILLS				EUPANCY : 08/20/2019 EXPIRES:
					PA	RENT PERMI	T #: BJ2018-066
APPLICANT:	FRANK SOLES/SAN 400 DaVinci Lane kitty hawk, nc 27949 757-448-8162		MES C	PC	nteli, John D Box 742 anteo, NC 2795 2-489-1875	54	
CONTRACTOR:	Sandy Bottom Home 400 DaVinci Lane kitty hawk, nc 27949 757-448-8162				- <u>\$</u> -192		
GENERAL BUILI	DING-LIMITED:	SANDY BC 400 DaVind kitty hawk, 757-448-81	nc 27949	3		ires: 01/01/2	2020
PARCEL:							
PIN:	988517019136	3		Parcel Number:	000472000		
Address:	234 EDEN ST	ST W KILL DEV	/IL HILLS				
				Zoning:			
Addition:	VIRGINIA DAF	RE SHORES		Block:	27	Lot(s):	37-38
Legal Descri	iption:						
FEES:		Paid	Due				
Certificate of Occ		\$50.00	\$0.00				
Residential Trash		\$106.75	\$0.00				
	Totals :	\$156.75	\$0.00				
PROJECT DESCR	RIPTION: Propose	d 3 bedroom sin	gle family dwe	elling			
		1					
	14.25						
	AUG 2.0 2019						
nted by : Marty Shaw or	n: 08/20/2019 08:34 AM						Page 1 of 2

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OP2019-050 PROJECT NAME: John and Mary Bartell SITE ADDRESS: 234 EDEN ST ST W KILL DEVIL HILLS

EXPIRES:

		DETAILS		
Permit		_		
Name	Value			
# OF TRASH CANS	1 .			
PURPOSE	<b>Residential New</b>			
ZONING DISTRICT	RL			
LOOD ZONE	AE			
BASE FLOOD ELEVATION	8			
DCCUPANCY TYPE	One & Two Family Dwelling			
	C	ONDITIONS		
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# Birthplace of Aviation R7H CAROLINE

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## Town of Kill Devil Hills

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

### **Planning and Inspection Department**

OP2019-08 PROJECT NA SITE ADDRES	51 ME: Carl Worsley N S: 2703 BAY DR H	ew SFD KILL DEVIL HILL	S		OCCUPANCY ISSUED: 08/20/2019 EXPIRES:
					PARENT PERMIT #: BJ2019-071
APPLICANT:	WORSLEY, CARL/ PO Box 188 Nags Head, NC 279 252-441-0500		ANY (	PONA	ORSLEY, CARL/ WORSLEY COMPANY D Box 188 ags Head, NC 27959 2-441-0500
GENERAL, UNI	LIMITED:	PO Box 18	, NC 27959	DCIATES	License: 58569 Expires: 12/31/2019
PARCEL:					
PIN:	98752080788	9		Parcel Number:	016626004
Address:	2703 BAY DR	KILL DEVIL HIL	LS		
				Zoning:	
Addition:	VIRGINIA DAI	RE SHORES		Block:	81 Lot(s): 3
Legal Desc	ription:				
FEES:		Paid	Due		
Certificate of Oc	cupancy Fee	\$50.00	\$0.00		
Residential Tras	sh Can	\$106.75	\$0.00		
	Totals :	\$156.75	\$0.00		
PROJECT DESC	CRIPTION: New 4 E	Bedroom single fa	amily dwelling		
				· · · · · · · · · · · · · · · · · · ·	
			Auc	6 2 0 <sub>2019</sub>	
inted by . Marty Shaw	on: 08/20/2019 09:07 AM				Page 1 of 2

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OP2019-051 PROJECT NAME: Carl Worsley New SFD SITE ADDRESS: 2703 BAY DR KILL DEVIL HILLS

EXPIRES:

	DETAILS		
Permit	N-los		
Name	Value		
# OF TRASH CANS	1 Decidential New		
PURPOSE	Residential New		
ZONING DISTRICT FLOOD ZONE	RL AE		
BASE FLOOD ELEVATION	A⊑ 8		
OCCUPANCY TYPE	One & Two Family Dwelling		
	CONDITIONS		
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PO BOX 1719 Kill Devil Hills, NC 27948 Phone: 252-449-5318 Fax: 252-441-4102

AUG 2 2 2019

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## Planning and Inspection Department

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: Sandy Bottom H 519 W Aycock S	omes/Frank Sol treet Kill Devil H	es lills		OCCUPANCY ISSUED: 08/22/2019 EXPIRES:
				PARENT PERMIT #: BJ2019-06
00 EAST BLACKMA	AN ST	o	20 Kil	BX COTTAGES LLC 0 EAST BLACKMAN ST I Devil HillsI, NC 27948 2-207-5475
andy Bottom Home 00 DaVinci Lane itty hawk, nc 27949 57-448-8162	S		De ontre lann, cristen el	
NG-LIMITED:	400 DaVino kitty hawk,	ci Lane nc 27949		License: 67524 Expires: 01/01/2020
987520906503			Parcel Number:	
519 W Aycock	Street Kill Devil	Hills		
				Lot(s):
tion: Lots 11 &	12, Block 73		DIOCK.	Lui(s).
	Paid	Due		
pancy Fee	\$50.00	\$0.00		
Can	\$106.75	\$0.00		
Totals :	\$156.75	\$0.00		
	00 EAST BLACKMA ill Devil Hillsl, NC 27 52-207-5475 andy Bottom Home 00 DaVinci Lane tty hawk, nc 27949 57-448-8162 NG-LIMITED: 987520906503 519 W Aycock tion: Lots 11 & pancy Fee Can	andy Bottom Homes 00 DaVinci Lane tty hawk, nc 27949 57-448-8162 NG-LIMITED: SANDY BC 400 DaVinc kitty hawk, 757-448-81 987520906503 519 W Aycock Street Kill Devil tion: Lots 11 & 12, Block 73 Paid pancy Fee \$50.00 Can \$106.75 Totals : \$156.75	00 EAST BLACKMAN ST         ill Devil Hillsl, NC 27948         52-207-5475         andy Bottom Homes         00 DaVinci Lane         tty hawk, nc 27949         57-448-8162         NG-LIMITED:       SANDY BOTTOM HOMES         400 DaVinci Lane         kitty hawk, nc 27949         757-448-8162         987520906503         519 W Aycock Street Kill Devil Hills         tion:       Lots 11 & 12, Block 73         Paid       Due         pancy Fee       \$50.00       \$0.00         Can       \$106.75       \$0.00	00 EAST BLACKMAN ST       20         III Devil Hillsl, NC 27948       Kil         52-207-5475       25         andy Bottom Homes       00 DaVinci Lane         tty hawk, nc 27949       57-448-8162         NG-LIMITED:       SANDY BOTTOM HOMES         400 DaVinci Lane       400 DaVinci Lane         kitty hawk, nc 27949       757-448-8162         987520906503       Parcel         987520906503       Parcel         Number:       519 W Aycock Street Kill Devil Hills         Zoning:       Block:         tion:       Lots 11 & 12, Block 73         Pancy Fee       \$50.00         \$106.75       \$0.00         Totals :       \$156.75

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#### OP2019-052

4

PROJECT NAME: Sandy Bottom Homes/Frank Soles SITE ADDRESS: 519 W Aycock Street Kill Devil Hills

**EXPIRES:** 

	DETAILS		
Permit			
Name	Value		
# OF TRASH CANS	1		
PURPOSE	Residential New		
ZONING DISTRICT	RL		
FLOOD ZONE	AE		
BASE FLOOD ELEVATION	8		
OCCUPANCY TYPE	One & Two Family Dwelling		
	CONDITIONS		
	reau and examined this application at	u know the same t	o be true and correct.
Il provisions of Laws and	Ordinances governing this type of we	ork will be complied	a with whether
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All provisions of Laws and specified herein or not. Th he provisions of any othe ssued By:	I Ordinances governing this type of we be granting of a permit does not presure r state/local law regulating construction Agent:	ne to give authority on or the performan	to violate or cancel ace of construction.



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## Town of Kill Devil Hills

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

AUG 1 4 2019

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### **Planning and Inspection Department**

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OP2019-04 PROJECT NAM SITE ADDRESS	H8 ME: Sandy Bottom H S: 907 THIRD ST \	Homes W KILL DEVIL HI	LLS			OCCUPANCY ISSUED: 08/12/2019 EXPIRES:
					PA	RENT PERMIT #: BJ2018-0
APPLICANT:	FRANK SOLES 400 Da Vinci Lane kitty hawk, nc 27949 757-448-8162	)	C	400 kitt	ndy Bottom H DaVinci Lan y hawk, nc 27 -448-8162	e
GENERAL BUIL	DING-LIMITED:	SANDY BO 400 DaVino kitty hawk, 1 757-448-81	nc 27949	5		ense: 67524 bires: 01/01/2020
PARCEL:						
PIN:	98840916233	8		Parcel Number:	002564000	)
Address:	907 THIRD S	TW KILL DEVIL	HILLS			
				Zoning:		
Addition:	CROATAN SH	HORES SUBDIV		Block:	14	Lot(s): 4
Legal Desc	ription:					
FEES:		Paid	Due			
Certificate of Oc	cupancy Fee	\$50.00	\$0.00			
Residential Tras	sh Can	\$106.75	\$0.00			
	Totals :	\$156.75	\$0.00			

Printed by : Marty Shaw on: 08/12/2019 04:31 PM

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OP2019-048 PROJECT NAME: Sandy Bottom Homes SITE ADDRESS: 907 THIRD ST W KILL DEVIL HILLS

EXPIRES:

	DETAILS	
Permit		
Name	Value	
# OF TRASH CANS	1	
PURPOSE	Residential New	
ZONING DISTRICT	RL	
FLOOD ZONE	AE	
BASE FLOOD ELEVATION	8	
OCCUPANCY TYPE	One & Two Family Dwelling	
	CONDITIONS	
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PO BOX 1719 Kill Devil Hills, NC 27948 Phone: 252-449-5318 Fax: 252-441-4102

# AUG - 8 2019

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#### **Planning and Inspection Department**

OCCUPANCY OP2019-019 PROJECT NAME: C&T Contracting SITE ADDRESS: 306 QUAIL LN KILL DEVIL HILLS ISSUED: 05/23/2019 EXPIRES: PARENT PERMIT #: BJ2018-204 APPLICANT: C & T CONTRACTING OWNER: **C & T CONTRACTING** 1700 Bell Ave. Kill Devil Hills, NC 27948 252-202-9943 1700 Bell Ave. Kill Devil Hills, NC 27948 252-202-9943 C & T CONTRACTING 1700 Bell Ave. License: 45367 Expires: 01/01/2020 BUILDING LIMITED: Kill Devil Hills, NC 27948 252-202-9943 PARCEL: Parcel PIN: 988316847471 027004008 Number: 306 QUAIL LN KILL DEVIL HILLS Address: Zoning: Addition: WHISPERING PINES SEC 2 & 3 Block: E Lot(s): 8 Legal Description: FEES: Paid Due Certificate of Occupancy Fee \$50.00 \$0.00 **Residential Trash Can** \$106.75 \$0.00 Totals : \$156.75 \$0.00 PROJECT DESCRIPTION: Proposed 4 Bedroom SFD DETAILS Permit Name Value **# OF TRASH CANS** 1 PURPOSE **Residential New ZONING DISTRICT** RL FLOOD ZONE х Printed by : CTHUMAN on: 05/23/2019 02:23 PM Page 1 of 2

OP2019-019 PROJECT NAME: C&T Contracting		OCCUPANC
SITE ADDRESS: 306 QUAIL LN KILL DEVIL HILLS		EXPIRES:
CON	DITIONS	
hereby certify that I have read and examined this II provisions of Laws and Ordinances governing pecified herein or not. The granting of a permit d he provisions of any other state/becal law regulat ssued By:	application and know the same to be this type of work will be complied wit oes not presume to give authority to ing construction or the performance o	e true and correct. th whether violate or cancel of construction.
	Date:	18/19
Contractor or Authorized Agent:	Date:	
contractor or Authorized Agent:	Date:	
ontractor or Authorized Agent:	Date:	
ontractor or Authorized Agent:	Date:	
contractor or Authorized Agent:	Date:	
ontractor or Authorized Agent:	Date:	
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PO BOX 1719 Kill Devil Hills, NC 27948 Phone: 252-449-5318 Fax: 252-441-4102

### **Planning and Inspection Department**

AUG - 6 2019

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AD INT

OP2019-046 PROJECT NAME: Richard Greenlee SITE ADDRESS: 1404 FIRST ST W KILL DEVIL HILLS OCCUPANCY ISSUED: 08/01/2019

**EXPIRES:** 

APPLICANT:	APPLICANT: SAUNDERS, KIRK Y 3708 Herbert Perrry rd. Kitty Hawk, NC 27949 252-202-8418			1	GREENLEE, RICHARD P 1402 W FIRST STREET KILL DEVIL HILLS, NC 27948		
GENERAL BUI	LDING:		ert Permy rd. NC 27949			License: 80402 Expires: 08/31/2019	
PARCEL:							
PIN:	988417117707			Parcel Number:	004046	046	
Address:	1404 FIRST ST		HILLS				
				Zoning	:		
Addition:	WRIGHT WOO	DS		Block:	0	Lot(s): 46	
Legal Desc	cription:						
FEES:		Paid	Due				
Certificate of O	ccupancy Fee	\$50.00	\$0.00				
Professional additional data from a filled water of the second	Totals :	\$50.00	\$0.00				

