



**Town of Kill Devil Hills**

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

OCT - 1 2019

**Planning and Inspection Department**

<b>BP2019-214</b>	<b>BUILDING</b>
<b>PROJECT NAME:</b> Michael Thompson	<b>ISSUED:</b> 09/30/2019
<b>SITE ADDRESS:</b> 1424 SHAY ST KILL DEVIL HILLS	<b>EXPIRES:</b> 03/28/2020

**APPLICANT:** Thompson, Michael  
1424 Shay Street  
Kill Devil Hills, NC 27948

**OWNER:** Thompson, Michael  
1424 Shay Street  
Kill Devil Hills, NC 27948

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

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

**PARCEL:**

**PIN:** 988316749087

**Parcel Number:** 004890302

**Address:** 1424 SHAY ST KILL DEVIL HILLS

**Addition:** WHISPERING PINES SEC 2 & 3

**Zoning:**

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

**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:** 12 X 8 Shed

**BP2019-214**

**PROJECT NAME:** Michael Thompson  
**SITE ADDRESS:** 1424 SHAY ST KILL DEVIL HILLS

**BUILDING**

**ISSUED:** 09/30/2019

**EXPIRES:** 03/28/2020

**DETAILS**

**Permit**

Name	Value
CAMA PERMIT	N
CAMA EXEMPTION	N
ZONING DISTRICT	RL
FRONT YARD SETBACK	30
SIDE YARD SETBACK	10
REAR YARD SETBACK	20% Depth >30
FLOOD ZONE	X
FINAL ELEVATION CERTIFICATE	N
CONSTRUCTION COST	1200.00
LOT COVERAGE	27.00
SURVEYOR NAME AND NUMBER	Styons Surveying Services

**REQUIRED INSPECTIONS**

Zoning Final

Final

**CONDITIONS**

- \* This permit becomes null and void if work or construction authorized is not commenced within 6 months or if construction or work is suspended for a period of 12 months at any time after work has started.
- \* Must comply with Wind Borne Debris requirements as defined in NCBC R301.2.1.2 and NCBC 1609.2.
- \* 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:** Marty Shaw

**Contractor or Authorized Agent:** [Signature]

**Date:** 10/1/19



**Town of Kill Devil Hills**

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SEP 30 2019

**Planning and Inspection Department**

<b>BP2019-215</b>	<b>BUILDING</b>
<b>PROJECT NAME:</b> NEWMAN STAIR AND DECKING	<b>ISSUED:</b> 09/30/2019
<b>SITE ADDRESS:</b> 3306 RAYMOND AVE KILL DEVIL HILLS	<b>EXPIRES:</b> 03/28/2020

<b>APPLICANT:</b> DELOANE NEWMAN 506 Sleepy Hollow Rd Richmond, VA 23229	<b>OWNER:</b> DELOANE NEWMAN 506 Sleepy Hollow Rd Richmond, VA 23229
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<b>GENERAL REMODELING-UNLICENSED:</b> B.R. Neier Construction Co. 208 Barco RD Barco, NC 27917 207-7956	<b>License:</b> aaa <b>Expires:</b>
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**PARCEL:**

<b>PIN:</b> 988513041980	<b>Parcel Number:</b> 000005000
<b>Address:</b> 3306 RAYMOND AVE KILL DEVIL HILLS	<b>Zoning:</b>
<b>Addition:</b> ORVILLE BEACH AMENDED BLK 3	<b>Block:</b> 3 <b>Lot(s):</b> 6
<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 EXTERIOR STAIRS, RAILING, AND DECKING

**BP2019-215**

**PROJECT NAME:** NEWMAN STAIR AND DECKING  
**SITE ADDRESS:** 3306 RAYMOND AVE KILL DEVIL HILLS

**BUILDING**

ISSUED: 09/30/2019

EXPIRES: 03/28/2020

**DETAILS****Permit**

Name	Value
CAMA PERMIT	N
CAMA EXEMPTION	N
ZONING DISTRICT	C
PURPOSE	Residential Repair/Remodel
FRONT YARD SETBACK	30
SIDE YARD SETBACK	10
REAR YARD SETBACK	20% Depth >30
FLOOD ZONE	AE
BASE FLOOD ELEVATION	9.00
FINAL ELEVATION CERTIFICATE	N
CONSTRUCTION COST	1140.00
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: \_\_\_\_\_

9-30-19





**Town of Kill Devil Hills**

PO BOX 1719  
Kill Devil Hills, NC 27948  
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OCT - 1 2019

**Planning and Inspection Department**

<b>BP2019-216</b>	<b>BUILDING</b>
<b>PROJECT NAME:</b> HOLMES STAIR AND LANDING	<b>ISSUED:</b> 10/01/2019
<b>SITE ADDRESS:</b> 533 CHOWAN ST W KILL DEVIL HILLS	<b>EXPIRES:</b> 03/29/2020

<b>APPLICANT:</b> DONALD & CYNTHIA HOLMES 7700 Harewood Ln. RICHMOND, VA 23231	<b>OWNER:</b> DONALD & CYNTHIA HOLMES 7700 Harewood Ln. RICHMOND, VA 23231
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<b>UNLICENSED - REMODELING:</b>	DOMESTIC DETAILS 506 COLINGTON DR Kill Devil Hills, NC 27948 252-202-6932	<b>License:</b> XXXX <b>Expires:</b>
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**PARCEL:**

