



**Town of Kill Devil Hills**

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

SEP 18 2019

**Planning and Inspection Department**

<b>HUR2019-004</b> PROJECT NAME: LEE EXTERIOR STAIR AND LANDING SITE ADDRESS: 1705 SUNSET AVE KILL DEVIL HILLS	<b>HURRICANE PERMIT</b> ISSUED: 09/18/2019 EXPIRES: 03/16/2020
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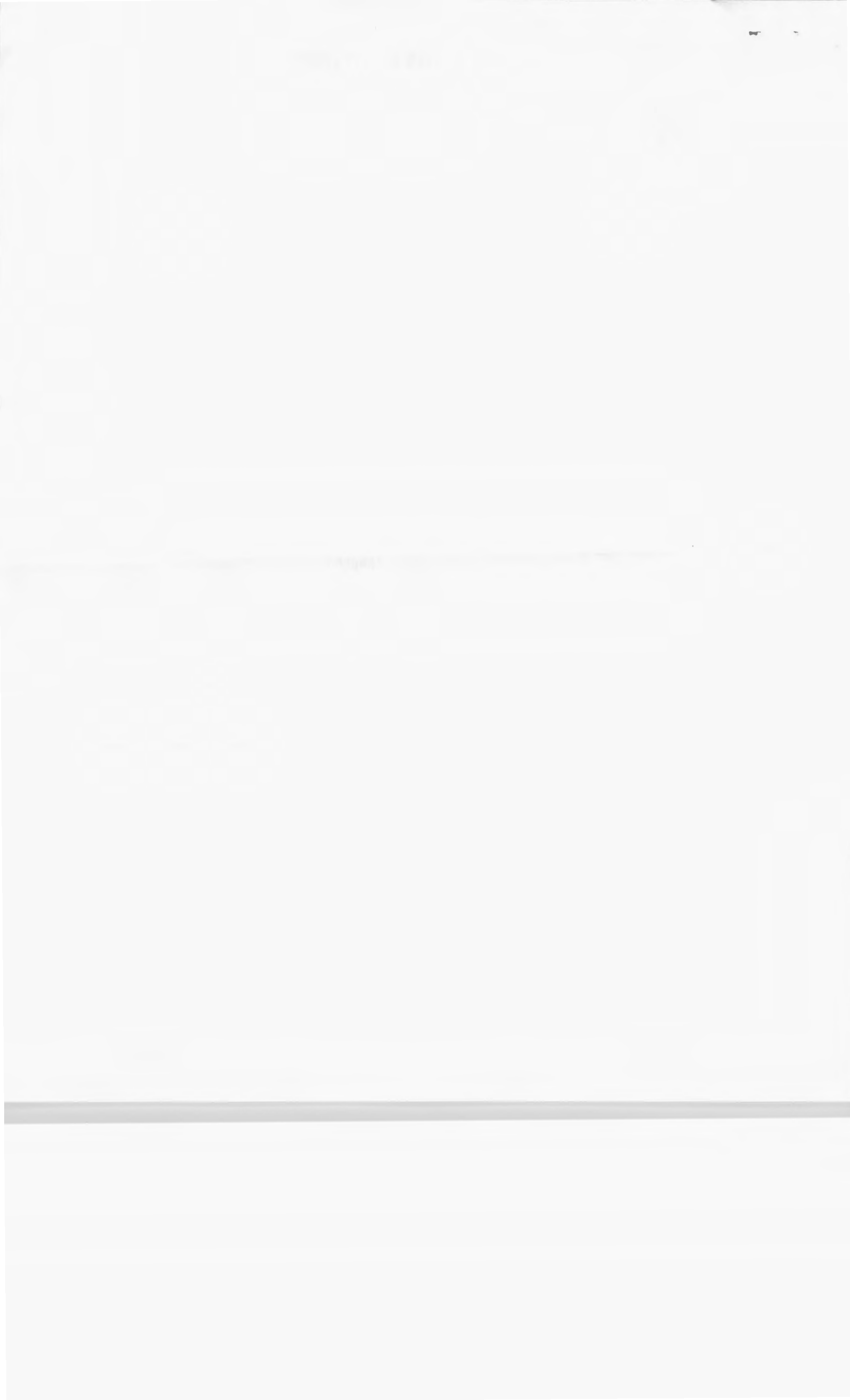
<b>APPLICANT:</b> LEE, REBECCA D P O BOX 510524 MELBOURNE BEACH, FL 32951	<b>OWNER:</b> LEE, REBECCA D P O BOX 510524 MELBOURNE BEACH, FL 32951
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<b>GENERAL, UNLICENSED:</b> FIVE STAR CONSTRUCTION 1004 INDIAN DR Kill Devil Hills, NC 27948 252-489-1252	<b>License:</b> XXX <b>Expires:</b>
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<b>PARCEL:</b>			
<b>PIN:</b> 988409150572	<b>Parcel Number:</b> 002609000		
<b>Address:</b> 1705 SUNSET AVE KILL DEVIL HILLS			
<b>Addition:</b> CROATAN SHORES SUBDIV	<b>Zoning:</b>	<b>Block:</b> 18	<b>Lot(s):</b> 26
<b>Legal Description:</b>			

<b>FEES:</b>	<b>Paid</b>	<b>Due</b>
<b>Totals :</b>		

**PROJECT DESCRIPTION:** REBUILD STAIR AND LANDING ON NORTH OF STRUCTURE



**HUR2019-004**

**PROJECT NAME:** LEE EXTERIOR STAIR AND LANDING  
**SITE ADDRESS:** 1705 SUNSET AVE KILL DEVIL HILLS

**HURRICANE PERMIT**

**ISSUED:** 09/18/2019

**EXPIRES:** 03/16/2020

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**DETAILS**

**Permit**

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<b>Name</b>	<b>Value</b>
ZONING DISTRICT	RL
FRONT YARD SETBACK	30
REAR YARD SETBACK	20% Depth >30
SIDE YARD SETBACK	8
CAMA PERMIT	N
FLOOD ZONE	AE
BASE FLOOD ELEVATION	8.00
PURPOSE	Residential Repair/Remodel
CONSTRUCTION TYPE	V
CONSTRUCTION COST	2500.00
CULVERT	N
OCCUPANCY TYPE	One & Two Family Dwelling

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**REQUIRED INSPECTIONS**

Slab/Foundation/Piling  
Final

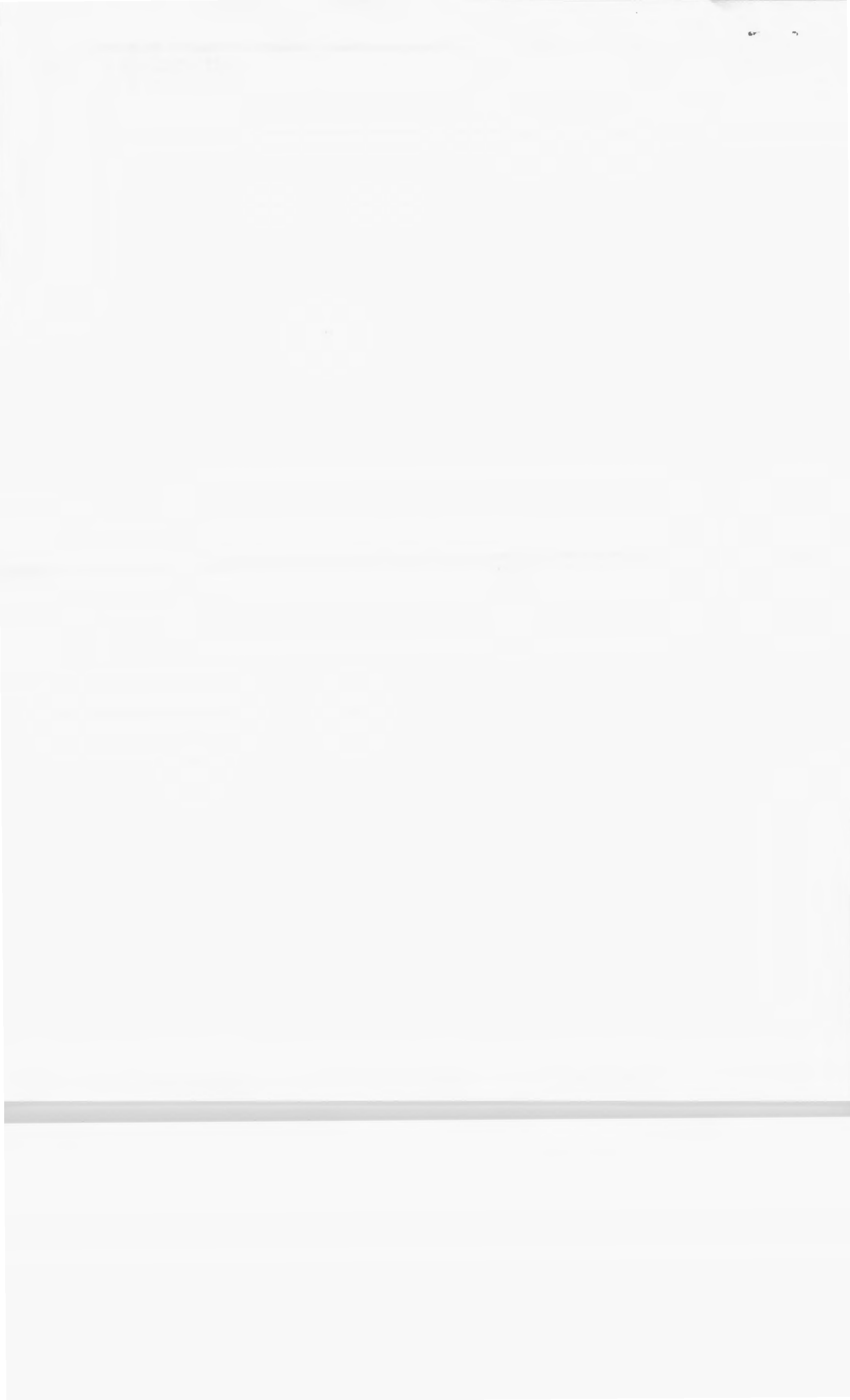
Zoning Final

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**CONDITIONS**

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

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



**HUR2019-004**

**PROJECT NAME:** LEE EXTERIOR STAIR AND LANDING  
**SITE ADDRESS:** 1705 SUNSET AVE KILL DEVIL HILLS

**HURRICANE PERMIT**

**ISSUED:** 09/18/2019

**EXPIRES:** 03/16/2020

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: \_\_\_\_\_

9/18/19

THE UNIVERSITY OF CHICAGO  
LIBRARY  
1100 EAST 58TH STREET  
CHICAGO, ILL. 60637

11/15/77  
11/15/77



# Town of Kill Devil Hills

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

SEP 23 2019

## Planning and Inspection Department

**HUR2019-005**

**PROJECT NAME:** Ward front deck and stairs and landing replacement-  
Hurricane damage  
**SITE ADDRESS:** 1613 KETCH LN KILL DEVIL HILLS

**HURRICANE PERMIT**

**ISSUED:** 09/23/2019

**EXPIRES:** 03/21/2020

**APPLICANT:** Ryan Ward  
1613 Ketch Lane  
Kill Devil Hills, NC 27948

**OWNER:** Ryan Ward  
1613 Ketch Lane  
Kill Devil Hills, NC 27948

**CONTRACTOR:** ADRIAN DEAN PITTS  
1807 Bay Drive  
Kill Devil Hills, NC 27948  
252-480-3023

**GENERAL BUILDING, LIMITED:** Pitts, Adrian/ADP Swimming Pools & Construction  
801 Indian DR  
Kill Devil Hills, NC 27948  
305-8088

**License:** 53785  
**Expires:**

**PARCEL:**

**PIN:** 988413146795

**Parcel Number:** 026968000

**Address:** 1613 KETCH LN KILL DEVIL HILLS

**Addition:** FIRST FLIGHT VLG PH A SEC 3

**Zoning:**  
**Block:** 0 **Lot(s):** 35

**Legal Description:**

FEES:	Paid	Due
Res. Building Permit Fee	\$0.00	\$0.00
<b>Totals :</b>	<b>\$0.00</b>	<b>\$0.00</b>

**PROJECT DESCRIPTION:** replace front deck, front stairs and landing to same footprint, hurricane damage

1. Introduction

The purpose of this study is to investigate the effects of various factors on the performance of a specific task. The study is designed to provide a comprehensive overview of the current state of research in this area and to identify areas for further investigation.

2. Methodology

The study was conducted using a combination of qualitative and quantitative methods. Data was collected from a series of experiments and interviews with experts in the field. The results of the experiments were analyzed using statistical methods, while the interviews were analyzed using content analysis.

3. Results

The results of the study indicate that there is a significant relationship between the variables studied. The data shows that as the independent variable increases, the dependent variable also increases. This relationship is supported by the statistical analysis of the experimental data.

4. Discussion

The findings of this study have important implications for the field. They suggest that the factors studied are key determinants of performance. This information can be used to develop more effective training programs and to improve the design of systems and processes.

5. Conclusion

In conclusion, this study has provided valuable insights into the factors that influence performance. The results suggest that further research is needed to explore the underlying mechanisms of these relationships and to develop more targeted interventions.



**HUR2019-005****PROJECT NAME:** Ward front deck and stairs and landing replacement-

Hurricane damage

**SITE ADDRESS:** 1613 KETCH LN KILL DEVIL HILLS**HURRICANE PERMIT****ISSUED:** 09/23/2019**EXPIRES:** 03/21/2020**DETAILS****Permit**

<b>Name</b>	<b>Value</b>
ZONING DISTRICT	RL
FRONT YARD SETBACK	30
REAR YARD SETBACK	30
SIDE YARD SETBACK	10
CAMA PERMIT	N
FLOOD ZONE	AE
BASE FLOOD ELEVATION	8.3
PURPOSE	Residential Repair/Remodel
CONSTRUCTION COST	9000.00
SURVEYOR NAME AND NUMBER	Martin Barnette L-3740
CULVERT	N
OCCUPANCY TYPE	One & Two Family Dwelling

**REQUIRED INSPECTIONS**Slab/Foundation/Piling  
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.

1947 1948 1949 1950 1951 1952 1953 1954 1955 1956 1957 1958 1959 1960 1961 1962 1963 1964 1965 1966 1967 1968 1969 1970 1971 1972 1973 1974 1975 1976 1977 1978 1979 1980 1981 1982 1983 1984 1985 1986 1987 1988 1989 1990 1991 1992 1993 1994 1995 1996 1997 1998 1999 2000 2001 2002 2003 2004 2005 2006 2007 2008 2009 2010 2011 2012 2013 2014 2015 2016 2017 2018 2019 2020 2021 2022 2023 2024 2025

1947 1948 1949 1950 1951 1952 1953 1954 1955 1956 1957 1958 1959 1960 1961 1962 1963 1964 1965 1966 1967 1968 1969 1970 1971 1972 1973 1974 1975 1976 1977 1978 1979 1980 1981 1982 1983 1984 1985 1986 1987 1988 1989 1990 1991 1992 1993 1994 1995 1996 1997 1998 1999 2000 2001 2002 2003 2004 2005 2006 2007 2008 2009 2010 2011 2012 2013 2014 2015 2016 2017 2018 2019 2020 2021 2022 2023 2024 2025

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**HUR2019-005**

**PROJECT NAME:** Ward front deck and stairs and landing replacement-  
Hurricane damage  
**SITE ADDRESS:** 1613 KETCH LN KILL DEVIL HILLS

**HURRICANE PERMIT**

**ISSUED:** 09/23/2019

**EXPIRES:** 03/21/2020

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: Ryan Ward Date: 9-23-19

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THE  
OFFICE OF THE  
COMMISSIONER OF  
THE GENERAL LAND OFFICE  
WASHINGTON, D. C.

TO THE  
COMMISSIONER OF THE  
GENERAL LAND OFFICE  
WASHINGTON, D. C.

FOR THE  
PURPOSE OF  
RECORDING  
THE  
FOLLOWING  
INSTRUMENT

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DEED  
DATED  
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DAY OF  
MAY  
A. D. 1917

BY  
THE  
PARTIES  
TO SAID  
INSTRUMENT



**Town of Kill Devil Hills**

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

SEP 24 2019

**Planning and Inspection Department**

<b>HUR2019-006</b> PROJECT NAME: BENDER FENCE SITE ADDRESS: 2010 SMITHFIELD ST KILL DEVIL HILLS	<b>HURRICANE PERMIT</b> ISSUED: 09/24/2019 EXPIRES: 03/22/2020
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<b>APPLICANT:</b> BENDER, CHRISTOPHER 2010 SMITHFIELD ST. KILL DEVIL HILLS, NC 27948	<b>OWNER:</b> BENDER, CHRISTOPHER 2010 SMITHFIELD ST. KILL DEVIL HILLS, NC 27948
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<b>GENERAL:</b>	Self UNKNOWN UNKNOWN, XX 00000 917-862-9006	<b>License:</b> Unlicensed <b>Expires:</b> 12/31/2020
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<b>PARCEL:</b>			
<b>PIN:</b>	988405195055	<b>Parcel Number:</b>	001421000
<b>Address:</b>	2010 SMITHFIELD ST KILL DEVIL HILLS		
<b>Addition:</b>	AVALON BEACH ANNEX 2 & 3	<b>Zoning:</b>	
<b>Legal Description:</b>		<b>Block:</b>	0 <b>Lot(s):</b> 1283

<b>FEES:</b>	<u>Paid</u>	<u>Due</u>
<b>Totals :</b>		

**PROJECT DESCRIPTION:** CONSTRUCT FENCE ON SOUTHERN PROPERTY LINE, REPAIR FROM STORM

REPORT OF THE

COMMISSIONERS OF THE LAND OFFICE

FOR THE YEAR ENDING 31st DECEMBER 1911

PRINTED BY THE GOVERNMENT PRINTER, SINGAPORE

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**HUR2019-006**

**PROJECT NAME:** BENDER FENCE

**SITE ADDRESS:** 2010 SMITHFIELD ST KILL DEVIL HILLS

**HURRICANE PERMIT**

**ISSUED:** 09/24/2019

**EXPIRES:** 03/22/2020

**DETAILS**

**Permit**

<b>Name</b>	<b>Value</b>
ZONING DISTRICT	RL
FRONT YARD SETBACK	15
REAR YARD SETBACK	20% Depth >30
SIDE YARD SETBACK	6
CAMA PERMIT	N
FLOOD ZONE	X
PURPOSE	Residential Repair/Remodel
CONSTRUCTION TYPE	V
CONSTRUCTION COST	500.00
CULVERT	N
OCCUPANCY TYPE	One & Two Family Dwelling

**REQUIRED INSPECTIONS**

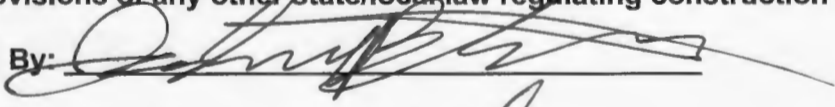
Stringline

Final

**CONDITIONS**

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

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

**Issued By:** 

**Contractor or Authorized Agent:**  **Date:** 9/24/19

THE UNIVERSITY OF CHICAGO  
DEPARTMENT OF CHEMISTRY  
5301 S. DICKINSON DRIVE  
CHICAGO, ILLINOIS 60637

RESEARCH REPORT

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THE UNIVERSITY OF CHICAGO  
DEPARTMENT OF CHEMISTRY  
5301 S. DICKINSON DRIVE  
CHICAGO, ILLINOIS 60637

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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

SEP 26 2019

**Planning and Inspection Department**

**HUR2019-008**

**PROJECT NAME:** BARBA SHEATHING, SIDING, AND WINDOWS  
**SITE ADDRESS:** 119 OCEAN BAY BLVD KILL DEVIL HILLS

**HURRICANE PERMIT**

**ISSUED:** 09/26/2019

**EXPIRES:** 03/24/2020

**APPLICANT:** BARBA, NICHOLAS F  
500 PINEY POINT ROAD  
YORKTOWN, VA 23692

**OWNER:** BARBA, NICHOLAS F  
500 PINEY POINT ROAD  
YORKTOWN, VA 23692

**BUILDING LIMITED:** JETTY CONSTRUCTION  
1002 WEST Memorial BLVD  
Kill Devil Hills, NC 27948  
252-715-8025

**License:** 79683  
**Expires:** 01/14/2020

**PARCEL:**

**PIN:** 988420709536

**Parcel Number:** 003846000

**Address:** 119 OCEAN BAY BLVD KILL DEVIL HILLS

**Addition:** KITTY HAWK SHORES - REVISED

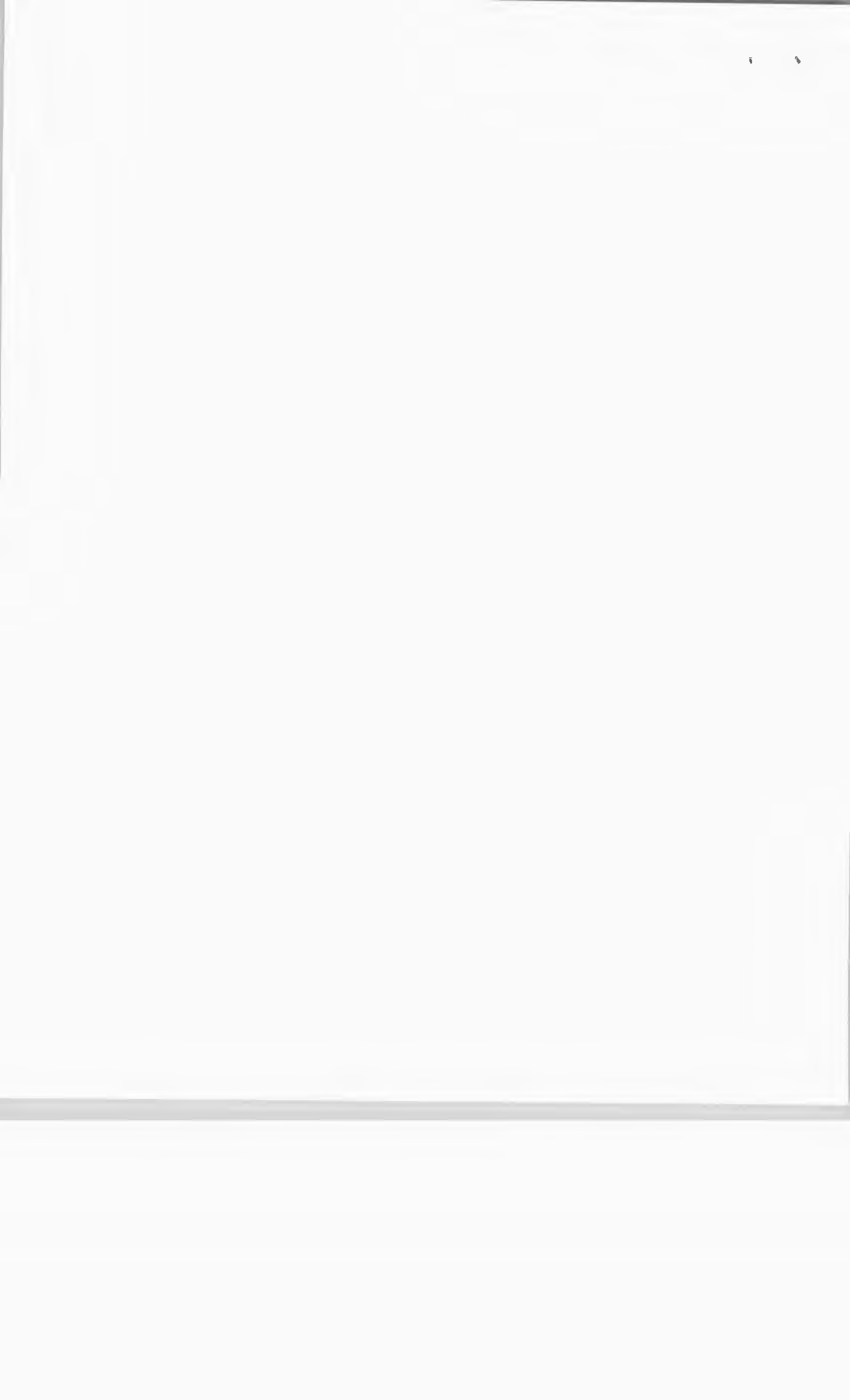
**Zoning:**

**Block:** 36 **Lot(s):** PT 1 & 2

**Legal Description:**

<b>FEES:</b>	<b>Paid</b>	<b>Due</b>
Res. Building Permit Fee	\$0.00	\$0.00
<b>Totals :</b>	<b>\$0.00</b>	<b>\$0.00</b>

**PROJECT DESCRIPTION:** REPAIR/REPLACE SHEATHING, SIDING, AND 3 WINDOWS DAMAGED FROM STORM



**HUR2019-008****PROJECT NAME:** BARBA SHEATHING, SIDING, AND WINDOWS  
**SITE ADDRESS:** 119 OCEAN BAY BLVD KILL DEVIL HILLS**HURRICANE PERMIT****ISSUED:** 09/26/2019**EXPIRES:** 03/24/2020

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**DETAILS****Permit**

<b>Name</b>	<b>Value</b>
ZONING DISTRICT	C
FRONT YARD SETBACK	15
REAR YARD SETBACK	20% Depth >30
SIDE YARD SETBACK	6
CAMA PERMIT	N
FLOOD ZONE	AE
BASE FLOOD ELEVATION	8.00
PURPOSE	Residential Repair/Remodel
CONSTRUCTION TYPE	V
CONSTRUCTION COST	15000.00
CULVERT	N
OCCUPANCY TYPE	One & Two Family Dwelling

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**REQUIRED INSPECTIONS**

Framing	Zoning Final
Final	

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**CONDITIONS**

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

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



**HUR2019-008**

**PROJECT NAME:** BARBA SHEATHING, SIDING, AND WINDOWS  
**SITE ADDRESS:** 119 OCEAN BAY BLVD KILL DEVIL HILLS

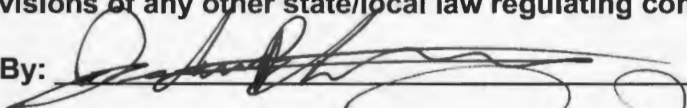
**HURRICANE PERMIT**

**ISSUED:** 09/26/2019

**EXPIRES:** 03/24/2020

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Issued By:

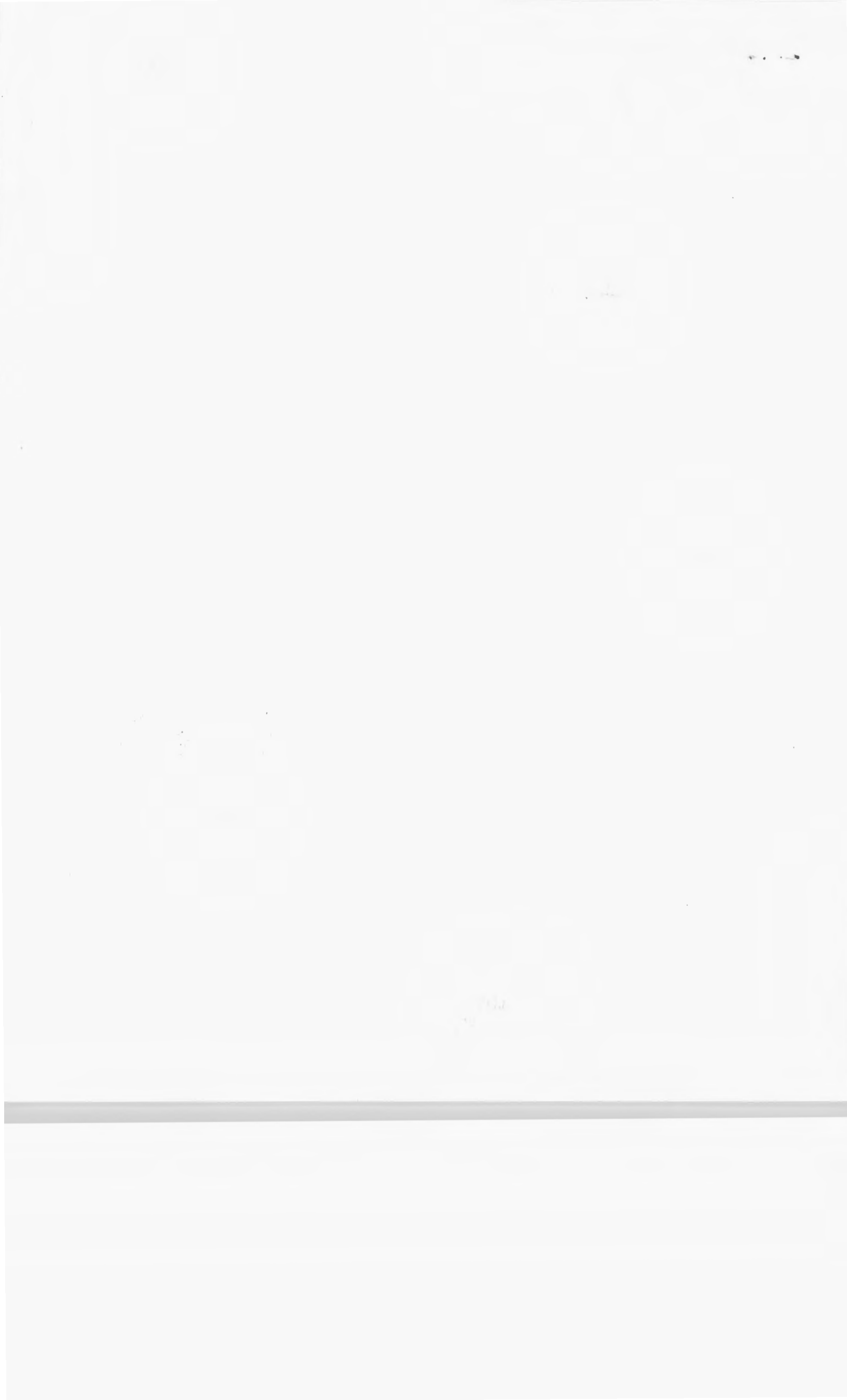


Contractor or Authorized Agent:



Date:

9/26/19





**Town of Kill Devil Hills**

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

PAID

SEP 26 2019

**Planning and Inspection Department**

<b>HUR2019-003</b> PROJECT NAME: Henry's Restaurant SITE ADDRESS: 3396 CROATAN HWY N KILL DEVIL HILLS	<b>HURRICANE PERMIT</b> ISSUED: 09/18/2019 EXPIRES: 03/16/2020
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<b>APPLICANT:</b> CARDINAL SIGNS 2629 Dean Drive VIRGINIA BEACH, VA 23452 757-486-7658	<b>OWNER:</b> EZZELL, HENRY EMMONS JR PO Box 470 KITTY HAWK, NC 27949 252-261-6142
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<b>CONTRACTOR:</b> CARDINAL SIGNS 2629 Dean Drive VIRGINIA BEACH, VA 23452 757-486-7658	<b>License:</b> LEGACY UNKNOWN <b>Expires:</b> 12/31/2019
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**PARCEL:**

<b>PIN:</b> 987516943985	<b>Parcel Number:</b> 000051000
<b>Address:</b> 3396 CROATAN HWY N KILL DEVIL HILLS	<b>Zoning:</b>
<b>Addition:</b>	<b>Block:</b> 18 <b>Lot(s):</b> 1-2
<b>Legal Description:</b>	

FEES:	Paid	Due
Res. Building Permit Fee	\$0.00	\$0.00
<b>Totals :</b>	<b>\$0.00</b>	<b>\$0.00</b>

**PROJECT DESCRIPTION:** Replace panel in free-standing sign damaged by hurricane

**DETAILS**

Permit	
Name	Value
ZONING DISTRICT	C
CAMA PERMIT	N
FLOOD ZONE	AE
CONSTRUCTION COST	2000.00
CULVERT	N

Form of the District

1. Name of the District

2. Address of the District

3. Description of the District

4. Name of the District

5. Address of the District

6. Description of the District

7. Name of the District

8. Address of the District

9. Description of the District

10. Name of the District

11. Address of the District

12. Description of the District



**HUR2019-003**

PROJECT NAME: Henry's Restaurant

SITE ADDRESS: 3396 CROATAN HWY N KILL DEVIL HILLS

**HURRICANE PERMIT**

ISSUED: 09/18/2019

EXPIRES: 03/16/2020

**REQUIRED INSPECTIONS**

In-Slab Plumbing

Slab/Foundation/Piling

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.