PROJECT DESCRIPTION: Proposed 4 bedroom single family dwelling

Printed by : Ryan Lang on: 08/01/2019 11:29 AM

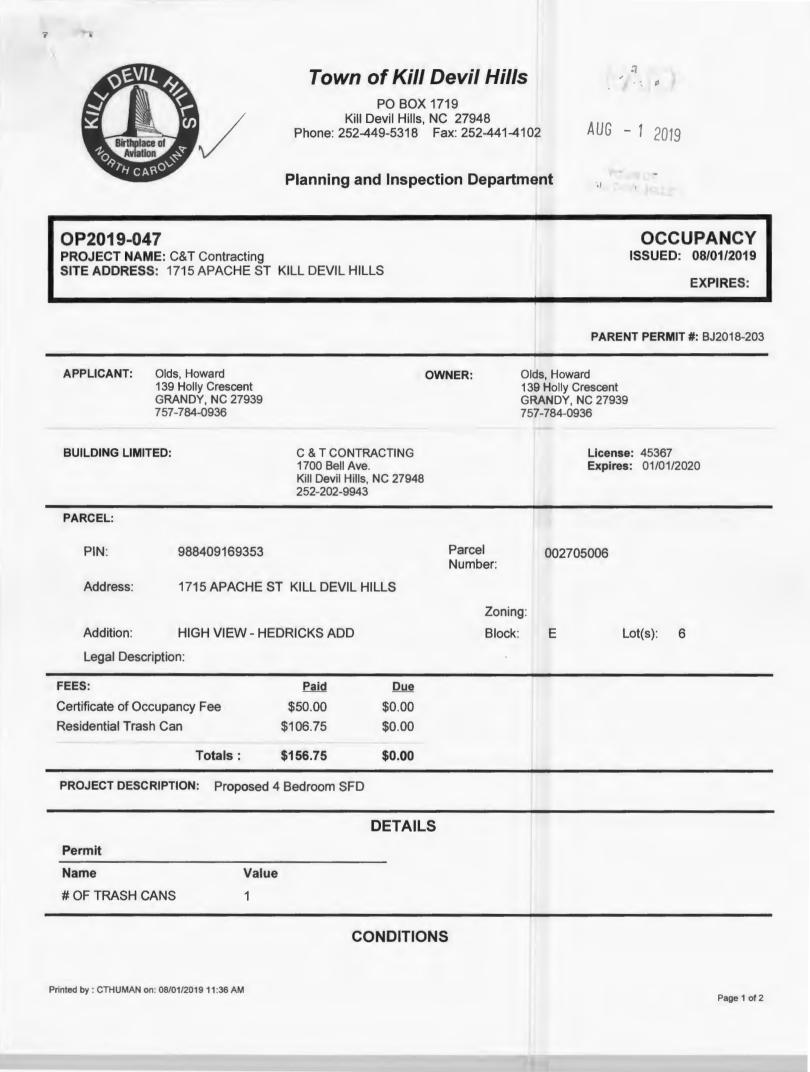
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OP2019-046 PROJECT NAME: Richard Greenlee SITE ADDRESS: 1404 FIRST ST W KILL DEVIL HILLS

# OCCUPANCY ISSUED: 08/01/2019

**EXPIRES:** 

	DETAILS			
Permit Name	Value			
# OF TRASH CANS	1 Residential New			
PURPOSE				
ZONING DISTRICT FLOOD ZONE	RL AE			
BASE FLOOD ELEVATION	9.0			
OCCUPANCY TYPE	One & Two Family Dwelling			
	CONDITIONS			
				_
				in and correct
hereby certify that I have Il provisions of Laws and	read and examined this applicati d Ordinances governing this type	on and know t of work will be	complied with v	whether
Il provisions of Laws and pecified herein or not. The	d Ordinances governing this type le granting of a permit does not p	of work will be resume to give	a complied with v authority to viol	vhether late or cancel
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Il provisions of Laws and pecified herein or not. The provisions of any othe ssued By:	d Ordinances governing this type he granting of a permit does not p er state/local law regulating const K. A. A.	of work will be resume to give	e complied with v authority to viol performance of c	vhether late or cancel
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All provisions of Laws and pecified herein or not. The	d Ordinances governing this type he granting of a permit does not p ex state/local law regulating const Agent: Kikk Kaune	of work will be resume to give	e complied with v authority to viol performance of c	vhether late or cancel



OP2019-047 PROJECT NAME: C&T Contracting SITE ADDRESS: 1715 APACHE ST KILL DEVIL HILLS

OCCUPANCY ISSUED: 08/01/2019

Date: 8/1/59

EXPIRES:

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

Issued By;

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Contractor or Authorized Agent:

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PROJECT NAME: Run Hill Garage Building 6 SITE ADDRESS: 1001 Run Hill Court Kill Devil Hills

OP2019-053

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# Town of Kill Devil Hills

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

AUG 2 3 2019

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### **Planning and Inspection Department**

OCCUPANCY

ISSUED: 08/23/2019

EXPIRES:

					PARENT PERMIT #: BJ2018-184
APPLICANT:	Run Hill Apartments, LLC PO Box 90 Kill Devil Hills, NC 27948 252-441-9003		O		Run Hill Apartments, LLC PO Box 90 KIII Devil Hills, NC 27948 252-441-9003
GENERAL BUI	LDING - LIMITED:		STRUCTION Itan Hwy, Suite s, NC 27948 03	301	License: 62306 Expires: 12/30/2019
PARCEL:					
PIN:	988306486111509			Parcel Number:	
Address:	1001 Run Hill Cour	t Kill Devil Hi	ills		
				Zoning	3:
Addition:				Block:	Lot(s):
Legal Desc	cription: Run Hill Garag	e Building 1,	Bermuda Bay	, Building 509	
EES:		Paid	Due		
Certificate of O	ccupancy Fee	\$50.00	\$0.00		
turtadu,Migi a,atragokat ≈atasta	Totals :	\$50.00	\$0.00		

PROJECT DESCRIPTION: 8 unit garage w/ storage

Printed by : Marty Shaw on: 08/23/2019 01:15 PM

### OP2019-053

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PROJECT NAME: Run Hill Garage Building 6 SITE ADDRESS: 1001 Run Hill Court Kill Devil Hills

EXPIRES:

-	DETAILS	
Permit		
Name	Value	
# OF TRASH CANS	0	
PURPOSE	Residential New	
ZONING DISTRICT	G&I Public	
FLOOD ZONE	x	
OCCUPANCY TYPE	Residential	
	CONDITIONS	
specified herein or not. he provisions of any o	The granting of a permit does not presur ther state/local law regulating construction	ork will be complied with whether ne to give authority to violate or cance on or the performance of construction.
specified herein or not. the provisions of any o Issued By:	The granting of a permit does not presure ther state/local law regulating construction	me to give authority to violate or cance
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the provisions of any o	The granting of a permit does not presure ther state/local law regulating construction	ne to give authority to violate or cance on or the performance of construction.



PROJECT NAME: Run Hill Apartments Building 501 SITE ADDRESS: 1000 Run Hill Ct Kill Devil Hills

OP2019-055

# Town of Kill Devil Hills

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

### **Planning and Inspection Department**

AUG 2 3 2019

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OCCUPANCY ISSUED: 08/23/2019

**EXPIRES:** 

PARENT PERMIT #: BJ2018-185

APPLICANT:	Run Hill Apartments, LLC PO Box 90 Kill Devil Hills, NC 27948 252-441-9003		O	WNER:	Run Hill Apartm PO Box 90 Kill Devil Hills, N 252-441-9003		
GENERAL BUI	ILDING - LIMITED:	1314 S Croa PO Box 90	STRUCTION atan Hwy, Suite Is, NC 27948 03	ə 301		cense: 62306 (pires: 12/30/2019	
PARCEL:							
PIN:	988306486111502			Parcel Number:			
Address:	1000 Run Hill Ct K	ill Devil Hills					
				Zoni	-		
Addition:		nanta Dama	ida Davi Can	Bloc	K:	Lot(s):	
Legal Des	cription: Run Hill Apartr			aye 4	_		
FEES: Certificate of O	ccupancy Fee	Paid \$50.00	<u>Due</u> \$0.00				
		\$50.00	\$0.00				
PROJECT DES	CRIPTION: 32 unit, 4-sto	ory apartmen	t building.				
			DETAILS	6			
		(	CONDITION	NS			
rinted by : Marty Shav	w on: 08/23/2019 03:16 PM						Page 1 of

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

Contractor or Authorized Agent: 4

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Date: 8/23/19

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

### **Planning and Inspection Department**

### BP2019-175

PROJECT NAME: HITE WINDOW REPLACEMENT SITE ADDRESS: 102 AVALON DR W KILL DEVIL HILLS BUILDING ISSUED: 08/01/2019

EXPIRES: 01/28/2020

APPLICANT:	HITE, LYNETTE J P O BOX 426 CLARKSVILLE, VA 2	3927	(	P	HTE, LYNE O BOX 42 CLARKSVIL	TTE J 6 LE, VA 23927
GENERAL:		Self UNKNOWI UNKNOWI 917-862-90	N, XX 00000			License: Unlicensed Expires: 12/31/2020
PARCEL:						
PIN:	988517107690	I		Parcel Number:	001728	3000
Address:	102 AVALON [	DR W KILL DE	/IL HILLS			
				Zoning	:	
Addition:	AVALON BEAG	CH		Block:	0	Lot(s): 86
Legal Desc	cription:					
FEES:		Paid	Due			
Building Permit Fee	Fee - Minimum	\$150.00	\$0.00			
	Totals :	\$150.00	\$0.00			
PROJECT DES	CRIPTION: REPLAC	E WINDOWS A	ND SHEATH	ING		
AL	JG - 1 2019					
	e on: 08/01/2019 09:18 AM					
						Page 1 of



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# Town of Kill Devil Hills

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

AUG - 1 2019

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### **Planning and Inspection Department**

BUILDING

BP2019-174 PROJECT NAME: Tienken Deck and Stair replacement SITE ADDRESS: 1508 DOGWOOD LN KILL DEVIL HILLS

ISSUED: 07/31/2019

EXPIRES: 01/27/2020

APPLICANT:	William Tienken 1508 Dogwood Ln. Kill Devil Hillsl, NC 27 804-651-3673	948	c		William Tienk 1508 Dogwo Kill Devil Hills 804-651-367	od Ln. sl, NC 27948	
CONTRACTOR:	2 GUYS SERVICES 605 W. Archdale St. Kill Devil Hills, NC 27 252-489-8753	948					
GENERAL BUIL	DING - LIMITED:	2 GUYS SE 605 W. Arc Kill Devil Hi 252-489-87	hdale St. ills, NC 27948			License: 75144 Expires: 12/31/2019	
PARCEL:							
PIN:	988413137782			Parcel Number:	026980	0000	
Address:	1508 DOGWO	OD LN KILL DE	VIL HILLS				
				Zoning	g:		
Addition:	FIRST FLIGHT	VLG PH A SEC	3	Block:	0	Lot(s): 49	
Legal Descr	iption:						
FEES:		Paid	Due				
Building Permit F Fee	ee - Minimum	\$150.00	\$0.00				
	Totals :	\$150.00	\$0.00				

PROJECT DESCRIPTION: replace deck floorboards, replace pickets and stairs to same footprint

Printed by : CTHUMAN on: 07/31/2019 02:08 PM



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

## **Planning and Inspection Department**

BP2019-17 PROJECT NAI SITE ADDRES	76 ME: DANIEL STAIR S: 1207 WRIGHTS	REBUILD VILLE BLVD KIL	L DEVIL HIL	LS	BUILDING ISSUED: 08/01/2019 EXPIRES: 01/28/2020
APPLICANT:	SHARON DANIEL 1207 WRIGHTSVILL Kill Devil Hills, NC 27 540-241-2156				SHARON DANIEL 1207 WRIGHTSVILLE BLVD Kill Devil Hills, NC 27948 540-241-2156
GENERAL:		Self UNKNOWN UNKNOWN 917-862-90	I, XX 00000		License: Unlicensed Expires: 12/31/2020
PARCEL:					
PIN:	988312975218	3		Parcel Number:	004231027
Address:	1207 WRIGHT	SVILLE BLVD		ILLS	
				Zoning	
Addition:	KILL DEVIL H	LLS SEC 1		Block:	16 Lot(s): 27
Legal Desc	cription:				
FEES: Building Permit Fee	Fee - Minimum	<u>Paid</u> \$150.00	<u>Due</u> \$0.00		
	Totals :	\$150.00	\$0.00		
PROJECT DESC	CRIPTION: REBUIL	D STAIRS ON N	ORTH END	OF PROPERTY	
A	UG - 1 2019				
rinted by : Jordan Blyth	ne on: 08/01/2019 09:36 AM				Page 1 of

### **BP2019-176**

-

PROJECT NAME: DANIEL STAIR REBUILD SITE ADDRESS: 1207 WRIGHTSVILLE BLVD KILL DEVIL HILLS

### BUILDING ISSUED: 08/01/2019

EXPIRES: 01/28/2020

	DE	TAILS	
Permit			
Name	Value		
CAMA PERMIT	N		
CAMA EXEMPTION	Ν		
ZONING DISTRICT	С		
PURPOSE	Residential Repair/Remodel		
FRONT YARD SETBACK	30		
SIDE YARD SETBACK	8		
REAR YARD SETBACK	20% Depth >30		
FLOOD ZONE	AE		
BASE FLOOD ELEVATION	8.00		
FINAL ELEVATION CERTIFICATE	Ν		
CONSTRUCTION COST	800.00		
CONSTRUCTION TYPE	V		
OCCUPANCY TYPE	One & Two Family Dwelling		

### JUIKED INSP ECHONS

**Zoning Final** 

Final

### CONDITIONS

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

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

Issued By:	performance of construction.
Contractor or Authorized Agent: Kutt	Date: 8-1-19