<b>PIN:</b> 987520817691	<b>Parcel Number:</b> 000703000
<b>Address:</b> 533 CHOWAN ST W KILL DEVIL HILLS	<b>Zoning:</b>
<b>Addition:</b> VIRGINIA DARE SHORES	<b>Block:</b> 68 <b>Lot(s):</b> 4-6
<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:** REBUILD REAR STAIR AND LANDING

**BP2019-216**

**PROJECT NAME:** HOLMES STAIR AND LANDING  
**SITE ADDRESS:** 533 CHOWAN ST W KILL DEVIL HILLS

**BUILDING**

**ISSUED:** 10/01/2019

**EXPIRES:** 03/29/2020

**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	AE
BASE FLOOD ELEVATION	8.00
FINAL ELEVATION CERTIFICATE	N
CONSTRUCTION COST	1500.00
CONSTRUCTION TYPE	V
OCCUPANCY TYPE	One & Two Family Dwelling

**REQUIRED INSPECTIONS**

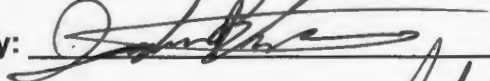
Zoning Final

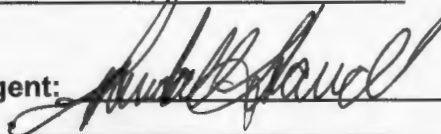
Final

**CONDITIONS**

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Issued By: 

Contractor or Authorized Agent: 

Date: 10-1-19



**Town of Kill Devil Hills**

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PAID  
OCT 2 2019

**Planning and Inspection Department**

<b>BP2019-218</b>	<b>BUILDING</b>
<b>PROJECT NAME:</b>	<b>ISSUED: 10/02/2019</b>
<b>SITE ADDRESS: 508 LOBLOLLY CT KILL DEVIL HILLS</b>	<b>EXPIRES: 03/30/2020</b>

<b>APPLICANT:</b> White, Bruce 6316 Bob White Ave nags head, nc 27959 252-207-5580	<b>OWNER:</b> White, Bruce 6316 Bob White Ave nags head, nc 27959 252-207-5580
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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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**PARCEL:**

<b>PIN:</b> 988410255804	<b>Parcel Number:</b> 002520274
<b>Address:</b> 508 LOBLOLLY CT KILL DEVIL HILLS	<b>Zoning:</b>
<b>Addition:</b> FIRST FLIGHT VILLAGE SEC 2	<b>Block:</b> 0 <b>Lot(s):</b> 274
<b>Legal Description:</b>	

<b>FEES:</b>	<b>Paid</b>	<b>Due</b>
Accessory Residential (MIN)	\$100.00	\$0.00
Fence	\$100.00	\$0.00
<b>Totals :</b>	<b>\$200.00</b>	<b>\$0.00</b>

**PROJECT DESCRIPTION:** New fence. New shed.

**BP2019-218**

PROJECT NAME:

SITE ADDRESS: 508 LOBLOLLY CT KILL DEVIL HILLS

**BUILDING**

ISSUED: 10/02/2019

EXPIRES: 03/30/2020

**DETAILS****Permit**

Name	Value
CAMA PERMIT	N
CAMA EXEMPTION	N
ZONING DISTRICT	RL
PURPOSE	Residential Accessory
FLOOD ZONE	X
FINAL ELEVATION CERTIFICATE	N
CONSTRUCTION COST	5000.00
CONSTRUCTION TYPE	V
OCCUPANCY TYPE	One & Two Family Dwelling

**REQUIRED INSPECTIONS**

Zoning Final

Stringline

Final

**CONDITIONS**

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Issued By: 

Contractor or Authorized Agent:  Date: 10/2/19



**Town of Kill Devil Hills**

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PAD  
OCT 2 2019

**Planning and Inspection Department**

<b>BP2019-219</b>	<b>BUILDING</b>
<b>PROJECT NAME:</b> CASPER DECK AND STAIRS	<b>ISSUED:</b> 10/02/2019
<b>SITE ADDRESS:</b> 200 FIFTH ST W KILL DEVIL HILLS	<b>EXPIRES:</b> 03/30/2020

<b>APPLICANT:</b> CASPER, GARY T & RT 1 BOX 5-B CORAPEAKE, NC 27926	<b>OWNER:</b> CASPER, GARY T & RT 1 BOX 5-B CORAPEAKE, NC 27926
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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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**PARCEL:**

<b>PIN:</b> 988405294030	<b>Parcel Number:</b> 002055000
<b>Address:</b> 200 FIFTH ST W KILL DEVIL HILLS	<b>Zoning:</b>
<b>Addition:</b> WRIGHT'S SHORES	<b>Block:</b> 0 <b>Lot(s):</b> 1
<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:** REBUILD STAIRS AND RAILING, REPLACE DECKING AND JOIST

**BP2019-219**

**PROJECT NAME:** CASPER DECK AND STAIRS  
**SITE ADDRESS:** 200 FIFTH ST W KILL DEVIL HILLS

**BUILDING**

**ISSUED:** 10/02/2019

**EXPIRES:** 03/30/2020

**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	6000.00
CONSTRUCTION TYPE	V
OCCUPANCY TYPE	One & Two Family Dwelling