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

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

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

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

\* Zoning Final Inspection is required.

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

Issued By: 

Contractor or Authorized Agent: 

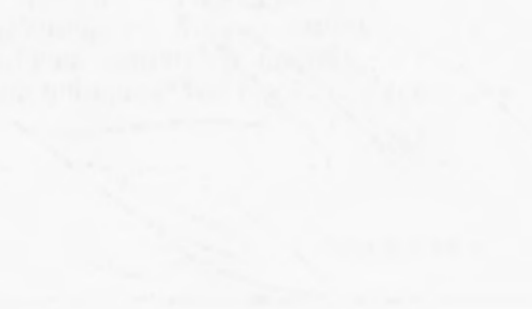
Date: 9-26-19

MURKIN CASE #121

200

ALL INFORMATION CONTAINED

81-15-1-111





# 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

**SG2019-022**

**PROJECT NAME:** Peace of the Pie  
**SITE ADDRESS:** 1731 S Croatan Hwy Kill Devil Hills

**SIGN**

**ISSUED:** 09/23/2019

**EXPIRES:** 03/21/2020

**APPLICANT:** 7 X Down 8 Up, LLC  
1714 Wrightsville Blvd.  
Kill Devil Hills, NC 27948  
252-202-1656

**OWNER:** 7 X Down 8 Up, LLC  
1714 Wrightsville Blvd.  
Kill Devil Hills, NC 27948  
252-202-1656

**CONTRACTOR:** SAME AS OWNER  
UNKNOWN  
UNKNOWN, XX 00000

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

**PARCEL:**

**PIN:** 989313046558

**Parcel Number:** 008242000

**Address:** 1731 S Croatan Hwy Kill Devil Hills

**Addition:** OCEAN ACRES INC

**Zoning:**  
**Block:** 0 **Lot(s):** 26-35

**Legal Description:**

<b>FEES:</b>	<b>Paid</b>	<b>Due</b>
Sign Permit Fee	\$100.00	\$0.00
<b>Totals :</b>	<b>\$100.00</b>	<b>\$0.00</b>

**PROJECT DESCRIPTION:** Sign on the building

PAID  
SEP 23 2019

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**SG2019-022**

**PROJECT NAME:** Peace of the Pie  
**SITE ADDRESS:** 1731 S Croatan Hwy Kill Devil Hills

**SIGN**

**ISSUED:** 09/23/2019

**EXPIRES:** 03/21/2020

**DETAILS**

**Permit**

Name	Value
# OF SIGNS	1
SIGN - WALL PERMITTED (SQFT)	168.20
SIGN- WALL PROPOSED (SQ FT)	36.00
ZONING DISTRICT	C
PURPOSE	Commercial Accessory
CONSTRUCTION COST	1000.00
FLOOD ZONE	AE

**REQUIRED INSPECTIONS**

Final

**CONDITIONS**

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

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

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

\* Zoning Final Inspection is required.

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

Issued By: 

Contractor or Authorized Agent: Ivan Marler

Date: 9/23/19

SET 17 DPI  
Town of Kill Devil Hills 4400  
PLANNING  
Date / Time : 09/24/19 08:46  
Payment : \$ 100.00  
Receipt # : 589152  
Check/Credit Card #: 023414  
Clerk : 981@nyd  
Paid By : KMAN GRAY

*[Handwritten signature]*



**Town of Kill Devil Hills**

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

PAID  
SEP 26 2019

**Planning and Inspection Department**

**SG2019-021**

**PROJECT NAME:** Speedway  
**SITE ADDRESS:** 1822 CROATAN HWY N KILL DEVIL HILLS

**SIGN**

**ISSUED:** 09/18/2019

**EXPIRES:** 03/16/2020

**APPLICANT:** CARDINAL SIGNS  
2629 Dean Drive  
VIRGINIA BEACH, VA 23452  
757-486-7658

**OWNER:** Downing, Nancy  
1829 Shoreham Rd  
Charlotte, NC 28211

**CONTRACTOR:** CARDINAL SIGNS  
2629 Dean Drive  
VIRGINIA BEACH, VA 23452  
757-486-7658

**License:** LEGACY UNKNOWN  
**Expires:** 12/31/2019

**PARCEL:**

**PIN:** 988406380174

**Parcel Number:** 027543000

**Address:** 1822 CROATAN HWY N KILL DEVIL HILLS

**Addition:** WILLIAMS COMMERCIAL LOTS

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

**Legal Description:**

<b>FEES:</b>	<b>Paid</b>	<b>Due</b>
Sign Permit Fee	\$100.00	\$0.00
<b>Totals :</b>	<b>\$100.00</b>	<b>\$0.00</b>

**PROJECT DESCRIPTION:** Replace portion of free-standing sign with gas numerals



OFFICE OF THE ATTORNEY GENERAL

IN SENATE, January 15, 1912.

REPORT OF THE ATTORNEY GENERAL  
ON THE PROCEEDINGS OF THE COMMISSIONERS OF THE LAND OFFICE  
IN CONNECTION WITH THE SALE OF THE STATE LANDS

ALBANY: PUBLISHED BY THE STATE PRINTING OFFICE, 1912.

RECEIVED JAN 15 1912

STATE OF NEW YORK

OFFICE OF THE ATTORNEY GENERAL

ALBANY: PUBLISHED BY THE STATE PRINTING OFFICE, 1912.



**SG2019-021**

**PROJECT NAME:** Speedway

**SITE ADDRESS:** 1822 CROATAN HWY N KILL DEVIL HILLS

**SIGN**

**ISSUED:** 09/18/2019

**EXPIRES:** 03/16/2020

**DETAILS**

**Permit**

<b>Name</b>	<b>Value</b>
# OF SIGNS	1
SIGN - FREE STANDING PERMITTED (SQFT)	64.00
SIGN - FREE STANDING PROPOSED (SQ FT)	48.30
ZONING DISTRICT	C
CONSTRUCTION COST	2000.00
FLOOD ZONE	AE

**REQUIRED INSPECTIONS**

Final

**CONDITIONS**

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

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

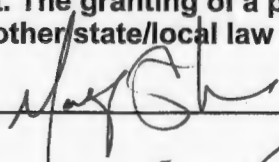
No exposed neon, argon, krypton or similar gas lighting allowed except as permitted in Section 153.077(B)(10).

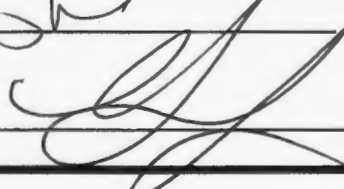
Lighting shall be shielded so as to prevent a direct view of the light from a residence or a street in a residential zone.

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

\* Zoning Final Inspection is required.

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

**Issued By:** \_\_\_\_\_ 

**Contractor or Authorized Agent:** \_\_\_\_\_  **Date:** 09-20-19

2012  
09/26/19  
09/26/19

RECEIPT

SET\_17.DPI  
Town of Kill Devil Hills 4400  
PLANNING  
Date / Time : 09/26/19 12:01  
Payment : \$ 100.00  
Receipt # : 589352  
Check/Credit Card #: 60153  
Clerk : 981msnyd  
Paid By : CARDINAL SIGNS



**Town of Kill Devil Hills**

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

PAID  
SEP - 3 2019

**Planning and Inspection Department**

<b>EL2019-070</b>	<b>PAID WITH CASH</b>	<b>ELECTRICAL</b>
<b>PROJECT NAME:</b>		<b>ISSUED: 09/03/2019</b>
<b>SITE ADDRESS: 2023 NORFOLK ST KILL DEVIL HILLS</b>		<b>EXPIRES: 03/01/2020</b>

<b>APPLICANT:</b> The McAra Group 118 Tall Pine LN Southern Shores, nc 27949 757-544-1588	<b>OWNER:</b> The McAra Group 118 Tall Pine LN Southern Shores, nc 27949 757-544-1588
--	--

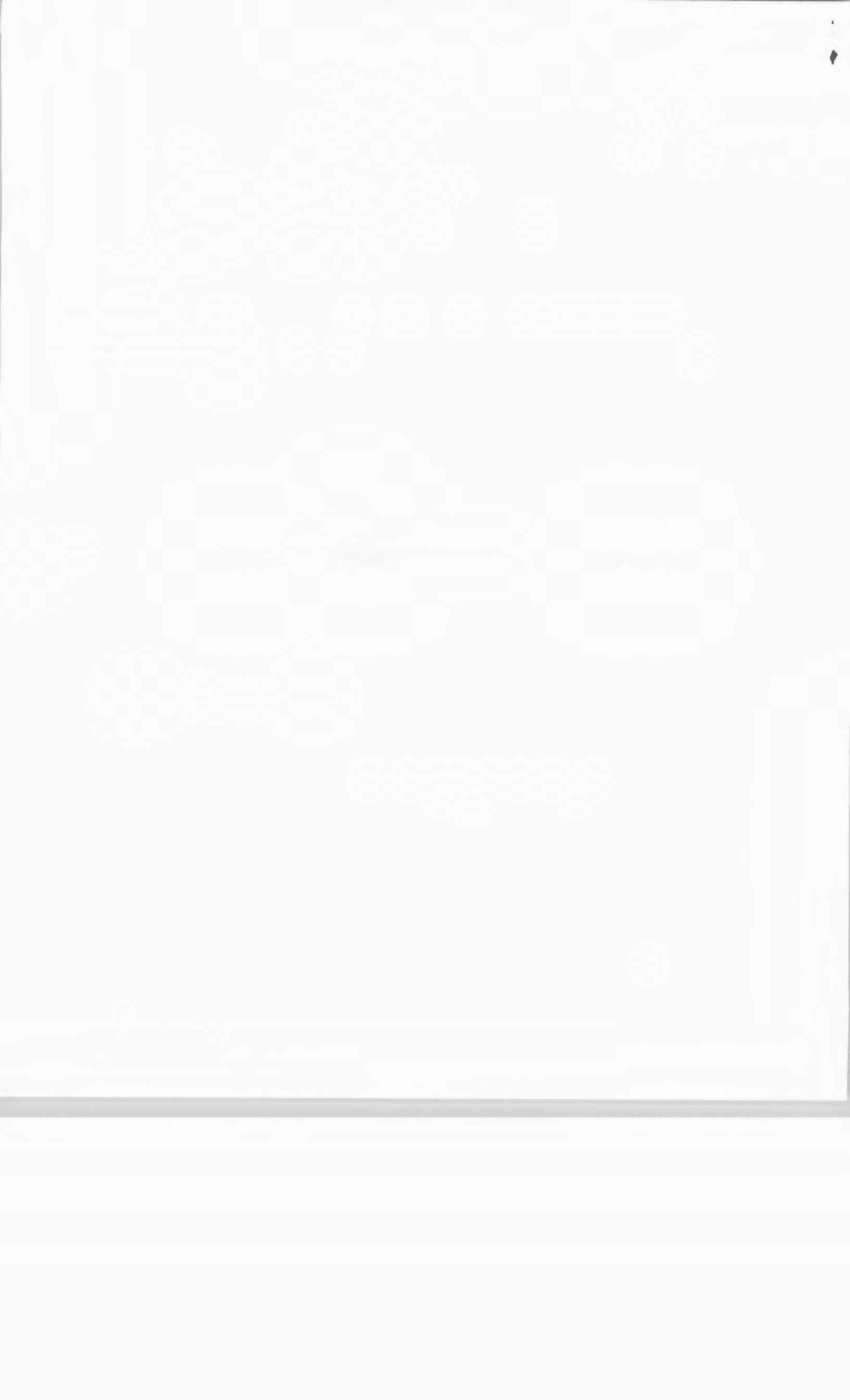
<b>ELECTRICAL-LIMITED:</b>	COASTAL ELECTRIC P.O. box 1952 Kill Devil Hills, NC 27948 252-207-4663	<b>License:</b> 24242 <b>Expires:</b> 07/31/2020
----------------------------	---	---

**PARCEL:**

<b>PIN:</b> 988405199674	<b>Parcel Number:</b> 001222000
<b>Address:</b> 2023 NORFOLK ST KILL DEVIL HILLS	<b>Zoning:</b>
<b>Addition:</b> AVALON BEACH ANNEX 2 & 3	<b>Block:</b> 0 <b>Lot(s):</b> 768
<b>Legal Description:</b>	

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

**PROJECT DESCRIPTION:** Service and meter base changeout



**EL2019-070**

**PROJECT NAME:**

**SITE ADDRESS:** 2023 NORFOLK ST KILL DEVIL HILLS

**ELECTRICAL**

**ISSUED:** 09/03/2019

**EXPIRES:** 03/01/2020

**DETAILS**

**Permit**

<b>Name</b>	<b>Value</b>
ZONING DISTRICT	RL
PURPOSE	Residential Repair/Remodel
CONSTRUCTION COST	1600.00
CONSTRUCTION TYPE	V
FLOOD ZONE	AE
BASE FLOOD ELEVATION	9
OCCUPANCY TYPE	One & Two Family Dwelling

**REQUIRED INSPECTIONS**

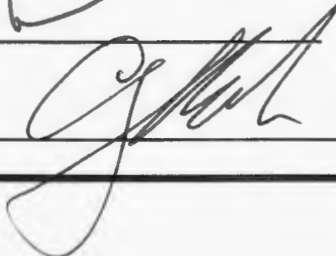
Final

**CONDITIONS**

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

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

Issued By: 

Contractor or Authorized Agent: 

Date: 9/3/2019

SET 17 CP1  
TOWN OF KILL DEVI HILLS 4000  
FLANNING  
Date / Time : 09/03/19 11:01  
Payment : \$ 150.00  
Receipt # : 587349  
Check / Credit Card #: :  
Clerk : 981msnyd  
Paid By : COASTAL ELECTRIC



# Town of Kill Devil Hills

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

## Planning and Inspection Department

**EL2019-071**

**PROJECT NAME:** Police temp generator  
**SITE ADDRESS:** 102 Town Hall Dr Kill Devil Hill

**ELECTRICAL**

**ISSUED: 09/04/2019**

**EXPIRES: 03/02/2020**

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

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

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

**License:** 19403  
**Expires:** 10/02/2019

**PARCEL:**

**PIN:** 9876543210

**Parcel Number:** 23

**Address:** 102 Town Hall Dr Kill Devil Hill

**Zoning:** LIGHT INDUSTRIAL 2

**Addition:**

**Block:** blk **Lot(s):** lot

**Legal Description:** This is the legal description test

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

**PROJECT DESCRIPTION:** Connect temp generator for police dept.

PAID  
SEP - 4 2019





**EL2019-071**

**PROJECT NAME:** Police temp generator  
**SITE ADDRESS:** 102 Town Hall Dr Kill Devil Hill

**ELECTRICAL**

**ISSUED:** 09/04/2019

**EXPIRES:** 03/02/2020

**DETAILS**

**Permit**

<b>Name</b>	<b>Value</b>
ZONING DISTRICT	G&I Public
PURPOSE	Commercial Repair/Remodel
CONSTRUCTION COST	1000.00
CONSTRUCTION TYPE	V
FLOOD ZONE	X

**REQUIRED INSPECTIONS**

Final

**CONDITIONS**

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

I hereby certify that I have read and examined this application and know the same to be true and correct. All provisions of Laws and Ordinances governing this type of work will be complied with whether specified herein or not. The granting of a permit does 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: 9-4-19

1

THE UNIVERSITY OF CHICAGO

PHYSICS DEPARTMENT  
5540 S. DICKINSON DRIVE  
CHICAGO, ILLINOIS 60637  
TEL: (773) 835-3100  
WWW.PHYSICS.UCHICAGO.EDU



**Town of Kill Devil Hills**

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

SEP 16 2019

**Planning and Inspection Department**

<b>EL2019-072</b> <b>PROJECT NAME:</b> Exotic Home Electric <b>SITE ADDRESS:</b> 900 Croatan HWY S. KILL DEVIL HILLS	<b>ELECTRICAL</b> <b>ISSUED:</b> 09/16/2019 <b>EXPIRES:</b> 03/14/2020
--	--

**APPLICANT:** Day, Michael  
 132 Freedom Ave  
 Powels Point, NC 27966

**OWNER:** Day, Michael  
 132 Freedom Ave  
 Powels Point, NC 27966

**ELECTRICAL:** COASTAL ELECTRIC CONTRACTING CO.  
 9010 Pineywoods Rd.  
 Fairfield, NC 27826  
 252-943-4029

**License:** 5167-U  
**Expires:** 06/30/2020

**PARCEL:**

**PIN:** 988308883029

**Parcel Number:** 004349003

**Address:** 900 Croatan HWY S. KILL DEVIL HILLS

**Addition:** KILL DEVIL HILLS REALTY CORP

**Zoning:**

**Block:** 10      **Lot(s):** 9, 10 & PT 1

**Legal Description:**

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

**PROJECT DESCRIPTION:** Replace panel box and wiring due to fire

**DETAILS**

**Permit**

Name	Value
ZONING DISTRICT	C
PURPOSE	Commercial Repair/Remodel
CONSTRUCTION COST	25300.00
FLOOD ZONE	AE
BASE FLOOD ELEVATION	9

Form 1041-100

Department of the Treasury  
Internal Revenue Service

1997

Form 1041-100 (1997)



ESTATE TAX RETURN  
For the year ending 12/31/97

NAME OF DECEASED (or other person whose estate is being administered)  
NAME OF ESTATE (or other person whose estate is being administered)

GRANTOR (or other person whose estate is being administered)  
NAME OF GRANTOR (or other person whose estate is being administered)

DECEASED (or other person whose estate is being administered)  
NAME OF DECEASED (or other person whose estate is being administered)

GRANTOR (or other person whose estate is being administered)  
NAME OF GRANTOR (or other person whose estate is being administered)

DECEASED (or other person whose estate is being administered)  
NAME OF DECEASED (or other person whose estate is being administered)

**EL2019-072**

**PROJECT NAME:** Exotic Home Electric

**SITE ADDRESS:** 900 Croatan HWY S. KILL DEVIL HILLS

**ELECTRICAL**

**ISSUED:** 09/16/2019

**EXPIRES:** 03/14/2020

**REQUIRED INSPECTIONS**

Pre-final

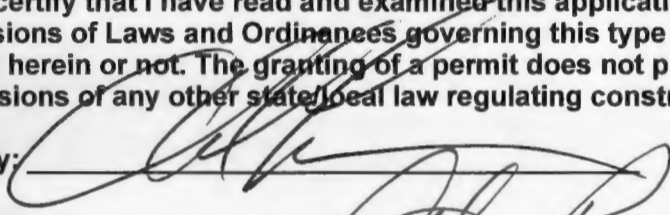
Final

**CONDITIONS**

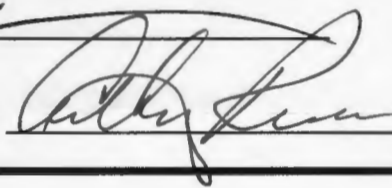
\* This permit becomes null and void if work or construction authorized is not commenced within 6 months or if construction or work is suspended for a period of 12 months at any time after work has started.

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

Issued By: \_\_\_\_\_



Contractor or Authorized Agent: \_\_\_\_\_



Date: \_\_\_\_\_

9/16/19

ELECTRICAL  
SERVICE  
COMPANY

RECEIPT

NO. 12345

Handwritten notes and signature area, including a signature that appears to read "John Doe".

SET 17 CPI  
Town of Kill Devil Hills 4400  
PLANNING  
Date / Time : 09/17/19 09:57  
Payment : \$ 150.00  
Receipt # : 588411  
Check/Credit Card #: 08284P  
Clerk : 981msnyd  
Paid By : COASTAL ELECTRIC CO



**Town of Kill Devil Hills**

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

PAID  
SEP 23 2019

**Planning and Inspection Department**

<b>EL2019-073</b> PROJECT NAME: Opus Generator SITE ADDRESS: 100 HELGA ST E KILL DEVIL HILLS	<b>ELECTRICAL</b> ISSUED: 09/23/2019 EXPIRES: 03/21/2020
--	--

<b>APPLICANT:</b> OPUS LLC 3909 TARKLERIDGE RD kitty hawk, nc 27949 252-489-0648	<b>OWNER:</b> OPUS LLC 3909 TARKLERIDGE RD kitty hawk, nc 27949 252-489-0648
---	---

<b>ELECTRICAL-UNLIMITED:</b>	SUBURBAN ELECTRIC CONTRACTORS OF NC INC. PO Box 925 Manteo, NC 27954 252-475-1372	<b>License:</b> 30633-U <b>Expires:</b> 08/06/2020
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**PARCEL:**

<b>PIN:</b> 988513041146	<b>Parcel Number:</b> 000042000
<b>Address:</b> 100 HELGA ST E KILL DEVIL HILLS	
<b>Addition:</b> ORVILLE BEACH AMENDED BLK 12	<b>Zoning:</b>
<b>Legal Description:</b>	<b>Block:</b> 12 <b>Lot(s):</b> 2

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

**PROJECT DESCRIPTION:** Install 22KW generator and 200amp transfer switch

**DETAILS**

Permit	
Name	Value
ZONING DISTRICT	C
PURPOSE	Commercial Repair/Remodel
CONSTRUCTION COST	8000.00
FLOOD ZONE	AE
BASE FLOOD ELEVATION	8

Town of Kill Devil Hills

Form 9 and report on the survey

Lot No.	Area	Owner	Remarks
1	1.25	John Smith	
2	1.50	Jane Doe	
3	1.75	Bob Johnson	
4	1.00	Alice Brown	
5	1.25	Charlie White	
6	1.50	Diana Green	
7	1.75	Frank Black	
8	1.00	Grace King	
9	1.25	Henry Lee	
10	1.50	Ivy Hill	
11	1.75	Jack King	
12	1.00	Karen White	
13	1.25	Larry Green	
14	1.50	Mary Black	
15	1.75	Nancy King	
16	1.00	Oscar White	
17	1.25	Peter Green	
18	1.50	Quinn Black	
19	1.75	Rachel King	
20	1.00	Sam White	
21	1.25	Tina Green	
22	1.50	Uma Black	
23	1.75	Victor King	
24	1.00	Wendy White	
25	1.25	Xavier Green	
26	1.50	Yvonne Black	
27	1.75	Zoe King	
28	1.00	Adam White	
29	1.25	Beth Green	
30	1.50	Carl Black	
31	1.75	Dora King	
32	1.00	Eugene White	
33	1.25	Fred Green	
34	1.50	Gina Black	
35	1.75	Harold King	
36	1.00	Irene White	
37	1.25	Jack Green	
38	1.50	Karen Black	
39	1.75	Larry King	
40	1.00	Mary White	
41	1.25	Nancy Green	
42	1.50	Oscar Black	
43	1.75	Peter King	
44	1.00	Quinn White	
45	1.25	Rachel Green	
46	1.50	Sam Black	
47	1.75	Tina King	
48	1.00	Uma White	
49	1.25	Victor Green	
50	1.50	Wendy Black	
51	1.75	Xavier King	
52	1.00	Yvonne White	
53	1.25	Zoe Green	
54	1.50	Adam Black	
55	1.75	Beth King	
56	1.00	Carl White	
57	1.25	Dora Green	
58	1.50	Eugene Black	
59	1.75	Fred King	
60	1.00	Gina White	
61	1.25	Harold Green	
62	1.50	Irene Black	
63	1.75	Jack King	
64	1.00	Karen White	
65	1.25	Larry Green	
66	1.50	Mary Black	
67	1.75	Nancy King	
68	1.00	Oscar White	
69	1.25	Peter Green	
70	1.50	Quinn Black	
71	1.75	Rachel King	
72	1.00	Sam White	
73	1.25	Tina Green	
74	1.50	Uma Black	
75	1.75	Victor King	
76	1.00	Wendy White	
77	1.25	Xavier Green	
78	1.50	Yvonne Black	
79	1.75	Zoe King	
80	1.00	Adam White	
81	1.25	Beth Green	
82	1.50	Carl Black	
83	1.75	Dora King	
84	1.00	Eugene White	
85	1.25	Fred Green	
86	1.50	Gina Black	
87	1.75	Harold King	
88	1.00	Irene White	
89	1.25	Jack Green	
90	1.50	Karen Black	
91	1.75	Larry King	
92	1.00	Mary White	
93	1.25	Nancy Green	
94	1.50	Oscar Black	
95	1.75	Peter King	
96	1.00	Quinn White	
97	1.25	Rachel Green	
98	1.50	Sam Black	
99	1.75	Tina King	
100	1.00	Uma White	



**EL2019-073**

**PROJECT NAME:** Opus Generator  
**SITE ADDRESS:** 100 HELGA ST E KILL DEVIL HILLS

**ELECTRICAL**

**ISSUED:** 09/23/2019

**EXPIRES:** 03/21/2020

**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.

\* Gas piping sign off required.

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

Issued By: 

Contractor or Authorized Agent: 

Date: 9/23/19

Suburban Electric Co.  
4400  
Town of Kill Devil Hills

RECEIPT

DATE

AMOUNT

PAID TO

Suburban Electric Co.

SET 17 CP1  
Town of Kill Devil Hills 4400  
PLANNING  
Date / Time : 09/23/19 14:24  
Payment : \$ 150.00  
Receipt # : 589140  
Check/Credit Card #: 861546  
Clerk : 981msnyd  
Paid By : SUBURBAN ELECTRIC C



**Town of Kill Devil Hills**

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

PAID  
SEP 26 2019

**Planning and Inspection Department**

<b>EL2019-074</b>	<b>ELECTRICAL</b>
<b>PROJECT NAME:</b> MOORE ILLEGAL WIRING REMOVAL	<b>ISSUED:</b> 09/26/2019
<b>SITE ADDRESS:</b> 110 CAMELLIA DR KILL DEVIL HILLS	<b>EXPIRES:</b> 03/24/2020

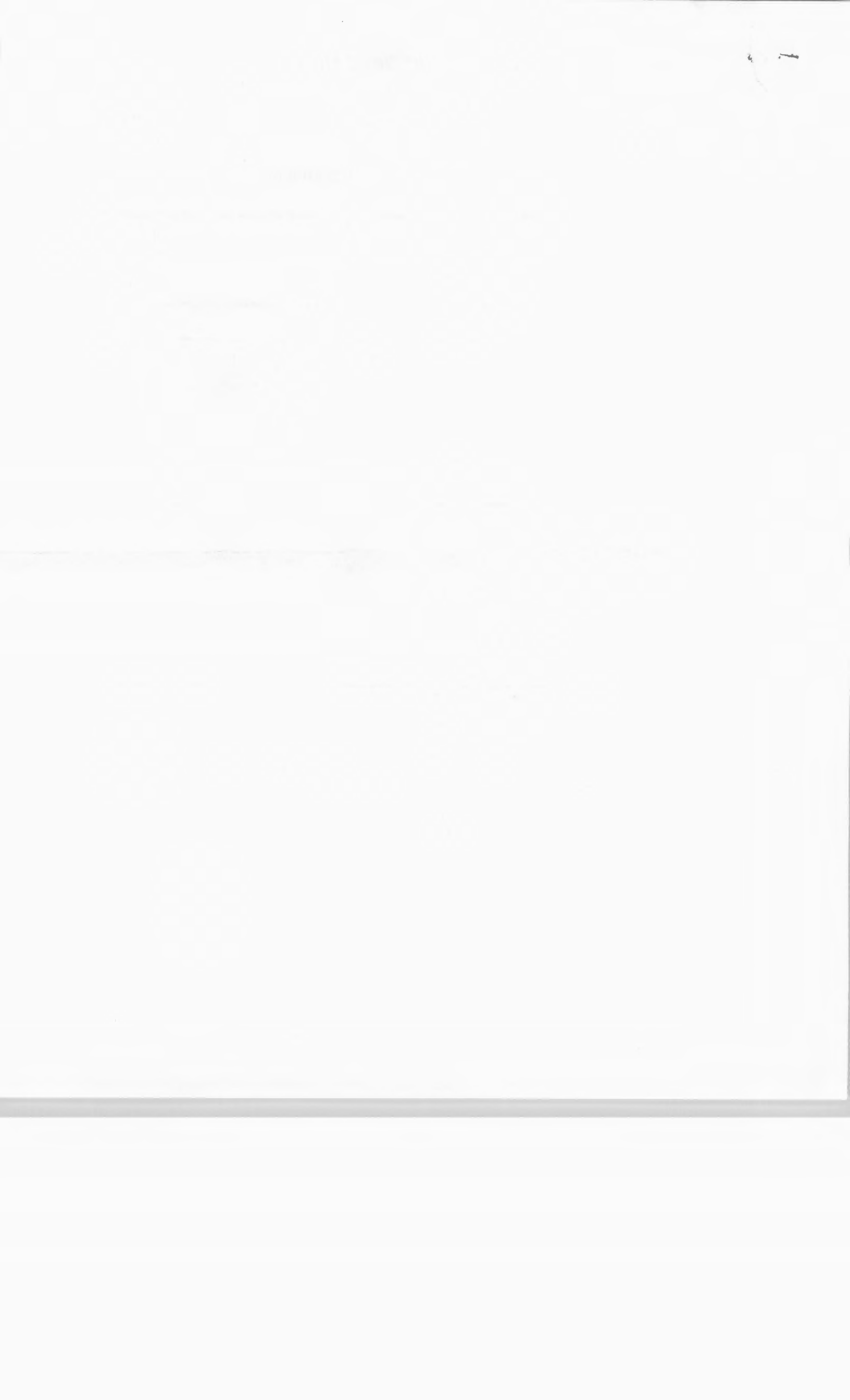
<b>APPLICANT:</b> SAM MOORE PO BOX 956 MANTEO, NC 27954 252-475-7084	<b>OWNER:</b> SAM MOORE PO BOX 956 MANTEO, NC 27954 252-475-7084
---	---