Printed by : Jordan Blythe on: 08/01/2019 09:36 AM



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# Town of Kill Devil Hills

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

AUG - 2 2019

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### **Planning and Inspection Department**

# BP2019-170 PROJECT NAME: Collins Deck and Stair repair SITE ADDRESS: 338 CHOWAN ST W KILL DEVIL HILLS BUILDING ISSUED: 07/29/2019 EXPIRES: 01/25/2020

APPLICANT:	Collins, Pamela 990-9 Springfield Drive ELLICOTT CITY, MD		c	1		
CONTRACTOR:	Perrin, Jay - OBX Dec PO Box 1734 Kill Devil Hills, NC 279 252-305-6000					
CONTRACTOR:		PO Box 17	ills, NC 27948			icense: 1234567 Expires: 05/31/2025
PARCEL:						
PIN:	987520926227			Parcel Number:	0005580	000
Address:	338 CHOWAN	ST W KILL DE	VIL HILLS			
				Zoning	J:	
Addition:	VIRGINIA DAR	E SHORES		Block:	41	Lot(s): 38-40
Legal Descr	iption:					
FEES:		Paid	Due			
Building Permit F Fee	Fee - Minimum	\$150.00	\$0.00			
e demonstra da a dalaria a 1 di mandalistis distan nan Andrews	Totals :	\$150.00	\$0.00			

PROJECT DESCRIPTION: Replace existing deck and rails, replace stairs both to same footprint

Printed by : Marty Shaw on: 07/29/2019 04:20 PM

### BP2019-170

PROJECT NAME: Collins Deck and Stair repair SITE ADDRESS: 338 CHOWAN ST W KILL DEVIL HILLS

BUILDING ISSUED: 07/29/2019

EXPIRES: 01/25/2020

	DETAIL	
P	DETAILS	5
Permit		
Name	Value	
CAMA PERMIT	N	
CAMA EXEMPTION	N	
ZONING DISTRICT	RL	
PURPOSE	Residential Repair/Remodel	
FRONT YARD SETBACK	30	
SIDE YARD SETBACK	10	
REAR YARD SETBACK	20% Depth >30	
HEALTH DEPARTMENT PERMIT #	28910	
FLOOD ZONE	х	
FINAL ELEVATION CERTIFICATE	Ν	
CONSTRUCTION COST	12500.00	
LOT COVERAGE	33.00	
SURVEYOR NAME AND NUMBER	William S Jones L-2532	
OCCUPANCY TYPE	One & Two Family Dwelling	

### **REQUIRED INSPECTIONS**

**Zoning Final** 

Final

### CONDITIONS

*	This permit becomes null and void if work or construction authorized is not commenced within 6 months or if construction
0	r work is suspended for a period of 12 months at any time after work has started.
*	Construction must meet all aspect of Chapter 153 Zoning including lot coverage and setbacks.
*	Zoning Final Inspection is required.

Printed by : Marty Shaw on: 07/29/2019 04:20 PM



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

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### **Planning and Inspection Department**

TO 1 TO 1

### BP2019-169 PROJECT NAME: Flythe Deck and stair replacement SITE ADDRESS: 2036 ELIZABETH CITY ST KILL DEVIL HILLS

### BUILDING

ISSUED: 07/30/2019

EXPIRES: 01/26/2020

	RT 2 BOX 308 CONWAY, NC 27820				T 2 BOX 30 ONWAY, NO		
CONTRACTOR:	Perrin, Jay - OBX Der PO Box 1734 Kill Devil Hills, NC 27 252-305-6000						
CONTRACTOR:		PO Box 17:	IIs, NC 27948		-	License: 1234567 Expires: 05/31/2025	
PARCEL:							
PIN:	988517108080			Parcel Number:	001175	000	
Address:	2036 ELIZABE	TH CITY ST KI	LL DEVIL HIL	LS			
				Zoning:			
Addition:	AVALON BEAG	HANNEX 2 & 3	3	Block:	0	Lot(s): 715	
Legal Descr	ription:						
FEES:		Paid	Due				
Building Permit F Fee	Fee - Minimum	\$150.00	\$0.00				
	Totals :	\$150.00	\$0.00				

PROJECT DESCRIPTION: Replace existing decking and rails, replace stairs both to same footprint

Printed by : CTHUMAN on: 07/30/2019 08:01 AM

### BP2019-169

PROJECT NAME: Flythe Deck and stair replacement SITE ADDRESS: 2036 ELIZABETH CITY ST KILL DEVIL HILLS

BUILDING ISSUED: 07/30/2019

EXPIRES: 01/26/2020

	C	DETAILS
Permit		
Name	Value	_
CAMA PERMIT	N	
CAMA EXEMPTION	N	
ZONING DISTRICT	RL	
PURPOSE	Residential Repair/Remodel	
FRONT YARD SETBACK	15	
SIDE YARD SETBACK	6	
REAR YARD SETBACK	20% Depth >30	
HEALTH DEPARTMENT PERMIT #	28911	
FLOOD ZONE	AE	
BASE FLOOD ELEVATION	9.0	
FINAL ELEVATION CERTIFICATE	Ν	
CONSTRUCTION COST	7500.00	
LOT COVERAGE	34.00	
SURVEYOR NAME AND NUMBER	Manson Ray Meekins L 2592	
OCCUPANCY TYPE	One & Two Family Dwelling	

### **REQUIRED INSPECTIONS**

**Zoning Final** 

Final

### CONDITIONS

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

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

\* Zoning Final Inspection is required.

Printed by : CTHUMAN on: 07/30/2019 08:01 AM

### BP2019-169 PROJECT NAME: Flythe Deck and stair replacement SITE ADDRESS: 2036 ELIZABETH CITY ST KILL DEVIL HILLS

7

BUILDING ISSUED: 07/30/2019

EXPIRES: 01/26/2020

I hereby certify that I have read and examined this application a All provisions of Laws and Ordinances governing this type of w specified herein or not. The granting of a permit does not presu the provisions of any other state local law regulating construction	ork will be complied with whether me to give authority to violate or cancel
Issued By:	<i>C</i> (2,10)
Contractor or Authorized Agent:	Date: <u>8-2-19</u>
$\langle \rangle$	

Printed by : CTHUMAN on: 07/30/2019 08:01 AM

Page 3 of 3



7

2

# Town of Kill Devil Hills

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

# PAID

AUG - 5 2019

### **Planning and Inspection Department**

TOWN OF KILL DEVIL HILLS

BJ2019-142 PROJECT NAME: SITE ADDRESS: 1724 UPPER DUNE RD KILL DEVIL HILLS

### BUILDING JOINT ISSUED: 08/02/2019

EXPIRES: 01/29/2020

APPLICANT:	Paul & Mary Stea 6537 Seapearl Ln. Columbia, MD 21045 252-449-4423	5-4634			Paul & Ma 6537 Sea Columbia, 252-449-4	pearl Ln. , MD 21045-4634
GENERAL BUIL	DING, LIMITED:	801 Indian		ning Pools & Constr 8		License: 53785 Expires:
PARCEL:						
PIN:	988409164318	3		Parcel Number:	0025	565000
Address:	1724 UPPER I	DUNE RD KILL	DEVIL HILL	S		
				Zoning	J:	
Addition:	CROATAN SH	ORES SUBDIV		Block:	14	Lot(s): 5
Legal Desc	ription:					
FEES:		Paid	Due	BUILDING AREA	:	
Building Permit I Fee	Fee - Minimum	\$150.00	\$0.00	Remodel/Renov	ation	205 SQFT
	Totals :	\$150.00	\$0.00			

PROJECT DESCRIPTION: Remodel kitchen. Relocate plumbing and electrical as needed.

Printed by : Marty Shaw on: 08/02/2019 08:39 AM

BJ2019-142

7

4.

PROJECT NAME: SITE ADDRESS: 1724 UPPER DUNE RD KILL DEVIL HILLS

**BUILDING JOINT** ISSUED: 08/02/2019

EXPIRES: 01/29/2020

	DETAILS
Permit	
Name	Value
ZONING DISTRICT	RL
CAMA PERMIT	N
CAMA EXEMPTION	N
FLOOD ZONE	x
SUBSTANTIAL IMPROVEMENT	NO
PURPOSE	Residential Repair/Remodel
CONSTRUCTION TYPE	V
CONSTRUCTION COST	40000.00
TOTAL SQUARE FOOTAGE	205
CULVERT	N
DRIVEWAY INVERT 2	N
Rough In Insulation	REQUIRED INSPECTIONS Final
	CONDITIONS
This permit becomes null and	Department (252) 480-4080 before pouring drivewayl void if work or construction authorized is not commenced within 6 months or if construction d of 12 months at any time after work has started.



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

### **Planning and Inspection Department**

BJ2019-145 PROJECT NAME: SITE ADDRESS:	: Britt Repair 904 MEMORIAL	. BLVD N KILL D	EVIL HILLS	;	BUILDING JOINT ISSUED: 08/07/2019 EXPIRES: 02/03/202
12 Oc	RITT AND BRITT I 2033 Hamden Dakton, VA 22124 03-629-7194	PROPERTIES, LLC	0	OWNER:	BRITT AND BRITT PROPERTIES, LLC 12033 Hamden Oakton, VA 22124 703-629-7194
CONTRACTOR:		SAME AS O UNKNOWN UNKNOWN			License: Same as Owner Expires: 12/30/2019
PARCEL:					
PIN:	98841562862	4		Parcel Number:	028672000
Address:	904 MEMORI	IAL BLVD N KILL	. DEVIL HILI		
				Zon	ning:
Addition:	KITTY HAWK	SHORES - REVI	ISED	Bloc	ock: 45 Lot(s): 2
Legal Descript	tion:				
FEES:		Paid	Due		
Building Permit Fee Fee	e - Minimum	\$150.00	\$0.00		
	Totals :	\$150.00	\$0.00		

PROJECT DESCRIPTION: Repair water damage including plumbing, insulation and drywall

AUG - 7 2019 .

Printed by : CTHUMAN on: 08/07/2019 12:31 PM

### BJ2019-145

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4

PROJECT NAME: Britt Repair SITE ADDRESS: 904 MEMORIAL BLVD N KILL DEVIL HILLS BUILDING JOINT ISSUED: 08/07/2019

EXPIRES: 02/03/2020

		DETAILS	
Permit			
Name	Value		
ZONING DISTRICT	RL		
FRONT YARD SETBACK	30		
REAR YARD SETBACK	20% Depth >30		
SIDE YARD SETBACK	8		
CAMA PERMIT	Ν		
CAMA EXEMPTION	N		
FLOOD ZONE	AE		
BASE FLOOD ELEVATION	8		
SUBSTANTIAL IMPROVEMENT	NO		
PURPOSE	Residential Repair/Remodel		
CONSTRUCTION COST	5000.00		
CULVERT	Ν		
DRIVEWAY INVERT 2	N		

### CONDITIONS

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

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

Printed by : CTHUMAN on: 08/07/2019 12:31 PM

Insulation

BJ2019-145	
PROJECT NAME: Britt Repair	
SITE ADDRESS: 904 MEMORIAL BLVD N KILL DEVIL	HILLS

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EXPIRES: 02/03/2020

I hereby certify that I have read and examined this application and know the All provisions of Laws and Ordinances governing this type of work will be co specified herein or not. The grapting of a permit does not presume to give an the provisions of any other state local law regulating construction or the per Issued By:	omplied with whether uthority to violate or cancel
Contractor or Authorized Agent: Venue C. Buil	Date: 87719

Printed by : CTHUMAN on: 08/07/2019 12:31 PM

Page 3 of 3



7

# Town of Kill Devil Hills

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

AUG - 8 2019

# Planning and Inspection Department

BJ2019-143 PROJECT NAME: Bakopoulos SITE ADDRESS: 518 Eden Si	s New SFD treet W Kill Devil Hill	S		BUILDING JOINT ISSUED: 08/08/2019 EXPIRES: 02/04/2020
APPLICANT: NICHOLAS BAI 107 St. Clair Sti Kill Devil Hills, N	reet		OWNER: NICHOLAS BA 107 St. Clair S Kill Devil Hills,	treet
CONTRACTOR: Hughes, Ryland 3945 Pine Way kitty hawk, nc 2	Drive			
BUILDING LIMITED:	Hughes, R 3945 Pinev kitty hawk,			icense: 76503 xpires: 12/31/2019
PARCEL:				
PIN: 98752090		()).	Parcel Number:	
Address: 518 Eden	Street W Kill Devil H	IIIS	Zoning:	
Addition:			Block:	Lot(s):
	29 and 30 Block 73 V	irginia Dare		
EES:	Paid	Due	BUILDING AREA:	
Covered Porch Residential	\$87.00	\$0.00	Covered Porches/Decks	116 SQFT
Open Deck Fee	\$150.00	\$0.00	Open Decks	1 EA
Res. Building Permit Fee	\$1,465.85	\$0.00	Resdiential Unheated (.40)	149 Sq. Ft
ſ-Pole	\$50.00	\$0.00	Residential Heated Space	1875 sq. Ft.
Totals	: \$1,752.85	\$0.00	(.75) # of Temporary Poles	1 EA
PROJECT DESCRIPTION: Nev	v 3 Bedroom SFD		I own or K F	
			PAI	a
nted by : Marty Chan an 00/00/0040 04-50				3670
nted by : Marty Shaw on: 08/08/2019 01:53 I	PM			Page 1 of