**REQUIRED INSPECTIONS**

Zoning Final

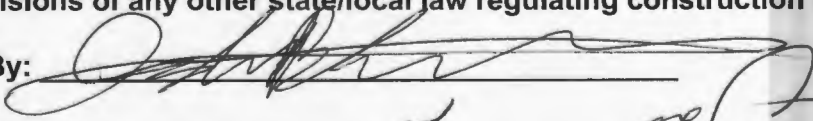
Final

**CONDITIONS**

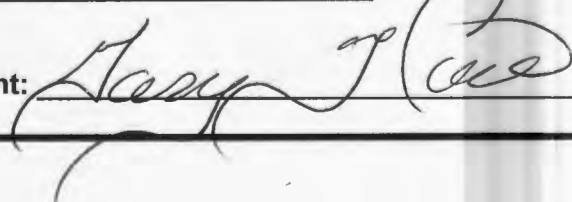
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Issued By:



Contractor or Authorized Agent:



Date:

10/2/19



**Town of Kill Devil Hills**

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

OCT 3 2019

**Planning and Inspection Department**

**BP2019-221**

**PROJECT NAME:** ALKER STAIR  
**SITE ADDRESS:** 502 LANDING DR W KILL DEVIL HILLS

**BUILDING**

**ISSUED:** 10/03/2019

**EXPIRES:** 03/31/2020

**APPLICANT:** ALKER, GREGORY B  
502 W LANDING DR  
KILL DEVIL HILLS, NC 27948-8445

**OWNER:** ALKER, GREGORY B  
502 W LANDING DR  
KILL DEVIL HILLS, NC 27948-8445

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

**License:** Unlicensed  
**Expires:** 12/31/2020

**PARCEL:**

**PIN:** 988414330506

**Parcel Number:** 003584000

**Address:** 502 LANDING DR W KILL DEVIL HILLS

**Zoning:**

**Addition:** LANDING SECTION 2, THE

**Block:** 0 **Lot(s):** 129

**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:** REBUILD FRONT PORCH STAIR



**BP2019-221**

**PROJECT NAME:** ALKER STAIR

**SITE ADDRESS:** 502 LANDING DR W KILL DEVIL HILLS

**BUILDING**

**ISSUED:** 10/03/2019

**EXPIRES:** 03/31/2020

**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	8.00
FINAL ELEVATION CERTIFICATE	N
CONSTRUCTION COST	525.00
CONSTRUCTION TYPE	V
OCCUPANCY TYPE	One & Two Family Dwelling

**REQUIRED INSPECTIONS**

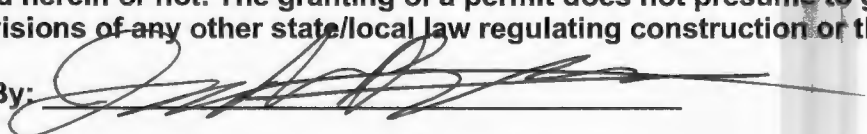
Final

**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:

10/3/2019



**Town of Kill Devil Hills**

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

**Planning and Inspection Department**

**BP2019-222**

**PROJECT NAME:** Pendleton Stairs  
**SITE ADDRESS:** 106 CARLOW AVE KILL DEVIL HILLS

**BUILDING**

**ISSUED:** 10/03/2019

**EXPIRES:** 03/31/2020

**APPLICANT:** Abbitt, Madeline  
8043 Old Courthouse Rd  
Appomattox, VA 24522

**OWNER:** Abbitt, Madeline  
8043 Old Courthouse Rd  
Appomattox, VA 24522

**UNLICENSED - REMODELING:** PENDLETON, SHAWN  
805 Eighth Avenue  
KILL DEVIL HILLS, NC 27948  
252-256-1775

**License:** 000000000  
**Expires:**

**PARCEL:**

**PIN:** 988419619776

**Parcel Number:** 003950000

**Address:** 106 CARLOW AVE KILL DEVIL HILLS

**Addition:** KITTY HAWK SHORES - REVISED

**Zoning:**  
**Block:** 42 **Lot(s):** 9

**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:** Remove and replace stairs from upper deck to landing

PAID

OCT 4 2019

TOWN OF  
KILL DEVIL HILLS

**BP2019-222**

PROJECT NAME: Pendleton Stairs

SITE ADDRESS: 106 CARLOW AVE KILL DEVIL HILLS

**BUILDING**

ISSUED: 10/03/2019

EXPIRES: 03/31/2020

**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	AE
BASE FLOOD ELEVATION	8
FINAL ELEVATION CERTIFICATE	N
CONSTRUCTION COST	3500.00

**REQUIRED INSPECTIONS**

Zoning Final

Final

**CONDITIONS**

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Issued By: Contractor or Authorized Agent:  Date: 10-4-19