<b>ELECTRICAL-LIMITED:</b>	William Farrell Electric LLC 5224 Lunar Drive Kitty Hawk, NC 27949 252-475-7084	<b>License:</b> 30086-L <b>Expires:</b> 12/01/2019
----------------------------	--	---

<b>PARCEL:</b>			
<b>PIN:</b> 988411552430	<b>Parcel Number:</b>	003135000	
<b>Address:</b> 110 CAMELLIA DR KILL DEVIL HILLS	<b>Zoning:</b>		
<b>Addition:</b> W R DEATON - DELRAY BEACH	<b>Block:</b> 2	<b>Lot(s):</b>	PT 18
<b>Legal Description:</b>			

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

**PROJECT DESCRIPTION:** EXPOSE ALL UNINSPECTED, UNPERMITTED WIRING, REMOVE ALL ELECTRICAL BELOW BASE FLOOD



**EL2019-074**

**PROJECT NAME:** MOORE ILLEGAL WIRING REMOVAL  
**SITE ADDRESS:** 110 CAMELLIA DR KILL DEVIL HILLS

**ELECTRICAL**

**ISSUED:** 09/26/2019

**EXPIRES:** 03/24/2020

**DETAILS**

**Permit**

<b>Name</b>	<b>Value</b>
ZONING DISTRICT	RL
PURPOSE	Residential Repair/Remodel
CONSTRUCTION COST	1000.00
CONSTRUCTION TYPE	V
FLOOD ZONE	AE
BASE FLOOD ELEVATION	8.00
OCCUPANCY TYPE	One & Two Family Dwelling

**REQUIRED INSPECTIONS**

Final

**CONDITIONS**

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

Contractor or Authorized Agent: \_\_\_\_\_

Date: \_\_\_\_\_

9/26/19

SET 17.DPI  
Town of Kill Devil Hills 4400  
PLANNING  
Date / Time : 09/27/19 09:02  
Payment : \$ 150.00  
Receipt # : 589390  
Check/Credit Card #: 416260  
Clerk : 981#snjd  
Paid By : WILLIAM FARRELL ELE



# Town of Kill Devil Hills

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

PAID  
SEP 23 2019

## Planning and Inspection Department

TOWN OF  
KILL DEVIL HILLS

**ZP2019-069**

**PROJECT NAME:** Gunther Fence  
**SITE ADDRESS:** 234 EDEN ST ST W KILL DEVIL HILLS

**ZONING PERMIT**

**ISSUED:** 09/23/2019

**EXPIRES:** 03/21/2020

**APPLICANT:** Gunther, William  
234 Eden Street W  
Kill Devil Hills, NC 27948

**OWNER:** Gunther, William  
234 Eden Street W  
Kill Devil Hills, NC 27948

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

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

**License:** 67524  
**Expires:** 01/01/2020

**PARCEL:**

**PIN:** 988517019136

**Parcel Number:** 000472000

**Address:** 234 EDEN ST ST W KILL DEVIL HILLS

**Addition:** VIRGINIA DARE SHORES

**Zoning:**  
**Block:** 27 **Lot(s):** 37-38

**Legal Description:**

FEES:	Paid	Due
Fence	\$100.00	\$0.00
<b>Totals :</b>	<b>\$100.00</b>	<b>\$0.00</b>

**PROJECT DESCRIPTION:** Fence along property line, connecting to side of house

*cost \$1000.00*

Form 1041-1 (2001)

Department of the Treasury  
Internal Revenue Service

Form 1041-1

1. Name of the trust or estate  
2. Identification number  
3. State of residence  
4. Tax year

5. Name of the recipient  
6. Identification number  
7. State of residence  
8. Tax year

9. Name of the trust or estate  
10. Identification number  
11. State of residence  
12. Tax year

13. Name of the trust or estate  
14. Identification number  
15. State of residence  
16. Tax year

17. Name of the trust or estate  
18. Identification number  
19. State of residence  
20. Tax year

21. Name of the trust or estate  
22. Identification number  
23. State of residence  
24. Tax year



**ZP2019-069**

**PROJECT NAME:** Gunther Fence  
**SITE ADDRESS:** 234 EDEN ST ST W KILL DEVIL HILLS

**ZONING PERMIT****ISSUED:** 09/23/2019**EXPIRES:** 03/21/2020**DETAILS****Permit**

<b>Name</b>	<b>Value</b>
ZONING DISTRICT	RL
FRONT YARD SETBACK	15
REAR YARD SETBACK	20% Depth >30
SIDE YARD SETBACK	6
CAMA PERMIT	N
CAMA EXEMPTION	N
FLOOD ZONE	AE
BASE FLOOD ELEVATION	8.3
PURPOSE	Residential Accessory
LOT COVERAGE	39.80
SURVEYOR NAME AND NUMBER	John R. Mayne L-4567
CULVERT	N
DRIVEWAY INVERT 2	N

**REQUIRED INSPECTIONS**

Stringline

Zoning Final

Final

**CONDITIONS**

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

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

**Issued By:** \_\_\_\_\_

**Contractor or Authorized Agent:** \_\_\_\_\_

**Date:** 9-23-19

STANDARD FORM NO. 64  
MAY 1962 EDITION  
GSA FPMR (41 CFR) 101-11.6

ACCOUNT TICKET

SET 17 CPI  
Town of Kill Devil Hills 4400  
PLANNING  
Date / Time : 09/23/19 14:22  
Payment : \$ 100.00  
Receipt # : 589138  
Check/Credit Card # : 086487  
Clerk : 981msyd  
Paid By : SANDY ROTTOM HOMES



**Town of Kill Devil Hills**

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

PAID

SEP 23 2019

**Planning and Inspection Department**

TOWN OF  
 KILL DEVIL HILLS

<b>DW2019-015</b> <b>PROJECT NAME:</b> Huddleston Driveway Addition <b>SITE ADDRESS:</b> 110 SPORTSMAN DR E KILL DEVIL HILLS	<b>DRIVEWAY</b> <b>ISSUED:</b> 09/19/2019 <b>EXPIRES:</b> 03/17/2020
--	--

<b>APPLICANT:</b> Huddleston, Henry 137 Nautical Lane currituck, nc 27929	<b>OWNER:</b> Huddleston, Henry 137 Nautical Lane currituck, nc 27929
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<b>CONTRACTOR:</b> C & T CONTRACTING 1700 Bell Ave. Kill Devil Hills, NC 27948 252-202-9943	
--	--

<b>BUILDING LIMITED:</b>	C & T CONTRACTING 1700 Bell Ave. Kill Devil Hills, NC 27948 252-202-9943	<b>License:</b> 45367 <b>Expires:</b> 01/01/2020
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<b>PARCEL:</b>			
PIN:	988517211016	Parcel Number:	001718000
Address:	110 SPORTSMAN DR E KILL DEVIL HILLS		
Addition:	AVALON BEACH	Zoning:	
Legal Description:		Block:	0      Lot(s): 66

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

**PROJECT DESCRIPTION:** add 7'x46.5' driveway to east side of existing driveway

Form of Bill of Exchange

Pay to the order of

No. 12345	Date of Issue	Place of Issue
Pay to the order of	Payable at	Value
Pay to the order of	Payable at	Value

I hereby certify that the above is a true and correct copy of the original bill of exchange.	Signature	Name	Address
I hereby certify that the above is a true and correct copy of the original bill of exchange.	Signature	Name	Address

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**DW2019-015**

**PROJECT NAME:** Huddleston Driveway Addition  
**SITE ADDRESS:** 110 SPORTSMAN DR E KILL DEVIL HILLS

**DRIVEWAY**

**ISSUED:** 09/19/2019

**EXPIRES:** 03/17/2020

**DETAILS**

**Permit**

Name	Value
DRIVEWAY INVERT 2	N
CULVERT	N
SURVEYOR NAME AND NUMBER	M. Douglas Styons L-3227
ZONING DISTRICT	C
CONSTRUCTION COST	2000.00
FLOOD ZONE	AE
BASE FLOOD ELEVATION	9.0
LOT COVERAGE	48.15
TOTAL SQUARE FOOTAGE	326

**REQUIRED INSPECTIONS**

Zoning Final

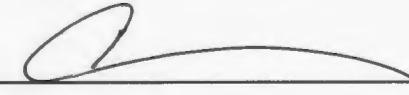
Final

**CONDITIONS**

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

I hereby certify that I have read and examined this application and know the same to be true and correct. All provisions of Laws and Ordinances governing this type of work will be complied with whether specified herein or not. The granting of a permit does 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: 9/23/19

09/23/19  
981msnyd

09/23/19

PLANNING  
Town of Kill Devil Hills 4400  
Date / Time : 09/23/19 09:40  
Payment : \$ 50.00  
Receipt # : 589020  
Check/Credit Card # : 10256  
Clerk : 981msnyd  
Paid By : C & T CONTRACTING I

*[Handwritten signature]*



# Town of Kill Devil Hills

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

SEP 24 2019

## Planning and Inspection Department

<b>OP2019-056</b> PROJECT NAME: Robert London SITE ADDRESS: 1414 HILL ST KILL DEVIL HILLS	<b>OCCUPANCY</b> ISSUED: 09/23/2019 EXPIRES:
---	--

PARENT PERMIT #: BJ2018-130

<b>APPLICANT:</b> LONDON, ROBERT F P O BOX 164 POINT HARBOR, NC 27964 252-491-8330	<b>OWNER:</b> LONDON, ROBERT F P O BOX 164 POINT HARBOR, NC 27964 252-491-8330
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<b>GENERAL:</b>	LONDON, ROBERT F. JR. Rt 1 Box 30 Harbinger, NC 27941 252-207-8644	<b>License:</b> 14364 <b>Expires:</b>
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<b>PARCEL:</b>			
<b>PIN:</b> 988315730921	<b>Parcel Number:</b>	004841008	
<b>Address:</b> 1414 HILL ST KILL DEVIL HILLS	<b>Zoning:</b>		
<b>Addition:</b> KILL DEVIL BEACH EXTENDED	<b>Block:</b> 14	<b>Lot(s):</b> 8	
<b>Legal Description:</b>			

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

**PROJECT DESCRIPTION:** Proposed 3 Bedroom SFD

Town of North Hill

Box 101  
1000 North Hill  
North Hill, ND 58850

North Hill Telephone Office

North Hill Telephone Office  
1000 North Hill  
North Hill, ND 58850

North Hill Telephone Office  
1000 North Hill  
North Hill, ND 58850

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North Hill, ND 58850

North Hill Telephone Office  
1000 North Hill  
North Hill, ND 58850

North Hill Telephone Office  
1000 North Hill  
North Hill, ND 58850



**OP2019-056**

**PROJECT NAME:** Robert London  
**SITE ADDRESS:** 1414 HILL ST KILL DEVIL HILLS

**OCCUPANCY**  
**ISSUED:** 09/23/2019


**EXPIRES:**

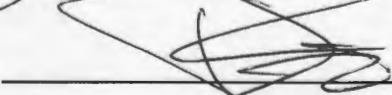
**DETAILS**

Permit	
Name	Value
# OF TRASH CANS	1
PURPOSE	Residential New
ZONING DISTRICT	RL
FLOOD ZONE	X
OCCUPANCY TYPE	One & Two Family Dwelling

**CONDITIONS**

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

Issued By: 

Contractor or Authorized Agent: 

Date: 9/24/2019

ISSUED 09/21/19  
EXPIRES

8.18.19

8.18.19

Handwritten notes and signatures in a rectangular box.

SET 17 CPI  
Town of Kill Devil Hills 4400  
PLANNING  
Date / Time : 09/24/19 11:28  
Payment : \$ 50.00  
Receipt # : 589160  
Check/Credit Card #: 091056  
Clerk : 981msnyd  
Paid By : ROBERT LONDON



**Town of Kill Devil Hills**

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

SEP 24 2019

**Planning and Inspection Department**

TOWN OF  
 KILL DEVIL HILLS

<b>OP2019-057</b> <b>PROJECT NAME:</b> Sandy Bottom Homes <b>SITE ADDRESS:</b> 1513 DOGWOOD LN KILL DEVIL HILLS	<b>OCCUPANCY</b> <b>ISSUED:</b> 09/24/2019  <b>EXPIRES:</b>
---	--

**PARENT PERMIT #: BJ2019-092**

<b>APPLICANT:</b> FRANK SOLES/SANDY BOTTOM HOMES 400 DaVinci Lane kitty hawk, nc 27949 757-448-8162	<b>OWNER:</b> Sandy Bottom Homes 400 DaVinci Lane kitty hawk, nc 27949 757-448-8162
--	--

<b>CONTRACTOR:</b>	FRANK SOLES/SANDY BOTTOM HOMES 400 DaVinci Lane kitty hawk, nc 27949 757-448-8162	<b>License:</b> LEGACY UNKNOWN <b>Expires:</b> 12/31/2019
<b>GENERAL BUILDING-LIMITED:</b>	SANDY BOTTOM HOMES 400 DaVinci Lane kitty hawk, nc 27949 757-448-8162	<b>License:</b> 67524 <b>Expires:</b> 01/01/2020

**PARCEL:**

PIN:	988413138997	Parcel Number:	026983000
Address:	1513 DOGWOOD LN KILL DEVIL HILLS		
Addition:	FIRST FLIGHT VLG PH A SEC 3	Zoning:	
Legal Description:		Block:	0      Lot(s): 57

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

**PROJECT DESCRIPTION:** Proposed 4 bedroom single family dwelling

**DETAILS**

Permit	
Name	Value
# OF TRASH CANS	1

Journal of the Board of Directors



Meeting held on the \_\_\_\_\_ day of \_\_\_\_\_ 19\_\_\_\_  
at \_\_\_\_\_

The following members were present: \_\_\_\_\_  
\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**OP2019-057**

**PROJECT NAME:** Sandy Bottom Homes

**SITE ADDRESS:** 1513 DOGWOOD LN KILL DEVIL HILLS

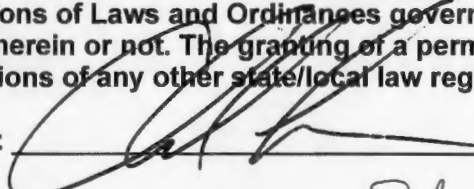
**OCCUPANCY**

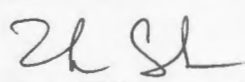
**ISSUED:** 09/24/2019

**EXPIRES:**

**CONDITIONS**

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

Issued By:  \_\_\_\_\_

Contractor or Authorized Agent:  \_\_\_\_\_

Date: 9-24-19

000000000000  
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CHARTER

PLANNING  
Town of Kill Devil Hills  
4400

SET\_17\_CPI  
Town of Kill Devil Hills  
4400  
PLANNING  
Date / Time : 09/24/19 11:50  
Payment : \$ 50.00  
Receipt # : 589163  
Check/Credit Card #: 044377  
Clerk : 981msnyd  
Paid By : SANDY BOTTOM HOMES



# Town of Kill Devil Hills

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

PAD

## Planning and Inspection Department

SEP 25 2019

### OP2019-059

PROJECT NAME: Water Oak Residential, LLC  
SITE ADDRESS: 1200 West First Street Kill Devil Hills

**TOWN OF  
OCCUPANCY**  
ISSUED: 09/25/2019

**EXPIRES:**

PARENT PERMIT #: BJ2018-162

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

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

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

**License:** 62306  
**Expires:** 12/30/2019

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

**License:** 62306  
**Expires:** 12/30/2019

#### PARCEL:

**PIN:** 988417126342

**Parcel  
Number:**

**Address:** 1200 West First Street Kill Devil Hills

**Zoning:**

**Addition:**

**Block:**

**Lot(s):**

**Legal Description:** Parcel A

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

**PROJECT DESCRIPTION:** Proposed 3 bedroom

MEMORANDUM FOR THE RECORD

DATE: 10/15/54

TO: SAC, NEW YORK

FROM: SA [Name]

RE: [Subject Name] (NY 100-157341) (C) (S) (M) (A) (R) (I) (D) (E) (F) (G) (H) (J) (K) (L) (N) (O) (P) (Q) (R) (S) (T) (U) (V) (W) (X) (Y) (Z) (AA) (AB) (AC) (AD) (AE) (AF) (AG) (AH) (AI) (AJ) (AK) (AL) (AM) (AN) (AO) (AP) (AQ) (AR) (AS) (AT) (AU) (AV) (AW) (AX) (AY) (AZ) (BA) (BB) (BC) (BD) (BE) (BF) (BG) (BH) (BI) (BJ) (BK) (BL) (BM) (BN) (BO) (BP) (BQ) (BR) (BS) (BT) (BU) (BV) (BW) (BX) (BY) (BZ) (CA) (CB) (CC) (CD) (CE) (CF) (CG) (CH) (CI) (CJ) (CK) (CL) (CM) (CN) (CO) (CP) (CQ) (CR) (CS) (CT) (CU) (CV) (CW) (CX) (CY) (CZ) (DA) (DB) (DC) (DD) (DE) (DF) (DG) (DH) (DI) (DJ) (DK) (DL) (DM) (DN) (DO) (DP) (DQ) (DR) (DS) (DT) (DU) (DV) (DW) (DX) (DY) (DZ) (EA) (EB) (EC) (ED) (EE) (EF) (EG) (EH) (EI) (EJ) (EK) (EL) (EM) (EN) (EO) (EP) (EQ) (ER) (ES) (ET) (EU) (EV) (EW) (EX) (EY) (EZ) (FA) (FB) (FC) (FD) (FE) (FF) (FG) (FH) (FI) (FJ) (FK) (FL) (FM) (FN) (FO) (FP) (FQ) (FR) (FS) (FT) (FU) (FV) (FW) (FX) (FY) (FZ) (GA) (GB) (GC) (GD) (GE) (GF) (GG) (GH) (GI) (GJ) (GK) (GL) (GM) (GN) (GO) (GP) (GQ) (GR) (GS) (GT) (GU) (GV) (GW) (GX) (GY) (GZ) (HA) (HB) (HC) (HD) (HE) (HF) (HG) (HH) (HI) (HJ) (HK) (HL) (HM) (HN) (HO) (HP) (HQ) (HR) (HS) (HT) (HU) (HV) (HW) (HX) (HY) (HZ) (IA) (IB) (IC) (ID) (IE) (IF) (IG) (IH) (II) (IJ) (IK) (IL) (IM) (IN) (IO) (IP) (IQ) (IR) (IS) (IT) (IU) (IV) (IW) (IX) (IY) (IZ) (JA) (JB) (JC) (JD) (JE) (JF) (JG) (JH) (JI) (JJ) (JK) (JL) (JM) (JN) (JO) (JP) (JQ) (JR) (JS) (JT) (JU) (JV) (JW) (JX) (JY) (JZ) (KA) (KB) (KC) (KD) (KE) (KF) (KG) (KH) (KI) (KJ) (KK) (KL) (KM) (KN) (KO) (KP) (KQ) (KR) (KS) (KT) (KU) (KV) (KW) (KX) (KY) (KZ) (LA) (LB) (LC) (LD) (LE) (LF) (LG) (LH) (LI) (LJ) (LK) (LL) (LM) (LN) (LO) (LP) (LQ) (LR) (LS) (LT) (LU) (LV) (LW) (LX) (LY) (LZ) (MA) (MB) (MC) (MD) (ME) (MF) (MG) (MH) (MI) (MJ) (MK) (ML) (MM) (MN) (MO) (MP) (MQ) (MR) (MS) (MT) (MU) (MV) (MW) (MX) (MY) (MZ) (NA) (NB) (NC) (ND) (NE) (NF) (NG) (NH) (NI) (NJ) (NK) (NL) (NM) (NN) (NO) (NP) (NQ) (NR) (NS) (NT) (NU) (NV) (NW) (NX) (NY) (NZ) (OA) (OB) (OC) (OD) (OE) (OF) (OG) (OH) (OI) (OJ) (OK) (OL) (OM) (ON) (OO) (OP) (OQ) (OR) (OS) (OT) (OU) (OV) (OW) (OX) (OY) (OZ) (PA) (PB) (PC) (PD) (PE) (PF) (PG) (PH) (PI) (PJ) (PK) (PL) (PM) (PN) (PO) (PP) (PQ) (PR) (PS) (PT) (PU) (PV) (PW) (PX) (PY) (PZ) (QA) (QB) (QC) (QD) (QE) (QF) (QG) (QH) (QI) (QJ) (QK) (QL) (QM) (QN) (QO) (QP) (QQ) (QR) (QS) (QT) (QU) (QV) (QW) (QX) (QY) (QZ) (RA) (RB) (RC) (RD) (RE) (RF) (RG) (RH) (RI) (RJ) (RK) (RL) (RM) (RN) (RO) (RP) (RQ) (RR) (RS) (RT) (RU) (RV) (RW) (RX) (RY) (RZ) (SA) (SB) (SC) (SD) (SE) (SF) (SG) (SH) (SI) (SJ) (SK) (SL) (SM) (SN) (SO) (SP) (SQ) (SR) (SS) (ST) (SU) (SV) (SW) (SX) (SY) (SZ) (TA) (TB) (TC) (TD) (TE) (TF) (TG) (TH) (TI) (TJ) (TK) (TL) (TM) (TN) (TO) (TP) (TQ) (TR) (TS) (TT) (TU) (TV) (TW) (TX) (TY) (TZ) (UA) (UB) (UC) (UD) (UE) (UF) (UG) (UH) (UI) (UJ) (UK) (UL) (UM) (UN) (UO) (UP) (UQ) (UR) (US) (UT) (UU) (UV) (UW) (UX) (UY) (UZ) (VA) (VB) (VC) (VD) (VE) (VF) (VG) (VH) (VI) (VJ) (VK) (VL) (VM) (VN) (VO) (VP) (VQ) (VR) (VS) (VT) (VU) (VV) (VW) (VX) (VY) (VZ) (WA) (WB) (WC) (WD) (WE) (WF) (WG) (WH) (WI) (WJ) (WK) (WL) (WM) (WN) (WO) (WP) (WQ) (WR) (WS) (WT) (WU) (WV) (WW) (WX) (WY) (WZ) (XA) (XB) (XC) (XD) (XE) (XF) (XG) (XH) (XI) (XJ) (XK) (XL) (XM) (XN) (XO) (XP) (XQ) (XR) (XS) (XT) (XU) (XV) (XW) (XZ) (YA) (YB) (YC) (YD) (YE) (YF) (YG) (YH) (YI) (YJ) (YK) (YL) (YM) (YN) (YO) (YP) (YQ) (YR) (YS) (YT) (YU) (YV) (YW) (YZ) (ZA) (ZB) (ZC) (ZD) (ZE) (ZF) (ZG) (ZH) (ZI) (ZJ) (ZK) (ZL) (ZM) (ZN) (ZO) (ZP) (ZQ) (ZR) (ZS) (ZT) (ZU) (ZV) (ZW) (ZX) (ZY) (ZZ)

1. [Subject Name] was interviewed on 10/15/54 at [Location]. [Subject Name] advised that [Subject Name] was born [Date of Birth] at [Place of Birth]. [Subject Name] is currently residing at [Address]. [Subject Name] is employed by [Employer Name] as a [Job Title]. [Subject Name] has no other persons of interest.

2. [Subject Name] was interviewed on 10/15/54 at [Location]. [Subject Name] advised that [Subject Name] was born [Date of Birth] at [Place of Birth]. [Subject Name] is currently residing at [Address]. [Subject Name] is employed by [Employer Name] as a [Job Title]. [Subject Name] has no other persons of interest.

3. [Subject Name] was interviewed on 10/15/54 at [Location]. [Subject Name] advised that [Subject Name] was born [Date of Birth] at [Place of Birth]. [Subject Name] is currently residing at [Address]. [Subject Name] is employed by [Employer Name] as a [Job Title]. [Subject Name] has no other persons of interest.

4. [Subject Name] was interviewed on 10/15/54 at [Location]. [Subject Name] advised that [Subject Name] was born [Date of Birth] at [Place of Birth]. [Subject Name] is currently residing at [Address]. [Subject Name] is employed by [Employer Name] as a [Job Title]. [Subject Name] has no other persons of interest.

5. [Subject Name] was interviewed on 10/15/54 at [Location]. [Subject Name] advised that [Subject Name] was born [Date of Birth] at [Place of Birth]. [Subject Name] is currently residing at [Address]. [Subject Name] is employed by [Employer Name] as a [Job Title]. [Subject Name] has no other persons of interest.

6. [Subject Name] was interviewed on 10/15/54 at [Location]. [Subject Name] advised that [Subject Name] was born [Date of Birth] at [Place of Birth]. [Subject Name] is currently residing at [Address]. [Subject Name] is employed by [Employer Name] as a [Job Title]. [Subject Name] has no other persons of interest.

7. [Subject Name] was interviewed on 10/15/54 at [Location]. [Subject Name] advised that [Subject Name] was born [Date of Birth] at [Place of Birth]. [Subject Name] is currently residing at [Address]. [Subject Name] is employed by [Employer Name] as a [Job Title]. [Subject Name] has no other persons of interest.

8. [Subject Name] was interviewed on 10/15/54 at [Location]. [Subject Name] advised that [Subject Name] was born [Date of Birth] at [Place of Birth]. [Subject Name] is currently residing at [Address]. [Subject Name] is employed by [Employer Name] as a [Job Title]. [Subject Name] has no other persons of interest.



**OP2019-059**

**PROJECT NAME:** Water Oak Residential, LLC  
**SITE ADDRESS:** 1200 West First Street Kill Devil Hills

**OCCUPANCY**  
**ISSUED:** 09/25/2019

**EXPIRES:**

**DETAILS**

**Permit**

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

**CONDITIONS**

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

Issued By: \_\_\_\_\_

Contractor or Authorized Agent: \_\_\_\_\_ Date: 5 Sep 25 19

SET\_17\_CPI  
TOWN OF KILL DEVIL HILLS 4908  
PLANNING  
Date / time : 09/25/19 09:31  
Payment : \$ 50.00  
Receipt # : 589214  
Check/Credit Card #: MULTIPLE  
Clerk : 981@snyd  
Paid By : SAGA CONSTRUCTION



**Town of Kill Devil Hills**

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

SEP 25 2019

**Planning and Inspection Department**

**OP2019-058**

**PROJECT NAME:** Water Oak Residential LLC  
**SITE ADDRESS:** 703 Zen Lane Kill Devil Hills

**OCCUPANCY**  
**ISSUED:** 09/24/2019

**EXPIRES:**

**PARENT PERMIT #:** BJ2018-157

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

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

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

**License:** 62306  
**Expires:** 12/30/2019

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

**License:** 62306  
**Expires:** 12/30/2019

**PARCEL:**

**PIN:** 988417222433

**Parcel Number:**

**Address:** 703 Zen Lane Kill Devil Hills

**Zoning:**

**Addition:**

**Block:**

**Lot(s):**

**Legal Description:** Lot 58, Water Oak Subdivision

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

**PROJECT DESCRIPTION:** Proposed 3 bedroom single family dwelling



**OP2019-058**

**PROJECT NAME:** Water Oak Residential LLC  
**SITE ADDRESS:** 703 Zen Lane Kill Devil Hills

**OCCUPANCY**  
**ISSUED:** 09/24/2019

**EXPIRES:**

**DETAILS**

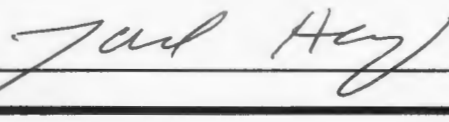
**Permit**

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

**CONDITIONS**

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

Issued By: 

Contractor or Authorized Agent:  Date: SEP 25 19

SET 17.P1  
Town of Kill Devil Hills 4400  
PLANNING  
Date / Time : 09/25/19 09:150  
Payment : \$ 50.00  
Receipt # : 589223  
Check/Credit Card #: MULTIPLE  
Clerk : 981smnd  
Paid By : SAGA CONSTRUCTION



**Town of Kill Devil Hills**

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

SEP 27 2019

**Planning and Inspection Department**

<b>OP2019-060</b> PROJECT NAME: Phillip Harrington SITE ADDRESS: 1919 GEORGIA LN KILL DEVIL HILLS	<b>OCCUPANCY</b> ISSUED: 09/26/2019  EXPIRES:
---	--

PARENT PERMIT #: BJ2019-095

<b>APPLICANT:</b> RELIANT CONSTRUCTION LLC 4275 Worthington Lane kitty hawk, nc 27949 252-202-7007	<b>OWNER:</b> Harrington, Phillip PO Box 2232 ELIZABETH CITY, NC 27909 252-312-4500
---	--

<b>GENERAL, UNLIMITED:</b>	RELIANT CONSTRUCTION LLC 4275 Worthington Lane kitty hawk, nc 27949 252-202-7007	<b>License:</b> 62339 <b>Expires:</b> 12/30/2019
<b>GENERAL, UNLIMITED:</b>	RELIANT CONSTRUCTION LLC 4275 Worthington Lane kitty hawk, nc 27949 252-202-7007	<b>License:</b> 62339 <b>Expires:</b> 12/30/2019

**PARCEL:**

<b>PIN:</b> 988405182169	<b>Parcel Number:</b> 002086000
<b>Address:</b> 1919 GEORGIA LN KILL DEVIL HILLS	
<b>Addition:</b> WRIGHT'S SHORES	<b>Zoning:</b>
<b>Legal Description:</b>	<b>Block:</b> 0 <b>Lot(s):</b> 122

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

**PROJECT DESCRIPTION:** Proposed 3 bedroom single family dwelling

IN SENATE,  
January 15, 1902.

REPORT  
OF THE

COMMISSIONER OF THE LAND OFFICE

IN RESPONSE TO A RESOLUTION PASSED BY THE SENATE

ON JANUARY 15, 1902.