EXPIRES: 02/04/2020

I hereby certify that I have read and examined this application and know the same to be true and correct.
All provisions of Laws and Ordinances governing this type of work will be complied with whether
specified herein or not. The granting of a permit does not presume to give authority to violate or cancel
the provisions of any other state/local law regulating construction or the performance of construction.
1121
Issued By:Mar(8)

Contractor or Authorized Agent: 10K

Date: 8-8-19

Printed by : Marty Shaw on: 08/08/2019 01:53 PM

Page 4 of 4



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

AUG - 9 2019

, 2

### **Planning and Inspection Department**

BJ2019-14 PROJECT NAM SITE ADDRESS	1 IE: 2 Guys Services New 5: 613 WALKER ST W	/ House KILL DEVIL HILLS		BUILDING JOINT ISSUED: 08/08/2019 EXPIRES: 02/04/2020
APPLICANT:	D & E Investments LLC 605 W. Archdale St. Kill Devil Hillsl, NC 27948 261-0702		OWNER:	D & E Investments LLC 605 W. Archdale St. Kill Devil Hillsl, NC 27948 261-0702
CONTRACTOR:	2 GUYS SERVICES 605 W. Archdale St. Kill Devil Hills, NC 27948 252-489-8753			
GENERAL BUIL	DING - LIMITED:	2 GUYS SERVICES 605 W. Archdale St. Kill Devil Hills, NC 279	48	License: 75144 Expires: 12/31/2019

		252-489-87	'53				
PARCEL:							
PIN:	98752090051	0		Parcel 001946000 Number:		0	
Address:	613 WALKER	ST W KILL DEV	IL HILLS				
				Zoning:			
Addition:	VIRGINIA DA	RE SHORES		Block:	79	Lot(s): 5-7	
Legal Description	on:						
EES:		Paid	Due	BUILDING AREA:			
Res. Building Permit	Fee	\$1,636.90	\$0.00	# of Temporary Poles		1 EA	
Covered Porch Residential		\$216.75	\$0.00	Covered Porches/Decks		289 SQFT	
Pool/Hot Tub \$200.0		\$200.00	\$0.00	Resdiential Unheated (.40)		496 Sq. Ft	
T-Pole		\$50.00	\$0.00	Residential Heater	. ,	1918 sq. Ft.	
	Totals :	\$2,103.65	\$0.00	(.75)		-	

PROJECT DESCRIPTION: New 3 Bedroom SFD

Town of Kur Devir Hills Water Charges PAID Water Tap #: T23669

8

Printed by : CTHUMAN on: 08/08/2019 04:38 PM

### BJ2019-141 PROJECT NAME: 2 Guys Services New House SITE ADDRESS: 613 WALKER ST W KILL DEVIL HILLS

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### CONDITIONS

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

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

\* As-built survey will be required prior to Certificate of Occupancy or Certificate of Compliance.

\* The developer shall be responsible for maintaining erosion and sediment control at the disturbed area.

\* A final elevation certificate will be required prior to issuance of a Certificate of Occupancy or a Certificate of Compliance in accordance with 151.41(C).

\* Development must meet all aspects of Chapter 151 Flood Damage Prevention Ordinance including use and elevation.

\* THIS PROPERTY IS LOCATED IN A SPECIAL FLOOD HAZARD AREA.

1. All Special Flood Hazard Areas limit the use of enclosures below the lowest floor for parking, building access and limited storage only.

2. In the VE Zone, there shall be no alteration of the sand dunes which would increase potential flood damage.

3. In the VE Zone, there shall be no fill used for stuctual support.

4. Elevation Certificate will be required at time of application, 21 days from the establishment of the lowest floor and at construction completion.

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

\* Per §153.082(B)(1)(c) Mechanical equipment, including HVAC equipment and LP Gas equipment shall not project into a minimum yard setback more than four (4) feet.

- \* Must comply with Wind Borne Debris requirements as defined in NCBC R301.2.1.2 and NCBC 1609.2.
- \* Construction must meet all aspect of Chapter 153 Zoning including lot coverage and setbacks.
- \* Zoning Final Inspection is required.

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

Contractor or Authorized Agent:

**Issued By:** 

Printed by : CTHUMAN on: 08/08/2019 04:38 PM

Page 3 of 3

Date: 8/9/19



PROJECT NAME: PALUMBO STAIR REBUILD

SITE ADDRESS: 806 CEDAR DR KILL DEVIL HILLS

BP2019-184

# Town of Kill Devil Hills

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

AUG 1 2 2019

### **Planning and Inspection Department**

### BUILDING ISSUED: 08/12/2019

EXPIRES: 02/08/2020

	Alder, Rebecca 806 Cedar Drive Kill Devil Hillsl, NC 2 276-492-1847	7948			Alder, Rebec 806 Cedar D Kill Devil Hills 276-492-184	rive sl, NC 27948
GENERAL:		Self UNKNOWN UNKNOWN 917-862-90	N, XX 00000			License: Unlicensed Expires: 12/31/2020
PARCEL:						
PIN:	988413132194			Parcel Number:	016560	000
Address:	806 CEDAR D	R KILL DEVIL H	HILLS			
				Zoning	ı:	
Addition:				Block:	0	Lot(s): 143
Legal Descri	ption:					
FEES:		Paid	Due			
Building Permit Fee	ee - Minimum	\$150.00	\$0.00			
	Totals :	\$150.00	\$0.00			

Printed by : Jordan Blythe on: 08/12/2019 09:10 AM

### **BP2019-184**

-

PROJECT NAME: PALUMBO STAIR REBUILD SITE ADDRESS: 806 CEDAR DR KILL DEVIL HILLS

EXPIRES: 02/08/2020

		DETAILS	
Permit			
Name	Value		
CAMA PERMIT	N		
CAMA EXEMPTION	N		
ZONING DISTRICT	RL		
PURPOSE	Residential Repair/Remodel		
FRONT YARD SETBACK	30		
SIDE YARD SETBACK	10		
REAR YARD SETBACK	20% Depth >30		
FLOOD ZONE	AE		
BASE FLOOD ELEVATION	9.00		
FINAL ELEVATION CERTIFICATE	Ν		
CONSTRUCTION COST	1000.00		
LOT COVERAGE	22.00		
CONSTRUCTION TYPE	V		
SURVEYOR NAME AND NUMBER	MARTIN BARNETTE		
OCCUPANCY TYPE	One & Two Family Dwelling		

### **REQUIRED INSPECTIONS**

**Zoning Final** 

Final

### CONDITIONS

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

Printed by : Jordan Blythe on: 08/12/2019 09:10 AM

PROJECT NAME: PALUMBO STAIR REBUILD SITE ADDRESS: 806 CEDAR DR KILL DEVIL HILLS

EXPIRES: 02/08/2020

I hereby certify that I have read and examined this application and know the same to be true and correct. All provisions of Laws and Ordinances governing this type of work will be complied with whether
specified herein or not. The granting of a permit does not presume to give authority to violate or cancel
the provisions of any other state/local law regulating construction or the performance of construction.
155
Issued By:
Contractor or Authorized Agent: Date: 8/12/19

Printed by : Jordan Blythe on: 08/12/2019 09:10 AM

Page 3 of 3



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

### Planning and Inspection Department

### BJ2019-150

4

PROJECT NAME: Combs Pool Install SITE ADDRESS: 810 CEDAR DR KILL DEVIL HILLS BUILDING JOIN

ISSUED: 08/12/20

EXPIRES: 02/08/20

APPLICANT:	Combs, Robert W OV 4740 Black Hollow Heights Dublin, VA 24084		WNER:	Combs, Robert W 4740 Black Hollow Heights Dublin, VA 24084	
CONTRACTOR:	CARRIBEAN POOLS & PO BOX 65 kitty hawk, nc 27949 252-207-1773	& SPAS			
GENERAL:		CARRIBE PO BOX 6 kitty hawk, 252-207-1	nc 27949	PAS	License: 48519 Expires: 12/30/2019
PARCEL:				1	
PIN:	988413131265			Parcel Number:	027541000
Address:	810 CEDAR DR	KILL DEVIL I	HILLS		
Addition:				Zoni Bloc	
Legal Descr	iption:				
FEES:		Paid	Due		
Pool/Hot Tub Pool/Hot Tub		\$200.00 \$200.00	\$0.00 \$0.00		
u Barter Mir Tar, J. d'ana Madhatan, J. Bara a' MANYA, MANA	Totals :	\$400.00	\$0.00		
PROJECT DESCI	RIPTION: In ground	pool and hot t	ub installation	AUG	1 3 2019
rinted by : Marty Shaw or	n: 08/12/2019 01:18 PM				

### BJ2019-150 PROJECT NAME: Combs Pool Install SITE ADDRESS: 810 CEDAR DR KILL DEVIL HILLS

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### BUILDING JOIN ISSUED: 08/12/20

EXPIRES: 02/08/20

	DETAI	LS
Permit		
Name	Value	
ZONING DISTRICT	RL	
FRONT YARD SETBACK	30	
REAR YARD SETBACK	20% Depth >30	
SIDE YARD SETBACK	10	
HEALTH DEPARTMENT PERMIT #	28940	
CAMA PERMIT	N	
CAMA EXEMPTION	Ν	
FLOOD ZONE	AE	
BASE FLOOD ELEVATION	9.0	
SUBSTANTIAL IMPROVEMENT	NO	
PURPOSE	<b>Residential Accessory</b>	
CONSTRUCTION COST	50874.00	
LOT COVERAGE	37.00	
SURVEYOR NAME AND NUMBER	Martin Barnette L-3740	
CULVERT	N	
DRIVEWAY INVERT 2	N	
OCCUPANCY TYPE	One & Two Family Dwelling	

### **REQUIRED INSPECTIONS**

Slab/Foundation/Piling Final Zoning Final

Pool Bonding

### CONDITIONS

<ul> <li>* This permit becomes null and void if work or construction authorized is not commenced within 6 months or if constructio or work is suspended for a period of 12 months at any time after work has started.</li> <li>* As-built survey will be required prior to Certificate of Occupancy or Certificate of Compliance.</li> </ul>
* Construction must meet all aspect of Chapter 153 Zoning including lot coverage and setbacks.
* Zoning Final Inspection is required.

Printed by : Marty Shaw on: 08/12/2019 01:18 PM

Pag

EXPIRES: 02/08/20

Date: 8-13-19

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

Issued By:

Contractor or Authorized Agent.

Printed by : Marty Shaw on: 08/12/2019 01:18 PM

Page



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

### **Planning and Inspection Department**

BJ2019-136 PROJECT NAME: PRY Investments Inc. SITE ADDRESS: 1717 APACHE ST KILL DEVIL HILLS BUILDING JOINT ISSUED: 08/12/2019

EXPIRES: 02/08/2020

APPLICANT:	C & T CONTRAC 1700 Bell Ave. Kill Devil Hills, NC 252-202-9943		narrangan any ang kan sa 19. Jawa kala na	OWNER:	PRY Investmer 116 Discovery WILLIAMSBUR 757-784-0936	Lane		
BUILDING LIMITED:		1700 Bell A Kill Devil H	C & T CONTRACTING 1700 Bell Ave. Kill Devil Hills, NC 27948 252-202-9943		License: 45367 Expires: 01/01/2020			
PARCEL:								
PIN:	9884091693	28		Parcel Number:	00270500	05		
Address:	1717 APAC	HE ST KILL DEVI	L HILLS					
				Zonin	g:			
Addition:	HIGH VIEW	- HEDRICKS ADD	)	Block	: Е	Lot(s): 5		
Legal Desc	cription:							
FEES:		Paid	Due	BUILDING ARE	A:			
T-Pole		\$50.00	\$0.00	# of Temporary	Poles	1 EA		
Covered Porch		\$168.00	\$0.00	Residential Hea	ated Space	1513 sq. Ft.		
Res. Building P	ermit Fee	\$1,134.75	\$0.00	(.75)	(Declar	004 00FT		
	Totals :	\$1,352.75	\$0.00	Covered Porch	es/Decks	224 SQFT	ant all the last is considered and	
PROJECT DESC	CRIPTION: Propo	sed 3 bedroom sin	igle family d	welling				
		. IS . 1					,	
	Tour	of Kill Devil Hil	s					
		later Charges						
					AUG 12	2 2019		
		PAID						
	Water Tar	PAID	13					
inted by : Marty Shaw	on: 08/12/2019 12:58 PM						Page 1 of	

BJ2019-136 PROJECT NAME: PRY Investments Inc. SITE ADDRESS: 1717 APACHE ST KILL DEVIL HILLS

EXPIRES: 02/08/2020

* Per §153.082(B)(1)(c) Mechanical equipment, including HVAC equipment and LP Gas equipment shall not project int	o a
minimum yard setback more than four (4) feet.	
***************************************	-

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

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

\* Zoning Final Inspection is required.