# Town of Kill Devil Hills

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

OCT 9 2019

## Planning and Inspection Department

**BP2019-217**

**PROJECT NAME:** Wellington By The Sea Walkway Replacement  
**SITE ADDRESS:** 1711 VA DARE TRL N KILL DEVIL HILLS

**BUILDING**

**ISSUED:** 10/03/2019

**EXPIRES:** 03/31/2020

**APPLICANT:** WELLINGTON BY THE SEA  
1711 N. Va. Dare Tr.  
Kill Devil Hills, NC 27948

**OWNER:** WELLINGTON BY THE SEA  
1711 N. Va. Dare Tr.  
Kill Devil Hills, NC 27948

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

**License:** Unlicensed  
**Expires:** 12/31/2020

**PARCEL:**

**PIN:** 98841157140600

**Parcel Number:** 002792999

**Address:** 1711 VA DARE TRL N KILL DEVIL HILLS

**Addition:**

**Zoning:**

**Block:** C

**Lot(s):** 15,16,PT 14  
COM.PRO

**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 the south and rear walkway with frangible concrete

**BP2019-217**

**PROJECT NAME:** Wellington By The Sea Walkway Replacement  
**SITE ADDRESS:** 1711 VA DARE TRL N KILL DEVIL HILLS

**BUILDING****ISSUED:** 10/03/2019**EXPIRES:** 03/31/2020**DETAILS****Permit**

<b>Name</b>	<b>Value</b>
CAMA PERMIT	N
CAMA EXEMPTION	Y
ZONING DISTRICT	OIR
PURPOSE	Commercial Repair/Remodel
FRONT YARD SETBACK	30
SIDE YARD SETBACK	12
REAR YARD SETBACK	CAMA
FLOOD ZONE	VE
BASE FLOOD ELEVATION	11.0
FINAL ELEVATION CERTIFICATE	N
CONSTRUCTION COST	10500.00
LOT COVERAGE	48.60
SURVEYOR NAME AND NUMBER	John Delucia 16759
OCCUPANCY TYPE	Residential

**REQUIRED INSPECTIONS**

Zoning Final

Final

**CONDITIONS**

- \* This permit becomes null and void if work or construction authorized is not commenced within 6 months or if construction or work is suspended for a period of 12 months at any time after work has started.
- \* The developer shall be responsible for maintaining erosion and sediment control at the disturbed area.
- \* Development must meet all aspects of Chapter 151 Flood Damage Prevention Ordinance including use and elevation.
- \* Construction must meet all aspect of Chapter 153 Zoning including lot coverage and setbacks.
- \* Must comply with Wind Borne Debris requirements as defined in NCBC R301.2.1.2 and NCBC 1609.2.
- \* Zoning Final Inspection is required.

**BP2019-217**

**PROJECT NAME:** Wellington By The Sea Walkway Replacement  
**SITE ADDRESS:** 1711 VA DARE TRL N KILL DEVIL HILLS

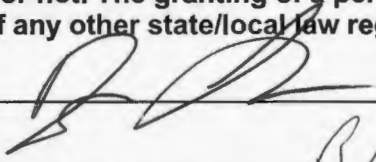
**BUILDING**

**ISSUED:** 10/03/2019

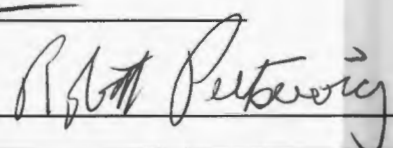
**EXPIRES:** 03/31/2020

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



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



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

10/9/2019



# Town of Kill Devil Hills

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

OCT 9 2019

## Planning and Inspection Department

<b>BP2019-223</b>	<b>BUILDING</b>
<b>PROJECT NAME:</b> JONES RAILS, DECKING, AND STAIRS	<b>ISSUED:</b> 10/07/2019
<b>SITE ADDRESS:</b> 3304 RAYMOND AVE KILL DEVIL HILLS	<b>EXPIRES:</b> 04/04/2020

<b>APPLICANT:</b> JONES, PAUL D 4705 TAMEO CT. GLEN ALLEN, VA 23060	<b>OWNER:</b> JONES, PAUL D 4705 TAMEO CT. GLEN ALLEN, VA 23060
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<b>GENERAL REMODELING-UNLICENSED:</b> B.R. Neier Construction Co. 208 Barco RD Barco, NC 27917 207-7956	<b>License:</b> aaa <b>Expires:</b>
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**PARCEL:**

<b>PIN:</b> 988513042823	<b>Parcel Number:</b> 000006000
<b>Address:</b> 3304 RAYMOND AVE KILL DEVIL HILLS	<b>Zoning:</b>
<b>Addition:</b> ORVILLE BEACH AMENDED BLK 3	<b>Block:</b> 3 <b>Lot(s):</b> 7
<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 DECKING AND RAILS, REBUILD STAIRS



**BP2019-223****PROJECT NAME:** JONES RAILS, DECKING, AND STAIRS  
**SITE ADDRESS:** 3304 RAYMOND AVE KILL DEVIL HILLS**BUILDING****ISSUED:** 10/07/2019**EXPIRES:** 04/04/2020**DETAILS****Permit**

Name	Value
CAMA PERMIT	N
CAMA EXEMPTION	N
ZONING DISTRICT	C
PURPOSE	Residential Repair/Remodel
FRONT YARD SETBACK	30
SIDE YARD SETBACK	10
REAR YARD SETBACK	20% Depth >30
FLOOD ZONE	AE
BASE FLOOD ELEVATION	9.00
FINAL ELEVATION CERTIFICATE	N
CONSTRUCTION COST	2450.00
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: \_\_\_\_\_

10-9-19



**Town of Kill Devil Hills**

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

PAID  
OCT 9 2019

**Planning and Inspection Department**

<b>BP2019-226</b>	<b>BUILDING</b>
<b>PROJECT NAME:</b> DAVENPORT STAIRS	<b>ISSUED:</b> 10/09/2019
<b>SITE ADDRESS:</b> 300 DOLLY ST KILL DEVIL HILLS	<b>EXPIRES:</b> 04/06/2020

<b>APPLICANT:</b> MICHAEL DAVENPORT 114 Fort Huger Way Manteo, NC 27954	<b>OWNER:</b> MICHAEL DAVENPORT 114 Fort Huger Way Manteo, NC 27954
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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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**PARCEL:**