**OP2019-060**

**PROJECT NAME:** Phillip Harrington  
**SITE ADDRESS:** 1919 GEORGIA LN KILL DEVIL HILLS

**OCCUPANCY**  
**ISSUED:** 09/26/2019

**EXPIRES:**

**DETAILS**

**Permit**

<b>Name</b>	<b>Value</b>
# OF TRASH CANS	1
PURPOSE	Residential New
ZONING DISTRICT	RL
FLOOD ZONE	X
OCCUPANCY TYPE	One & Two Family Dwelling

**CONDITIONS**

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

Issued By: 

Contractor or Authorized Agent: 

Date: 9/27/19

SET 17 CPI  
Town of Kill Devil Hills 4400  
PLANNING  
Date / Time : 09/27/19 09:52  
Payment : \$ 50.00  
Receipt # : 589396  
Check/Credit Card #: 1432  
Clerk : 981asmvd  
Paid By : RELIANT CONSTRUCTION

9/27/19

PL



**Town of Kill Devil Hills**

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

SEP 27 2019

**Planning and Inspection Department**

**DW2019-016**

**PROJECT NAME:** Richard Mallard  
**SITE ADDRESS:** 1711 WYANDOTTE ST KILL DEVIL HILLS

**DRIVEWAY**

**ISSUED:** 09/27/2019

**EXPIRES:** 03/25/2020

**APPLICANT:** CHRIS SCARBOROUGH  
1815 Seaswept Rd.  
KDH, NC 27948  
252-202-3308

**OWNER:** RICHARD MALLARD  
1711 Wyandotte St.  
KILL DEVIL HILLS, NC 27948

**CONTRACTOR:** SAME AS APPLICANT  
0000000  
00000000, nc 00000

**License:** 123456  
**Expires:** 04/30/2020

**PARCEL:**

**PIN:** 988409262206

**Parcel Number:** 002693000

**Address:** 1711 WYANDOTTE ST KILL DEVIL HILLS

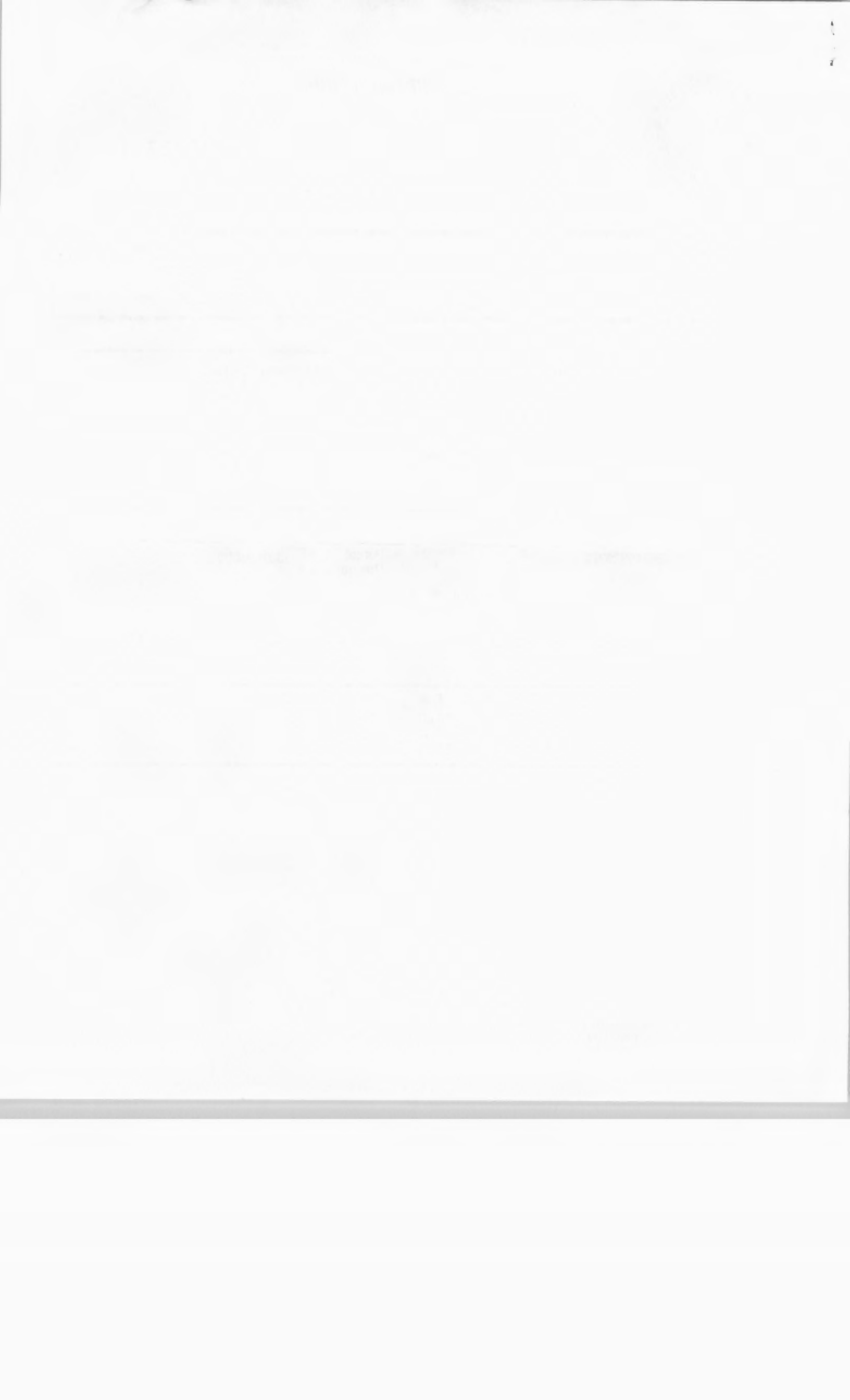
**Addition:** HIGH VIEW - HEDRICKS ADD

**Zoning:**  
**Block:** D **Lot(s):** 8-9

**Legal Description:**

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

**PROJECT DESCRIPTION:** Add to driveway



**DW2019-016**

**PROJECT NAME:** Richard Mallard  
**SITE ADDRESS:** 1711 WYANDOTTE ST KILL DEVIL HILLS

**DRIVEWAY**

**ISSUED:** 09/27/2019

**EXPIRES:** 03/25/2020

**DETAILS**

**Permit**

<b>Name</b>	<b>Value</b>
DRIVEWAY INVERT 2	N
CULVERT	N
SURVEYOR NAME AND NUMBER	Seaboard Surveying
ZONING DISTRICT	RL
CONSTRUCTION COST	1000.00
FLOOD ZONE	X
LOT COVERAGE	35.70

**REQUIRED INSPECTIONS**

Zoning Final

Final

**CONDITIONS**

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

\* Zoning Final Inspection is required.

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

\* Driveway must maintain a 2 foot setback from side property line.

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

Issued By: Donna Elliott

Contractor or Authorized Agent: Richard Mallard

Date: 9-27-19

SET 17 CP1  
Town of Kill Devil Hills  
PLANNING  
Date / Time : 09/30/19 10:44  
Payment : \$ 50.00  
Receipt # : 589897  
Check/Credit Card #: 931065  
Clerk : 981msnyd  
Paid By : RICHARD WALLARD



**Town of Kill Devil Hills**

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

PAID  
SEP 19 2019  
TOWN OF  
KILL DEVIL HILLS

**Planning and Inspection Department**

<b>EG2019-011</b>	<b>EXCAVATION AND GRADING</b>
<b>PROJECT NAME:</b> IG Holdings grading	<b>ISSUED:</b> 09/19/2019
<b>SITE ADDRESS:</b> 104 ARCH ST E KILL DEVIL HILLS	<b>EXPIRES:</b> 03/17/2020

<b>APPLICANT:</b> IG HOLDING, LLC P. O. Box 120 Kitty Hawk, NC 27949	<b>OWNER:</b> IG HOLDING, LLC P. O. Box 120 Kitty Hawk, NC 27949
--	--

<b>CONTRACTOR:</b> BARNHILL CONTRACTING COMPANY, INC. P.O. Box 1529 Tarboro, NC 27886
---

<b>GENERAL-UNLIMITED-UNCLASSIFIED:</b> BARNHILL CONTRACTING COMPANY, INC. P.O. Box 1529 Tarboro, NC 27886	<b>License:</b> 3194 <b>Expires:</b> 01/01/2020
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<b>PARCEL:</b>			
<b>PIN:</b> 988513040643	<b>Parcel Number:</b>	000034000	
<b>Address:</b> 104 ARCH ST E KILL DEVIL HILLS	<b>Zoning:</b>		
<b>Addition:</b>	<b>Block:</b> 10	<b>Lot(s):</b>	1
<b>Legal Description:</b>			

<b>FEES:</b>	<b>Paid</b>	<b>Due</b>
Land Disturbing	\$100.00	\$0.00
<b>Totals :</b>	<b>\$100.00</b>	<b>\$0.00</b>

**PROJECT DESCRIPTION:** add fill, grading and stabilization

Town of Kill Devil Hills

Planning and Zoning Department

LOCATION AND GRADING SHEET NO. 1 FOR PERMITS	PROJECT NO. 12345 DATE 12/15/2023
--	--------------------------------------

PROJECT: [Faint text]  
 LOCATION: [Faint text]  
 DATE: [Faint text]

[Faint text]  
 [Faint text]  
 [Faint text]

[Faint text]



**EG2019-011**

**PROJECT NAME:** IG Holdings grading  
**SITE ADDRESS:** 104 ARCH ST E KILL DEVIL HILLS

**EXCAVATION AND GRADING**

**ISSUED:** 09/19/2019

**EXPIRES:** 03/17/2020

**DETAILS**

**Permit**

<b>Name</b>	<b>Value</b>
ESTIMATED CONSTRUCTION COST	22000.00
ZONING DISTRICT	C
CAMA PERMIT	N
FLOOD ZONE	AE
BASE FLOOD ELEVATION	9.0
ENGINEER AND LICENSE NUMBER	Michael J. Morway 28572

**REQUIRED INSPECTIONS**

Final

**CONDITIONS**

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

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

**Issued By:** \_\_\_\_\_

**Contractor or Authorized Agent:** \_\_\_\_\_

**Date:** 9/19/19

SET\_17\_CPI  
Town of Kill Devil Hills 4900  
PLANNING  
Date / Time : 09/19/19 12:32  
Payment : \$ 100.00  
Receipt # : 588898  
Check/Credit Card # :  
Clerk : 981msnyd  
Paid By :

*[Faint, illegible text, possibly a signature or stamp]*

*[Faint, illegible text]*

*[Faint, illegible text]*

EXCAVATION UNIT OR ADJACENT  
*[Faint, illegible text]*



# Town of Kill Devil Hills

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

SEP 18 2019

## Planning and Inspection Department

<b>EG2019-010</b>	<b>EXCAVATION AND GRADING</b>
<b>PROJECT NAME:</b> EMANUELSON LAND DISTURBANCE	<b>ISSUED:</b> 09/18/2019
<b>SITE ADDRESS:</b> 0 HARDING ST KILL DEVIL HILLS	<b>EXPIRES:</b> 03/16/2020

<b>APPLICANT:</b> Emanuelson and Dad 6705 CROATAN HWY SOUTH 6705 S. Croatan Hwy. nags head, nc 27959 252-261-2215	<b>OWNER:</b> Emanuelson and Dad 6705 CROATAN HWY SOUTH 6705 S. Croatan Hwy. nags head, nc 27959 252-261-2215
---	---

<b>RESIDENTIAL, LIMITED:</b> Emanuelson and Dad 6705 CROATAN HWY SOUTH 6705 S. Croatan Hwy. nags head, nc 27959 252-261-2215	<b>License:</b> 79801 <b>Expires:</b> 01/01/2020
--	---

<b>PARCEL:</b>			
<b>PIN:</b> 988315648986	<b>Parcel Number:</b>	004540099	
<b>Address:</b> 0 HARDING ST KILL DEVIL HILLS <i>1101 HARDING</i> <i>Boundary</i>	<b>Zoning:</b>		
<b>Addition:</b> KILL DEVIL HILLS REALTY CORP	<b>Block:</b> 60	<b>Lot(s):</b> TRIANGULAR PIECE	
<b>Legal Description:</b>			

<b>FEES:</b>	<b>Paid</b>	<b>Due</b>
Land Disturbing	\$100.00	\$0.00
<b>Totals :</b>	<b>\$100.00</b>	<b>\$0.00</b>

**PROJECT DESCRIPTION:** CLEAR LOT, GRADE AND SEED

Town of Kill Devil Hills

1912

Excavation in the ...

EXCAVATION AND ...

...

...

...

...

...

**EG2019-010**

**PROJECT NAME:** EMANUELSON LAND DISTURBANCE  
**SITE ADDRESS:** 0 HARDING ST KILL DEVIL HILLS

**EXCAVATION AND GRADING**

**ISSUED:** 09/18/2019

**EXPIRES:** 03/16/2020

**DETAILS**

**Permit**

<b>Name</b>	<b>Value</b>
ESTIMATED CONSTRUCTION COST	2500.00
ZONING DISTRICT	LI-2
CAMA PERMIT	N
FLOOD ZONE	X

**REQUIRED INSPECTIONS**

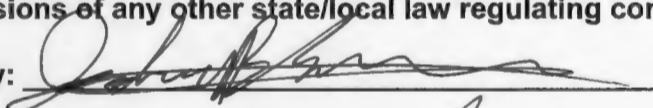
Final

**CONDITIONS**

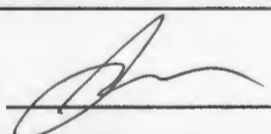
- \* This permit becomes null and void if work or construction authorized is not commenced within 6 months or if construction or work is suspended for a period of 12 months at any time after work has started.
- \* The developer shall be responsible for maintaining erosion and sediment control at the disturbed area.
- \* All gravel brought in for temporary construction entrance must be removed.
- \* Site shall not be used for commercial parking lot

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

9-18-19

98831165 7079

98831569<sup>74</sup> 80874  
1740

SET 17 CP1  
Town of Kill Devil Hills  
4400  
PLANNING  
Date / Time : 09/19/19 08:29  
Payment : \$ 100.00  
Receipt # : 58858  
Check/Credit Card #: 318114  
Clerk : 981msnyd  
Paid By : EMANUELSON AND GAO



**Town of Kill Devil Hills**

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

PAID

SEP 19 2019

**Planning and Inspection Department**

<b>EG2019-012</b>	<b>EXCAVATION AND GRADING</b>
<b>PROJECT NAME:</b> IG Holdings Fill	<b>ISSUED:</b> 09/19/2019
<b>SITE ADDRESS:</b> 0 BRIGGS ST KILL DEVIL HILLS	<b>EXPIRES:</b> 03/17/2020

<b>APPLICANT:</b> IG HOLDING, LLC P. O. Box 120 Kitty Hawk, NC 27949	<b>OWNER:</b> IG HOLDING, LLC P. O. Box 120 Kitty Hawk, NC 27949
--	--

**CONTRACTOR:** BARNHILL CONTRACTING COMPANY, INC.  
P.O. Box 1529  
Tarboro, NC 27886

<b>GENERAL-UNLIMITED-UNCLASSIFIED:</b> BARNHILL CONTRACTING COMPANY, INC. P.O. Box 1529 Tarboro, NC 27886	<b>License:</b> 3194 <b>Expires:</b> 01/01/2020
---	--

**PARCEL:**

<b>PIN:</b> 987516949791	<b>Parcel Number:</b> 000035004
<b>Address:</b> 3304 BRIGGS ST KILL DEVIL HILLS	<b>Zoning:</b>
<b>Addition:</b>	<b>Block:</b> 10 <b>Lot(s):</b> 4
<b>Legal Description:</b>	

<b>FEES:</b>	<b>Paid</b>	<b>Due</b>
Land Disturbing	\$100.00	\$0.00
<b>Totals :</b>	<b>\$100.00</b>	<b>\$0.00</b>

**PROJECT DESCRIPTION:** import fill, grading and stabilization

Town of Kill Devil Hills

Planning and Inspection Department

65° 19' 00"

EXCAVATION AND GRADING	EXCITATION
REPAIR 09/10/20	REPAIR 09/10/20
EXCISE 09/11/20	EXCISE 09/11/20

1000	1000	1000	1000
1000	1000	1000	1000
1000	1000	1000	1000

1000	1000	1000	1000
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1000	1000	1000	1000

1000	1000	1000	1000
1000	1000	1000	1000
1000	1000	1000	1000



**EG2019-012**

**PROJECT NAME:** IG Holdings Fill  
**SITE ADDRESS:** 0 BRIGGS ST KILL DEVIL HILLS

**EXCAVATION AND GRADING**

**ISSUED:** 09/19/2019

**EXPIRES:** 03/17/2020

**DETAILS**

**Permit**

<b>Name</b>	<b>Value</b>
ESTIMATED CONSTRUCTION COST	11000.00
ZONING DISTRICT	C
CAMA PERMIT	N
FLOOD ZONE	AE
BASE FLOOD ELEVATION	9.0
ENGINEER AND LICENSE NUMBER	Michael J. Morway 028572

**REQUIRED INSPECTIONS**

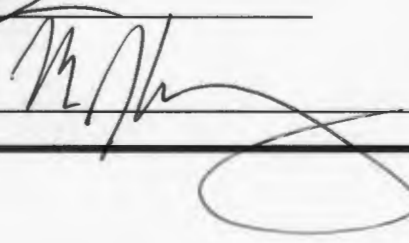
Final

**CONDITIONS**

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

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

Issued By: 

Contractor or Authorized Agent:  Date: 9/19/19

ST. JOHN'S COLLEGE AND CHURCH  
17500 175th Ave  
Eden Prairie, MN 55324  
Phone: 952-941-1234  
Fax: 952-941-1235

ST. JOHN'S COLLEGE AND CHURCH  
17500 175th Ave  
Eden Prairie, MN 55324  
Phone: 952-941-1234  
Fax: 952-941-1235

ST. JOHN'S COLLEGE AND CHURCH  
17500 175th Ave  
Eden Prairie, MN 55324  
Phone: 952-941-1234  
Fax: 952-941-1235

SET 17 CPI  
Town of Kill Devil Hills 4400  
PLANNING  
Date / Time : 09/19/19 12:33  
Payment : \$ 100.00  
Receipt # : 588899  
Check/Credit Card # : 80213  
Clerk : 9815nyd  
Paid By : GOLASA HOLDINGS



# 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

<b>EG2019-008</b>	<b>EXCAVATION AND GRADING</b>
<b>PROJECT NAME:</b> Water Oak Staging and Parking	<b>ISSUED:</b> 09/13/2019
<b>SITE ADDRESS:</b> 1303 TRANQUIL PLACE Kill Devil Hills	<b>EXPIRES:</b> 03/11/2020

<b>APPLICANT:</b> Water Oak Residential, LLC PO Box 90 Kill Devil Hills, NC 27948 252-441-9003	<b>OWNER:</b> Water Oak Residential, LLC PO Box 90 Kill Devil Hills, NC 27948 252-441-9003
---	---

**CONTRACTOR:** SAGA CONSTRUCTION INC.  
1314 S Croatan Hwy, Suite 301  
Kill Devil Hills, NC 27948  
252-441-9003

<b>GENERAL BUILDING - LIMITED:</b>	SAGA CONSTRUCTION 1314 S Croatan Hwy, Suite 301 PO Box 90 Kill Devil Hills, NC 27948 252-441-9003	<b>License:</b> 62306 <b>Expires:</b> 12/30/2019
------------------------------------	---	---

**PARCEL:**

<b>PIN:</b> 988413223614	<b>Parcel Number:</b>
<b>Address:</b> 1303 TRANQUIL PLACE Kill Devil Hills	<b>Zoning:</b>
<b>Addition:</b>	<b>Block:</b> Lot(s):
<b>Legal Description:</b> Lot 67, Water Oak Residential Community	

<b>FEES:</b>	<b>Paid</b>	<b>Due</b>
Land Disturbing	\$100.00	\$0.00
<b>Totals :</b>	<b>\$100.00</b>	<b>\$0.00</b>

**PROJECT DESCRIPTION:** Temporary Gravel Construction staging and parking area

PAID  
SEP 16 2019  
TOWN OF  
KILL DEVIL HILLS

Town of Kill Devil Hills

10000  
10000  
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Planning and Engineering Department



EXAVATION AND GRADING

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**EG2019-008**

**PROJECT NAME:** Water Oak Staging and Parking  
**SITE ADDRESS:** 1303 TRANQUIL PLACE Kill Devil Hills

**EXCAVATION AND GRADING**

**ISSUED:** 09/13/2019

**EXPIRES:** 03/11/2020

**DETAILS**

**Permit**

Name	Value
ESTIMATED CONSTRUCTION COST	5000.00
ZONING DISTRICT	RL
CAMA PERMIT	N
FLOOD ZONE	AE
BASE FLOOD ELEVATION	8.3

**REQUIRED INSPECTIONS**

Final

**CONDITIONS**

- \* This permit becomes null and void if work or construction authorized is not commenced within 6 months or if construction or work is suspended for a period of 12 months at any time after work has started.
- \* The developer shall be responsible for maintaining erosion and sediment control at the disturbed area.
- \* All land disturbance shall follow the approved Erosion Control Plan dated 11/15/2018 including soil and erosion and sedimentation control plan notes silt fence detail inlet protection detail and gravel construction entrance/exit detail.
- \* Temporary construction entrance and parking area shall be completely removed in its entirety prior to issuance of a building permit on lots 67 and 69.

**I hereby certify that I have read and examined this application and know the same to be true and correct. All provisions of Laws and Ordinances governing this type of work will be complied with whether specified herein or not. The granting of a permit does 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:** 9/16/19

ELEVATION AND GRADING  
12000 6000-000  
12000 6000-000

DETAIL A



SECTION THROUGH

CONDITION

Technical drawing showing a cross-section of a structure. It includes various dimensions and labels, such as '12000', '6000-000', and '12000 6000-000'. The drawing is oriented vertically on the page.

Technical drawing showing a cross-section of a structure. It includes various dimensions and labels, such as '12000', '6000-000', and '12000 6000-000'. The drawing is oriented vertically on the page.

SET 17\_CPI  
Town of Kill Devil Hills 4400  
PLANNING  
Date / Time : 09/16/19 13:47  
Payment : \$ 100.00  
Receipt # : 588391  
Check/Credit Card #: 16021  
Clerk : 981msnyd  
Paid By : SAGA CONSTRUCTION



**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**

<b>EG2019-009</b>	<b>EXCAVATION AND GRADING</b>
<b>PROJECT NAME:</b> SAGA Temporary Parking and Staging	<b>ISSUED:</b> 09/13/2019
<b>SITE ADDRESS:</b> 1305 TRANQUIL PLACE Kill Devil Hills	<b>EXPIRES:</b> 03/11/2020

<b>APPLICANT:</b> Water Oak Residential, LLC PO Box 90 Kill Devil Hills, NC 27948 252-441-9003	<b>OWNER:</b> Water Oak Residential, LLC PO Box 90 Kill Devil Hills, NC 27948 252-441-9003
<b>CONTRACTOR:</b> SAGA CONSTRUCTION INC. 1314 S Croatan Hwy, Suite 301 Kill Devil Hills, NC 27948 252-441-9003	
<b>GENERAL BUILDING - LIMITED:</b>	SAGA CONSTRUCTION 1314 S Croatan Hwy, Suite 301 PO Box 90 Kill Devil Hills, NC 27948 252-441-9003
	<b>License:</b> 62306 <b>Expires:</b> 12/30/2019

<b>PARCEL:</b>	
<b>PIN:</b> 9884132227700	<b>Parcel Number:</b>
<b>Address:</b> 1305 TRANQUIL PLACE Kill Devil Hills	<b>Zoning:</b>
<b>Addition:</b>	<b>Block:</b> Lot(s):
<b>Legal Description:</b> Lot 69, Water Oak Residential Community	

<b>FEES:</b>	<b>Paid</b>	<b>Due</b>
Land Disturbing	\$100.00	\$0.00
<b>Totals :</b>	<b>\$100.00</b>	<b>\$0.00</b>

**PROJECT DESCRIPTION:** Temporary gravel construction staging and parking area

PAID

SEP 16 2019

Town of Kill Devil Hills

Department of Planning and Inspection



Planning and Inspection Department

<p>EXCAVATION AND GRADING PERMITS</p>	<p>Application No. _____</p> <p>Site Address _____</p> <p>Applicant Name _____</p> <p>Engineer Name _____</p> <p>Date _____</p>
---------------------------------------	---

<p>Project Description</p> <p>_____</p> <p>_____</p> <p>_____</p>	<p>Proposed Work</p> <p>_____</p> <p>_____</p> <p>_____</p>
---	---

<p>Site Plan</p> <p>_____</p> <p>_____</p>	<p>Notes</p> <p>_____</p> <p>_____</p> <p>_____</p>
--	---

<p>Permit Conditions</p> <p>_____</p> <p>_____</p>	<p>Approval</p> <p>_____</p> <p>_____</p>
--	---

<p>Additional Information</p> <p>_____</p> <p>_____</p>	<p>Remarks</p> <p>_____</p> <p>_____</p>
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**EG2019-009**

**PROJECT NAME:** SAGA Temporary Parking and Staging  
**SITE ADDRESS:** 1305 TRANQUIL PLACE Kill Devil Hills

**EXCAVATION AND GRADING**

**ISSUED:** 09/13/2019

**EXPIRES:** 03/11/2020

**DETAILS**

**Permit**

Name	Value
ESTIMATED CONSTRUCTION COST	5000.00
ZONING DISTRICT	RL
CAMA PERMIT	N
FLOOD ZONE	AE
BASE FLOOD ELEVATION	8.3

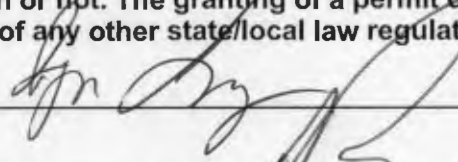
**REQUIRED INSPECTIONS**

Final

**CONDITIONS**

- \* This permit becomes null and void if work or construction authorized is not commenced within 6 months or if construction or work is suspended for a period of 12 months at any time after work has started.
- \* The developer shall be responsible for maintaining erosion and sediment control at the disturbed area.
- \* All land disturbance shall follow the approved Erosion Control Plan dated 11/15/18 including soil erosion and sedimentation control plan notes silt fence detail inlet protection detail and gravel construction entrance/exit detail.
- \* Temporary construction entrance and parking area shall be completely removed in its entirety prior to issuance of a building permit on lots 67 and 69

I hereby certify that I have read and examined this application and know the same to be true and correct. All provisions of Laws and Ordinances governing this type of work will be complied with whether specified herein or not. The granting of a permit does 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: 9-16-19

DETAILS

CONDITIONS

PAID BY

SET 17.CPI  
Town of Kill Devil Hills 4400  
PLANNING  
Date / Time : 09/16/19 13:47  
Payment : \$ 100.00  
Receipt # : 588390  
Check/Credit Card #: 16022  
Clerk : 981msnyd  
Paid By : SAGA CONSTRUCTION



# Town of Kill Devil Hills

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

PAID

SEP 19 2019

## Planning and Inspection Department

<b>DM2019-008</b>	<b>DEMOLITION</b>
<b>PROJECT NAME:</b> Saga Demo	<b>ISSUED:</b> 09/19/2019
<b>SITE ADDRESS:</b> 1213 VA DARE TRL S KILL DEVIL HILLS	<b>EXPIRES:</b> 03/17/2020

<b>APPLICANT:</b> SAGA CONSTRUCTION INC. 1314 S Croatan Hwy, Suite 301 Kill Devil Hills, NC 27948 252-441-9003	<b>OWNER:</b> 1213 SVDT LLC PO Box 90 Kill Devil Hills, NC 27948
---	--

<b>GENERAL BUILDING - LIMITED:</b> SAGA CONSTRUCTION 1314 S Croatan Hwy, Suite 301 PO Box 90 Kill Devil Hills, NC 27948 252-441-9003	<b>License:</b> 62306 <b>Expires:</b> 12/30/2019
--	---

<b>PARCEL:</b>			
<b>PIN:</b> 989305073521	<b>Parcel Number:</b> 004276000		
<b>Address:</b> 1213 VA DARE TRL S KILL DEVIL HILLS			
<b>Addition:</b> KILL DEVIL HILLS SEC 1	<b>Zoning:</b>	<b>Block:</b> 5	<b>Lot(s):</b> 8 & PT 7
<b>Legal Description:</b>			

<b>FEES:</b>	<b>Paid</b>	<b>Due</b>
Demolition	\$100.00	\$0.00
<b>Totals :</b>	<b>\$100.00</b>	<b>\$0.00</b>

**PROJECT DESCRIPTION:** Demo existing house, septic and driveway

### DETAILS

<b>Permit</b>	
<b>Name</b>	<b>Value</b>
ZONING DISTRICT	OIR
FLOOD ZONE	VE
CONSTRUCTION COST	10000.00

Town of Kill Buckley



Planning and Inspection Department

PROJECT NO. 2017-001	DATE 08/15/17
PROJECT NAME	PROJECT LOCATION
PROJECT DESCRIPTION	PROJECT CONTACT

PROJECT NO.	DATE
PROJECT NAME	PROJECT LOCATION
PROJECT DESCRIPTION	PROJECT CONTACT

PROJECT NO.	DATE
PROJECT NAME	PROJECT LOCATION
PROJECT DESCRIPTION	PROJECT CONTACT

PROJECT NO.	DATE
PROJECT NAME	PROJECT LOCATION
PROJECT DESCRIPTION	PROJECT CONTACT

PROJECT NO.	DATE
PROJECT NAME	PROJECT LOCATION
PROJECT DESCRIPTION	PROJECT CONTACT

PROJECT NO.	DATE
PROJECT NAME	PROJECT LOCATION
PROJECT DESCRIPTION	PROJECT CONTACT

PROJECT NO.	DATE
PROJECT NAME	PROJECT LOCATION
PROJECT DESCRIPTION	PROJECT CONTACT

PROJECT NO.	DATE
PROJECT NAME	PROJECT LOCATION
PROJECT DESCRIPTION	PROJECT CONTACT

PROJECT NO.	DATE
PROJECT NAME	PROJECT LOCATION
PROJECT DESCRIPTION	PROJECT CONTACT

PROJECT NO.	DATE
PROJECT NAME	PROJECT LOCATION
PROJECT DESCRIPTION	PROJECT CONTACT

PROJECT NO.	DATE
PROJECT NAME	PROJECT LOCATION
PROJECT DESCRIPTION	PROJECT CONTACT

PROJECT NO.	DATE
PROJECT NAME	PROJECT LOCATION
PROJECT DESCRIPTION	PROJECT CONTACT

**DM2019-008**

**PROJECT NAME:** Saga Demo  
**SITE ADDRESS:** 1213 VA DARE TRL S KILL DEVIL HILLS

**DEMOLITION**

**ISSUED:** 09/19/2019

**EXPIRES:** 03/17/2020

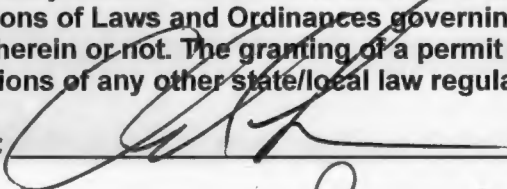
**REQUIRED INSPECTIONS**

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.
- \* Final asbestos abatement, transport and disposal report from Michael Iwashchenko required for issuance of Certificate of Compliance.

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

Issued By: 

Contractor or Authorized Agent: Greeff Muuck Date: 9.19.19.