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

Issued By: \_ Date: 8/12/19 Contractor or Authorized Agent:

Printed by : Marty Shaw on: 08/12/2019 12:58 PM

Page 3 of 3



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

### **Planning and Inspection Department**

BP2019-187 PROJECT NAME: Szymanski Stairs SITE ADDRESS: 214 PALMETTO ST W KILL DEVIL HILLS BUILDING ISSUED: 08/13/2019

EXPIRES: 02/09/2020

APPLICANT:		Szymanski, Stephen 214 W Palmetto Street Kill Devil Hills, NC 27948			Szymanski, Stephen 214 W Palmetto Street Kill Devil Hills, NC 27948			
GENERAL:	Self UNKNOWN UNKNOWN, XX 00000 917-862-9006					License: Unlice Expires: 12/31/		
PARCEL:								
PIN:	988517112098			Parcel Number:	000465	6000		
Address:	214 PALMETT	OSTW KILL D	EVIL HILLS					
				Zoning	:			
Addition:	VIRGINIA DAR	E SHORES		Block:	26	Lot(s):	23-28	
Legal Desc	cription:							
FEES:		Paid	Due					
Building Permit	Fee - Minimum	\$150.00	\$0.00					
	Totals :	\$150.00	\$0.00					
PROJECT DESC	CRIPTION: replace f	ront stairs to sa	me footprint					
AL	JG 1 3 2019							
	¥ .							
<sup>o</sup> rinted by : Jordan Blyth	e on: 08/13/2019 04:16 PM						Page 1 of 3	
					-			

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EXPIRES: 02/09/2020

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

Issued By: mphil zypen Sr **Contractor or Authorized Agent:** Alle

Date: 8/13/19

Printed by : Jordan Blythe on: 08/13/2019 04:16 PM



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

## Planning and Inspection Department

### BJ2019-146

-4

PROJECT NAME: Lane Investment Properties NC, LLC SITE ADDRESS: 1536 N. Virginia Dare Trail Kill Devil Hills BUILDING JOINT ISSUED: 08/15/2019

EXPIRES: 08/12/2020

APPLICANT:	EAST COAST COM PO Box 329 KILL DEVIL HILLS, 252-202-1600	NSTRUCTION GRO	UP	OWNER:	Lane Investr PO Box 329 Kill Devil Hill 252-202-160		LLC
GENERAL:		PO Box 329	9 HILLS, NC 2	QUCTION GROUP 27948		License: 34495 Expires: 01/01/20	020
PARCEL:							
PIN:	98841156319	91		Parcel Number:			
Address:	1536 N. Virgi	nia Dare Trail Kill	Devil Hills				
				Zonin	g:		
Addition:				Block	:	Lot(s):	
Legal Desc	cription: Lot 2, Se	c. 1, Block D, W.F	R. Deaton De	elray Beach Subo	livision		
FEES:		Paid	Due	BUILDING ARE	A:		
Covered Porch	Residential	\$612.00	\$0.00	Open Decks		1 EA	
Open Deck Fee	•	\$150.00	\$0.00	Covered Porch	es/Decks	816 SQ	FT
Res. Building P	ermit Fee	\$2,378.35	\$0.00	Resdiential Unh	neated (.40)	188 Sq.	Ft
T-Pole		\$50.00	\$0.00	Resdiential Unit	neated (.40)	386 Sq.	Ft
	Totals :	\$3,190.35	\$0.00	Residential Hea (.75)	ated Space	2865 sq.	Ft.
				# of Temporary	Poles	1 EA	
PROJECT DESC		ed 4 bedroom sing	•	welling			
		n of Kill Devil H	ills			AUG 16 20 9	5 m
	V	Vater Charges				A00 1 0	
		PAID					
		PAID	nil				
	Water Tap	# 1236	14				
Printed by : Marty Shaw	on: 08/15/2019 01:49 PM						Page 1 of 3



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

### **Planning and Inspection Department**

	BUILDING JOINT ISSUED: 08/16/2019 EXPIRES: 02/12/2020				
9006 Old 125 RD			90 SC	06 Old 125 R COTLAND NE 2-903-8460	
4275 Worthington L	ane				
IMITED:	4275 Worth kitty hawk,	nington Lane nc 27949	ION LLC		cense: 62339 cpires: 12/30/2019
98841155216	9		Parcel Number:	00314800	00
111 CAMELL	A DR KILL DEV	L HILLS			
			Zoning:		
	I - DELRAY BEA	CH	Block:	9	Lot(s): 4
	Paid	Due	BUILDING AREA:		
Residential	\$156.00	\$0.00		Decks	208 SQFT
	\$450.00	\$0.00		DOOND	3 EA
ermit Fee	\$1,052.35	\$0.00		ated (.40)	124 Sq. Ft
	\$50.00	\$0.00			1337 sq. Ft.
Totals :	\$1,708.35	\$0.00	<ul><li>(.75)</li><li># of Temporary Performance</li></ul>		1 EA
	The second secon	ME: Faithful New House         S: 111 CAMELLIA DR KILL DEVIL         Faithful, Ron & Leslie         9006 Old 125 RD         SCOTLAND NECK, NC 27874         252-903-8460         RELIANT CONSTRUCTION LLC         4275 Worthington Lane         kitty hawk, nc 27949         252-202-7007         IMITED:       RELIANT CONSTRUCTION LLC         988411552169         111 CAMELLIA DR KILL DEVI         W R DEATON - DELRAY BEAU         viption:         Paid         Residential       \$156.00         \$450.00         system       \$50.00	ME: Faithful New House         S: 111 CAMELLIA DR KILL DEVIL HILLS         Faithful, Ron & Leslie         9006 Old 125 RD         SCOTLAND NECK, NC 27874         252-903-8460         RELIANT CONSTRUCTION LLC         4275 Worthington Lane         kitty hawk, nc 27949         252-202-7007         IMITED:       RELIANT CONSTRUCT         988411552169         111 CAMELLIA DR KILL DEVIL HILLS         W R DEATON - DELRAY BEACH         ription:         Residential       \$156.00       \$0.00         \$450.00       \$0.00         \$50.00       \$0.00	ME: Faithful New House         S: 111 CAMELLIA DR KILL DEVIL HILLS         Faithful, Ron & Leslie       OWNER:         9006 Old 125 RD       90         SCOTLAND NECK, NC 27874       Sd         252-903-8460       25         RELIANT CONSTRUCTION LLC       4275 Worthington Lane         kitty hawk, nc 27949       252-202-7007         IMITED:       RELIANT CONSTRUCTION LLC         4275 Worthington Lane       kitty hawk, nc 27949         252-202-7007       Parcel         Number:       111 CAMELLIA DR KILL DEVIL HILLS         VR DEATON - DELRAY BEACH       Block:         ription:       Paid       Due         BUILDING AREA:       Stafo.00         \$450.00       \$0.00       Covered Porches.         \$4450.00       \$0.00       Govered Porches.         \$450.00       \$0.00       Residential Unhear         \$50.00       \$0.00       Residential Heate         \$50.00       \$0.00       Residential Heate         \$50.00       \$0.00       Residential Heate	ME: Faithful New House         S: 111 CAMELLIA DR KILL DEVIL HILLS         Faithful, Ron & Leslie         9006 Old 125 RD         SCOTLAND NECK, NC 27874         252-903-8460         RELIANT CONSTRUCTION LLC         4275 Worthington Lane         kitty hawk, nc 27949         252-202-7007         IMITED:         RELIANT CONSTRUCTION LLC         4275 Worthington Lane         kitty hawk, nc 27949         252-202-7007         IMITED:         RELIANT CONSTRUCTION LLC         4275 Worthington Lane         kitty hawk, nc 27949         252-202-7007         988411552169         Parcel         Number:         111 CAMELLIA DR KILL DEVIL HILLS         Zoning:         W R DEATON - DELRAY BEACH         Block:         9         iption:         Residential         \$156.00         \$450.00         \$0.00         \$450.00         \$0.00         \$450.00         \$0.00         \$50.00         \$0.00         \$60.00         \$250.00         \$0.00

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PROJECT NAME: Faithful New House SITE ADDRESS: 111 CAMELLIA DR KILL DEVIL HILLS

### BUILDING JOINT ISSUED: 08/16/2019

EXPIRES: 02/12/2020

	DETAILS	
Permit		
Name	Value	
ZONING DISTRICT	RL	
FRONT YARD SETBACK	30	
REAR YARD SETBACK	20% Depth >30	
SIDE YARD SETBACK	10	
HEALTH DEPARTMENT PERMIT #	28892	
# PARKING SPACES/BEDROOM	3	
CAMA PERMIT	N	
CAMA EXEMPTION	Ν	
FLOOD ZONE	AE	
BASE FLOOD ELEVATION	8.3	
Proposed First Floor Elevation	7.80	·
SUBSTANTIAL IMPROVEMENT	NO	
PURPOSE	Residential New	
CONSTRUCTION TYPE	V	
CONSTRUCTION COST	175000.00	
LOT COVERAGE	20.00	
LIVING SPACE (SQFT)	1337	
COVERED PORCHES/DECKS (SQFT)	208	
STORAGE (SQFT)	124	
OPEN DECK (SQFT)	552	
TOTAL SQUARE FOOTAGE	2221	
SURVEYOR NAME AND NUMBER	Martin Barnette L-3740	
ARCHITECT NAME AND LICENSE NUMBER	Michael A Florez 14163	
CULVERT	N	
ROLL OUT CAN	1	
DRIVEWAY INVERT 2	Y	
OCCUPANCY TYPE	One & Two Family Dwelling	

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Page 2 of 4

BJ2019-151 PROJECT NAME: Faithful New House SITE ADDRESS: 111 CAMELLIA DR KILL DEVIL HILLS

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### BUILDING JOINT ISSUED: 08/16/2019

EXPIRES: 02/12/2020

R	EG	U	IR	ED	INS	SPE	ECT	ГК	10	1S

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

#### CONDITIONS

* This permit becomes null and void if work or construction authorized is not commenced within 6 months or if construction or work is suspended for a period of 12 months at any time after work has started.
* NOTICE: Call Public Services Department (252) 480-4080 before pouring driveway!
* As-built survey will be required prior to Certificate of Occupancy or Certificate of Compliance.
* The developer shall be responsible for maintaining erosion and sediment control at the disturbed area.
<ul> <li>* Development must meet all aspects of Chapter 151 Flood Damage Prevention Ordinance including use and elevation.</li> <li>* THIS PROPERTY IS LOCATED IN A SPECIAL FLOOD HAZARD AREA.</li> <li>1. All Special Flood Hazard Areas limit the use of enclosures below the lowest floor for parking, building access and limited storage only.</li> <li>2. In the VE Zone, there shall be no alteration of the sand dunes which would increase potential flood damage.</li> <li>3. In the VE Zone, there shall be no fill used for stuctual support.</li> <li>4. Elevation Certificate will be required at time of application, 21 days from the establishment of the lowest floor and at construction completion.</li> </ul>
DEVELOPER MUST OBTAIN ALL THE NECCESSARY FEDERAL, STATE AND LOCAL PERMITS BEFORE THIS PERMIT CAN BE ISSUED.
* Per §153.082(B)(1)(c) Mechanical equipment, including HVAC equipment and LP Gas equipment shall not project into a minimum yard setback more than four (4) feet.
* Per §153.186(D)(1) Mechanical equipment shall not be visible from any right-of-way and (2) All Mechanical equipment and appurtenances shall be screened.
* Must comply with Wind Borne Debris requirements as defined in NCBC R301.2.1.2 and NCBC 1609.2.
* Construction must meet all aspect of Chapter 153 Zoning including lot coverage and setbacks.
* Zoning Final Inspection is required.
* A final elevation certificate will be required prior to issuance of a Certificate of Occupancy or a Certificate of Compliance in accordance with 151.41(C).

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EXPIRES: 02/12/2020

I hereby certify that I have read and examined this application and know the	same to be true and correct.
All provisions of Laws and Ordinances governing this type of work will be co	omplied with whether
specified herein or not. The granting of a permit does not presume to give au	uthority to violate or cancel
the provisions of any <sub>1</sub> other state/local law regulating construction or the per	formance of construction.
Issued By: Nox Sh	
10 RI	Date: 8/20/19
Contractor or Authorized Agent:	Date: <u>8/20/19</u>
/.)-	1

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Page 4 of 4



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

### **Planning and Inspection Department**

	4 ME: Smith New SFI S: 602 Cedar Drive				BUILDING JOINT ISSUED: 08/16/2019 EXPIRES: 02/12/2020
APPLICANT:	SMITH, KERRY PO BOX 838 kitty hawk, nc 27949	9		OWNER: SMITH, KER PO BOX 838 kitty hawk, no	3
CONTRACTOR:	Griggs & Co. Home P. O. Box 125 Point Harbor, NC 27 207-8450		naturalita di unite da tanàn any ang		<u></u>
GENERAL UNL	IMITED:	P. O. Box 1	o. Homes Inc 125 or, NC 27964		License: 48170 Expires:
PARCEL:					
PIN:	98841323362	7		Parcel Number:	
Address:	602 Cedar Dri	ve Kill Devil Hills	5		
				Zoning:	
Addition: Legal Desc	ription: Lot 68 S	ec 3, First Flight \	/illage Phas	Block:	Lot(s):
EES:		Paid	Due	BUILDING AREA:	
Covered Porch F	Residential	\$156.00	\$0.00	Covered Porches/Decks	208 SQFT
Res. Building Pe	ermit Fee	\$1,099.80	\$0.00	Resdiential Unheated (.40)	312 Sq. Ft
-Pole		\$50.00	\$0.00	Residential Heated Space	1300 sq. Ft.
hu- uyapış Andorekleyi, Ələriyi də Yakını da Yakın	Totals :	\$1,305.80	\$0.00	~ (.75) # of Temporary Poles	1 EA
PROJECT DESC	RIPTION: New 3 I		r Charges	AUG 1	9 2019