<b>PIN:</b> 988406277731	<b>Parcel Number:</b> 002474000
<b>Address:</b> 300 DOLLY ST KILL DEVIL HILLS	<b>Zoning:</b>
<b>Addition:</b> SEA HOLLY RIDGE	<b>Block:</b> 1 <b>Lot(s):</b> 5
<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:** REBUILD STAIR AND RAILING

**BP2019-226**PROJECT NAME: DAVENPORT STAIRS  
SITE ADDRESS: 300 DOLLY ST KILL DEVIL HILLS**BUILDING**

ISSUED: 10/09/2019

EXPIRES: 04/06/2020

**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	100.00
CONSTRUCTION TYPE	V
OCCUPANCY TYPE	One & Two Family Dwelling

**REQUIRED INSPECTIONS**

Zoning Final

Final

**CONDITIONS**

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

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

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

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



**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**

**BP2019-225**

**PROJECT NAME:** Szymczak Shed  
**SITE ADDRESS:** 1212 MEMORIAL BLVD S KILL DEVIL HILLS

**BUILDING**

**ISSUED:** 10/09/2019

**EXPIRES:** 04/06/2020

**APPLICANT:** Szymczak, Joseph  
12002 Big Ben Blvd  
FREDERICKSBURG, VA 22407

**OWNER:** Szymczak, Joseph  
12002 Big Ben Blvd  
FREDERICKSBURG, VA 22407

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

**License:** Unlicensed  
**Expires:** 12/31/2020

**PARCEL:**

**PIN:** 988312977201

**Parcel Number:** 004231029

**Address:** 1212 MEMORIAL BLVD S KILL DEVIL HILLS

**Addition:** KILL DEVIL HILLS SEC 1

**Zoning:**  
**Block:** 16 **Lot(s):** 9

**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:** 5x8 shed in rear yard

OCT 9 2019

**BP2019-225****PROJECT NAME:** Szymczak Shed  
**SITE ADDRESS:** 1212 MEMORIAL BLVD S KILL DEVIL HILLS**BUILDING****ISSUED:** 10/09/2019**EXPIRES:** 04/06/2020

---

**DETAILS****Permit**

<b>Name</b>	<b>Value</b>
CAMA PERMIT	N
CAMA EXEMPTION	N
ZONING DISTRICT	C
PURPOSE	Residential Accessory
FRONT YARD SETBACK	30
SIDE YARD SETBACK	8
REAR YARD SETBACK	20% Depth >30
HEALTH DEPARTMENT PERMIT #	29063
FLOOD ZONE	AE
BASE FLOOD ELEVATION	8.3
FINAL ELEVATION CERTIFICATE	N
CONSTRUCTION COST	1400.00
LOT COVERAGE	39.60
ACCESSORY STRUCTURE (SQFT)	40
SURVEYOR NAME AND NUMBER	W.C. Owen L-3216
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.
- \* Development must meet all aspects of Chapter 151 Flood Damage Prevention Ordinance including use and elevation.
- \* Construction must meet all aspect of Chapter 153 Zoning including lot coverage and setbacks.
- \* Zoning Final Inspection is required.

**BP2019-225**

**PROJECT NAME:** Szymczak Shed

**SITE ADDRESS:** 1212 MEMORIAL BLVD S KILL DEVIL HILLS

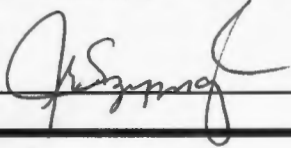
**BUILDING**

**ISSUED:** 10/09/2019

**EXPIRES:** 04/06/2020

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: 10/9/19



**Town of Kill Devil Hills**

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

OCT 14 2019

**Planning and Inspection Department**

**BP2019-231**

**PROJECT NAME:** HAMMOCK STAIR AND DECKING  
**SITE ADDRESS:** 1313 SHAY ST KILL DEVIL HILLS

**BUILDING**

**ISSUED:** 10/14/2019

**EXPIRES:** 04/11/2020

**APPLICANT:** Brandon Hammock  
551 Jean St. Apt 213  
OAKLAND, CA 94610  
336-601-5289

**OWNER:** Brandon Hammock  
551 Jean St. Apt 213  
OAKLAND, CA 94610  
336-601-5289

**GENERAL, UNLICENSED:** FIVE STAR CONSTRUCTION  
1004 INDIAN DR  
Kill Devil Hills, NC 27948  
252-489-1252

**License:** XXX  
**Expires:**

**PARCEL:**

**PIN:** 988316747850

**Parcel Number:** 004782000

**Address:** 1313 SHAY ST KILL DEVIL HILLS

**Zoning:**

**Addition:** KILL DEVIL BEACH EXTENDED

**Block:** 3 **Lot(s):** 9

**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:** REBUILD EXTERIOR STAIR, REPLACE DECKING AND RAILING



**BP2019-231****PROJECT NAME:** HAMMOCK STAIR AND DECKING  
**SITE ADDRESS:** 1313 SHAY ST KILL DEVIL HILLS**BUILDING****ISSUED:** 10/14/2019**EXPIRES:** 04/11/2020**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
STREET SIDE SETBACK	15
FLOOD ZONE	X
FINAL ELEVATION CERTIFICATE	N
CONSTRUCTION COST	6000.00
CONSTRUCTION TYPE	V
OCCUPANCY TYPE	One & Two Family Dwelling