DEPARTMENT OF REVENUE  
STATE OF MISSISSIPPI  
RECEIPT FOR PAYMENT

RECEIVED

DATE

FOR THE PAYMENT OF  
TAXES AND FEES  
IN THE AMOUNT OF  
\$ 100.00  
BY  
SAGA CONSTRUCTION

PAID TO  
TOWN OF KILL DEVIL HILLS

SET 17 CPI  
Town of Kill Devil Hills 4900  
PLANNING  
Date / Time : 09/19/19 13:40  
Payment : \$ 100.00  
Receipt # : 588917  
Check/Credit Card #: 1610  
Clerk : 981msnyd  
Paid By : SAGA CONSTRUCTION



# Town of Kill Devil Hills

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

SEP 27 2019

## Planning and Inspection Department

<b>DM2019-010</b>	<b>DEMOLITION</b>
<b>PROJECT NAME:</b> MARTONE DEMO	<b>ISSUED:</b> 09/27/2019
<b>SITE ADDRESS:</b> 430 EDEN ST ST W KILL DEVIL HILLS	<b>EXPIRES:</b> 03/25/2020

<b>APPLICANT:</b> MARTONE, VICKI P O BOX 469 KITTY HAWK, NC 27949	<b>OWNER:</b> MARTONE, VICKI P O BOX 469 KITTY HAWK, NC 27949
---	---

<b>ABATEMENT AND DEMOLITION:</b>	East Coast Abatement and Demolition 176 Winchester Way Moyock, NC 27958 757-528-5773	<b>License:</b> 00000 <b>Expires:</b> 12/31/2020
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<b>PARCEL:</b>			
<b>PIN:</b>	988517000615	<b>Parcel Number:</b>	003017000
<b>Address:</b>	430 EDEN ST ST W KILL DEVIL HILLS		
<b>Addition:</b>	VIRGINIA DARE SHORES	<b>Zoning:</b>	
<b>Legal Description:</b>		<b>Block:</b>	52 <b>Lot(s):</b> 34-36

<b>FEES:</b>	<u>Paid</u>	<u>Due</u>
Demolition	\$100.00	\$0.00
<b>Totals :</b>	<b>\$100.00</b>	<b>\$0.00</b>

**PROJECT DESCRIPTION:** DEMO SINGLE FAMILY DWELLING

### DETAILS

<b>Permit</b>	
<b>Name</b>	<b>Value</b>
ZONING DISTRICT	RL
FLOOD ZONE	AE
CONSTRUCTION COST	14700.00

1954

THE UNIVERSITY OF CHICAGO  
DEPARTMENT OF CHEMISTRY  
5408 S. UNIVERSITY AVENUE  
CHICAGO, ILLINOIS 60637

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**DM2019-010**

**PROJECT NAME:** MARTONE DEMO

**SITE ADDRESS:** 430 EDEN ST ST W KILL DEVIL HILLS

**DEMOLITION**

**ISSUED:** 09/27/2019

**EXPIRES:** 03/25/2020

**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.

I hereby certify that I have read and examined this application and know the same to be true and correct. All provisions of Laws and Ordinances governing this type of work will be complied with whether specified herein or not. The granting of a permit does 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: 9/27/19

DEVELOPMENT  
PERMITTING  
PLANNING

*John J. ...*

SET 17 CP1  
 Town of Kill Devil Hills 4400  
 PLANNING  
 Date / Time : 09/30/19 10:43  
 Payment : \$ 100.00  
 Receipt # : 589896  
 Check/Credit Card #: 358194  
 Clerk : 981msnyd  
 Paid By : EAST COAST ABATEMEN



**Town of Kill Devil Hills**

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

**PAID**

SEP - 3 2019

**Planning and Inspection Department**

TOWN OF  
KILL DEVIL HILLS

**MC2019-267**

**PROJECT NAME:** Smith HVAC  
**SITE ADDRESS:** 1601 VA DARE TRL N KILL DEVIL HILLS

**MECHANICAL**

**ISSUED:** 09/03/2019

**EXPIRES:** 03/01/2020

**APPLICANT:** Smith, William  
405 Plantation Rd  
MARTINSVILLE, VA 24112

**OWNER:** Smith, William  
405 Plantation Rd  
MARTINSVILLE, VA 24112

**MECHANICAL:** R A HOY  
PO Box 265  
Kitty Hawk, NC 27949  
252-261-2008

**License:** 13056  
**Expires:** 12/31/2019

**PARCEL:**

**PIN:** 98841156647314

**Parcel Number:** 002781014

**Address:** 1601 VA DARE TRL N KILL DEVIL HILLS

**Addition:**

**Zoning:**

**Block:** B

**Lot(s):** UT 304 16-20

**Legal Description:**

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

**PROJECT DESCRIPTION:** C/O 3.5 Ton Hvac System

16-8-1932

1. The first part of the document  
 2. The second part of the document  
 3. The third part of the document  
 4. The fourth part of the document  
 5. The fifth part of the document



**MC2019-267**

**PROJECT NAME:** Smith HVAC

**SITE ADDRESS:** 1601 VA DARE TRL N KILL DEVIL HILLS

**MECHANICAL**

**ISSUED:** 09/03/2019

**EXPIRES:** 03/01/2020

**DETAILS**

**Permit**

Name	Value
PURPOSE	Residential Repair/Remodel
CONSTRUCTION COST	7995.00
CONSTRUCTION TYPE	V
FLOOD ZONE	VE
BASE FLOOD ELEVATION	11
NATURAL GAS SIGNOFF	N

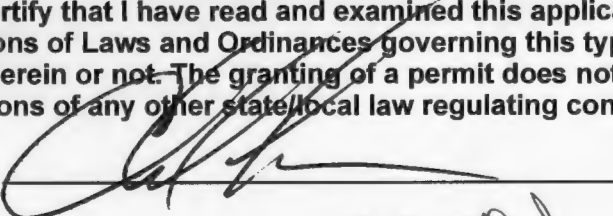
**REQUIRED INSPECTIONS**

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.

I hereby certify that I have read and examined this application and know the same to be true and correct. All provisions of Laws and Ordinances governing this type of work will be complied with whether specified herein or not. The granting of a permit does 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: 9-3-19

RECEIVED  
 TOWN OF KILL DEVIL HILLS  
 PLANNING DEPARTMENT  
 4400



SET\_17\_CPI  
 Town of Kill Devil Hills  
 PLANNING  
 Date / Time : 09/03/19 12:49  
 Payment : \$ 150.00  
 Receipt # : 587371  
 Check/Credit Card #: 5233  
 Clerk : 98185nyd  
 Paid By : R A HOY HEATING & A



**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**

<b>MC2019-264</b> PROJECT NAME: JOHNSTON HVAC SITE ADDRESS: 1104 CLAM SHELL DR KILL DEVIL HILLS	<b>MECHANICAL</b> ISSUED: 08/30/2019 EXPIRES: 02/26/2020
---	--

<b>APPLICANT:</b> Sandra Johnston 1104 Clamshell Dr. Kill Devil Hills, NC 27948	<b>OWNER:</b> Sandra Johnston 1104 Clamshell Dr. Kill Devil Hills, NC 27948
---	---

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

<b>PARCEL:</b>			
<b>PIN:</b>	988409064812	<b>Parcel Number:</b>	002556005
<b>Address:</b>	1104 CLAM SHELL DR KILL DEVIL HILLS		
<b>Addition:</b>	CROATAN SHORES INC SEC 1	<b>Zoning:</b>	
<b>Legal Description:</b>		<b>Block:</b>	23 <b>Lot(s):</b> 5

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

**PROJECT DESCRIPTION:** HVAC CHANGE OUT

PAID

AUG 30 2019

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APR 19 1964

APR 19 1964

APR 19 1964

APR 19 1964

APR 19 1964

APR 19 1964

APR 19 1964



**MC2019-264**

**PROJECT NAME:** JOHNSTON HVAC

**SITE ADDRESS:** 1104 CLAM SHELL DR KILL DEVIL HILLS

**MECHANICAL**

**ISSUED:** 08/30/2019

**EXPIRES:** 02/26/2020

**DETAILS**

**Permit**

<b>Name</b>	<b>Value</b>
PURPOSE	Residential Repair/Remodel
CONSTRUCTION COST	10470.00
CONSTRUCTION TYPE	V
FLOOD ZONE	AE
BASE FLOOD ELEVATION	8.00
NATURAL GAS SIGNOFF	N
OCCUPANCY TYPE	One & Two Family Dwelling

**REQUIRED INSPECTIONS**

Final

**CONDITIONS**

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

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

Issued By: 

Contractor or Authorized Agent: 

Date: 8-30-19

SET\_17\_CPI  
Town of Kill Devil Hills 4400

PLANNING

Date / Time : 09/03/19 11:31

Payment : \$ 150.00

Receipt # : 587302

Check/Credit Card #: 5229

Clerk : 981msnyd

Paid By

: R A HOY HEATING & A



**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**

<b>MC2019-265</b> PROJECT NAME: Moody HVAC SITE ADDRESS: 2052 VA DARE TRL N KILL DEVIL HILLS	<b>MECHANICAL</b> ISSUED: 09/03/2019 EXPIRES: 03/01/2020
--	--

<b>APPLICANT:</b> Willard Moody 4201 Manchester Road PORTSMOUTH, VA 23703	<b>OWNER:</b> Willard Moody 4201 Manchester Road PORTSMOUTH, VA 23703
---	---

<b>MECHANICAL, H-2, H-3:</b>	ATLANTIC HEATING AND COOLING P.O. Box 132 Kill Devil Hills, NC 27948 441-7642	<b>License:</b> 11618 <b>Expires:</b> 12/31/2019
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**PARCEL:**

<b>PIN:</b> 988518208884	<b>Parcel Number:</b> 002318000
<b>Address:</b> 2052 VA DARE TRL N KILL DEVIL HILLS	<b>Zoning:</b>
<b>Addition:</b> MILES CLARK	<b>Block:</b> 0 <b>Lot(s):</b> 6
<b>Legal Description:</b>	

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

**PROJECT DESCRIPTION:** C/O 3 Ton HVAC System

PAID  
SEP - 3 2019

1911

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1911

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1911

**MC2019-265**

**PROJECT NAME:** Moody HVAC

**SITE ADDRESS:** 2052 VA DARE TRL N KILL DEVIL HILLS

**MECHANICAL**

**ISSUED:** 09/03/2019

**EXPIRES:** 03/01/2020

**DETAILS**

**Permit**

<b>Name</b>	<b>Value</b>
PURPOSE	Residential Repair/Remodel
CONSTRUCTION COST	6090.00
CONSTRUCTION TYPE	V
FLOOD ZONE	VE
BASE FLOOD ELEVATION	11
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.

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

9/3/19

17011010101  
17011010101  
17011010101

SET\_17\_CPI  
Town of Kill Devil Hills 4400  
PLANNING  
Date / Time : 09/04/19 08:35  
Payment : \$ 150.00  
Receipt # : 587388  
Check/Credit Card #: 003801  
Clerk : 981msnyd  
Paid By : ATLANTIC HEATING AN



**Town of Kill Devil Hills**

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

PAID

**Planning and Inspection Department**

SEP - 4 2019

<b>MC2019-268</b>	<b>MECHANICAL</b>
<b>PROJECT NAME:</b> Chamber of Commerce HVAC	<b>ISSUED:</b> 09/04/2019
<b>SITE ADDRESS:</b> 101 Town Hall Dr. ST KILL DEVIL HILLS	<b>EXPIRES:</b> 03/02/2020

**APPLICANT:** OUTER BANKS CHAMBER OF COMMERCE  
101 Town Hall Dr.  
Kill Devil Hills, NC 27948

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

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

**License:** 12643  
**Expires:** 12/31/2019

**PARCEL:**

**PIN:** 988307696324      **Parcel Number:** 008165006

**Address:** 101 Town Hall Dr. ST KILL DEVIL HILLS

**Addition:** SUBDIVISION - NONE      **Zoning:**

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

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

**PROJECT DESCRIPTION:** C/O 4 Ton HVAC System



1870-1871

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1870-1871



**MC2019-268**

**PROJECT NAME:** Chamber of Commerce HVAC  
**SITE ADDRESS:** 101 Town Hall Dr. ST KILL DEVIL HILLS

**MECHANICAL**

**ISSUED:** 09/04/2019

**EXPIRES:** 03/02/2020

**DETAILS**

**Permit**

<b>Name</b>	<b>Value</b>
PURPOSE	Commercial Repair/Remodel
CONSTRUCTION COST	7815.00
CONSTRUCTION TYPE	V
FLOOD ZONE	AE
BASE FLOOD ELEVATION	9
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.

I hereby certify that I have read and examined this application and know the same to be true and correct. All provisions of Laws and Ordinances governing this type of work will be complied with whether specified herein or not. The granting of a permit does 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: 9-4-19

MECHANICAL  
PLANNING  
DATE

SET 17.CPI  
Town of Kill Devil Hills  
PLANNING  
Date / Time : 09/04/19 08:54  
Payment : \$ 150.00  
Receipt # : 587389  
Check/Credit Card #: 1267  
Clerk : 981msnyd  
Paid By : OUTER BANKS HEATING  
4900



**Town of Kill Devil Hills**

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

SEP 10 2019

**Planning and Inspection Department**

<b>MC2019-266</b> <b>PROJECT NAME:</b> Shwe HVAC <b>SITE ADDRESS:</b> 2016 PHOEBUS ST KILL DEVIL HILLS	<b>MECHANICAL</b> <b>ISSUED:</b> 09/03/2019 <b>EXPIRES:</b> 03/01/2020
--	--

<b>APPLICANT:</b> Tun Lin Shwe 1000 Colington Road Kill Devil Hills, NC 27948	<b>OWNER:</b> Tun Lin Shwe 1000 Colington Road Kill Devil Hills, NC 27948
---	---

<b>MECHANICAL, H-2, H-3:</b>	ATLANTIC HEATING AND COOLING P.O. Box 132 Kill Devil Hills, NC 27948 441-7642	<b>License:</b> 11618 <b>Expires:</b> 12/31/2019
------------------------------	--	---

**PARCEL:**

PIN: 988405086609	Parcel Number: 000900000	
Address: 2016 PHOEBUS ST KILL DEVIL HILLS	Zoning:	
Addition: AVALON BEACH ANNEX 2 & 3	Block: 0	Lot(s): 1163
Legal Description:		

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

**PROJECT DESCRIPTION:** C/O 2 Ton HVAC System

**DETAILS**

<b>Permit</b>	
Name	Value
PURPOSE	Residential Repair/Remodel
CONSTRUCTION COST	5600.00
CONSTRUCTION TYPE	V
FLOOD ZONE	X
NATURAL GAS SIGNOFF	N

Form of All Things

Faint, illegible text at the top of the page, possibly a header or title block.



Main body of faint, illegible text, possibly bleed-through from the reverse side of the page.

**MC2019-266**

**PROJECT NAME:** Shwe HVAC

**SITE ADDRESS:** 2016 PHOEBUS ST KILL DEVIL HILLS

**MECHANICAL**

**ISSUED:** 09/03/2019

**EXPIRES:** 03/01/2020

**REQUIRED INSPECTIONS**

Final

**CONDITIONS**

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Issued By: \_\_\_\_\_

Contractor or Authorized Agent: \_\_\_\_\_

Date: \_\_\_\_\_

SET 17 GPI  
Town of Kill Devil Hills  
4400  
PLANNING  
Date / Time : 09/10/19 12:17  
Payment : \$ 150.00  
Receipt # : 587927  
Check/Credit Card #: 010208  
Clerk : 981msnyd  
Paid By : ATLANTIC HEATING AN



**Town of Kill Devil Hills**

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

**PAID**

SEP 13 2019

TOWN OF  
KILL DEVIL HILLS

**Planning and Inspection Department**

<b>MC2019-270</b> PROJECT NAME: SITE ADDRESS: 1210 MEMORIAL BLVD S KILL DEVIL HILLS	<b>MECHANICAL</b> ISSUED: 09/13/2019 EXPIRES: 03/11/2020
---	--

<b>APPLICANT:</b> McPhail, Steven & Kellie 104 Flagstone CT Chapel Hill, NC 27517 919-868-0107	<b>OWNER:</b> McPhail, Steven & Kellie 104 Flagstone CT Chapel Hill, NC 27517 919-868-0107
---	---

<b>MECHANICAL:</b>	R A HOY PO Box 265 Kitty Hawk, NC 27949 252-261-2008	<b>License:</b> 13056 <b>Expires:</b> 12/31/2019
--------------------	---	---

<b>PARCEL:</b>			
<b>PIN:</b>	988312976276	<b>Parcel Number:</b>	004231028
<b>Address:</b>	1210 MEMORIAL BLVD S KILL DEVIL HILLS		
<b>Addition:</b>	KILL DEVIL HILLS SEC 1	<b>Zoning:</b>	
<b>Legal Description:</b>		<b>Block:</b>	16 <b>Lot(s):</b> 8

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

**PROJECT DESCRIPTION:** HVAC changeout

THE UNIVERSITY OF CHICAGO

1950

SEP 1 9 50

LIBRARY

UNIVERSITY OF CHICAGO  
LIBRARY  
540 EAST 57TH STREET  
CHICAGO, ILLINOIS 60637



**MC2019-270**

**PROJECT NAME:**

**SITE ADDRESS:** 1210 MEMORIAL BLVD S KILL DEVIL HILLS

**MECHANICAL**

**ISSUED:** 09/13/2019

**EXPIRES:** 03/11/2020

**DETAILS**

**Permit**

<b>Name</b>	<b>Value</b>
PURPOSE	Residential Repair/Remodel
CONSTRUCTION COST	7363.00
CONSTRUCTION TYPE	V
FLOOD ZONE	AE
BASE FLOOD ELEVATION	8
NATURAL GAS SIGNOFF	N
OCCUPANCY TYPE	One & Two Family Dwelling

**REQUIRED INSPECTIONS**

Final

**CONDITIONS**

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I hereby certify that I have read and examined this application and know the same to be true and correct. All provisions of Laws and Ordinances governing this type of work will be complied with whether specified herein or not. The granting of a permit does 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: 9/13/19

SET\_17\_CPI  
Town of Kill Devil Hills 4400  
PLANNING  
Date / Time : 09/13/19 14:06  
Payment : \$ 150.00  
Receipt # : 588209  
Check/Credit Card #: 5239  
Clerk : 981msnyd  
Paid By : R A HOY HEATING & A



**Town of Kill Devil Hills**

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

SEP 13 2019

**Planning and Inspection Department**

<b>MC2019-269</b> PROJECT NAME: SITE ADDRESS: 3317 BAY DR KILL DEVIL HILLS	<b>MECHANICAL</b> ISSUED: 09/13/2019 EXPIRES: 03/11/2020
--	--

<b>APPLICANT:</b> NOCK, BARRY T P O BOX 1953 KITTY HAWK, NC 27949	<b>OWNER:</b> NOCK, BARRY T P O BOX 1953 KITTY HAWK, NC 27949
---	---

<b>MECHANICAL, H-2, H-3:</b>	ATLANTIC HEATING AND COOLING P.O. Box 132 Kill Devil Hills, NC 27948 441-7642	<b>License:</b> 11618 <b>Expires:</b> 12/31/2019
------------------------------	--	---

<b>PARCEL:</b>			
<b>PIN:</b>	987516748395	<b>Parcel Number:</b>	000150000
<b>Address:</b>	3317 BAY DR KILL DEVIL HILLS		
<b>Addition:</b>	ORVILLE BEACH WEST	<b>Zoning:</b>	
		<b>Block:</b>	0
		<b>Lot(s):</b>	34 & 1/4 LOT 33
<b>Legal Description:</b>			

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

**PROJECT DESCRIPTION:** HVAC changout

THE UNIVERSITY OF CHICAGO

PHYSICS DEPARTMENT

PHYSICS 439: QUANTUM MECHANICS  
LECTURE 10: PERTURBATION THEORY  
DATE: \_\_\_\_\_

NAME: \_\_\_\_\_  
SECTION: \_\_\_\_\_

PROBLEM 1: Consider a particle in a one-dimensional potential well...

PROBLEM 2: A particle is in a state that is a superposition of the ground and first excited states...

PROBLEM 3: A particle is in a state that is a superposition of the ground and first excited states...

PROBLEM 4: A particle is in a state that is a superposition of the ground and first excited states...

PROBLEM 5: A particle is in a state that is a superposition of the ground and first excited states...

PROBLEM 6: A particle is in a state that is a superposition of the ground and first excited states...

PROBLEM 7: A particle is in a state that is a superposition of the ground and first excited states...

PROBLEM 8: A particle is in a state that is a superposition of the ground and first excited states...

PROBLEM 9: A particle is in a state that is a superposition of the ground and first excited states...

**MC2019-269**

**PROJECT NAME:**

**SITE ADDRESS:** 3317 BAY DR KILL DEVIL HILLS

**MECHANICAL**

**ISSUED:** 09/13/2019

**EXPIRES:** 03/11/2020

**DETAILS**

**Permit**

<b>Name</b>	<b>Value</b>
PURPOSE	Residential Repair/Remodel
CONSTRUCTION COST	4500.00
CONSTRUCTION TYPE	V
FLOOD ZONE	X
NATURAL GAS SIGNOFF	N
OCCUPANCY TYPE	One & Two Family Dwelling

**REQUIRED INSPECTIONS**

Final

**CONDITIONS**

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I hereby certify that I have read and examined this application and know the same to be true and correct. All provisions of Laws and Ordinances governing this type of work will be complied with whether specified herein or not. The granting of a permit does 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: 9-13-19

SET 17 GPI  
Town of Kill Devil Hills 4400  
PLANNING  
Date / Time : 09/16/19 10:59  
Payment : \$ 150.00  
Receipt # : 588278  
Check/Credit Card #: 013687  
Clerk : 981msnyd  
Paid By : ATLANTIC HEATING AN



**Town of Kill Devil Hills**

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

SEP 16 2019

**Planning and Inspection Department**

**MC2019-271**

**PROJECT NAME:**

**SITE ADDRESS:** 1101 DURHAM ST W KILL DEVIL HILLS

**MECHANICAL**

**ISSUED:** 09/16/2019

**EXPIRES:** 03/14/2020

**APPLICANT:** James Bellamy  
1101 W. Durham St.  
Kill Devil Hills, NC 27948  
252-202-4015

**OWNER:** James Bellamy  
1101 W. Durham St.  
Kill Devil Hills, NC 27948  
252-202-4015

**PARCEL:**

**PIN:** 988405084040

**Parcel Number:** 001400000

**Address:** 1101 DURHAM ST W KILL DEVIL HILLS

**Addition:** AVALON BEACH ANNEX 2 & 3

**Zoning:**  
**Block:** 0 **Lot(s):** 698

**Legal Description:**

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

**PROJECT DESCRIPTION:** HVAC changeout

**DETAILS**

**Permit**

<b>Name</b>	<b>Value</b>
PURPOSE	Residential Repair/Remodel
CONSTRUCTION COST	4900.00
CONSTRUCTION TYPE	V
FLOOD ZONE	AE
BASE FLOOD ELEVATION	8
NATURAL GAS SIGNOFF	N
OCCUPANCY TYPE	One & Two Family Dwelling

Town of Will Devilville

123 Main Street  
Will Devilville, VT 05678  
Phone: 802-555-1234



Planning and Inspection Department

PROJECT NAME	PROJECT NUMBER
APPLICANT	DATE
ADDRESS	

OWNER	ADDRESS
CITY/TOWN	STATE
ZIP	

DATE	TIME
BY	
REMARKS	

DATE	TIME
BY	
REMARKS	

DATE	TIME
BY	
REMARKS	

APPROVED: \_\_\_\_\_



**MC2019-271**

**PROJECT NAME:**

**SITE ADDRESS:** 1101 DURHAM ST W KILL DEVIL HILLS

**MECHANICAL**

**ISSUED:** 09/16/2019

**EXPIRES:** 03/14/2020

**REQUIRED INSPECTIONS**

Final

**CONDITIONS**

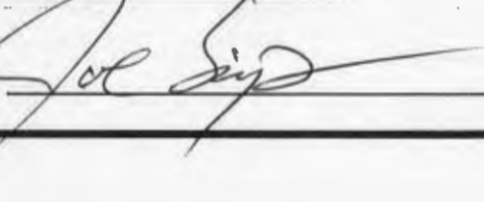
\* This permit becomes null and void if work or construction authorized is not commenced within 6 months or if construction or work is suspended for a period of 12 months at any time after work has started.

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 Ordinances governing this type of work will be complied with whether specified herein or not. The granting of a permit does 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: \_\_\_\_\_

8-16-19

REQUIRED INSPECTIONS

CONDITIONS

Handwritten notes and signatures in the conditions section, including a signature that appears to read "John J. ...".

SET 17 CP1  
 Town of Kill Devil Hills 4400  
 PLANNING  
 Date / Time : 09/16/19 14:19  
 Payment : \$ 150.00  
 Receipt # : 588400  
 Check/Credit Card #: 7009  
 Clerk : 981#snvd  
 Paid By : ALL SEASONS HEATING



**Town of Kill Devil Hills**

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

SEP 17 2019

**Planning and Inspection Department**

**MC2019-251**

**PROJECT NAME:** Two Roads Tavern  
**SITE ADDRESS:** 3105 CROATAN HWY N KILL DEVIL HILLS

**MECHANICAL**

**ISSUED:** 08/15/2019

**EXPIRES:** 02/11/2020

**APPLICANT:** JOHN HIGH  
203 Forest Hill Ave.  
Rocky Mount, NC 27801

**OWNER:** JOHN HIGH  
203 Forest Hill Ave.  
Rocky Mount, NC 27801

**MECHANICAL:** BFPE International  
213 Tintern Ct.  
CHESAPEAKE, VA 23320  
757-436-1301

**License:** 29957  
**Expires:** 12/31/2019

**PARCEL:**

**PIN:** 988513035596

**Parcel Number:** 002991000

**Address:** 3105 CROATAN HWY N KILL DEVIL HILLS

**Addition:** SUBDIVISION - NONE

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

**Legal Description:**

<b>FEEs:</b>	<b>Paid</b>	<b>Due</b>
Mechanical Permit Fee	\$150.00	\$0.00
<b>Totals :</b>	<b>\$150.00</b>	<b>\$0.00</b>

**PROJECT DESCRIPTION:** Repipe existing fire suppression system protecting hood, duct, plenum and associated equipment.

PHYSICS 435

NAME	
SECTION	
DATE	

The following is a list of the topics covered in this course. The topics are listed in order of their appearance in the course. The topics are:

1. Introduction to Quantum Mechanics  
 2. The Schrodinger Equation  
 3. The Harmonic Oscillator  
 4. Angular Momentum  
 5. The Hydrogen Atom  
 6. Perturbation Theory  
 7. Identical Particles  
 8. Scattering Theory  
 9. Relativistic Quantum Mechanics  
 10. Quantum Field Theory

**MC2019-251**

**PROJECT NAME:** Two Roads Tavern

**SITE ADDRESS:** 3105 CROATAN HWY N KILL DEVIL HILLS

**MECHANICAL**

**ISSUED:** 08/15/2019

**EXPIRES:** 02/11/2020

**DETAILS**

**Permit**

<b>Name</b>	<b>Value</b>
PURPOSE	Commercial Repair/Remodel
CONSTRUCTION COST	1588.00
CONSTRUCTION TYPE	V
FLOOD ZONE	AE
BASE FLOOD ELEVATION	9
NATURAL GAS SIGNOFF	N
OCCUPANCY TYPE	Assembly

**REQUIRED INSPECTIONS**

Final

**CONDITIONS**

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Issued By: 

Contractor or Authorized Agent: 

Date: 9/17/19

SET\_17\_CPI

Town of Kill Devil Hills

4400

PLANNING

Date / Time

: 09/17/19 12:39

Payment

: \$ 150.00

Receipt #

: 588466

Check/Credit Card #: 017726

Clerk

: 981msnyd

Paid By

: BFFE INTERNATIONAL



**Town of Kill Devil Hills**

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

PAD

SEP 18 2019

**Planning and Inspection Department**

**MC2019-275**

**PROJECT NAME:** RICKARD HEAT PUMP REPLACEMENT  
**SITE ADDRESS:** 1509 QUAIL LN KILL DEVIL HILLS

**MECHANICAL**

**ISSUED:** 09/18/2019

**EXPIRES:** 03/16/2020

**APPLICANT:** RICKARD, STEVEN C  
P.O. Box 2534  
Kill Devil Hills, NC 27948  
252-202-3509

**OWNER:** RICKARD, STEVEN C  
P.O. Box 2534  
Kill Devil Hills, NC 27948  
252-202-3509

**MECHANICAL:** American Refrigeration  
P.O. Box 835  
nags head, nc 27959  
252-305-5320

**License:** 29031  
**Expires:** 12/31/2019

**PARCEL:**

**PIN:** 988316947928

**Parcel Number:** 005102000

**Address:** 1509 QUAIL LN KILL DEVIL HILLS

**Addition:** WHISPERING PINES SEC 1

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

**Legal Description:**

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

**PROJECT DESCRIPTION:** REPLACE 2TON HEAT PUMP

Planning and execution of the will



MECHANICAL	1910-1915
1915-1920	
1920-1925	

1925-1930	1930-1935	1935-1940	1940-1945
1945-1950	1950-1955	1955-1960	1960-1965
1965-1970	1970-1975	1975-1980	1980-1985
1985-1990	1990-1995	1995-2000	2000-2005

2005-2010	2010-2015	2015-2020	2020-2025
2025-2030	2030-2035	2035-2040	2040-2045



**MC2019-275**

**PROJECT NAME:** RICKARD HEAT PUMP REPLACEMENT  
**SITE ADDRESS:** 1509 QUAIL LN KILL DEVIL HILLS

**MECHANICAL**

**ISSUED:** 09/18/2019

**EXPIRES:** 03/16/2020

**DETAILS**

**Permit**

<b>Name</b>	<b>Value</b>
PURPOSE	Residential Repair/Remodel
CONSTRUCTION COST	4000.00
CONSTRUCTION TYPE	V
FLOOD ZONE	X
NATURAL GAS SIGNOFF	N
OCCUPANCY TYPE	One & Two Family Dwelling

**REQUIRED INSPECTIONS**

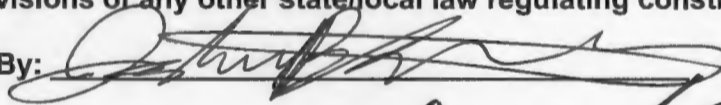
Final

**CONDITIONS**

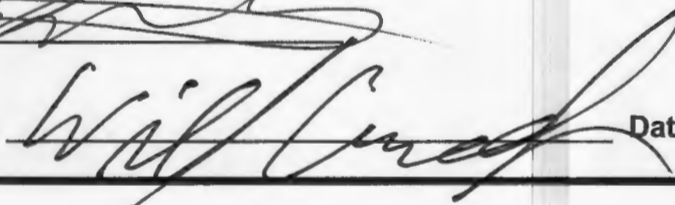
\* This permit becomes null and void if work or construction authorized is not commenced within 6 months or if construction or work is suspended for a period of 12 months at any time after work has started.