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EXPIRES: 02/12/2020

<ul> <li>* NOTICE: Call Public Services Department (252) 480-4080 before pouring driveway!</li> <li>* This permit becomes null and void if work or construction authorized is not commenced within 6 months or if construction or work is suspended for a period of 12 months at any time after work has started.</li> <li>* As-built survey will be required prior to Certificate of Occupancy or Certificate of Compliance.</li> <li>* The developer shall be responsible for maintaining erosion and sediment control at the disturbed area.</li> <li>* A final elevation certificate will be required prior to issuance of a Certificate of Occupancy or a Certificate of Compliance in accordance with 151.41(C).</li> <li>* Development must meet all aspects of Chapter 151 Flood Damage Prevention Ordinance including use and elevation.</li> <li>* THIS PROPERTY IS LOCATED IN A SPECIAL FLOOD HAZARD AREA.</li> <li>1. All Special Flood Hazard Areas limit the use of enclosures below the lowest floor for parking, building access and limited storage only.</li> <li>2. In the VE Zone, there shall be no alteration of the sand dunes which would increase potential flood damage.</li> <li>3. In the VE Zone, there shall be no fill used for stuctual support.</li> <li>4. Elevation Certificate will be required at time of application, 21 days from the establishment of the lowest floor and at construction completion.</li> </ul>
DEVELOPER MUST OBTAIN ALL THE NECCESSARY FEDERAL, STATE AND LOCAL PERMITS BEFORE THIS PERMIT CAN BE ISSUED. * Per §153.082(B)(1)(c) Mechanical equipment, including HVAC equipment and LP Gas equipment shall not project into a minimum yard setback more than four (4) feet. * Per §153.186(D)(1) Mechanical equipment shall not be visible from any right-of-way and (2) All Mechanical equipment and appurtenances shall be screened. * Must comply with Wind Borne Debris requirements as defined in NCBC R301.2.1.2 and NCBC 1609.2. * Construction must meet all aspect of Chapter 153 Zoning including lot coverage and setbacks. * Zoning Final Inspection is required.
I hereby certify that I have read and examined this application and know the same to be true and correct. All provisions of Laws and Ordinances governing this type of work will be complied with whether specified herein or not. The granting of a permit does not presume to give authority to violate or cancel the provisions of any other state/local law regulating construction or the performance of construction. Issued By:

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A DEVI Birthplac Birthplac Aviatio	STURE	K	PO BO) ill Devil Hills	( 1719 , NC 27948 Fax: 252-441-410		AUG 2 2 2019	
HCA	RO	Planning	and Inspe	ection Departm	ent	TON OF	-
	9 IE: Travis Joynes 5: 605 MEMORIAL	BLVD N KILL D	EVIL HILLS			BUILDING JOIN ISSUED: 08/20/20 EXPIRES: 02/16/20	019
APPLICANT:	TRAVIS JOYNES P. O. Box 2772 KITTY HAWK, NC 27	949		P	RAVIS JOYI O. Box 277 ITTY HAWK		
CONTRACTOR:		SAME AS O UNKNOWN UNKNOWN				License: Same as Owner Expires: 12/30/2019	
PARCEL:							
PIN:	988419723075			Parcel Number:	0037360	000	
Address:	605 MEMORIA	L BLVD N KILL	DEVIL HILI	LS			
				Zoning:			
Addition:	KITTY HAWK	SHORES - REV	ISED	Block:	22	Lot(s): 6	
Legal Descr	iption:						
FEES:		Paid	Due	BUILDING AREA:			
Res. Building Pe	rmit Fee	\$302.25	\$0.00	Residential Heate	ed Space	403 sq. Ft.	
				- (.75)			

PROJECT DESCRIPTION: Add heated space under house - Will remain a 3 bedroom SFD - No duplex

Printed by : Marty Shaw on: 08/20/2019 08:05 AM

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PROJECT NAME: Travis Joynes SITE ADDRESS: 605 MEMORIAL BLVD N KILL DEVIL HILLS

#### BUILDING JOINT ISSUED: 08/20/2019

EXPIRES: 02/16/2020

	D	ETAILS		
Permit				
Name	Value			
ZONING DISTRICT	RL			
FRONT YARD SETBACK	30			
REAR YARD SETBACK	20% Depth >30			
SIDE YARD SETBACK	8			
# PARKING SPACES/BEDROOM	3			
CAMA PERMIT	N			
CAMA EXEMPTION	N			
FLOOD ZONE	AE			
BASE FLOOD ELEVATION	8.3			
Proposed First Floor Elevation	9.30			
CONSTRUCTION TYPE	V			
CONSTRUCTION COST	22000.00			
LIVING SPACE (SQFT)	403			
SURVEYOR NAME AND NUMBER	Robert Cummins			
CULVERT	N			
DRIVEWAY INVERT 2	N			

In-Slab PlumbingInsulationSlab/Foundation/PilingFinalFramingZoning FinalRough InFinal

#### CONDITIONS

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

\* As-built survey will be required prior to Certificate of Occupancy or Certificate of Compliance.

\* The developer shall be responsible for maintaining erosion and sediment control at the disturbed area.

\* A final elevation certificate will be required prior to issuance of a Certificate of Occupancy or a Certificate of Compliance in accordance with 151.41(C).

\* Development must meet all aspects of Chapter 151 Flood Damage Prevention Ordinance including use and elevation.

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Page 2 of 3

<ul> <li>* Per §153.082(B)(1)(c) Mechanical equipment, including HVAC equipment and LP Gas equipment shall not project in minimum yard setback more than four (4) feet.</li> <li>* Must comply with Wind Borne Debris requirements as defined in NCBC R301.2.1.2 and NCBC 1609.2.</li> <li>* Construction must meet all aspect of Chapter 153 Zoning including lot coverage and setbacks.</li> <li>* Zoning Final Inspection is required.</li> <li>* This has not been approved for a duplex. This is a 3 bedroom single family dwelling.</li> <li>I hereby certify that I have read and examined this application and know the same to be true and concerning the provisions of Laws and Ordinances governing this type of work will be complied with whether specified herein or not. The granting of a permit does not presume to give authority to violate or can the provisions of any other state/local law regulating construction or the performance of construction law By:</li> <li>Contractor or Authorized Agent:</li> </ul>		IG JOINT 08/20/2019 5: 02/16/2020
All provisions of Laws and Ordinances governing this type of work will be complied with whether specified herein or not. The granting of a permit does not presume to give authority to violate or cather provisions of any other state/local law regulating construction or the performance of construction lasued By:	r (4) feet. ris requirements as defined in NCBC R301.2.1.2 and NCBC 1609.2. of Chapter 153 Zoning including lot coverage and setbacks.	iject into a
	inances governing this type of work will be complied with whet anting of a permit does not presume to give authority to violate te/local law regulating construction or the performance of const 8/22	her or cancel
	t: Date: <u>8/22</u>	119

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

### **Planning and Inspection Department**

	5 IE: Barker Rec Roc S: 1426 SHAY ST		LS			BUILDING JOINT ISSUED: 08/22/2019 EXPIRES: 02/18/2020
APPLICANT:	Barker, Ken 1426 Shay Street Kill Devil Hills, NC 2	7948		14	irker, Ken 26 Shay St I Devil Hills	reet , NC 27948
CONTRACTOR:	SANDERLING CON 2701 North Croatan 517 Elm Court Kill Devil Hills, NC 2 252-449-8366	Hwy.	ŖΡ			
CONTRACTOR:		2701 North 517 Elm Co	Croatan Hwy ourt ills, NC 27948			License: 47372 Expires: 12/31/2019
PARCEL:						
PIN:	988316830958	8		Parcel Number:	0048900	000
Address:	1426 SHAY S	T KILL DEVIL H	ILLS			
				Zoning:		
Addition:	WHISPERING	PINES SEC 2 8	3	Block:	н	Lot(s): 1
Legal Descr	iption:					
EES:		Paid	Due	BUILDING AREA:		
Res. Building Pe	rmit Fee	\$225.75	\$0.00	Residential Heater	d Space	301 sq. Ft.
	Totals :	\$225.75	\$0.00	(.75)		

PROJECT DESCRIPTION: 14'x21' rec room on ground floor under existing footprint

AUG 2 6 2019

Printed by : Jordan Blythe on: 08/22/2019 09:30 AM



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

### **Planning and Inspection Department**

BJ2019-147
PROJECT NAME: Gyoker Pool
SITE ADDRESS: 1706 UPPER DUNE RD KILL DEVIL HILLS

**BUILDING JOINT** 

ISSUED: 08/07/2019

EXPIRES: 02/03/2020

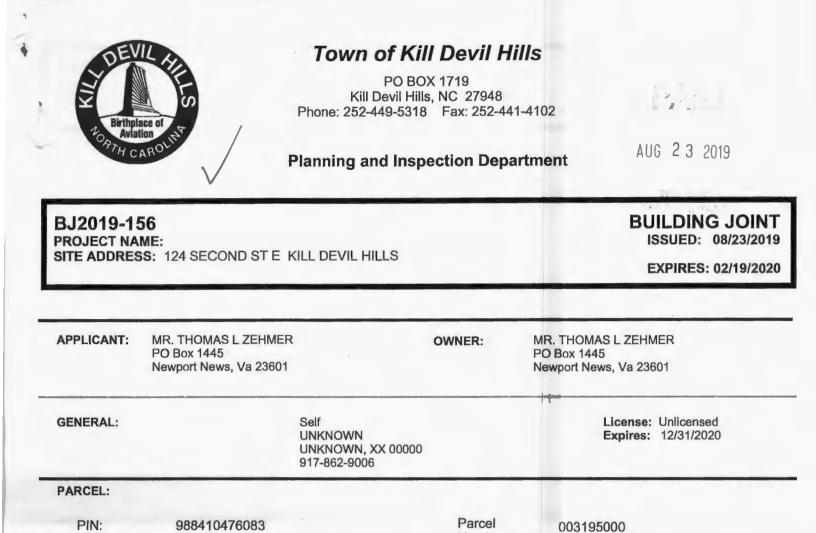
APPLICANT:	John Gyoker 1706 Upper Dune Rd. Kill Devil Hillsl, NC 279 252-715-1408	48			John Gyoker 1706 Upper Dun Kill Devil Hillsl, N 252-715-1408	e Rd. IC 27948	
CONTRACTOR:	SOUTHERN SCAPES PO Box 359 Jarvisburg, NC 27947 252-202-1654						
GENERAL:		SOUTHERI PO Box 359 Jarvisburg, 252-202-16	9 NC 27947			ense: 64251 bires: 12/31/2019	
PARCEL:							
PIN:	988409156960			Parcel Number:	027162000	0	
Address:	1706 UPPER DU	JNE RD KILL	DEVIL HILLS	6			
				Zoning			
Addition:	CROATAN SHO	RES SUBDIV		Block:	14	Lot(s): 23	
Legal Descr	ription:						
FEES:		Paid	Due				
Pool/Hot Tub		\$200.00	\$0.00				
	Totals :	\$200.00	\$0.00				
PROJECT DESC	RIPTION: Pool and	concrete pool d	leck installati	on	11		
				AUG 2 6 2019			
				· · · · · ·			
rinted by : Jordan Blythe	e on: 08/07/2019 04:46 PM						Page 1 of 3

BJ2019-147 PROJECT NAME: Gyoker Pool SITE ADDRESS: 1706 UPPER DUNE RD KILL DEVIL HILLS

1

EXPIRES: 02/03/2020

I hereby certify that I have read and examined this application and know the same to be true and correct. All provisions of Laws and Ordinances governing this type of work will be complied with whether specified herein or not. The granting of a permit does not presume to give authority to violate or cancel the provisions of any other state/local law regulating construction or the performance of construction. Issued By: 27 Date: 0-24 **Contractor or Authorized Agent:** Printed by : Jordan Blythe on: 08/07/2019 04:46 PM Page 3 of 3



Number:

**BUILDING AREA:** 

Due

Zoning:

Block:

Н

Lot(s):

300 Sq. Ft

PT 37 & 38

 Res. Building Permit Fee
 \$120.00
 \$0.00
 Resdiential Unheated (.40)

 Pool/Hot Tub
 \$200.00
 \$0.00
 Resdiential Unheated (.40)

 Totals :
 \$320.00
 \$0.00
 Resdiential Unheated (.40)

Paid

124 SECOND ST E KILL DEVIL HILLS

W R DEATON - DELRAY BEACH

PROJECT DESCRIPTION: 15'X20' site built shed, pool and pool deck.