**REQUIRED INSPECTIONS**

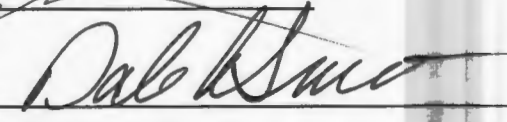
Zoning Final

Final

**CONDITIONS**

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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: 10/14/2019



# Town of Kill Devil Hills

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

## Planning and Inspection Department

**BP2019-224**

**PROJECT NAME:** Roark Ramp  
**SITE ADDRESS:** 609 CANAL DR KILL DEVIL HILLS

**BUILDING**

**ISSUED:** 10/15/2019

**EXPIRES:** 04/12/2020

**APPLICANT:** ROARK, DONNA  
609 CANAL DRIVE  
Kill Devil Hills, NC 27948

**OWNER:** ROARK, DONNA  
609 CANAL DRIVE  
Kill Devil Hills, NC 27948

**CONTRACTOR:** MARC JAMES  
UNKNOWN  
UNKNOWN, XX 00000

**GENERAL BUILDING-LIMITED:** MARC JAMES  
UNKNOWN  
UNKNOWN, XX 00000

**License:** 49471  
**Expires:** 12/31/2019

**PARCEL:**

**PIN:** 988413243262

**Parcel Number:** 003327000

**Address:** 609 CANAL DR KILL DEVIL HILLS

**Addition:** FIRST FLIGHT VILLAGE SEC 1

**Zoning:**  
**Block:** 0      **Lot(s):** 41

**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 handicap ramp 18' with a landing then 6' ramp to front door

OCT 15 2019

**BP2019-224**PROJECT NAME: Roark Ramp  
SITE ADDRESS: 609 CANAL DR KILL DEVIL HILLS**BUILDING**

ISSUED: 10/15/2019

EXPIRES: 04/12/2020

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**DETAILS****Permit**

<b>Name</b>	<b>Value</b>
CAMA PERMIT	N
CAMA EXEMPTION	N
ZONING DISTRICT	RL
PURPOSE	Residential Accessory
FRONT YARD SETBACK	30
SIDE YARD SETBACK	10
REAR YARD SETBACK	20% Depth >30
HEALTH DEPARTMENT PERMIT #	29053
FLOOD ZONE	AE
BASE FLOOD ELEVATION	8.3
FINAL ELEVATION CERTIFICATE	N
CONSTRUCTION COST	225.00
LOT COVERAGE	38.00
SURVEYOR NAME AND NUMBER	Wesley M. Meekins
OCCUPANCY TYPE	One & Two Family Dwelling

---

**REQUIRED INSPECTIONS**

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

**BP2019-228**

**PROJECT NAME:** Captain Georges Shed and Fence Area  
**SITE ADDRESS:** 705 CROATAN HWY S KILL DEVIL HILLS

**BUILDING**

**ISSUED:** 10/15/2019

**EXPIRES:** 04/12/2020

**APPLICANT:** PITCO 1, LLC  
1956 Laskin Road  
Va. Beach, Va 23454

**OWNER:** PITCO 1, LLC  
1956 Laskin Road  
Va. Beach, Va 23454

**CONTRACTOR:** SETH JOHNSON CONSTRUCTION CO., INC.  
PO Box 1433  
NAGS HEAD, NC 27959  
252-216-8853

**CONTRACTOR:** SETH JOHNSON CONSTRUCTION CO., INC.  
PO Box 1433  
NAGS HEAD, NC 27959  
252-216-8853

**License:** 61904  
**Expires:** 12/31/2019

**PARCEL:**

**PIN:** 988308892096

**Parcel Number:** 004309000

**Address:** 705 CROATAN HWY S KILL DEVIL HILLS

**Addition:** KILL DEVIL HILLS REALTY CORP

**Zoning:**

**Block:** 1 **Lot(s):** 5 & 6

**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:** Removing walk in cooler, adding shed and fenced in area outside of bar

07/15/2019

**BP2019-228**

**PROJECT NAME:** Captain Georges Shed and Fence Area  
**SITE ADDRESS:** 705 CROATAN HWY S KILL DEVIL HILLS

**BUILDING****ISSUED:** 10/15/2019**EXPIRES:** 04/12/2020

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**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	10
REAR YARD SETBACK	20% Depth >30
STREET SIDE SETBACK	15
FLOOD ZONE	AE
BASE FLOOD ELEVATION	8.3
FINAL ELEVATION CERTIFICATE	N
CONSTRUCTION COST	20000.00
LOT COVERAGE	63.40
SURVEYOR NAME AND NUMBER	James L. Overton L-339
OCCUPANCY TYPE	Business

---

**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.
- \* 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.

**BP2019-228**

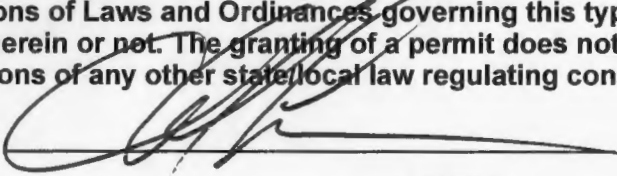
**PROJECT NAME:** Captain Georges Shed and Fence Area  
**SITE ADDRESS:** 705 CROATAN HWY S KILL DEVIL HILLS