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Issued By:



Contractor or Authorized Agent:



Date:

9-18-19

MECHANICAL  
PLUMBING CONTRACT  
1000-1000-1000

RECEIVED  
TOWN OF KILL DEVIL HILLS  
PLANNING  
4400

SET 17.P1  
Town of Kill Devil Hills  
PLANNING  
4400  
Date / Time : 09/18/19 12:54  
Payment : \$ 150.00  
Receipt # : 58851  
Check/Credit Card #: 2242  
Clerk : 98185nd  
Paid By : AMERICAN REFRIGERAT



# Town of Kill Devil Hills

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

SEP 18 2019

## Planning and Inspection Department

**MC2019-274**

**PROJECT NAME:** LEE HEAT PUMP REPLACEMENT  
**SITE ADDRESS:** 1705 SUNSET AVE KILL DEVIL HILLS

**MECHANICAL**

**ISSUED:** 09/18/2019

**EXPIRES:** 03/16/2020

**APPLICANT:** LEE, REBECCA D  
P O BOX 510524  
MELBOURNE BEACH, FL 32951

**OWNER:** LEE, REBECCA D  
P O BOX 510524  
MELBOURNE BEACH, FL 32951

**MECHANICAL:** American Refrigeration  
P.O. Box 835  
nags head, nc 27959  
252-305-5320

**License:** 29031  
**Expires:** 12/31/2019

**PARCEL:**

**PIN:** 988409150572

**Parcel Number:** 002609000

**Address:** 1705 SUNSET AVE KILL DEVIL HILLS

**Addition:** CROATAN SHORES SUBDIV

**Zoning:**  
**Block:** 18      **Lot(s):** 26

**Legal Description:**

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

**PROJECT DESCRIPTION:** REPLACE 2TON HEAT PUMP



Form of Mill Work  
...  
...

MECHANICAL	...
...	...
...	...

...	...	...
...	...	...
...	...	...

...	...	...	...
...	...	...	...
...	...	...	...
...	...	...	...

**MC2019-274**

**PROJECT NAME:** LEE HEAT PUMP REPLACEMENT  
**SITE ADDRESS:** 1705 SUNSET AVE KILL DEVIL HILLS

**MECHANICAL**

**ISSUED:** 09/18/2019

**EXPIRES:** 03/16/2020

**DETAILS**

**Permit**

<b>Name</b>	<b>Value</b>
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

**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:

MECHANICAL  
PLUMBING  
ELECTRICAL  
HVAC

STATE

REPAIRS

DETAILS

9-18-19

*[Handwritten Signature]*

SET\_17\_CPI  
Town of Kill Devil Hills 4400  
PLANNING  
Date / Time : 09/18/19 12:54  
Payment : \$ 150.00  
Receipt # : 588850  
Check/Credit Card # : 981msnyd  
Clerk :  
Paid By :



**Town of Kill Devil Hills**

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

PAD

SEP 18 2019

**Planning and Inspection Department**

<b>MC2019-276</b>	<b>MECHANICAL</b>
<b>PROJECT NAME:</b> REICHERT HVAC CHANGE OUT	<b>ISSUED:</b> 09/18/2019
<b>SITE ADDRESS:</b> 126 SECOND ST E KILL DEVIL HILLS	<b>EXPIRES:</b> 03/16/2020

<b>APPLICANT:</b> REICHERT, JAMES A P O BOX 8215 NORFOLK, VA 23503	<b>OWNER:</b> REICHERT, JAMES A P O BOX 8215 NORFOLK, VA 23503
--	--

<b>MECHANICAL:</b>	R A HOY PO Box 265 Kitty Hawk, NC 27949 252-261-2008	<b>License:</b> 13056 <b>Expires:</b> 12/31/2019
--------------------	---	---

<b>PARCEL:</b>			
<b>PIN:</b>	988410477055	<b>Parcel Number:</b>	003194000
<b>Address:</b>	126 SECOND ST E KILL DEVIL HILLS		
<b>Addition:</b>	W R DEATON - DELRAY BEACH	<b>Zoning:</b>	
<b>Legal Description:</b>		<b>Block:</b>	H Lot(s): PT 37 & 38

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

**PROJECT DESCRIPTION:** CHANGE OUT 2.5 TON HVAC

Town of Killbuck Ohio

10000  
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10000



**MC2019-276**

**PROJECT NAME:** REICHERT HVAC CHANGE OUT  
**SITE ADDRESS:** 126 SECOND ST E KILL DEVIL HILLS

**MECHANICAL**

**ISSUED:** 09/18/2019

**EXPIRES:** 03/16/2020

**DETAILS**

**Permit**

<b>Name</b>	<b>Value</b>
PURPOSE	Residential Repair/Remodel
CONSTRUCTION COST	6200.00
CONSTRUCTION TYPE	V
FLOOD ZONE	AE
BASE FLOOD ELEVATION	8.00
NATURAL GAS SIGNOFF	N
OCCUPANCY TYPE	One & Two Family Dwelling

**REQUIRED INSPECTIONS**

Final

**CONDITIONS**

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

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

Issued By: \_\_\_\_\_

Contractor or Authorized Agent: \_\_\_\_\_

Date: \_\_\_\_\_

9/18/19

RECEIVED  
TOWN OF KILL DEVI HILLS  
PLANNING  
4400

DEPT

RECEIVED

CONDITIONS

Handwritten notes and signatures in a rectangular box.

SET 17 CPI  
Town of Kill Devil Hills  
PLANNING  
4400  
Date / Time : 09/19/19 08:28  
Payment : \$ 150.00  
Receipt # : 588857  
Check/Credit Card #: 5243  
Clerk : 981msnyd  
Paid By : R A HOY HEATING & A



**Town of Kill Devil Hills**

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

PAID  
SEP 23 2019

**Planning and Inspection Department**

<b>MC2019-277</b>	<b>MECHANICAL</b>
<b>PROJECT NAME:</b> LATINO HVAC	<b>ISSUED:</b> 09/23/2019
<b>SITE ADDRESS:</b> 1608 PRINCESS ANNE DR KILL DEVIL HILLS	<b>EXPIRES:</b> 03/21/2020

<b>APPLICANT:</b> LATINO, ROBERT J 14000 HILL SPRING DRIVE CHESTER, VA 23831	<b>OWNER:</b> LATINO, ROBERT J 14000 HILL SPRING DRIVE CHESTER, VA 23831
--	--

<b>H-3, CLASS I:</b>	ISLAND HEATING AND COOLING UNKNOWN UNKNOWN, XX 00000	<b>License:</b> 22354 <b>Expires:</b> 12/31/2019
----------------------	--	---

**PARCEL:**

<b>PIN:</b> 988410466131	<b>Parcel Number:</b> 003136013
<b>Address:</b> 1608 PRINCESS ANNE DR KILL DEVIL HILLS	
<b>Addition:</b> DELRAY BEACH RESUBDIV	<b>Zoning:</b>
<b>Legal Description:</b>	<b>Block:</b> 3 <b>Lot(s):</b> 13

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

**PROJECT DESCRIPTION:** HVAC CHANGE OUT

RECEIVED  
 DEPARTMENT OF THE ARMY  
 OFFICE OF THE QUARTERMASTER GENERAL  
 WASHINGTON, D. C.

RECEIVED  
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 OFFICE OF THE QUARTERMASTER GENERAL  
 WASHINGTON, D. C.

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 WASHINGTON, D. C.

RECEIVED  
 DEPARTMENT OF THE ARMY  
 OFFICE OF THE QUARTERMASTER GENERAL  
 WASHINGTON, D. C.

**MC2019-277**

**PROJECT NAME:** LATINO HVAC

**SITE ADDRESS:** 1608 PRINCESS ANNE DR KILL DEVIL HILLS

**MECHANICAL**

**ISSUED:** 09/23/2019

**EXPIRES:** 03/21/2020

**DETAILS**

**Permit**

<b>Name</b>	<b>Value</b>
PURPOSE	Residential Repair/Remodel
CONSTRUCTION COST	6425.00
CONSTRUCTION TYPE	V
FLOOD ZONE	AE
BASE FLOOD ELEVATION	8.00
NATURAL GAS SIGNOFF	N
OCCUPANCY TYPE	One & Two Family Dwelling

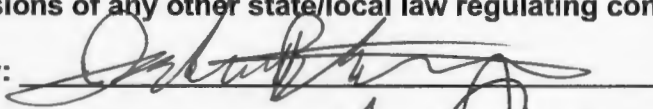
**REQUIRED INSPECTIONS**

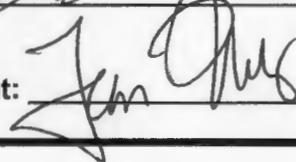
Final

**CONDITIONS**

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

Issued By: 

Contractor or Authorized Agent: 

Date: 9-23-19

SET\_17\_0P1  
Town of Kill Devil Hills 4400  
PLANNING  
Date / Time : 09/23/19 07:59  
Payment : \$ 150.00  
Receipt # : 589021  
Check/Credit Card #: 1045  
Clerk : 981msnyd  
Paid By : ISLAND HEATING & CO



**Town of Kill Devil Hills**

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

SEP 25 2019

**Planning and Inspection Department**

<b>MC2019-278</b>	<b>MECHANICAL</b>
<b>PROJECT NAME:</b> Strand HVAC	<b>ISSUED:</b> 09/25/2019
<b>SITE ADDRESS:</b> 1531 VA DARE TRL N KILL DEVIL HILLS	<b>EXPIRES:</b> 03/23/2020

**APPLICANT:** STRAND SOUTH LTD  
P O BOX 1917  
KILL DEVIL HILLS, NC 27948

**OWNER:** STRAND SOUTH LTD  
P O BOX 1917  
KILL DEVIL HILLS, NC 27948

**MECHANICAL:** R A HOY  
PO Box 265  
Kitty Hawk, NC 27949  
252-261-2008

**License:** 13056  
**Expires:** 12/31/2019

**PARCEL:**

**PIN:** 98841156806907

**Parcel Number:** 002765002

**Address:** 1531 VA DARE TRL N KILL DEVIL HILLS

**Addition:**

**Zoning:**

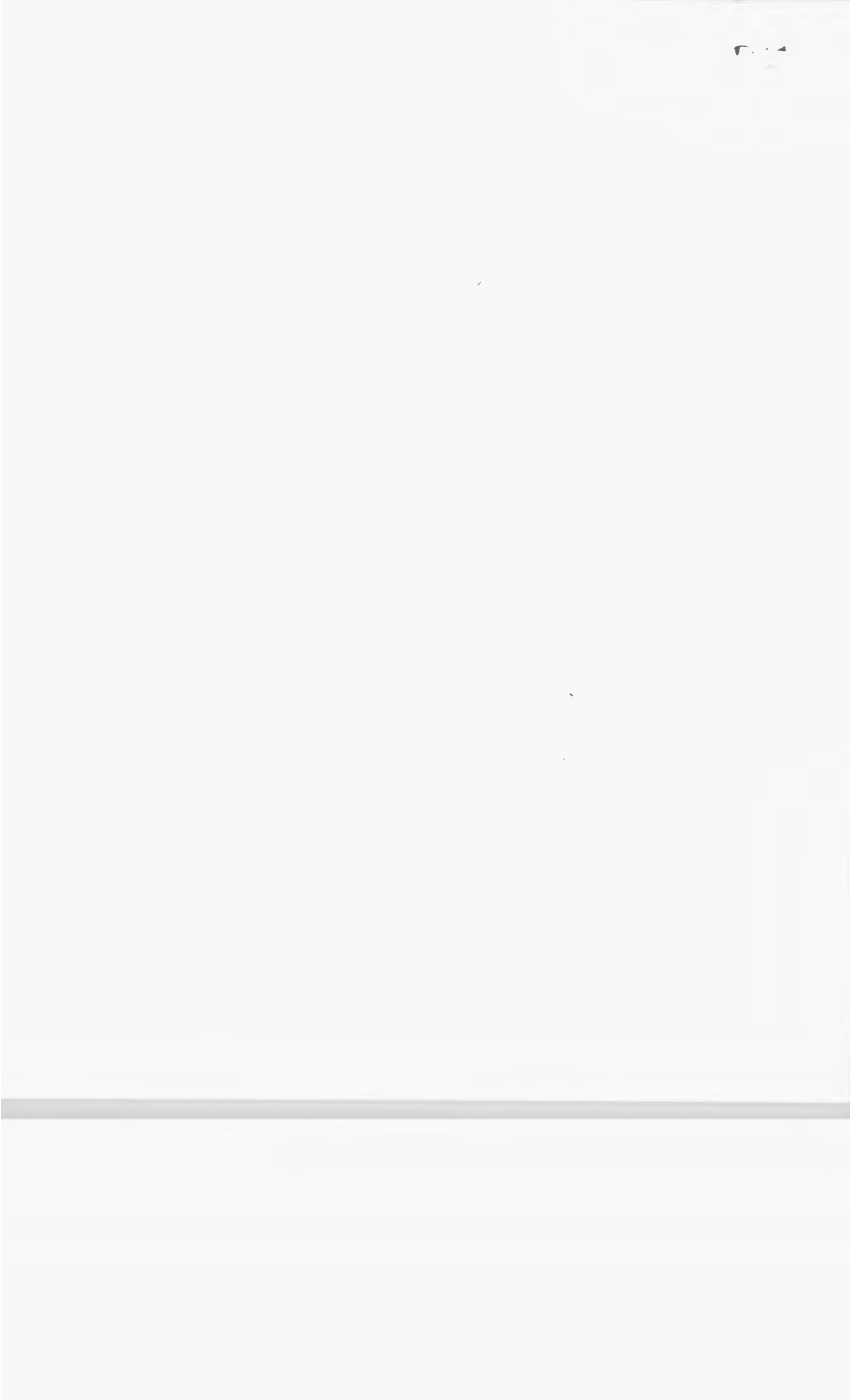
**Block:** A

**Lot(s):** UNIT M-2 LT  
6-7,PT

**Legal Description:**

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

**PROJECT DESCRIPTION:** C/O 2 Ton HVAC System





**MC2019-278**

PROJECT NAME: Strand HVAC

SITE ADDRESS: 1531 VA DARE TRL N KILL DEVIL HILLS

**MECHANICAL**

ISSUED: 09/25/2019

EXPIRES: 03/23/2020

**DETAILS**

**Permit**

Name	Value
PURPOSE	Residential Repair/Remodel
CONSTRUCTION COST	6000.00
CONSTRUCTION TYPE	V
FLOOD ZONE	VE
BASE FLOOD ELEVATION	11
NATURAL GAS SIGNOFF	N

**REQUIRED INSPECTIONS**

Final

**CONDITIONS**

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Issued By: 

Contractor or Authorized Agent: 

Date: 9/25/19

3317 DP  
 Check of all Dev's with  
 PLANNING  
 Date of the 08/25/13 11AM  
 Payment 1.000000  
 Receipt # 000000  
 Check/ Credit Card No. 0000  
 Client 1015000  
 Paid By 1.000000



**Town of Kill Devil Hills**

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

SEP 25 2019

**Planning and Inspection Department**

<b>MC2019-273</b> <b>PROJECT NAME:</b> Dominguez HVAC <b>SITE ADDRESS:</b> 2010 HIGHVIEW ST KILL DEVIL HILLS	<b>MECHANICAL</b> <b>ISSUED:</b> 09/17/2019 <b>EXPIRES:</b> 03/15/2020
--	--

PAID  
 W/T  
 CASE

<b>APPLICANT:</b> Dominguez, Marcelo 2010 Hieghview St Kill Devil Hills, NC 27948 252-305-7223	<b>OWNER:</b> Dominguez, Marcelo 2010 Hieghview St Kill Devil Hills, NC 27948 252-305-7223
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<b>CONTRACTOR:</b> GREGORY MECHANICAL UNKNOWN UNKNOWN, XX 00000 252-202-4329	<b>License:</b> 21287 <b>Expires:</b> 12/31/2019
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**PARCEL:**

<b>PIN:</b> 988405089609  <b>Address:</b> 2010 HIGHVIEW ST KILL DEVIL HILLS  <b>Addition:</b> AVALON BEACH ANNEX 2 & 3 <b>Legal Description:</b>	<b>Parcel Number:</b> 000911000  <b>Zoning:</b> <b>Block:</b> 0 <b>Lot(s):</b> 1183
---	--

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

**PROJECT DESCRIPTION:** C/O 2.5 Ton HVAC System

**DETAILS**

<u>Permit</u>	<u>Name</u>	<u>Value</u>
	PURPOSE	Residential Repair/Remodel
	CONSTRUCTION COST	3400.00
	CONSTRUCTION TYPE	V
	FLOOD ZONE	X
	NATURAL GAS SIGNOFF	N

1905



RECEIVED  
MAY 10 1905

1905



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**MC2019-273**

**PROJECT NAME:** Dominguez HVAC

**SITE ADDRESS:** 2010 HIGHVIEW ST KILL DEVIL HILLS

**MECHANICAL**

**ISSUED:** 09/17/2019

**EXPIRES:** 03/15/2020

**REQUIRED INSPECTIONS**

Final

**CONDITIONS**

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Issued By: \_\_\_\_\_

Contractor or Authorized Agent: \_\_\_\_\_

Date: \_\_\_\_\_

25 Sep 19

SET 17 CP1

Town of Kill Devil Hills

4908

PLANNING

Date / Time

: 09/26/19 09:03

Payment

: \$ 150.00

Receipt #

: 589303

Check/Credit Card #:

: 981msnyd

Clerk

Paid By

: GREGORY MECHANICAL



# 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

SEP 26 2019

### MC2019-279

PROJECT NAME: VAUGHN HVAC  
SITE ADDRESS: 1316 VA DARE TRL N KILL DEVIL HILLS

### MECHANICAL

ISSUED: 09/26/2019

EXPIRES: 03/24/2020

**APPLICANT:** Craig Vaughan  
P. O. Box 1795  
nags head, nc 27959  
441-9309

**OWNER:** Craig Vaughan  
P. O. Box 1795  
nags head, nc 27959  
441-9309

**MECHANICAL:** American Refrigeration  
P.O. Box 835  
nags head, nc 27959  
252-305-5320

**License:** 29031  
**Expires:** 12/31/2019

### PARCEL:

**PIN:** 988415640765

**Parcel Number:** 004041000

**Address:** 1316 VA DARE TRL N KILL DEVIL HILLS

**Zoning:**

**Addition:**

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

**Legal Description:**

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

**PROJECT DESCRIPTION:** Replace HVAC Systems





**MC2019-279**

**PROJECT NAME:** VAUGHN HVAC

**SITE ADDRESS:** 1316 VA DARE TRL N KILL DEVIL HILLS

**MECHANICAL**

**ISSUED:** 09/26/2019

**EXPIRES:** 03/24/2020

**DETAILS**

**Permit**

<b>Name</b>	<b>Value</b>
PURPOSE	Residential Repair/Remodel
CONSTRUCTION COST	5030.00
CONSTRUCTION TYPE	V
FLOOD ZONE	AE
BASE FLOOD ELEVATION	8.00
NATURAL GAS SIGNOFF	N
OCCUPANCY TYPE	One & Two Family Dwelling



**REQUIRED INSPECTIONS**

Final

**CONDITIONS**

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Issued By:   
Contractor or Authorized Agent:  Date: 9-26-19

SET 17 01  
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PLANNING  
Date / Time : 09/26/1 14:37  
Patient : 150...  
Receipt # : 59375  
EXHIBIT DAY # 250  
Case : KOT...nd  
: AMERICAN REF IG...A



**Town of Kill Devil Hills**

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

PAID

SEP 27 2019

**Planning and Inspection Department**

TOWN OF  
KILL DEVIL HILLS

**MC2019-280**

**PROJECT NAME:** RHEUBOTTOM HVAC  
**SITE ADDRESS:** 204 MEMORIAL BLVD S KILL DEVIL HILLS

**MECHANICAL**

**ISSUED:** 09/27/2019

**EXPIRES:** 03/25/2020

**APPLICANT:** MS. MARGARET AND LORI RHEUBOTTOM  
204 S. Memorial Blvd.  
Kill Devil Hills, NC 27948

**OWNER:** MS. MARGARET AND LORI RHEUBOTTOM  
204 S. Memorial Blvd.  
Kill Devil Hills, NC 27948

**MECHANICAL:** R A HOY  
PO Box 265  
Kitty Hawk, NC 27949  
252-261-2008

**License:** 13056  
**Expires:** 12/31/2019

**PARCEL:**

**PIN:** 988420800276

**Parcel Number:** 003832000

**Address:** 204 MEMORIAL BLVD S KILL DEVIL HILLS

**Addition:** KITTY HAWK SHORES - REVISED

**Zoning:**

**Block:** 35 **Lot(s):** 3

**Legal Description:**

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

**PROJECT DESCRIPTION:** HVAC CHANGE OUT



**MC2019-280**

**PROJECT NAME:** RHEUBOTTOM HVAC  
**SITE ADDRESS:** 204 MEMORIAL BLVD S KILL DEVIL HILLS

**MECHANICAL**

**ISSUED:** 09/27/2019

**EXPIRES:** 03/25/2020

**DETAILS**

**Permit**

<b>Name</b>	<b>Value</b>
PURPOSE	Residential Repair/Remodel
CONSTRUCTION COST	6456.00
CONSTRUCTION TYPE	V
FLOOD ZONE	AE
BASE FLOOD ELEVATION	8.00
NATURAL GAS SIGNOFF	N
OCCUPANCY TYPE	One & Two Family Dwelling

**REQUIRED INSPECTIONS**

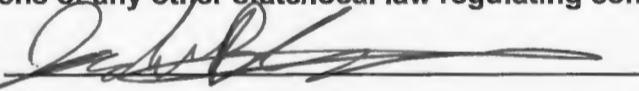
Final

**CONDITIONS**

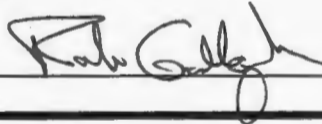
\* This permit becomes null and void if work or construction authorized is not commenced within 6 months or if construction or work is suspended for a period of 12 months at any time after work has started.

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Issued By:



Contractor or Authorized Agent:



Date:

9/27/19

5/17/21  
Town of Hill Mills  
Flannery  
Date of the : 05/17/21  
Payment : \$ 100.00  
Receipt # : 58134  
Check/Credit Card # : 5234  
Class : POLICE  
Paid to : M & M RESTAURANT



# Town of Kill Devil Hills

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

SEP 30 2019

## Planning and Inspection Department

**MC2019-281**

**PROJECT NAME:** DOWNS HVAC CHANGE OUT  
**SITE ADDRESS:** 2025 MEMORIAL BLVD S KILL DEVIL HILLS

**MECHANICAL**

**ISSUED:** 09/30/2019

**EXPIRES:** 03/28/2020

**APPLICANT:** PAUL DOWNS  
440 W. WILLIAN ST.  
PORT CHESTER, NY 10573  
914-319-1153

**OWNER:** PAUL DOWNS  
440 W. WILLIAN ST.  
PORT CHESTER, NY 10573  
914-319-1153

**ELECTRICAL, PLUMBING AND HEATING:** AIR HANDLERS OBX  
8788 Caratoke Hwy  
Harbinger, NC 27941  
252-216-8945

**License:** 32935  
**Expires:** 01/30/2020

**PARCEL:**

**PIN:** 989313138613      **Parcel Number:** 008520000  
**Address:** 2025 MEMORIAL BLVD S KILL DEVIL HILLS  
**Addition:** NAGS HEAD SHORES AMENDED SEC 4      **Zoning:**  
**Legal Description:**      **Block:** 4      **Lot(s):** 12 & PT 11

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

**PROJECT DESCRIPTION:** HVAC CHANGE OUT

NAME	RESIDENCE	BIRTH	DEATH	REMARKS
J. H. ...	...	...	...	...
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**MC2019-281**

**PROJECT NAME:** DOWNS HVAC CHANGE OUT  
**SITE ADDRESS:** 2025 MEMORIAL BLVD S KILL DEVIL HILLS

**MECHANICAL**

**ISSUED:** 09/30/2019

**EXPIRES:** 03/28/2020

**DETAILS**

**Permit**

<b>Name</b>	<b>Value</b>
PURPOSE	Residential Repair/Remodel
CONSTRUCTION COST	6197.00
CONSTRUCTION TYPE	V
FLOOD ZONE	AE
BASE FLOOD ELEVATION	10.00
NATURAL GAS SIGNOFF	N
OCCUPANCY TYPE	One & Two Family Dwelling

**REQUIRED INSPECTIONS**

Final

**CONDITIONS**

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Issued By: \_\_\_\_\_

Contractor or Authorized Agent: \_\_\_\_\_

Date: 9/30/19

SET 17 PPI  
Town of Hills Devil Hills  
PLANNING  
Date / Time : 09/30/19 11:00  
Payment : \$ 150.00  
Receipt # : 590302  
Check/Deposit Card #: 10030  
Clark : 81menya  
Paid By : AIR HANDLES RMX



**Town of Kill Devil Hills**

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

PAID

SEP - 4 2019

**Planning and Inspection Department**

TOWN OF  
KILL DEVIL HILLS

<b>BJ2019-158</b>	<b>BUILDING JOINT</b>
<b>PROJECT NAME:</b> Sandy Bottom Homes	<b>ISSUED:</b> 08/30/2019
<b>SITE ADDRESS:</b> 602 PALMETTO ST W KILL DEVIL HILLS	<b>EXPIRES:</b> 02/26/2020

<b>APPLICANT:</b> FRANK SOLES 400 Da Vinci Lane kitty hawk, nc 27949 757-448-8162	<b>OWNER:</b> Sandy Bottom Homes 400 DaVinci Lane kitty hawk, nc 27949 757-448-8162
--	--

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

**PARCEL:**

<b>PIN:</b> 987520903090	<b>Parcel Number:</b> 000775007
<b>Address:</b> 602 PALMETTO ST W KILL DEVIL HILLS	
<b>Addition:</b> VIRGINIA DARE SH BLK 77 RECOMB	<b>Zoning:</b>
<b>Legal Description:</b>	<b>Block:</b> 77 <b>Lot(s):</b> 7

FEES:	Paid	Due	BUILDING AREA:	
T-Pole	\$50.00	\$0.00	Residential Heated Space	1905 sq. Ft.
Res. Building Permit Fee	\$1,471.55	\$0.00	(.75)	
Covered Porch Residential	\$56.25	\$0.00	# of Temporary Poles	1 EA
Open Deck Fee	\$150.00	\$0.00	Open Decks	1 EA
<b>Totals :</b>	<b>\$1,727.80</b>	<b>\$0.00</b>	Residential Unheated (.40)	107 Sq. Ft
			Covered Porches/Decks	75 SQFT

**PROJECT DESCRIPTION:** Proposed 4 bedroom single family dwelling

**Town of Kill Devil Hills  
Water Charges**

PAID

Water Tap # \_\_\_\_\_

**BJ2019-158****PROJECT NAME:** Sandy Bottom Homes**SITE ADDRESS:** 602 PALMETTO ST W KILL DEVIL HILLS**BUILDING JOINT****ISSUED:** 08/30/2019**EXPIRES:** 02/26/2020**DETAILS****Permit**

<b>Name</b>	<b>Value</b>
ZONING DISTRICT	RL
FRONT YARD SETBACK	30
REAR YARD SETBACK	20% Depth >30
SIDE YARD SETBACK	8
HEALTH DEPARTMENT PERMIT #	28984
# PARKING SPACES/BEDROOM	4
CAMA PERMIT	N
CAMA EXEMPTION	N
FLOOD ZONE	AE
BASE FLOOD ELEVATION	8.3
Proposed First Floor Elevation	7.00
SUBSTANTIAL IMPROVEMENT	NO
CONSTRUCTION COST	200000.00
LOT COVERAGE	32.70
SURVEYOR NAME AND NUMBER	Seaboard Surveying and Planning
CULVERT	N
ROLL OUT CAN	2
DRIVEWAY INVERT 2	Y

**REQUIRED INSPECTIONS**

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

**CONDITIONS**

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

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

**BJ2019-158**

**PROJECT NAME:** Sandy Bottom Homes

**SITE ADDRESS:** 602 PALMETTO ST W KILL DEVIL HILLS

**BUILDING JOINT**

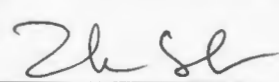
**ISSUED:** 08/30/2019

**EXPIRES:** 02/26/2020

- \* Elevation Certificate will be required 21 days after establishment of the reference level in accordance with 151.41(C).
- \* As-built survey will be required prior to Certificate of Occupancy or Certificate of Compliance.
- \* The developer shall be responsible for maintaining erosion and sediment control at the disturbed area.
- \* A final elevation certificate will be required prior to issuance of a Certificate of Occupancy or a Certificate of Compliance in accordance with 151.41(C).
- \* Development must meet all aspects of Chapter 151 Flood Damage Prevention Ordinance including use and elevation.
- \* Per §153.082(B)(1)(c) Mechanical equipment, including HVAC equipment and LP Gas equipment shall not project into a minimum yard setback more than four (4) feet.
- \* Must comply with Wind Borne Debris requirements as defined in NCBC R301.2.1.2 and NCBC 1609.2.
- \* Construction must meet all aspect of Chapter 153 Zoning including lot coverage and setbacks.
- \* Zoning Final Inspection is required.

I hereby certify that I have read and examined this application and know the same to be true and correct. All provisions of Laws and Ordinances governing this type of work will be complied with whether specified herein or not. The granting of a permit does 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: 9-4-19



**Town of Kill Devil Hills**

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

SEP - 4 2019

**Planning and Inspection Department**

<b>BJ2019-164</b> PROJECT NAME: DAVIS WATER DAMAGE SITE ADDRESS: 1515 VILLAGE LN KILL DEVIL HILLS	<b>BUILDING JOINT</b> ISSUED: 09/04/2019 EXPIRES: 03/02/2020
---	--

<b>APPLICANT:</b> Davis, Wanda 12012 Prince George Drive Disputanta, VA 23842 804-704-2285	<b>OWNER:</b> Davis, Wanda 12012 Prince George Drive Disputanta, VA 23842 804-704-2285
---	---

<b>UNLICENSED - REMODELING:</b> Econo Cleaning Service, INC 615 Canal DR Kill Devil Hills, NC 27948 252-256-3707	<b>License:</b> 0 <b>Expires:</b>
---	--------------------------------------

**PARCEL:**

<b>PIN:</b> 988410256086	<b>Parcel Number:</b> 003383000
<b>Address:</b> 1515 VILLAGE LN KILL DEVIL HILLS	<b>Zoning:</b>
<b>Addition:</b> FIRST FLIGHT VILLAGE SEC 1	<b>Block:</b> 0 <b>Lot(s):</b> 114
<b>Legal Description:</b>	

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

**PROJECT DESCRIPTION:** REPLACE INSULATION AND RUN NEW ELECTRICAL FOR DISHWASHER, REPAIR DUE TO WATER DAMAGE

**BJ2019-164**

**PROJECT NAME:** DAVIS WATER DAMAGE  
**SITE ADDRESS:** 1515 VILLAGE LN KILL DEVIL HILLS

**BUILDING JOINT**

**ISSUED:** 09/04/2019

**EXPIRES:** 03/02/2020

---

**DETAILS**

**Permit**

---

<b>Name</b>	<b>Value</b>
ZONING DISTRICT	RL
FRONT YARD SETBACK	30
REAR YARD SETBACK	20% Depth >30
SIDE YARD SETBACK	8
STREET SIDE SETBACK	15
CAMA PERMIT	N
CAMA EXEMPTION	N
FLOOD ZONE	X
SUBSTANTIAL IMPROVEMENT	NO
PURPOSE	Residential Repair/Remodel
CONSTRUCTION TYPE	V
CONSTRUCTION COST	20000.00
CULVERT	N
DRIVEWAY INVERT 2	N
OCCUPANCY TYPE	One & Two Family Dwelling

---

**REQUIRED INSPECTIONS**

Rough In	Final
Insulation	

---

**CONDITIONS**

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

**BJ2019-164**

**PROJECT NAME:** DAVIS WATER DAMAGE  
**SITE ADDRESS:** 1515 VILLAGE LN KILL DEVIL HILLS

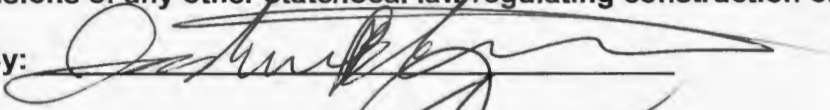
**BUILDING JOINT**

**ISSUED:** 09/04/2019

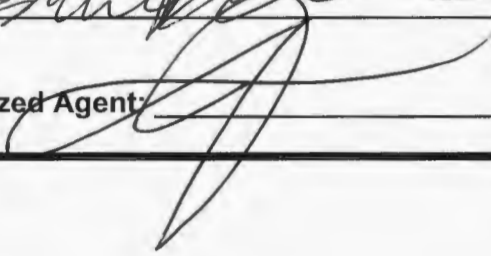
**EXPIRES:** 03/02/2020

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/local law regulating construction or the performance of construction.