Printed by : Marty Shaw on: 08/23/2019 02:33 PM

Address:

Addition:

FEES:

Legal Description:

1

EXPIRES: 02/19/2020

I hereby certify that I have read and examined this application and know the same to be true and correct.
All provisions of Laws and Ordinances governing this type of work will be complied with whether
specified herein or not. The granting of a permit does not presume to give authority to violate or cancel
the provisions of any other state/local law regulating construction or the performance of construction.
Issued By:
Nor PJA olala
Contractor or Authorized Agent: Advandee Date: Date: Date: Z0/9

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

### **Planning and Inspection Department**

BJ2019-153

PROJECT NAME: Mustang Music Outreach Unit 1 SITE ADDRESS: 3105 CROATAN HWY N KILL DEVIL HILLS BUILDING JOINT ISSUED: 08/15/2019

EXPIRES: 02/11/2020

APPLICANT:	JOHN HIGH 203 Forest Hill Rocky Mount,				OWNER:	JOHN HIG 203 Forest Rocky Mou		
CONTRACTOR	: B&B Contracto P. O. Box 299 Kitty Hawk, NO 252-489-9551	8					·	
GENERAL BUI	LDING - LIMITEI	P. Kit	B Contracto O. Box 2998 ty Hawk, NC 2-489-9551	3			License: 60944 Expires:	
PARCEL:								
PIN:	9885130	35596			Parcel Number:	0029	91000	
Address:	3105 CR	OATAN HWY	N KILL DE	VIL HILL	S			
					Zoning	g:		
Addition:		SION - NONE			Block	0	Lot(s): 0	
Legal Desc	cription:							
FEES:			aid	Due	BUILDING AREA	A:		
Renovation/Rer			.00	\$0.00	Remodel/Renov	vation	760 SQFT	
	Totals	s: \$342	.00	\$0.00				
PROJECT DESC	CRIPTION: pa	rtition walls, ac	ld ada com	pliant ba	throom			
		A MR.A.						
	1	AUG 2 6 201	9 3.					
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		_						

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EXPIRES: 02/11/2020

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# Town of Kill Devil Hills

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

### **Planning and Inspection Department**

PROJECT NAM SITE ADDRESS	E: Bermuda Bay Po : 1101 Cambridge	ond Fountains RD KILL DEVIL	HILLS		_		D: 07/31/201 ES: 01/27/202
	Bermuda Bay Home PO Box 1807 Nags Head, NC 2795 480-4722		1		Bermuda Ba PO Box 180 Nags Head, 480-4722		Association
	SEABREEZE ELECT 136 CAROLINA CT V MANTEO, NC 27954 (252) 654-2094	WEST	INC				
ELECTRICAL - U	INLIMITED:		INA CT WES NC 27954	& LIGHTING INC T		License: 3007 Expires: 04/0	
PARCEL:							
PIN:	988309167734	ŧ		Parcel Number:	008164	1001	
Address:	1101 Cambridg	ge RD KILL DE	/IL HILLS				
				Zoning	J:		
Addition:	SUBDIVISION	- NONE		Block:	0	Lot(s):	0
Legal Descri	iption:						
FEES:		Paid	Due				
Electrical Permit	Fee	\$150.00	\$0.00				
	Totals :	\$150.00	\$0.00				

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Page 1 of 3

BUILDING JOINT ISSUED: 07/31/2019

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# Town of Kill Devil Hills

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

### **Planning and Inspection Department**

BJ2019-15 PROJECT NAM SITE ADDRES	<b>4</b> ME: Jerome and Mir S: 114 SECOND S	ndy Lynes T E KILL DEVIL	HILLS			BUILDING JOINT ISSUED: 08/20/2019 EXPIRES: 02/16/2020
APPLICANT:	RENAISSANCE / RI CONSTRUCTION C PO Box 1411 Manteo, NC 27954 252-982-6059			15 FF	506 PRIN	ROME & MINDY CE EDWARD ST KSBURG, VA 22401 379
GENERAL:		RENAISSA COMPANY PO Box 14 Manteo, NO 252-982-60	, 11 C 27954	SSANCE CONSTRU	ICTION	License: 26244 Expires:
PARCEL:						
PIN:	988410464992	2		Parcel Number:	00315	54000
Address:	114 SECOND	ST E KILL DEV	IL HILLS			
				Zoning:		
Addition:	W R DEATON	- DELRAY BEA	СН	Block:	11	Lot(s): PT 2
Legal Desc	ription:					
FEES:		Paid	Due			
Building Permit I Fee	Fee - Minimum	\$150.00	\$0.00			
	Totals :	\$150.00	\$0.00			

AUG 2 7 2019

10-4

Printed by : CTHUMAN on: 08/20/2019 09:04 AM

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PROJECT NAME: Jerome and Mindy Lynes SITE ADDRESS: 114 SECOND ST E KILL DEVIL HILLS BUILDING JOINT ISSUED: 08/20/2019

EXPIRES: 02/16/2020

		DETAILS	
Permit			
Name	Value		
ZONING DISTRICT	RL		
FRONT YARD SETBACK	30		
REAR YARD SETBACK	20% Depth >30		
SIDE YARD SETBACK	10		
HEALTH DEPARTMENT PERMIT #	28933		
# PARKING SPACES/BEDROOM	3		
CAMA PERMIT	Ν		
CAMA EXEMPTION	Ν		
FLOOD ZONE	AE		
BASE FLOOD ELEVATION	8.3		
Proposed First Floor Elevation	8.20		
SUBSTANTIAL IMPROVEMENT	NO		
PURPOSE	<b>Residential Addition</b>		
CONSTRUCTION COST	43500.00		
LOT COVERAGE	29.36		
SURVEYOR NAME AND NUMBER	William S. Jones		
CULVERT	Ν		
DRIVEWAY INVERT 2	Ν		

#### REQUIRED INSPECTIONS

Framing Rough In Insulation

Final

Zoning Final

#### CONDITIONS

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

\* As-built survey will be required prior to Certificate of Occupancy or Certificate of Compliance.

\* The developer shall be responsible for maintaining erosion and sediment control at the disturbed area.

Printed by : CTHUMAN on: 08/20/2019 09:04 AM

Page 2 of 3

BUILDING JOINT ISSUED: 08/20/2019

EXPIRES: 02/16/2020

\* A final elevation certificate will be required prior to issuance of a Certificate of Occupancy or a Certificate of Compliance in accordance with 151.41(C).

- \* Development must meet all aspects of Chapter 151 Flood Damage Prevention Ordinance including use and elevation.
- \* Must comply with Wind Borne Debris requirements as defined in NCBC R301.2.1.2 and NCBC 1609.2.
- \* Construction must meet all aspect of Chapter 153 Zoning including lot coverage and setbacks.
- \* Zoning Final Inspection is required.

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

Issued By: Date: 8-27-19 **Contractor or Authorized Agent:** 

Printed by : CTHUMAN on: 08/20/2019 09:04 AM



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

### **Planning and Inspection Department**

BJ2019-159 PROJECT NAM SITE ADDRESS	E: Huddleston Ga	arage MAN DR E KILL D	EVIL HILLS		B	UILDING JOINT ISSUED: 08/27/2019 EXPIRES: 02/23/2020
APPLICANT:	Huddleston, Henry 137 Nautical Lane currituck, nc 27929			13	ddleston, Henry 7 Nautical Lane rrituck, nc 27929	
CONTRACTOR:	C & T CONTRACT 1700 Bell Ave. Kill Devil Hills, NC 252-202-9943					
BUILDING LIMIT	ED:	1700 Bell A	ills, NC 27948	3		: 45367 : 01/01/2020
PARCEL:						
PIN:	9885172110	16		Parcel Number:	001718000	
Address:	110 SPORTS	SMAN DR E KILL	DEVIL HILL	S		
				Zoning:		
Addition: Legal Descr	AVALON BE	ACH		Block:	0 L	ot(s): 66
EES:		Paid	Due	BUILDING AREA:		
Res. Building Pe	rmit Fee	\$184.00	\$0.00	Resdiential Unhea	ted (.40)	460 Sq. Ft
	Totals :	\$184.00	\$0.00			
PROJECT DESCI	RIPTION: add 2 lights	exterior walls to ex	xisting carpo	rt to create garage,	add electrical for	garage doors and
A	NUG 2 7 2019					
A						
	NUG 2 7 2019					Page 1 of 3

BUILDING JOINT ISSUED: 08/27/2019

EXPIRES: 02/23/2020

\* A final elevation certificate will be required prior to issuance of a Certificate of Occupancy or a Certificate of Compliance in accordance with 151.41(C).

- \* Development must meet all aspects of Chapter 151 Flood Damage Prevention Ordinance including use and elevation.
- \* Construction must meet all aspect of Chapter 153 Zoning including lot coverage and setbacks.
- \* Zoning Final Inspection is required.

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

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

Printed by : CTHUMAN on: 08/27/2019 08:29 AM

Date: Szalig



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# Town of Kill Devil Hills

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

### **Planning and Inspection Department**

BJ2019-160 PROJECT NAME: Zinovis Remodel SITE ADDRESS: 1201 THIRD ST W KILL DEVIL HILLS BUILDING JOINT ISSUED: 08/27/2019

EXPIRES: 02/23/2020

APPLICANT:	Mulligans OBX LLC PO Box 417 nags head, nc 27959 757-287-0686	9			Mulligans OB PO Box 417 nags head, no 757-287-0686	c 27959
CONTRACTOR:		SAME AS A 0000000 00000000,	APPLICANT nc 00000			License: 123456 Expires: 04/30/2020
PARCEL:						
PIN:	988409066026	6		Parcel Number:	0026140	000
Address:	1201 THIRD S	TW KILL DEVIL	HILLS			
				Zoning	g:	
Addition:	CROATAN SH	ORES SUBDIV		Block:	20	Lot(s): 1
Legal Descr	iption:					
FEES:		Paid	Due	BUILDING AREA	.:	
Renovation/Rem	odel/Relocate	\$315.00	\$0.00	Remodel/Renov	vation	700 SQFT
	Totals :	\$315.00	\$0.00			

AUG 2 7 2019

Printed by : CTHUMAN on: 08/27/2019 02:17 PM

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÷ X PROJECT NAME: Zinovis Remodel SITE ADDRESS: 1201 THIRD ST W KILL DEVIL HILLS BUILDING JOINT ISSUED: 08/27/2019

EXPIRES: 02/23/2020

		DETAILS
Permit		
Name	Value	
ZONING DISTRICT	RL	
FRONT YARD SETBACK	30	
REAR YARD SETBACK	20% Depth >30	
SIDE YARD SETBACK	8	
STREET SIDE SETBACK	15	
CAMA PERMIT	N	
CAMA EXEMPTION	N	
FLOOD ZONE	AE	
BASE FLOOD ELEVATION	8	
SUBSTANTIAL IMPROVEMENT	NO	
PURPOSE	Residential Repair/Remodel	
CONSTRUCTION TYPE	V	
CONSTRUCTION COST	18000.00	
CULVERT	Ν	
DRIVEWAY INVERT 2	N	

REQUIRED INSPECTIONS
----------------------

In-Slab Plumbing	Insulation
Framing	Final
Rough In	Zoning Final

### CONDITIONS

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

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Page 2 of 3

#### BJ2019-160 PROJECT NAME: Zinovis Remodel SITE ADDRESS: 1201 THIRD ST W KILL DEVIL HILLS

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**BUILDING JOINT** ISSUED: 08/27/2019

EXPIRES: 02/23/2020

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

Printed by : CTHUMAN on: 08/27/2019 02:17 PM



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

### **Planning and Inspection Department**

BJ2019-16 PROJECT NAM SITE ADDRESS	1 IE: Walters Garage 5: 209 QUAIL LN H	KILL DEVIL HILL	S			BUILDING JO ISSUED: 08/28/2 EXPIRES: 02/24/2	2019
APPLICANT:	Walters, Gary 209 Quail LN Kill Devil Hills, NC 27 804-335-7367	7948	C	2 K	Valters, Gary 09 Quail LN ill Devil Hills, I 04-335-7367	NC 27948	
CONTRACTOR:	Pain Construction Co 407 Raceview CT nags head, nc 27959 256-1055						
GENERAL BUIL	DING, LIMITED:	Pain Const 407 Racevi nags head, 256-1055		ny		cense: 19675 kpires:	
PARCEL:							
PIN:	988316944772	2		Parcel Number:	00510700	00	
Address:	209 QUAIL LN	KILL DEVIL HI	LLS				
Addition: Legal Descr	WHISPERING	PINES SEC 1		Zoning: Block:	A	Lot(s): 10	
FEES:		Paid	Due			·	
Building Permit F Fee	Fee - Minimum	\$150.00	\$0.00				
	Totals :	\$150.00	\$0.00				
PROJECT DESC	RIPTION: Convert	open carport inte	o garage				
Ŧ	7.1D						
AUG	2 8 2019						
10	and a water	٠					
rinted by : CTHUMAN o	n: 08/28/2019 08:57 AM					Pa	ige 1 of
					10.		

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PROJECT NAME: Walters Garage SITE ADDRESS: 209 QUAIL LN KILL DEVIL HILLS BUILDING JOINT ISSUED: 08/28/2019

EXPIRES: 02/24/2020

	DI	ETAILS	
Permit			
Name	Value		
ZONING DISTRICT	RL		
FRONT YARD SETBACK	30		
REAR YARD SETBACK	20% Depth >30		
SIDE YARD SETBACK	10		
# PARKING SPACES/BEDROOM	4		
CAMA PERMIT	Ν		
CAMA EXEMPTION	Ν		
FLOOD ZONE	Х		
SUBSTANTIAL IMPROVEMENT	NO		
PURPOSE	Residential Repair/Remodel		
CONSTRUCTION COST	14500.00		
LOT COVERAGE	33.10		
SURVEYOR NAME AND NUMBER	John R. Mayne L-4567		
CULVERT	Ν		
DRIVEWAY INVERT 2	N		
OCCUPANCY TYPE	One & Two Family Dwelling		

### **REQUIRED INSPECTIONS**

Framing Rough In Final

**Zoning Final** 

#### CONDITIONS

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

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

\* Zoning Final Inspection is required.