**BUILDING**

**ISSUED:** 10/15/2019

**EXPIRES:** 04/12/2020

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

Date: 10-15-19



# 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

**BP2019-233**

**PROJECT NAME:**

**SITE ADDRESS:** 116 WILSON ST KILL DEVIL HILLS

**BUILDING**

**ISSUED:** 10/15/2019

**EXPIRES:** 04/12/2020

**APPLICANT:** ERIC PRUITT  
2057 Newbern St  
KDH, NC 27948  
449-6801

**OWNER:** ERIC PRUITT  
2057 Newbern St  
KDH, NC 27948  
449-6801

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

**License:** Unlicensed  
**Expires:** 12/31/2020

**PARCEL:**

**PIN:** 988517204780

**Parcel Number:** 001812000

**Address:** 116 WILSON ST KILL DEVIL HILLS

**Addition:** AVALON BEACH ANNEX 1

**Zoning:**

**Block:** 0 **Lot(s):** 363

**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:** Rebuild stairs same location.

OCT 15 2019



**BP2019-233**

**PROJECT NAME:**

**SITE ADDRESS:** 116 WILSON ST KILL DEVIL HILLS

**BUILDING**

**ISSUED:** 10/15/2019

**EXPIRES:** 04/12/2020

**DETAILS**

**Permit**

<b>Name</b>	<b>Value</b>
CAMA PERMIT	N
CAMA EXEMPTION	N
ZONING DISTRICT	C
PURPOSE	Residential Repair/Remodel
FLOOD ZONE	AE
BASE FLOOD ELEVATION	9
FINAL ELEVATION CERTIFICATE	N
CONSTRUCTION COST	1500.00
CONSTRUCTION TYPE	V
OCCUPANCY TYPE	One & Two Family Dwelling

**REQUIRED INSPECTIONS**


Zoning Final

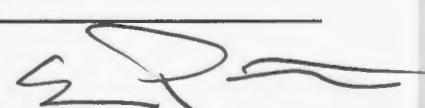
Final

**CONDITIONS**

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

Issued By: 

Contractor or Authorized Agent: 

Date: 10/15/19



**Town of Kill Devil Hills**

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

PAID

OCT 16 2019

**Planning and Inspection Department**

<b>BP2019-235</b>	A W C	<b>BUILDING</b>
<b>PROJECT NAME: BARKSDALE PILING REPLACEMENT</b>		<b>ISSUED: 10/15/2019</b>
<b>SITE ADDRESS: 2051 BAY DR KILL DEVIL HILLS</b>		<b>EXPIRES: 04/12/2020</b>

<b>APPLICANT:</b> BARKSDALE, CAROL D 2051 BAY DRIVE KILL DEVIL HILLS, NC 27948	<b>OWNER:</b> BARKSDALE, CAROL D 2051 BAY DRIVE 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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**PARCEL:**

<b>PIN:</b> 987408984994	<b>Parcel Number:</b> 001981000
<b>Address:</b> 2051 BAY DR KILL DEVIL HILLS	<b>Zoning:</b>
<b>Addition:</b> AVALON BEACH ANNEX 2 & 3	<b>Block:</b> 0 <b>Lot(s):</b> 1005
<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 2 ROOF SUPPORTING PILINGS ON COVERED PORCH

**BP2019-235****PROJECT NAME:** BARKSDALE PILING REPLACEMENT  
**SITE ADDRESS:** 2051 BAY DR KILL DEVIL HILLS**BUILDING****ISSUED:** 10/15/2019**EXPIRES:** 04/12/2020**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	AE
BASE FLOOD ELEVATION	8.3
FINAL ELEVATION CERTIFICATE	N
CONSTRUCTION COST	900.00
CONSTRUCTION TYPE	V
OCCUPANCY TYPE	One & Two Family Dwelling

**REQUIRED INSPECTIONS**

Zoning Final

Final

**CONDITIONS**

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

Issued By: Contractor or Authorized Agent: Date: 10-16-19



**Town of Kill Devil Hills**

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

FAD

OCT 18 2019

**Planning and Inspection Department**

**BP2019-234**

**PROJECT NAME:**

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

**BUILDING**

**ISSUED:** 10/15/2019

**EXPIRES:** 04/12/2020

**APPLICANT:** LEWIS F LAMOND  
po box 738  
deltaville, va 23043

**OWNER:** LEWIS F LAMOND  
po box 738  
deltaville, va 23043

**LIMITED- SPECIALTY-MARINE CONSTR:** NORTHEASTERN MARINE CONSTRUCTION  
P.O. Box 42  
Kitty Hawk, NC 27949  
261-3682

**License:** 30026  
**Expires:** 01/01/2020

**PARCEL:**

**PIN:** 988405084748

**Parcel Number:** 000864000

**Address:** 2023 HAMPTON ST KILL DEVIL HILLS

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

**Zoning:**

**Block:** 0 **Lot(s):** 1120

**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:** Sister 6 pilings under house per engineered detail.

**BP2019-234**

**PROJECT NAME:**

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

**BUILDING**

**ISSUED:** 10/15/2019

**EXPIRES:** 04/12/2020

**DETAILS**

**Permit**

Name	Value
CAMA PERMIT	N
CAMA EXEMPTION	N
ZONING DISTRICT	RL
PURPOSE	Residential Repair/Remodel
FLOOD ZONE	AE
BASE FLOOD ELEVATION	8
FINAL ELEVATION CERTIFICATE	N
CONSTRUCTION COST	2400.00
CONSTRUCTION TYPE	V
OCCUPANCY TYPE	One & Two Family Dwelling