Issued By:



Contractor or Authorized Agent:



Date:

9-4-19





**Town of Kill Devil Hills**

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

PAID

SEP 16 2019

**Planning and Inspection Department**

<b>BJ2019-169</b>	<b>BUILDING JOINT</b>
<b>PROJECT NAME:</b> SUTER GENERAC INSTALL	<b>ISSUED:</b> 09/16/2019
<b>SITE ADDRESS:</b> 406 CLAM SHELL DR KILL DEVIL HILLS	<b>EXPIRES:</b> 03/14/2020

**APPLICANT:** Suter, Steve  
P O BOX 2942  
303 Archdale Street  
KILL DEVIL HILLS, NC 27948  
757-237-4726

**OWNER:** Suter, Steve  
P O BOX 2942  
303 Archdale Street  
KILL DEVIL HILLS, NC 27948  
757-237-4726

**ELECTRICAL - UNLIMITED:** Bear Rock Electrical  
131 S. Dogwood Tr.  
kitty hawk, nc 27949  
240-439-5278

**License:** 30667-U  
**Expires:**

**PARCEL:**

**PIN:** 988405271744

**Parcel Number:** 002408000

**Address:** 406 CLAM SHELL DR KILL DEVIL HILLS

**Addition:** SEA HOLLY RIDGE

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

**Legal Description:**

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

**PROJECT DESCRIPTION:** INSTALL 22KW STANDBY GENERATOR

**BJ2019-169**

**PROJECT NAME:** SUTER GENERAC INSTALL  
**SITE ADDRESS:** 406 CLAM SHELL DR KILL DEVIL HILLS

**BUILDING JOINT**

**ISSUED:** 09/16/2019

**EXPIRES:** 03/14/2020

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**DETAILS**

**Permit**

---

<b>Name</b>	<b>Value</b>
ZONING DISTRICT	RL
FRONT YARD SETBACK	30
REAR YARD SETBACK	20% Depth >30
SIDE YARD SETBACK	8
CAMA PERMIT	N
CAMA EXEMPTION	N
FLOOD ZONE	X
SUBSTANTIAL IMPROVEMENT	NO
PURPOSE	Residential Accessory
CONSTRUCTION TYPE	V
CONSTRUCTION COST	9459.00
CULVERT	N
DRIVEWAY INVERT 2	N
OCCUPANCY TYPE	One & Two Family Dwelling

---

**REQUIRED INSPECTIONS**

Rough In	Zoning Final
Final	

---

**CONDITIONS**

- \* This permit becomes null and void if work or construction authorized is not commenced within 6 months or if construction or work is suspended for a period of 12 months at any time after work has started.
  - \* NOTICE: Call Public Services Department (252) 480-4080 before pouring driveway!
  - \* Per §153.082(B)(1)(c) Mechanical equipment, including HVAC equipment and LP Gas equipment shall not project into a minimum yard setback more than four (4) feet.
  - \* Construction must meet all aspect of Chapter 153 Zoning including lot coverage and setbacks.
  - \* Zoning Final Inspection is required.
-



# 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

**BJ2019-167**

**PROJECT NAME:** Stewart Pool, Pool House, and bathroom addition  
**SITE ADDRESS:** 903 Swan Street KILL DEVIL HILLS

**BUILDING JOINT**

**ISSUED:** 09/11/2019

**EXPIRES:** 03/09/2020

**APPLICANT:** STEWART, JEREMIAH  
903 SWAN ST  
Kill Devil Hills, NC 27948  
252-305-1922

**OWNER:** STEWART, JEREMIAH  
903 SWAN ST  
Kill Devil Hills, NC 27948  
252-305-1922

**CONTRACTOR:** SOUNDSIDE POOLS  
PO Box 2996  
Kill Devil Hills, NC 27948  
252-256-2684

**GENERAL:** SOUNDSIDE POOLS  
PO Box 2996  
Kill Devil Hills, NC 27948  
252-256-2684

**License:** 61128  
**Expires:** 12/31/2019

**PARCEL:**

**PIN:** 988312776265

**Parcel Number:**

**Address:** 903 Swan Street KILL DEVIL HILLS

**Zoning:**

**Addition:**

**Block:**

**Lot(s):**

**Legal Description:** Lot 9, Block 27, Kill Devil Hill Realty Corp. S/D

<b>FEES:</b>	<b>Paid</b>	<b>Due</b>	<b>BUILDING AREA:</b>	
Covered Porch Residential	\$126.00	\$0.00	Covered Porches/Decks	168 SQFT
Pool/Hot Tub	\$200.00	\$0.00		
<b>Totals :</b>	<b>\$326.00</b>	<b>\$0.00</b>		

**PROJECT DESCRIPTION:** Add screened in porch, bathroom under existing house, and pool

SEP 16 2019

**BJ2019-167**

**PROJECT NAME:** Stewart Pool, Pool House, and bathroom addition  
**SITE ADDRESS:** 903 Swan Street KILL DEVIL HILLS

**BUILDING JOINT**

ISSUED: 09/11/2019

EXPIRES: 03/09/2020

**DETAILS****Permit**

<b>Name</b>	<b>Value</b>
ZONING DISTRICT	RL
FRONT YARD SETBACK	30
REAR YARD SETBACK	20% Depth >30
SIDE YARD SETBACK	10
HEALTH DEPARTMENT PERMIT #	28959
# PARKING SPACES/BEDROOM	4
CAMA PERMIT	N
CAMA EXEMPTION	N
FLOOD ZONE	X
SUBSTANTIAL IMPROVEMENT	NO
PURPOSE	Residential Addition
CONSTRUCTION COST	40000.00
LOT COVERAGE	34.70
SURVEYOR NAME AND NUMBER	Manson Ray Meekins L-2592
CULVERT	N
DRIVEWAY INVERT 2	N
OCCUPANCY TYPE	One & Two Family Dwelling

**REQUIRED INSPECTIONS**

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

**CONDITIONS**

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

**BJ2019-167**

**PROJECT NAME:** Stewart Pool, Pool House, and bathroom addition  
**SITE ADDRESS:** 903 Swan Street KILL DEVIL HILLS

**BUILDING JOINT**

**ISSUED:** 09/11/2019

**EXPIRES:** 03/09/2020

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

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

Issued By: \_\_\_\_\_

Contractor or Authorized Agent: \_\_\_\_\_

Date: 9/16/19



# Town of Kill Devil Hills

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

SEP 19 2019

## Planning and Inspection Department

<b>BJ2019-166</b>	<b>BUILDING JOINT</b>
<b>PROJECT NAME:</b> SELIMI WALK-IN CLOSET ADDITION	<b>ISSUED:</b> 09/11/2019
<b>SITE ADDRESS:</b> 2035 PORTSMOUTH ST KILL DEVIL HILLS	<b>EXPIRES:</b> 03/09/2020

<b>APPLICANT:</b> EDMOND SELIMI 2035 PORTSMOUTH ST KILL DEVIL HILLS, NC 27948 252-305-5217	<b>OWNER:</b> EDMOND SELIMI 2035 PORTSMOUTH ST KILL DEVIL HILLS, NC 27948 252-305-5217
---	---

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

<b>PIN:</b> 988405080992	<b>Parcel Number:</b> 001109000
<b>Address:</b> 2035 PORTSMOUTH ST KILL DEVIL HILLS	<b>Zoning:</b>
<b>Addition:</b> AVALON BEACH ANNEX 2 & 3	<b>Block:</b> 0 <b>Lot(s):</b> 896
<b>Legal Description:</b>	

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

**PROJECT DESCRIPTION:** CONVERTING OPEN DECK TO WALK-IN CLOSET, 8'X16' ADDITION

**BJ2019-166**

**PROJECT NAME:** SELIMI WALK-IN CLOSET ADDITION  
**SITE ADDRESS:** 2035 PORTSMOUTH ST KILL DEVIL HILLS

**BUILDING JOINT**

**ISSUED:** 09/11/2019

**EXPIRES:** 03/09/2020

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**DETAILS**

**Permit**

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<b>Name</b>	<b>Value</b>
ZONING DISTRICT	RL
FRONT YARD SETBACK	15
REAR YARD SETBACK	20% Depth >30
SIDE YARD SETBACK	6
CAMA PERMIT	N
CAMA EXEMPTION	N
FLOOD ZONE	AE
BASE FLOOD ELEVATION	8.00
SUBSTANTIAL IMPROVEMENT	NO
PURPOSE	Residential Addition
CONSTRUCTION TYPE	V
CONSTRUCTION COST	5000.00
CULVERT	N
DRIVEWAY INVERT 2	N
OCCUPANCY TYPE	One & Two Family Dwelling

---

**REQUIRED INSPECTIONS**

Framing	Final
Rough In	Zoning Final
Insulation	

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

**BJ2019-166**

**PROJECT NAME:** SELIMI WALK-IN CLOSET ADDITION  
**SITE ADDRESS:** 2035 PORTSMOUTH ST KILL DEVIL HILLS

**BUILDING JOINT**

**ISSUED:** 09/11/2019

**EXPIRES:** 03/09/2020

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/local law regulating construction or the performance of construction.

Issued By: \_\_\_\_\_

Contractor or Authorized Agent: \_\_\_\_\_

*Edmond Selimi*

Date: \_\_\_\_\_





**Town of Kill Devil Hills**

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

SEP 19 2019

**Planning and Inspection Department**

<b>BJ2019-163</b> <b>PROJECT NAME:</b> Carrie Quinn <b>SITE ADDRESS:</b> 500 Eden Street W Kill Devil Hills	<b>BUILDING JOINT</b> <b>ISSUED:</b> 09/17/2019 <b>EXPIRES:</b> 03/15/2020
---	--

<b>APPLICANT:</b> OCEAN CONSTRUCTION UNKNOWN UNKNOWN, XX 00000 252-261-5240	<b>OWNER:</b> Quinn, Carrie 20952 N.E. High Desert Lane Bend, OR 97703 541-310-9501
--	--

<b>GENERAL:</b> OCEAN CONSTRUCTION UNKNOWN UNKNOWN, XX 00000 252-261-5240	<b>License:</b> 65696 <b>Expires:</b> 01/01/2020
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**PARCEL:**

PIN: 987520908524	Parcel Number:	
Address: 500 Eden Street W Kill Devil Hills	Zoning:	
Addition:	Block:	Lot(s):
Legal Description: Lots 21 & 22, Block 73, Virginia Dare Shores S/D Lots combined by an Instrument of Combination dated 2/28/19 Book #2286 -- Page #484 (2)		

FEES:	<u>Paid</u>	<u>Due</u>	BUILDING AREA:	
Covered Porch Residential	\$60.00	\$0.00	Open Decks	1 EA
Open Deck Fee	\$150.00	\$0.00	Residential Unheated (.40)	117 Sq. Ft
T-Pole	\$50.00	\$0.00	Residential Heated Space	1852 sq. Ft.
Res. Building Permit Fee	\$1,435.80	\$0.00	(.75)	
<b>Totals :</b>	<b>\$1,695.80</b>	<b>\$0.00</b>	Covered Porches/Decks	80 SQFT
			# of Temporary Poles	1 EA

**PROJECT DESCRIPTION:** Proposed 3 bedroom single family dwelling

**DETAILS**

Town of Kill Devil Hills  
Water Charges  
**PAID**  
Water Tap #: T 23730

**BJ2019-163**

**PROJECT NAME:** Carrie Quinn  
**SITE ADDRESS:** 500 Eden Street W Kill Devil Hills

**BUILDING JOINT**

**ISSUED:** 09/17/2019

**EXPIRES:** 03/15/2020

**REQUIRED INSPECTIONS**

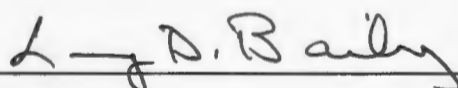
In-Slab Plumbing	Insulation
Slab/Foundation/Piling	Final
Framing	Zoning Final
Rough In	

**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!
- \* Elevation Certificate will be required 21 days after establishment of the reference level in accordance with 151.41(C).
- \* As-built survey will be required prior to Certificate of Occupancy or Certificate of Compliance.
- \* The developer shall be responsible for maintaining erosion and sediment control at the disturbed area.
- \* A final elevation certificate will be required prior to issuance of a Certificate of Occupancy or a Certificate of Compliance in accordance with 151.41(C).
- \* Development must meet all aspects of Chapter 151 Flood Damage Prevention Ordinance including use and elevation.
- \* Per §153.082(B)(1)(c) Mechanical equipment, including HVAC equipment and LP Gas equipment shall not project into a minimum yard setback more than four (4) feet.
- \* Must comply with Wind Borne Debris requirements as defined in NCBC R301.2.1.2 and NCBC 1609.2.
- \* Construction must meet all aspect of Chapter 153 Zoning including lot coverage and setbacks.
- \* Zoning Final Inspection is required.

I hereby certify that I have read and examined this application and know the same to be true and correct. All provisions of Laws and Ordinances governing this type of work will be complied with whether specified herein or not. The granting of a permit does 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: 9/18/19



**Town of Kill Devil Hills**

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

PAID

SEP 24 2019

**Planning and Inspection Department**

<b>BJ2019-172</b> <b>PROJECT NAME:</b> ELROD BATHROOM REMODEL <b>SITE ADDRESS:</b> 1230 MEMORIAL BLVD S KILL DEVIL HILLS	<b>BUILDING JOINT</b> <b>ISSUED:</b> 09/24/2019 <b>EXPIRES:</b> 03/22/2020
--	--

PAID WITH CASH

<b>APPLICANT:</b> ELROD, WILLIAM P 7269 STRATH ROAD RICHMOND, VA 23231	<b>OWNER:</b> ELROD, WILLIAM P 7269 STRATH ROAD RICHMOND, VA 23231
--	--

<b>GENERAL:</b>	Self UNKNOWN UNKNOWN, XX 00000 917-862-9006	<b>License:</b> Unlicensed <b>Expires:</b> 12/31/2020
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<b>PARCEL:</b>			
<b>PIN:</b> 988312969719	<b>Parcel Number:</b> 004726000		
<b>Address:</b> 1230 MEMORIAL BLVD S KILL DEVIL HILLS	<b>Zoning:</b>		
<b>Addition:</b> KILL DEVIL BEACH SEC 1 REVISED	<b>Block:</b> F	<b>Lot(s):</b> 9	
<b>Legal Description:</b>			

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

**PROJECT DESCRIPTION:** REMODEL BATHROOM, INSTALL NEW FIXTURES, REMOVE PRE-FAB SHOWER, INSTALL TILE SHOWER, INSTALL NEW RECEPTACLES

**BJ2019-172****PROJECT NAME:** ELROD BATHROOM REMODEL  
**SITE ADDRESS:** 1230 MEMORIAL BLVD S KILL DEVIL HILLS**BUILDING JOINT**

ISSUED: 09/24/2019

EXPIRES: 03/22/2020

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**DETAILS****Permit**

<b>Name</b>	<b>Value</b>
ZONING DISTRICT	C
FRONT YARD SETBACK	30
REAR YARD SETBACK	20% Depth >30
SIDE YARD SETBACK	8
CAMA PERMIT	N
CAMA EXEMPTION	N
FLOOD ZONE	AE
BASE FLOOD ELEVATION	8.00
SUBSTANTIAL IMPROVEMENT	NO
PURPOSE	Residential Repair/Remodel
CONSTRUCTION TYPE	V
CONSTRUCTION COST	5000.00
CULVERT	N
DRIVEWAY INVERT 2	N
OCCUPANCY TYPE	One & Two Family Dwelling

---

**REQUIRED INSPECTIONS**

Shower Pan	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.

**BJ2019-172**

**PROJECT NAME:** ELROD BATHROOM REMODEL  
**SITE ADDRESS:** 1230 MEMORIAL BLVD S KILL DEVIL HILLS

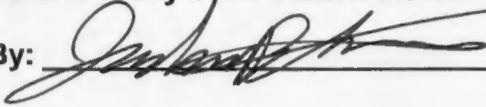
**BUILDING JOINT**

**ISSUED:** 09/24/2019

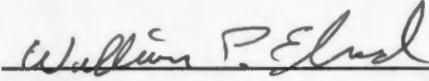
**EXPIRES:** 03/22/2020

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: \_\_\_\_\_

9/24/19



**Town of Kill Devil Hills**

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

SEP 30 2019

**Planning and Inspection Department**

<b>BJ2019-175</b> <b>PROJECT NAME:</b> Chappell addition <b>SITE ADDRESS:</b> 1005 THIRD ST W KILL DEVIL HILLS	<b>BUILDING JOINT</b> <b>ISSUED:</b> 09/27/2019 <b>EXPIRES:</b> 03/25/2020
--	--

<b>APPLICANT:</b> CHAPPELL, CAROL 1005 WEST THIRD ST Kill Devil Hills, NC 27948	<b>OWNER:</b> CHAPPELL, CAROL 1005 WEST THIRD ST Kill Devil Hills, NC 27948
---	---

<b>CONTRACTOR:</b> SANDERLING CONSTRUCTION CORP 2701 North Croatan Hwy. 517 Elm Court Kill Devil Hills, NC 27948 252-449-8366
---

<b>CONTRACTOR:</b> SANDERLING CONSTRUCTION CORP 2701 North Croatan Hwy. 517 Elm Court Kill Devil Hills, NC 27948 252-449-8366	<b>License:</b> 47372 <b>Expires:</b> 12/31/2019
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<b>PARCEL:</b>			
PIN:	988409160238	Parcel Number:	002576000
Address:	1005 THIRD ST W KILL DEVIL HILLS		
Addition:	CROATAN SHORES SUBDIV	Zoning:	
Legal Description:		Block:	16 Lot(s): 3

FEES:	Paid	Due	BUILDING AREA:	
Building Permit Fee - Minimum Fee	\$150.00	\$0.00	Remodel/Renovation	184 SQFT
			Residential Heated Space	85 sq. Ft.
<b>Totals :</b>	<b>\$150.00</b>	<b>\$0.00</b>	(.75)	

**PROJECT DESCRIPTION:** Extend living room onto existing front deck and enclose, add 1 bedroom, no increase in building footprint

**BJ2019-175**

**PROJECT NAME:** Chappell addition  
**SITE ADDRESS:** 1005 THIRD ST W KILL DEVIL HILLS

**BUILDING JOINT**

**ISSUED:** 09/27/2019

**EXPIRES:** 03/25/2020

**DETAILS****Permit**

<b>Name</b>	<b>Value</b>
ZONING DISTRICT	RL
FRONT YARD SETBACK	30
REAR YARD SETBACK	20% Depth >30
SIDE YARD SETBACK	8
HEALTH DEPARTMENT PERMIT #	28998
# PARKING SPACES/BEDROOM	3
CAMA PERMIT	N
CAMA EXEMPTION	N
FLOOD ZONE	AE
BASE FLOOD ELEVATION	8.3
SUBSTANTIAL IMPROVEMENT	NO
PURPOSE	Residential Addition
CONSTRUCTION COST	23000.00
LOT COVERAGE	30.00
SURVEYOR NAME AND NUMBER	J.H. Miller L-4958
ENGINEER AND LICENSE NUMBER	Raymond G. Pate 13018
CULVERT	N
DRIVEWAY INVERT 2	N
OCCUPANCY TYPE	One & Two Family Dwelling

**REQUIRED INSPECTIONS**

Slab/Foundation/Piling	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.

**BJ2019-175**

**PROJECT NAME:** Chappell addition

**SITE ADDRESS:** 1005 THIRD ST W KILL DEVIL HILLS

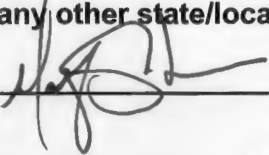
**BUILDING JOINT**

**ISSUED:** 09/27/2019

**EXPIRES:** 03/25/2020

- \* 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.
- \* Provide for window egress requirements for new bedroom as per the 2018 NC Residential Code.

I hereby certify that I have read and examined this application and know the same to be true and correct. All provisions of Laws and Ordinances governing this type of work will be complied with whether specified herein or not. The granting of a permit does 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: 9/30/19





# Town of Kill Devil Hills

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

## Planning and Inspection Department

**BP2019-213**

**PROJECT NAME:** Bermuda Bay dock and walkway  
**SITE ADDRESS:** 0 Ocean Bay Boulevard Kill Devil Hills

**BUILDING**

**ISSUED:** 09/30/2019

**EXPIRES:** 03/28/2020

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

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

**CONTRACTOR:** LYN SMALL, INC.  
113 Ballast Rock Dr.  
Powels Point, NC 27966

**GENERAL BUILDING - INTERMEDIATE:** LYN SMALL, INC.  
113 Ballast Rock Dr.  
Powels Point, NC 27966

**License:** 27960-I  
**Expires:** 12/30/2019

**PARCEL:**

**PIN:** 988309270074

**Parcel  
Number:**

**Address:** 0 Ocean Bay Boulevard Kill Devil Hills

**Zoning:**

**Addition:**

**Block:**

**Lot(s):**

**Legal Description:** Wetlands Conservation Easement

<b>FEES:</b>	<b>Paid</b>	<b>Due</b>
Pier/Bulkhead	\$150.00	\$0.00
<b>Totals :</b>	<b>\$150.00</b>	<b>\$0.00</b>

PAID

**PROJECT DESCRIPTION:** 280' walkway and kayak pier launch

SEP 30 2019

**BP2019-213****PROJECT NAME:** Bermuda Bay dock and walkway  
**SITE ADDRESS:** 0 Ocean Bay Boulevard Kill Devil Hills**BUILDING****ISSUED:** 09/30/2019**EXPIRES:** 03/28/2020**DETAILS****Permit**

Name	Value
CAMA PERMIT	Y
CAMA EXEMPTION	N
ZONING DISTRICT	G&I Private
PURPOSE	Residential Accessory
FLOOD ZONE	AE
BASE FLOOD ELEVATION	8.3
FINAL ELEVATION CERTIFICATE	N
CONSTRUCTION COST	100000.00
CONSTRUCTION TYPE	V

**REQUIRED INSPECTIONS**

Zoning Final

Slab/Foundation/Piling

Final

**CONDITIONS**

- \* This permit becomes null and void if work or construction authorized is not commenced within 6 months or if construction or work is suspended for a period of 12 months at any time after work has started.
- \* As-built survey will be required prior to Certificate of Occupancy or Certificate of Compliance.
- \* Must comply with Wind Borne Debris requirements as defined in NCBC R301.2.1.2 and NCBC 1609.2.
- \* The developer shall be responsible for maintaining erosion and sediment control at the disturbed area.

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

Issued By: \_\_\_\_\_

Contractor or Authorized Agent: \_\_\_\_\_

Date: \_\_\_\_\_

9-30-19



**Town of Kill Devil Hills**

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

PAID  
SEP 24 2019

**Planning and Inspection Department**

<b>BP2019-210</b>	PAID WITH CASH	<b>BUILDING</b>
<b>PROJECT NAME:</b> TURRISI DECK AND STAIR		<b>ISSUED:</b> 09/24/2019
<b>SITE ADDRESS:</b> 303 FRESH POND DR E KILL DEVIL HILLS		<b>EXPIRES:</b> 03/22/2020

**APPLICANT:** TURRISI, THOMAS J  
3211 BARBARA LN  
FAIRFAX, VA 22031

**OWNER:** TURRISI, THOMAS J  
3211 BARBARA LN  
FAIRFAX, VA 22031

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

**License:** Unlicensed  
**Expires:** 12/31/2020

**PARCEL:**

**PIN:** 989313143263

**Parcel Number:** 004941000

**Address:** 303 FRESH POND DR E KILL DEVIL HILLS

**Addition:** LAKE DRIVE DEVELOPMENT SEC 2

**Zoning:**  
**Block:** 0 **Lot(s):** 8

**Legal Description:**

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

**PROJECT DESCRIPTION:** REPLACE DECKING AND RAILINGS, REBUILD STAIR, JOISTS AS NEEDED

**BP2019-210****PROJECT NAME:** TURRISI DECK AND STAIR  
**SITE ADDRESS:** 303 FRESH POND DR E KILL DEVIL HILLS**BUILDING****ISSUED:** 09/24/2019**EXPIRES:** 03/22/2020**DETAILS****Permit**

<b>Name</b>	<b>Value</b>
CAMA PERMIT	N
CAMA EXEMPTION	N
ZONING DISTRICT	C
PURPOSE	Residential Repair/Remodel
FRONT YARD SETBACK	30
SIDE YARD SETBACK	8
REAR YARD SETBACK	20% Depth >30
FLOOD ZONE	AE
BASE FLOOD ELEVATION	10.00
FINAL ELEVATION CERTIFICATE	N
CONSTRUCTION COST	1200.00
CONSTRUCTION TYPE	V
OCCUPANCY TYPE	One & Two Family Dwelling

**REQUIRED INSPECTIONS**

Zoning Final

Final

**CONDITIONS**

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

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

Issued By: Contractor or Authorized Agent: Date: 9-24-19



**Town of Kill Devil Hills**

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

**PAID**

SEP 24 2019

**Planning and Inspection Department**

TOWN OF  
KILL DEVIL HILLS

<b>BP2019-209</b> PROJECT NAME: Sarah Fletcher- Dormers SITE ADDRESS: 805 VA DARE TRL N KILL DEVIL HILLS	<b>BUILDING</b> ISSUED: 09/20/2019 EXPIRES: 03/18/2020
--	--

PARENT PERMIT #: BJ2019-066

**APPLICANT:** Fletcher, Sarah  
206 Hinton Terrace  
Newport News, VA 23601

**OWNER:** Fletcher, Sarah  
206 Hinton Terrace  
Newport News, VA 23601

**CONTRACTOR:** JENNINGS, DONALD  
P. O. Box 1102  
nags head, nc 27959  
252-207-4936

**RESIDENTIAL - INTERMEDIATE:** JENNINGS, DONALD  
P. O. Box 1102  
nags head, nc 27959  
252-207-4936

**License:** 32637  
**Expires:** 01/01/2020

**PARCEL:**

**PIN:** 988416725795

**Parcel Number:** 003696000

**Address:** 805 VA DARE TRL N KILL DEVIL HILLS

**Addition:** KITTY HAWK SHORES - REVISED

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

**Legal Description:**

<b>FEES:</b>	<b>Paid</b>	<b>Due</b>	<b>BUILDING AREA:</b>	
Res. Building Permit Fee	\$186.00	\$0.00	Residential Heated Space (.75)	248 sq. Ft.
<b>Totals :</b>	<b>\$186.00</b>	<b>\$0.00</b>		

**PROJECT DESCRIPTION:** Add 2 dormers and raise ceiling for additional living space.

**BP2019-209**

**PROJECT NAME:** Sarah Fletcher- Dormers

**SITE ADDRESS:** 805 VA DARE TRL N KILL DEVIL HILLS

**BUILDING**

**ISSUED:** 09/20/2019

**EXPIRES:** 03/18/2020

**DETAILS**

**Permit**

Name	Value
CAMA PERMIT	N
CAMA EXEMPTION	N
ZONING DISTRICT	OIR
PURPOSE	Residential Repair/Remodel
FLOOD ZONE	VE
FINAL ELEVATION CERTIFICATE	N
CONSTRUCTION COST	25000.00

**REQUIRED INSPECTIONS**

Zoning Final

Final

**CONDITIONS**

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

Issued By: \_\_\_\_\_

Contractor or Authorized Agent: \_\_\_\_\_

Date: \_\_\_\_\_

9-24-19



**Town of Kill Devil Hills**

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

PAID

SEP 25 2019

**Planning and Inspection Department**

**BP2019-211**

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

**BUILDING**

**ISSUED:** 09/25/2019

**EXPIRES:** 03/23/2020

**PARENT PERMIT #:** BP2019-149

**APPLICANT:** EDWARD HOLLOWELL  
3226 CASTELOW RD  
COFIELD, NC 27922  
252-209-2486

**OWNER:** EDWARD HOLLOWELL  
3226 CASTELOW RD  
COFIELD, NC 27922  
252-209-2486

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

**License:** Unlicensed  
**Expires:** 12/31/2020

**PARCEL:**

**PIN:** 988409274285

**Parcel Number:** 002469000

**Address:** 404 THIRD ST W KILL DEVIL HILLS

**Zoning:**

**Addition:** SEA HOLLY RIDGE

**Block:** H **Lot(s):** 16

**Legal Description:**

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

**PROJECT DESCRIPTION:** Add porch roof over front deck

**BP2019-211**PROJECT NAME: HOLLOWELL ROOF AND WINDOWS  
SITE ADDRESS: 404 THIRD ST W KILL DEVIL HILLS**BUILDING**

ISSUED: 09/25/2019

EXPIRES: 03/23/2020

**DETAILS****Permit**

Name	Value
CAMA PERMIT	N
CAMA EXEMPTION	N
ZONING DISTRICT	RL
PURPOSE	Residential Repair/Remodel
FRONT YARD SETBACK	30
SIDE YARD SETBACK	8
REAR YARD SETBACK	20% Depth >30
FLOOD ZONE	X
FINAL ELEVATION CERTIFICATE	N
CONSTRUCTION COST	2400.00
CONSTRUCTION TYPE	V
OCCUPANCY TYPE	One & Two Family Dwelling

**REQUIRED INSPECTIONS**

Zoning Final

Final

**CONDITIONS**

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

Issued By: \_\_\_\_\_

Contractor or Authorized Agent: Sandra C. HollowellDate: 9/25/19





# Town of Kill Devil Hills

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

SEP 26 2019

## Planning and Inspection Department

### BP2019-212

**PROJECT NAME:** SELIMI 12'X4' DECK ADDITION  
**SITE ADDRESS:** 2035 PORTSMOUTH ST KILL DEVIL HILLS

### BUILDING

**ISSUED:** 09/26/2019

**EXPIRES:** 03/24/2020

**APPLICANT:** EDMOND SELIMI  
2035 PORTSMOUTH ST  
KILL DEVIL HILLS, NC 27948  
252-305-5217

**OWNER:** EDMOND SELIMI  
2035 PORTSMOUTH ST  
KILL DEVIL HILLS, NC 27948  
252-305-5217

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

**License:** Unlicensed  
**Expires:** 12/31/2020

### PARCEL:

**PIN:** 988405080992

**Parcel Number:** 001109000

**Address:** 2035 PORTSMOUTH ST KILL DEVIL HILLS

**Addition:** AVALON BEACH ANNEX 2 & 3

**Zoning:**

**Block:** 0 **Lot(s):** 896

**Legal Description:**

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

**PROJECT DESCRIPTION:** EXTEND THIRD FLOOR DECK 12'X4'

**BP2019-212**

**PROJECT NAME:** SELIMI 12'X4' DECK ADDITION  
**SITE ADDRESS:** 2035 PORTSMOUTH ST KILL DEVIL HILLS

**BUILDING****ISSUED:** 09/26/2019**EXPIRES:** 03/24/2020**DETAILS****Permit**

<b>Name</b>	<b>Value</b>
CAMA PERMIT	N
CAMA EXEMPTION	N
ZONING DISTRICT	RL
PURPOSE	Residential Addition
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	N
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.
- \* Construction must meet all aspect of Chapter 153 Zoning including lot coverage and setbacks.
- \* Zoning Final Inspection is required.