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Page 2 of 3

BJ2019-161 PROJECT NAME: Walters Garage SITE ADDRESS: 209 QUAIL LN KILL DEVIL HILLS

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**BUILDING JOINT** ISSUED: 08/28/2019

EXPIRES: 02/24/2020

I hereby certify that I have read and examined this application and kno All provisions of Laws and Ordinances governing this type of work wi specified herein or not. The granting of a permit does not presume to the provisions of any other state bcal law regulating construction or t	Il be complied with whether give authority to violate or cancel
Issued By:	
Contractor or Authorized Agent: Chen & Town	Date: 8/28/19

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

### **Planning and Inspection Department**

Building Permit Fee - Minimum \$150.00 \$0.00 Fee Totals : \$150.00 \$0.00 PROJECT DESCRIPTION: Enclose back of garage for conditioned living space AUG 2 6 2019 AUG 2 6 2019 AUG		7 IE: Steven Suter/Ga S: 406 CLAM SHEI		/IL HILLS			BUILDING ISSUED: 08/ EXPIRES: 02	26/2019
PO Box 321 CRESWRELL, NC 27928 252-796-7737 PARCEL: PIN: 988405271744 Parcel Number: Address: 406 CLAM SHELL DR KILL DEVIL HILLS Addition: SEA HOLLY RIDGE Block: A Lot(s): 27 Legal Description: FEES: Paid Due Building Permit Fee - Minimum \$150.00 \$0.00 Fee Totals : \$150.00 \$0.00 PROJECT DESCRIPTION: Enclose back of garage for conditioned living space	APPLICANT:	PO Box 321 CRESWELL, NC 279		c OV	P 30 Kl	O BOX 2942 3 Archdale 3 LL DEVIL H	Street ILLS, NC 27948	
PIN: 988405271744 Parcel Number: 002408000   Address: 406 CLAM SHELL DR KILL DEVIL HILLS Zoning: A Lot(s): 27   Addition: SEA HOLLY RIDGE Block: A Lot(s): 27   Legal Description: Paid Due Block: A Lot(s): 27   FEES:   Paid Due   Building Permit Fee - Minimum \$150.00 \$0.00   Fee Totals: \$150.00 \$0.00   PROJECT DESCRIPTION: Enclose back of garage for conditioned living space   AUG 2.6 2019   August 22,060.00	BUILDING-UNLI	MITED:	PO Box 32 CRESWEL	1 L, NC 27928	lopment, Inc			
Init:       OOCHOOLY INTER       Number:       OOCHOOLY INTER         Address:       406 CLAM SHELL DR KILL DEVIL HILLS       Zoning:         Addition:       SEA HOLLY RIDGE       Block:       A       Lot(s):       27         Legal Description:       FEES:       Paid       Due       Building Permit Fee - Minimum       \$150.00       \$0.00         Fee       Totals :       \$150.00       \$0.00         PROJECT DESCRIPTION:       Enclose back of garage for conditioned living space	PARCEL:							
Zoning: Block:       A       Lot(s):       27         Legal Description:       FES:       Paid       Due         Building Permit Fee - Minimum       \$150.00       \$0.00         Fee       Totals:       \$150.00       \$0.00         Fee       Totals:       \$150.00       \$0.00         PROJECT DESCRIPTION:       Enclose back of garage for conditioned living space       Image: Condition of the space of the						0024080	000	
Addition:       SEA HOLLY RIDGE       Block:       A       Lot(s):       27         Legal Description:       FEES:       Paid       Due       Due         Building Permit Fee - Minimum       \$150.00       \$0.00       Fee       Fee </td <td>Address:</td> <td>406 CLAM SH</td> <td>ELL DR KILL D</td> <td>EVIL HILLS</td> <td>Zanira</td> <td></td> <td></td> <td></td>	Address:	406 CLAM SH	ELL DR KILL D	EVIL HILLS	Zanira			
Building Permit Fee - Minimum \$150.00 \$0.00 Fee Totals : \$150.00 \$0.00 PROJECT DESCRIPTION: Enclose back of garage for conditioned living space AUG 2 6 2019 AUG 2 6 2019 AUG			RIDGE			A	Lot(s): 27	
Fee       Totals :       \$150.00       \$0.00         PROJECT DESCRIPTION:       Enclose back of garage for conditioned living space         AUG 2 6 2019       July 12,060.00         Intred by:       CTHUMAN or: 08/26/2019 02:05 PM	FEES:		Paid	Due				
PROJECT DESCRIPTION: Enclose back of garage for conditioned living space		Fee - Minimum	\$150.00	\$0.00				
AUG 2 6 2019 JALUL 12,060.00		Totals :	\$150.00	\$0.00				
rinted by : CTHUMAN on: 08/26/2019 02:05 PM	PROJECT DESC				2			
rinted by : CTHUMAN on: 08/26/2019 02:05 PM Page 1 o				V V	121060.	00	>	
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PROJECT NAME: Steven Suter/Gail Sabato SITE ADDRESS: 406 CLAM SHELL DR KILL DEVIL HILLS BUILDING JOINT ISSUED: 08/26/2019

EXPIRES: 02/22/2020

	DETAILS
Permit	
Name	Value
ZONING DISTRICT	RL
FRONT YARD SETBACK	30
REAR YARD SETBACK	20% Depth >30
SIDE YARD SETBACK	8
HEALTH DEPARTMENT PERMIT #	28977
CAMA PERMIT	Ν
CAMA EXEMPTION	N
FLOOD ZONE	x
SUBSTANTIAL IMPROVEMENT	NO
SURVEYOR NAME AND NUMBER	William S. Jones, Jr.
CULVERT	Ν
DRIVEWAY INVERT 2	N
Framing Rough In	Final Zoning Final
Insulation	
	CONDITIONS
	d void if work or construction authorized is not commenced within 6 months or if construction
	iod of 12 months at any time after work has started.
inimum yard setback more th	anical equipment, including HVAC equipment and LP Gas equipment shall not project into a nan four (4) feet.
	e Debris requirements as defined in NCBC R301.2.1.2 and NCBC 1609.2.
Construction must meet all a	spect of Chapter 153 Zoning including lot coverage and setbacks.
Zoning Final Inspection is re	
Must remain a 3 bedroom si	ngle family dwelling. A duplex is not approved.
Must maintain 3 (10X20) par	
All	
All rooms must be labeled or	
All rooms must be labeled of	

BJ2019-157 PROJECT NAME: Steven Suter/Gail Sabato SITE ADDRESS: 406 CLAM SHELL DR KILL DEVIL HILLS

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BUILDING JOINT ISSUED: 08/26/2019

EXPIRES: 02/22/2020

I hereby certify that I have read and examined this application and know the sa	ame to be true and correct.
All provisions of Laws and Ordinances governing this type of work will be con	nplied with whether
specified herein or not. The granting of a permit does not presume to give aut	
the provisions of any other statellocal law regulating construction or the perfo	ormance of construction.
Issued By:	
Contractor or Authorized Agent Since aleged	Date: 8-26-19

Printed by : CTHUMAN on: 08/26/2019 02:05 PM



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

### **Planning and Inspection Department**

BJ2019-152 PROJECT NAME: Tuttle House F SITE ADDRESS: 300 ARCH ST	Raising E KILL DEVIL HII	LS		BUILDING JOINT ISSUED: 08/30/2019 EXPIRES: 02/26/2020
APPLICANT: Emanuelson and D 6705 CROATAN H 6705 S. Croatan H nags head, nc 279 252-261-2215	WY SOUTH wy.	C		Tuttle, John 3070 Falmouth Drive CHESAPEAKE, VA 23321
RESIDENTIAL, LIMITED:		ATAN HWY SO oatan Hwy. nc 27959	UTH	License: 79801 Expires: 01/01/2020
PARCEL:				
PIN: 9885130438	83		Parcel Number:	000071000
Address: 300 ARCH S	T E KILL DEVIL I	HILLS		
			Zoning	<b>]</b> :
Addition: ORVILLE BE Legal Description:	ACH BLK 2		Block:	2 Lot(s): 14
FEES:	Paid	Due		1
Building Permit Fee - Minimum Fee	\$150.00	\$0.00		
Totals :	\$150.00	\$0.00		
PROJECT DESCRIPTION: Raise pilings	house within same and girder systen	e footprint, der 1	mo storage area	currently underneath structure, install new
AUG 3 0 2019				
Printed by : Marty Shaw on: 08/30/2019 09:23 AM				Page 1 of 3

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PROJECT NAME: Tuttle House Raising SITE ADDRESS: 300 ARCH ST E KILL DEVIL HILLS BUILDING JOINT ISSUED: 08/30/2019

EXPIRES: 02/26/2020

	D	ETAILS	
Permit	· · · · · · · · · · · · · · · · · · ·		
Name	Value		
ZONING DISTRICT	С		
FRONT YARD SETBACK	30		
REAR YARD SETBACK	20% Depth >30		
SIDE YARD SETBACK	8		
STREET SIDE SETBACK	15		
HEALTH DEPARTMENT PERMIT #	10660		
CAMA PERMIT	Ν		
CAMA EXEMPTION	Ν		
FLOOD ZONE	AE		
BASE FLOOD ELEVATION	9.0		
SUBSTANTIAL IMPROVEMENT	NO		
PURPOSE	Residential Repair/Remodel		
CONSTRUCTION TYPE	V		
CONSTRUCTION COST	50000.00		
SURVEYOR NAME AND NUMBER	Robert C. Cummins L- 2951		
ENGINEER AND LICENSE NUMBER	Harold Goodman 20446		
CULVERT	Ν		
DRIVEWAY INVERT 2	Ν		
OCCUPANCY TYPE	One & Two Family Dwelling		

### **REQUIRED INSPECTIONS**

Slab/Foundation/Piling Framing Rough In Final

Zoning Final

### CONDITIONS

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

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Page 2 of 3

EXPIRES: 02/26/2020

- \* Construction must meet all aspect of Chapter 153 Zoning including lot coverage and setbacks.
- \* Zoning Final Inspection is required.
- \* As-built survey will be required prior to Certificate of Occupancy or Certificate of Compliance.
- \* Development must meet all aspects of Chapter 151 Flood Damage Prevention Ordinance including use and elevation.

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

Issued By: Date: 8/30/19 Contractor or Authorized Agent:

Printed by : Marty Shaw on: 08/30/2019 09:23 AM



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

### **Planning and Inspection Department**

BJ2019-13 PROJECT NAM SITE ADDRESS	9 ME: Imperial Invest S: 602 BOUNDAR	ments Townhome RY ST W KILL DE	es EVIL HILLS			BUILDING ISSUED: 08 EXPIRES: 02	8/28/2019
APPLICANT:	Imperial Investment 307 woodard drive kitty hawk, nc 2794			3	mperial Investr 307 woodard dr kitty hawk, nc 2		
CONTRACTOR:	Neal Contracting/ M P.O. Box 637 Kill Devil Hills, NC 2 252-599-6232						
GENERAL BUIL	DING:	P.O. Box 6	ills, NC 27948			cense: 66561 kpires:	
PARCEL:							
PIN:	98831275930	04		Parcel Number:	00453300	)0	
Address:	602 BOUNDA	ARY ST W KILL D	DEVIL HILLS	3			
				Zoning	:		
Addition:	KILL DEVIL H	HILLS REALTY CO	ORP	Block:	42	Lot(s): 6	
Legal Desc	ription:						
FEES:		Paid	Due	BUILDING AREA	:		
Covered Porch F	Residential	\$425.25	\$0.00	Covered Porche	s/Decks	567 SQFT	
Res. Building Pe	ermit Fee	\$8,568.90	\$0.00	Resdiential Unhe	eated (.40)	1185 Sq. Ft	
T-Pole		\$50.00	\$0.00	Residential Heat		9166 sq. Ft.	
A. A	Totals :	\$9,044.15	\$0.00	~ (.75)			
				# of Temporary I Resdiential Unhe		1 EA 3051 Sq. Ft	

PROJECT DESCRIPTION: Construct 7 two bedroom townhomes

Printed by : Marty Shaw on: 08/28/2019 09:22 AM

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PROJECT NAME: Imperial Investments Townhomes SITE ADDRESS: 602 BOUNDARY ST W KILL DEVIL HILLS

### BUILDING JOINT ISSUED: 08/28/2019

EXPIRES: 02/24/2020

		DETAILS	
Permit			
Name	Value		
ZONING DISTRICT	LI-2		
FRONT YARD SETBACK	30		
REAR YARD SETBACK	20% Depth >30		
SIDE YARD SETBACK	10		
STREET SIDE SETBACK	15		
HEALTH DEPARTMENT PERMIT #	26489		
# PARKING SPACES/BEDROOM	20		
CAMA PERMIT	N		
CAMA EXEMPTION	N		
FLOOD ZONE	Х		
SUBSTANTIAL IMPROVEMENT	NO		
PURPOSE	<b>Residential New</b>		
CONSTRUCTION TYPE	V		
CONSTRUCTION COST	650000.00		
# OF UNITS	7		
LOT COVERAGE	44.60		
LIVING SPACE (SQFT)	9166		
COVERED PORCHES/DECKS (SQFT)	567		
GARAGE (SQFT)	3051		
STORAGE (SQFT)	1185		
OPEN DECK (SQFT)	0		
TOTAL SQUARE FOOTAGE	13969		
ENGINEER AND LICENSE NUMBER	Fredrick House 27740	)	
CULVERT	Ν		
DRIVEWAY INVERT 2	Ν		
OCCUPANCY TYPE	One & Two Family Dwelling		

Printed by : Marty Shaw on: 08/28/2019 09:22 AM

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PROJECT NAME: Imperial Investments Townhomes SITE ADDRESS: 602 BOUNDARY ST W KILL DEVIL HILLS

### BUILDING JOINT ISSUED: 08/28/2019

EXPIRES: 02/24/2020

R	EQUIRED INSPECTIONS
In-Slab Plumbing	Insulation
Slab/Foundation/Piling	Final
Framing	Zoning Final
Rough In	
	CONDITIONS
or work is suspended for a period of 12 months a * NOTICE: Call Public Services Department (252 * As-built survey will be required prior to Certifica * Per §153.082(B)(1)(c) Mechanical equipment, minimum yard setback more than four (4) feet. * Per §153.186(D)(1) Mechanical equipment sha appurtenances shall be screened.	<ul> <li>2) 480-4080 before pouring driveway!</li> <li>ate of Occupancy or Certificate of Compliance.</li> <li>including HVAC equipment and LP Gas equipment shall not project into a</li> <li>III not be visible from any right-of-way and (2) All Mechanical equipment and</li> <li>ents as defined in NCBC R301.2.1.2 and NCBC 1609.2.</li> </ul>
All provisions of Laws and Ordinances g specified herein or not. The granting of a	nined this application and know the same to be true and correct. overning this type of work will be complied with whether permit does not presume to give authority to violate or cancel w regulating construction or the performance of construction. Date: $8/29/19$
Printed by : Marty Shaw on: 08/28/2019 09:22 AM	Page 3 of 3