**BP2019-212**

PROJECT NAME: SELIMI 12'X4' DECK ADDITION  
SITE ADDRESS: 2035 PORTSMOUTH ST KILL DEVIL HILLS

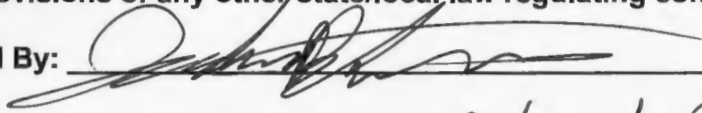
**BUILDING**

ISSUED: 09/26/2019

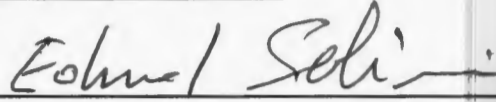
EXPIRES: 03/24/2020

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: \_\_\_\_\_



Contractor or Authorized Agent: \_\_\_\_\_



Date: \_\_\_\_\_

09-26-19



**Town of Kill Devil Hills**

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

SEP 27 2019

**Planning and Inspection Department**

<b>BP2019-204</b>	<b>BUILDING</b>
<b>PROJECT NAME:</b> CHILLI PEPPERS ROOF REPAIR	<b>ISSUED:</b> 09/17/2019
<b>SITE ADDRESS:</b> 3001 CROATAN HWY N KILL DEVIL HILLS	<b>EXPIRES:</b> 03/15/2020

<b>APPLICANT:</b> CHILI PEPPERS P O BOX 429 KITTY HAWK, NC 27949	<b>OWNER:</b> CHILI PEPPERS P O BOX 429 KITTY HAWK, NC 27949
--	--

<b>GENERAL:</b>	Self UNKNOWN UNKNOWN, XX 00000 917-862-9006	<b>License:</b> Unlicensed <b>Expires:</b> 12/31/2020
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<b>PARCEL:</b>			
<b>PIN:</b>	988513028956	<b>Parcel Number:</b>	002996000
<b>Address:</b>	3001 CROATAN HWY N KILL DEVIL HILLS		
<b>Addition:</b>	VIRGINIA DARE SHORES	<b>Zoning:</b>	
<b>Legal Description:</b>		<b>Block:</b>	16 <b>Lot(s):</b> 25-30 PT 31

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

**PROJECT DESCRIPTION:** REROOF NORTH SECTION OF ROOF

**BP2019-204**

**PROJECT NAME:** CHILLI PEPPERS ROOF REPAIR  
**SITE ADDRESS:** 3001 CROATAN HWY N KILL DEVIL HILLS

**BUILDING**

**ISSUED:** 09/17/2019

**EXPIRES:** 03/15/2020

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**DETAILS**

**Permit**

---

<b>Name</b>	<b>Value</b>
CAMA PERMIT	N
CAMA EXEMPTION	N
ZONING DISTRICT	C
PURPOSE	Commercial Repair/Remodel
FRONT YARD SETBACK	30
SIDE YARD SETBACK	15
REAR YARD SETBACK	20% Depth >30
STREET SIDE SETBACK	15
FLOOD ZONE	AE
BASE FLOOD ELEVATION	9.00
FINAL ELEVATION CERTIFICATE	N
CONSTRUCTION COST	3500.00
CONSTRUCTION TYPE	V
OCCUPANCY TYPE	Assembly

---

**REQUIRED INSPECTIONS**

Zoning Final

Final

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**CONDITIONS**

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

**BP2019-204**

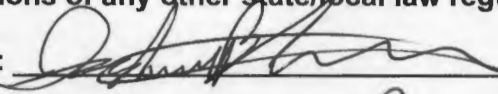
**PROJECT NAME:** CHILLI PEPPERS ROOF REPAIR  
**SITE ADDRESS:** 3001 CROATAN HWY N KILL DEVIL HILLS

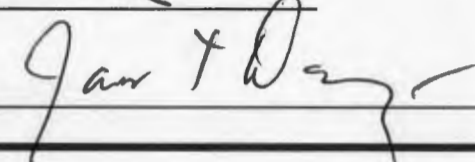
**BUILDING**

**ISSUED:** 09/17/2019

**EXPIRES:** 03/15/2020

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: 9/27/19



**Town of Kill Devil Hills**

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

SEP - 3 2019

**Planning and Inspection Department**

<b>BP2019-199</b> <b>PROJECT NAME:</b> Lions Club Shed Replacement <b>SITE ADDRESS:</b> 2706 CROATAN HWY N KILL DEVIL HILLS	<b>BUILDING</b> <b>ISSUED:</b> 08/30/2019 <b>EXPIRES:</b> 02/26/2020
---	--

<b>APPLICANT:</b> FIRST FLIGHT LIONS CLUB P O BOX 2133 KILL DEVIL HILLS, NC 27948	<b>OWNER:</b> FIRST FLIGHT LIONS CLUB P O BOX 2133 KILL DEVIL HILLS, NC 27948
---	---

<b>CONTRACTOR:</b> White, Owen 808 Swan Street Kill Devil Hills, NC 27948 919-538-6805	
---	--

<b>GENERAL:</b>	Self UNKNOWN UNKNOWN, XX 00000 917-862-9006	<b>License:</b> Unlicensed <b>Expires:</b> 12/31/2020
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<b>PARCEL:</b>			
PIN:	988517029159	Parcel Number:	002999000
Address:	2706 CROATAN HWY N KILL DEVIL HILLS		
Addition:	VIRGINIA DARE SHORES	Zoning:	
Legal Description:		Block:	19      Lot(s): 1-3 PT 4

FEES:	Paid	Due	BUILDING AREA:
Accessory Commercial (MIN)	\$150.00	\$0.00	Commercial Accessory Structure
<b>Totals :</b>	<b>\$150.00</b>	<b>\$0.00</b>	192 Sq. Ft.

**PROJECT DESCRIPTION:** replacing 12'x16' shed destroyed by fire (no porch)

**BP2019-199**

**PROJECT NAME:** Lions Club Shed Replacement  
**SITE ADDRESS:** 2706 CROATAN HWY N KILL DEVIL HILLS

**BUILDING****ISSUED:** 08/30/2019**EXPIRES:** 02/26/2020**DETAILS****Permit**

<b>Name</b>	<b>Value</b>
CAMA PERMIT	N
CAMA EXEMPTION	N
ZONING DISTRICT	C
PURPOSE	Commercial Accessory
FRONT YARD SETBACK	30
SIDE YARD SETBACK	8
REAR YARD SETBACK	20% Depth >30
STREET SIDE SETBACK	15
FLOOD ZONE	AE
BASE FLOOD ELEVATION	9.0
FINAL ELEVATION CERTIFICATE	N
CONSTRUCTION COST	8000.00
LOT COVERAGE	75.80
ACCESSORY STRUCTURE (SQFT)	192
SURVEYOR NAME AND NUMBER	M Douglas Styons L- 3227
OCCUPANCY TYPE	Storage

**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.

\* 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).

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

\* Zoning Final Inspection is required.



**BP2019-199**

**PROJECT NAME:** Lions Club Shed Replacement  
**SITE ADDRESS:** 2706 CROATAN HWY N KILL DEVIL HILLS

**BUILDING**

**ISSUED:** 08/30/2019

**EXPIRES:** 02/26/2020

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: 9/3/19



**Town of Kill Devil Hills**

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

PAID  
SEP - 4 2019  
TOWN OF  
KILL DEVIL HILLS

**Planning and Inspection Department**

<b>BP2019-200</b>	<b>BUILDING</b>
<b>PROJECT NAME:</b> Fanto Deck Repair	<b>ISSUED:</b> 09/04/2019
<b>SITE ADDRESS:</b> 1100 FIFTH ST W KILL DEVIL HILLS	<b>EXPIRES:</b> 03/02/2020

<b>APPLICANT:</b> FANTO, KELLY 1100 Fifth Street W Kill Devil Hills, NC 27948	<b>OWNER:</b> FANTO, KELLY 1100 Fifth Street W Kill Devil Hills, NC 27948
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**CONTRACTOR:** Morales, Miguel  
513 Burns Drive  
Kill Devil Hills, NC 27948

<b>UNLICENSED - REMODELING:</b> Morales, Miguel 513 Burns Drive Kill Devil Hills, NC 27948	<b>License:</b> 12345 <b>Expires:</b>
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**PARCEL:**

<b>PIN:</b> 988405072779	<b>Parcel Number:</b> 002153000
<b>Address:</b> 1100 FIFTH ST W KILL DEVIL HILLS	<b>Zoning:</b>
<b>Addition:</b> WRIGHT'S SHORES	<b>Block:</b> 0 <b>Lot(s):</b> 47
<b>Legal Description:</b>	

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

**PROJECT DESCRIPTION:** remodel existing decks and both sets of side stairs

**BP2019-200**

**PROJECT NAME:** Fanto Deck Repair  
**SITE ADDRESS:** 1100 FIFTH ST W KILL DEVIL HILLS

**BUILDING**

**ISSUED:** 09/04/2019

**EXPIRES:** 03/02/2020

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**DETAILS**

**Permit**

<b>Name</b>	<b>Value</b>
CAMA PERMIT	N
CAMA EXEMPTION	N
ZONING DISTRICT	RL
PURPOSE	Residential Repair/Remodel
FRONT YARD SETBACK	30
SIDE YARD SETBACK	8
REAR YARD SETBACK	20% Depth >30
FLOOD ZONE	AE
BASE FLOOD ELEVATION	8.3
FINAL ELEVATION CERTIFICATE	N
CONSTRUCTION COST	4200.00
OCCUPANCY TYPE	One & Two Family Dwelling

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**REQUIRED INSPECTIONS**

Slab/Foundation/Piling	Final
Zoning Final	

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**CONDITIONS**

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

**BP2019-200**

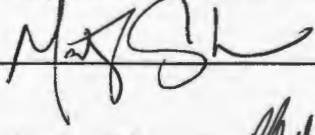
**PROJECT NAME:** Fanto Deck Repair  
**SITE ADDRESS:** 1100 FIFTH ST W KILL DEVIL HILLS

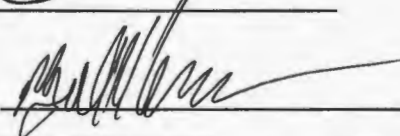
**BUILDING**

**ISSUED:** 09/04/2019

**EXPIRES:** 03/02/2020

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/local law regulating construction or the performance of construction.

Issued By: 

Contractor or Authorized Agent:  Date: 9/4/2019



**Town of Kill Devil Hills**

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

SEP 11 2019

**Planning and Inspection Department**

<b>BP2019-195</b> <b>PROJECT NAME:</b> LaForge Stair and deck board Replacement <b>SITE ADDRESS:</b> 404 CLAM SHELL DR KILL DEVIL HILLS	<b>BUILDING</b> <b>ISSUED:</b> 08/28/2019 <b>EXPIRES:</b> 02/24/2020
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<b>APPLICANT:</b> LaForge, Robert 2707 Misty Point Road CHESAPEAKE, VA 23323	<b>OWNER:</b> LaForge, Robert 2707 Misty Point Road CHESAPEAKE, VA 23323
<b>CONTRACTOR:</b> MACKO CONSTRUCTION (T/A, SMS CONSTRUCTION INC.) P.O. Box 3689 Kill Devil Hills, NC 27948 252-480-6411	
<b>UNLIMITED, GENERAL BUILDING:</b>	MACKO CONSTRUCTION (T/A, SMS CONSTRUCTION INC.) P.O. Box 3689 Kill Devil Hills, NC 27948 252-480-6411
	<b>License:</b> 62049 <b>Expires:</b> 12/31/2019

**PARCEL:**

PIN: 988405272706	Parcel Number: 002409000
Address: 404 CLAM SHELL DR KILL DEVIL HILLS	
Addition: SEA HOLLY RIDGE	Zoning: Block: A Lot(s): 28
Legal Description:	

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

**PROJECT DESCRIPTION:** Replace existing decks with trex decking, replace stairs and deck rails

**BP2019-195**

**PROJECT NAME:** LaForge Stair and deck board Replacement  
**SITE ADDRESS:** 404 CLAM SHELL DR KILL DEVIL HILLS

**BUILDING**

**ISSUED:** 08/28/2019

**EXPIRES:** 02/24/2020

**DETAILS****Permit**

<b>Name</b>	<b>Value</b>
CAMA PERMIT	N
CAMA EXEMPTION	N
ZONING DISTRICT	RL
PURPOSE	Residential Repair/Remodel
FRONT YARD SETBACK	30
SIDE YARD SETBACK	8
REAR YARD SETBACK	20% Depth >30
FLOOD ZONE	X
FINAL ELEVATION CERTIFICATE	N
CONSTRUCTION COST	16875.00
SURVEYOR NAME AND NUMBER	Kirk R. Foreman L-2801
OCCUPANCY TYPE	One & Two Family Dwelling

**REQUIRED INSPECTIONS**

Zoning Final

Final

**CONDITIONS**

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

**BP2019-195**

**PROJECT NAME:** LaForge Stair and deck board Replacement  
**SITE ADDRESS:** 404 CLAM SHELL DR 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 the same to be true and correct. All provisions of Laws and Ordinances governing this type of work will be complied with whether specified herein or not. The granting of a permit does not presume to give authority to violate or cancel the provisions of any other state/local law regulating construction or the performance of construction.

Issued By: \_\_\_\_\_

Contractor or Authorized Agent: \_\_\_\_\_

Date: \_\_\_\_\_



**Town of Kill Devil Hills**

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

SEP 13 2019

**Planning and Inspection Department**

<b>BP2019-202</b>	<b>BUILDING</b>
<b>PROJECT NAME:</b> ORWIG DECKING, RAILING, AND STAIRS	<b>ISSUED:</b> 09/13/2019
<b>SITE ADDRESS:</b> 2048 EDENTON ST ST KILL DEVIL HILLS	<b>EXPIRES:</b> 03/11/2020

<b>APPLICANT:</b> JOSH ORWIG 1738 48TH AVE SAN FRANCISCO, CA 94122 757-553-7196	<b>OWNER:</b> JOSH ORWIG 1738 48TH AVE SAN FRANCISCO, CA 94122 757-553-7196
--	--

<b>GENERAL, UNLICENSED:</b>	FIVE STAR CONSTRUCTION 1004 INDIAN DR Kill Devil Hills, NC 27948 252-489-1252	<b>License:</b> XXX <b>Expires:</b>
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<b>PARCEL:</b>			
<b>PIN:</b>	987408995047	<b>Parcel Number:</b>	001252000
<b>Address:</b>	2048 EDENTON ST ST KILL DEVIL HILLS		
<b>Addition:</b>	AVALON BEACH ANNEX 2 & 3	<b>Zoning:</b>	
<b>Legal Description:</b>		<b>Block:</b>	0 <b>Lot(s):</b> 801

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

**PROJECT DESCRIPTION:** REBUILD STAIR, RAILING, AND DECKING



**BP2019-202**

**PROJECT NAME:** ORWIG DECKING, RAILING, AND STAIRS  
**SITE ADDRESS:** 2048 EDENTON ST ST KILL DEVIL HILLS

**BUILDING**

**ISSUED:** 09/13/2019

**EXPIRES:** 03/11/2020

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**DETAILS**

**Permit**

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<b>Name</b>	<b>Value</b>
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	N
LOT COVERAGE	5500.00
CONSTRUCTION TYPE	V
OCCUPANCY TYPE	One & Two Family Dwelling

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**REQUIRED INSPECTIONS**

Zoning Final

Final

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**CONDITIONS**

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

**BP2019-202**

**PROJECT NAME:** ORWIG DECKING, RAILING, AND STAIRS  
**SITE ADDRESS:** 2048 EDENTON ST ST KILL DEVIL HILLS

**BUILDING**

**ISSUED:** 09/13/2019

**EXPIRES:** 03/11/2020

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: \_\_\_\_\_

9-13-19



# Town of Kill Devil Hills

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

SEP 17 2019

## Planning and Inspection Department

<b>BP2019-203</b> PROJECT NAME: Sundune village condos deck repair SITE ADDRESS: 200 MARTIN ST E KILL DEVIL HILLS	<b>BUILDING</b> ISSUED: 09/17/2019 EXPIRES: 03/15/2020
---	--

<b>APPLICANT:</b> Sun Dune Village Association P. O. Box 2018 NORFOLK, VA 23501 252-441-8857	<b>OWNER:</b> Sun Dune Village Association P. O. Box 2018 NORFOLK, VA 23501 252-441-8857
---	---

**CONTRACTOR:** JETTY CONSTRUCTION  
1002 WEST Memorial BLVD  
Kill Devil Hills, NC 27948  
252-715-8025

<b>BUILDING LIMITED:</b>	JETTY CONSTRUCTION 1002 WEST Memorial BLVD Kill Devil Hills, NC 27948 252-715-8025	<b>License:</b> 79683 <b>Expires:</b> 01/14/2020
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**PARCEL:**

<b>PIN:</b> 98830897368900	<b>Parcel Number:</b> 004302999
<b>Address:</b> 200 MARTIN ST E KILL DEVIL HILLS	<b>Zoning:</b>
<b>Addition:</b>	<b>Block:</b> 15 <b>Lot(s):</b> COMM. PRO. LOTS 6-1

**Legal Description:**

FEES:	Paid	Due	BUILDING AREA:
Covered Porch Residential	\$1,922.25	\$0.00	Covered Porches Decks 2563 SQFT
<b>Totals :</b>	<b>\$1,922.25</b>	<b>\$0.00</b>	

**PROJECT DESCRIPTION:** remove and replace decks, add pilings, remove and replace sliders and windows to same previous size

**BP2019-203**

**PROJECT NAME:** Sundune village condos deck repair  
**SITE ADDRESS:** 200 MARTIN ST E KILL DEVIL HILLS

**BUILDING****ISSUED:** 09/17/2019**EXPIRES:** 03/15/2020**DETAILS****Permit**

<b>Name</b>	<b>Value</b>
CAMA PERMIT	N
CAMA EXEMPTION	N
ZONING DISTRICT	C
PURPOSE	Residential Repair/Remodel
FRONT YARD SETBACK	30
SIDE YARD SETBACK	10
STREET SIDE SETBACK	15
FLOOD ZONE	AE
BASE FLOOD ELEVATION	8.3
FINAL ELEVATION CERTIFICATE	N
CONSTRUCTION COST	412415.40
COVERED PORCHES/DECKS (SQFT)	2563
SURVEYOR NAME AND NUMBER	William G. Yetzer
OCCUPANCY TYPE	Residential

**REQUIRED INSPECTIONS**

Slab/Foundation/Piling	Final
Zoning Final	

**CONDITIONS**

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

**BP2019-203**

**PROJECT NAME:** Sundune village condos deck repair  
**SITE ADDRESS:** 200 MARTIN ST E KILL DEVIL HILLS

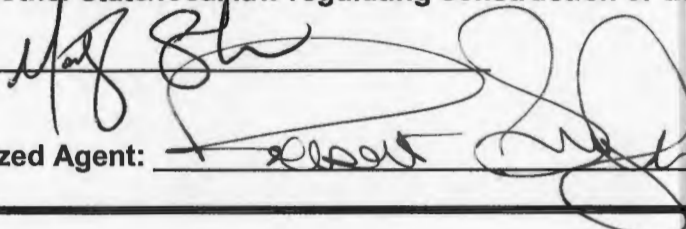
**BUILDING**

**ISSUED:** 09/17/2019

**EXPIRES:** 03/15/2020

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: \_\_\_\_\_

9-17-19



**Town of Kill Devil Hills**

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

SEP 19 2019

**Planning and Inspection Department**

<b>BP2019-206</b> PROJECT NAME: Hall Stair remodel SITE ADDRESS: 1807 BAY DR KILL DEVIL HILLS	<b>BUILDING</b> ISSUED: 09/17/2019 EXPIRES: 03/15/2020
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<b>APPLICANT:</b> Hall, Ryan 1807 Bay Drive Kill Devil Hills, NC 27948	<b>OWNER:</b> Hall, Ryan 1807 Bay Drive Kill Devil Hills, NC 27948
--	--

<b>CONTRACTOR:</b> Classic Construction 92 Baum Bay Kill Devil Hills, NC 27948 252-216-0200	
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<b>UNLICENSED - REMODELING:</b> Classic Construction 92 Baum Bay Kill Devil Hills, NC 27948 252-216-0200	<b>License:</b> 12345 <b>Expires:</b>
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<b>PARCEL:</b>			
<b>PIN:</b> 988409063248	<b>Parcel Number:</b> 002524008		
<b>Address:</b> 1807 BAY DR KILL DEVIL HILLS			
<b>Addition:</b> CROATAN SHORES INC SEC 1	<b>Zoning:</b>	<b>Block:</b> 19	<b>Lot(s):</b> 8
<b>Legal Description:</b>			

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

**PROJECT DESCRIPTION:** Replace front South East stairs to same footprint

**BP2019-206**

**PROJECT NAME:** Hall Stair remodel  
**SITE ADDRESS:** 1807 BAY DR KILL DEVIL HILLS

**BUILDING****ISSUED:** 09/17/2019**EXPIRES:** 03/15/2020

---

**DETAILS****Permit**

<b>Name</b>	<b>Value</b>
CAMA PERMIT	N
CAMA EXEMPTION	N
ZONING DISTRICT	RL
PURPOSE	Residential Repair/Remodel
FRONT YARD SETBACK	30
SIDE YARD SETBACK	8
REAR YARD SETBACK	20% Depth >30
FLOOD ZONE	AE
BASE FLOOD ELEVATION	8.3
FINAL ELEVATION CERTIFICATE	N
CONSTRUCTION COST	2050.00
SURVEYOR NAME AND NUMBER	Wesley M. Meekins L- 1465
OCCUPANCY TYPE	One & Two Family Dwelling

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**REQUIRED INSPECTIONS**

Slab/Foundation/Piling	Final
Zoning Final	

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**CONDITIONS**

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

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

**BP2019-206**

PROJECT NAME: Hall Stair remodel  
SITE ADDRESS: 1807 BAY DR KILL DEVIL HILLS

**BUILDING**

ISSUED: 09/17/2019

EXPIRES: 03/15/2020

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: \_\_\_\_\_





# Town of Kill Devil Hills

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

SEP 20 2019

## Planning and Inspection Department

<b>BP2019-208</b>	<b>BUILDING</b>
<b>PROJECT NAME:</b>	<b>ISSUED: 09/20/2019</b>
<b>SITE ADDRESS: 715 FIRST ST W KILL DEVIL HILLS</b>	<b>EXPIRES: 03/18/2020</b>

<b>APPLICANT:</b> Mooney, William 715 First Street W Kill Devil Hills, NC 27948	<b>OWNER:</b> Mooney, William 715 First Street W Kill Devil Hills, NC 27948
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<b>BUILDING LIMITED:</b> JES Construction, LLC 1741 Corporate Landing Parkway VIRGINIA BEACH, VA 23454	<b>License:</b> 69678 <b>Expires:</b>
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<b>PARCEL:</b>			
<b>PIN:</b> 988413146001	<b>Parcel Number:</b> 027546084		
<b>Address:</b> 715 FIRST ST W KILL DEVIL HILLS			
<b>Addition:</b>	<b>Zoning:</b>	<b>Block:</b> 0	<b>Lot(s):</b> 84
<b>Legal Description:</b>			

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

**PROJECT DESCRIPTION:** Stabilize the existing foundation system. Permit does not include encapsulation of crawl space.

**BP2019-208**

**PROJECT NAME:**

**SITE ADDRESS:** 715 FIRST ST W KILL DEVIL HILLS

**BUILDING**

**ISSUED:** 09/20/2019

**EXPIRES:** 03/18/2020

**DETAILS**

**Permit**

<b>Name</b>	<b>Value</b>
CAMA PERMIT	N
CAMA EXEMPTION	N
ZONING DISTRICT	RL
PURPOSE	Residential Repair/Remodel
FLOOD ZONE	AE
BASE FLOOD ELEVATION	8
FINAL ELEVATION CERTIFICATE	N
CONSTRUCTION COST	22500.00
CONSTRUCTION TYPE	V
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.

\* This permit does not include encapsulation of crawl space below base flood 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: 

Contractor or Authorized Agent: 

Date: 9/20/19



**Town of Kill Devil Hills**

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

PAID  
SEP 20 2019

**Planning and Inspection Department**

<b>BP2019-207</b>	<b>BUILDING</b>
<b>PROJECT NAME:</b> Ferebee Piling Sister	<b>ISSUED:</b> 09/18/2019
<b>SITE ADDRESS:</b> 203 VA DARE TRL S KILL DEVIL HILLS	<b>EXPIRES:</b> 03/16/2020

<b>APPLICANT:</b> FEREBEE, DIANE H P O BOX 110 SHAWBORO, NC 27973 202-1392	<b>OWNER:</b> FEREBEE, DIANE H P O BOX 110 SHAWBORO, NC 27973 202-1392
---	---

**CONTRACTOR:** Ryan White  
706 Cedar Dr.  
Kill Devil Hills, NC 27948  
252-312-8646

<b>BUILDER:</b>	Ryan White 706 Cedar Dr. Kill Devil Hills, NC 27948 252-312-8646	<b>License:</b> unlic <b>Expires:</b>
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**PARCEL:**

<b>PIN:</b> 988420805559	<b>Parcel Number:</b> 003667000
<b>Address:</b> 203 VA DARE TRL S KILL DEVIL HILLS	
<b>Addition:</b> KITTY HAWK SHORES - REVISED	<b>Zoning:</b>
<b>Legal Description:</b>	<b>Block:</b> 1 <b>Lot(s):</b> C

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

**PROJECT DESCRIPTION:** Sister new 8x8 piling to exterior existing 6x6

**BP2019-207**

PROJECT NAME: Ferebee Piling Sister

SITE ADDRESS: 203 VA DARE TRL S KILL DEVIL HILLS

**BUILDING**

ISSUED: 09/18/2019

EXPIRES: 03/16/2020

**DETAILS****Permit**

Name	Value
CAMA PERMIT	N
CAMA EXEMPTION	N
ZONING DISTRICT	OIR
PURPOSE	Residential Repair/Remodel
FRONT YARD SETBACK	30
SIDE YARD SETBACK	10
REAR YARD SETBACK	CAMA
FLOOD ZONE	VE
BASE FLOOD ELEVATION	11.0
FINAL ELEVATION CERTIFICATE	N
CONSTRUCTION COST	15800.00
LOT COVERAGE	48.64
SURVEYOR NAME AND NUMBER	William S. Jones L-2532
OCCUPANCY TYPE	One & Two Family Dwelling

**REQUIRED INSPECTIONS**

Zoning Final

Final

**CONDITIONS**

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

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

**BP2019-207**

**PROJECT NAME:** Ferebee Piling Sister

**SITE ADDRESS:** 203 VA DARE TRL S KILL DEVIL HILLS

**BUILDING**

**ISSUED:** 09/18/2019

**EXPIRES:** 03/16/2020

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: \_\_\_\_\_



**Town of Kill Devil Hills**

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

PAID

SEP 23 2019

**Planning and Inspection Department**

<b>BP2019-205</b>	<b>BUILDING</b>
<b>PROJECT NAME:</b> Dematteo Deck addition	<b>ISSUED:</b> 09/17/2019
<b>SITE ADDRESS:</b> 115 AVALON DR E KILL DEVIL HILLS	<b>EXPIRES:</b> 03/15/2020

<b>APPLICANT:</b> JOSEPH DEMATTEO 24534 BOWS AND ARROWS RD Zuni, VA 23898 757-876-5187	<b>OWNER:</b> JOSEPH DEMATTEO 24534 BOWS AND ARROWS RD Zuni, VA 23898 757-876-5187
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<b>CONTRACTOR:</b> ERIC PRUITT UNKNOWN UNKNOWN, XX 00000
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<b>GENERAL:</b>	PRUITT, ERIC GLADSTONE 2055 New Bern Street Kill Devil Hills, NC 27948	<b>License:</b> 21008 <b>Expires:</b> 01/01/2020
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<b>PARCEL:</b>			
<b>PIN:</b>	988517204707	<b>Parcel Number:</b>	001689001
<b>Address:</b>	115 AVALON DR E KILL DEVIL HILLS		
<b>Addition:</b>	AVALON BEACH	<b>Zoning:</b>	
<b>Legal Description:</b>		<b>Block:</b>	0 <b>Lot(s):</b> 34

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

**PROJECT DESCRIPTION:** Add 10x10 deck on top of existing deck with stairs (House Engineering)

**BP2019-205**

**PROJECT NAME:** Dematteo Deck addition  
**SITE ADDRESS:** 115 AVALON DR E KILL DEVIL HILLS

**BUILDING**

ISSUED: 09/17/2019

EXPIRES: 03/15/2020

**DETAILS****Permit**

<b>Name</b>	<b>Value</b>
CAMA PERMIT	N
CAMA EXEMPTION	N
ZONING DISTRICT	C
PURPOSE	Residential Addition
FRONT YARD SETBACK	15
SIDE YARD SETBACK	6
REAR YARD SETBACK	20% Depth >30
FLOOD ZONE	AE
BASE FLOOD ELEVATION	9.0
FINAL ELEVATION CERTIFICATE	N
CONSTRUCTION COST	8000.00
LOT COVERAGE	41.18
SURVEYOR NAME AND NUMBER	William S. Jones Jr 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.

**BP2019-205**

**PROJECT NAME:** Dematteo Deck addition

**SITE ADDRESS:** 115 AVALON DR E KILL DEVIL HILLS

**BUILDING**

**ISSUED:** 09/17/2019

**EXPIRES:** 03/15/2020

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: \_\_\_\_\_