**REQUIRED INSPECTIONS**

Zoning Final  
Final

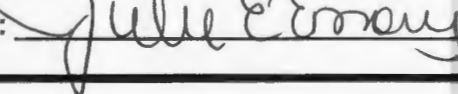
Slab/Foundation/Piling

**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: 10/18/19



**Town of Kill Devil Hills**

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

PAD

OCT 18 2019

**Planning and Inspection Department**

<b>BP2019-237</b>	<b>BUILDING</b>
<b>PROJECT NAME:</b> SKIPPER STAIRS	<b>ISSUED:</b> 10/18/2019
<b>SITE ADDRESS:</b> 2038 HIGHVIEW ST KILL DEVIL HILLS	<b>EXPIRES:</b> 04/15/2020

<b>APPLICANT:</b> SKIPPER, WALTER T 400 QUAIL LANE KILL DEVIL HILLS, NC 27948	<b>OWNER:</b> SKIPPER, WALTER T 400 QUAIL LANE KILL DEVIL HILLS, NC 27948
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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> 988405095259	<b>Parcel Number:</b> 001516000		
<b>Address:</b> 2038 HIGHVIEW ST KILL DEVIL HILLS	<b>Zoning:</b>		
<b>Addition:</b> AVALON BEACH ANNEX 2 & 3	<b>Block:</b> 0	<b>Lot(s):</b> 1399	
<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:** REBUILD BOTH SETS OF EXTERIOR STEPS

**BP2019-237**

**PROJECT NAME:** SKIPPER STAIRS

**SITE ADDRESS:** 2038 HIGHVIEW ST KILL DEVIL HILLS

**BUILDING**

**ISSUED:** 10/18/2019

**EXPIRES:** 04/15/2020

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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	X
FINAL ELEVATION CERTIFICATE	N
CONSTRUCTION COST	1750.00
CONSTRUCTION TYPE	V
OCCUPANCY TYPE	One & Two Family Dwelling

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**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.

\* Stairs to be built as is where is

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**BP2019-237**

**PROJECT NAME:** SKIPPER STAIRS

**SITE ADDRESS:** 2038 HIGHVIEW ST KILL DEVIL HILLS

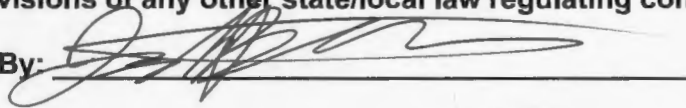
**BUILDING**

**ISSUED:** 10/18/2019

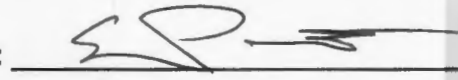
**EXPIRES:** 04/15/2020

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



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



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

10/18/19





**Town of Kill Devil Hills**

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

OCT 21 2019

**Planning and Inspection Department**

TOWN OF  
KILL DEVIL HILLS

<b>BP2019-241</b>	<b>BUILDING</b>
<b>PROJECT NAME:</b> PRUITT STAIR REBUILD	<b>ISSUED:</b> 10/21/2019
<b>SITE ADDRESS:</b> 316 LIVE OAK CT KILL DEVIL HILLS	<b>EXPIRES:</b> 04/18/2020

<b>APPLICANT:</b> GEORGE PRUITT UNKNOWN UNKNOWN, XX 00000	<b>OWNER:</b> GEORGE PRUITT UNKNOWN UNKNOWN, XX 00000
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<b>RESIDENTIAL - LIMITED:</b>	BEACH CONSTRUCTION GROUP 1496 COLINGTON RD Kill Devil Hills, NC 27948 252-441-8224	<b>License:</b> 77114 <b>Expires:</b> 01/01/2020
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**PARCEL:**

<b>PIN:</b> 988410354702	<b>Parcel Number:</b> 003217000
<b>Address:</b> 316 LIVE OAK CT KILL DEVIL HILLS	<b>Zoning:</b>
<b>Addition:</b> FIRST FLIGHT VILLAGE SEC 2	<b>Block:</b> 0 <b>Lot(s):</b> 221
<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:** REBUILD EXTERIOR STAIR

**BP2019-241**PROJECT NAME: PRUITT STAIR REBUILD  
SITE ADDRESS: 316 LIVE OAK CT KILL DEVIL HILLS**BUILDING**

ISSUED: 10/21/2019

EXPIRES: 04/18/2020

**DETAILS****Permit**

Name	Value
CAMA PERMIT	N
CAMA EXEMPTION	N
ZONING DISTRICT	RL
PURPOSE	Residential Repair/Remodel
FRONT YARD SETBACK	30
SIDE YARD SETBACK	10
REAR YARD SETBACK	20% Depth >30
FLOOD ZONE	AE
BASE FLOOD ELEVATION	9.00
FINAL ELEVATION CERTIFICATE	N
CONSTRUCTION COST	7500.00
CONSTRUCTION TYPE	V
OCCUPANCY TYPE	One & Two Family Dwelling

**REQUIRED INSPECTIONS**

Zoning Final

Final

**CONDITIONS**

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

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

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

10/21/19



**Town of Kill Devil Hills**

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

**Planning and Inspection Department**

**BP2019-240**

**PROJECT NAME:** Slekis Stairs  
**SITE ADDRESS:** 1223 WRIGHTSVILLE BLVD KILL DEVIL HILLS

**BUILDING**

**ISSUED:** 10/18/2019

**EXPIRES:** 04/15/2020

**APPLICANT:** SLEKIS, STEVEN A  
16071 DEER PARK DRIVE  
MONTCLAIR, VA 22026

**OWNER:** SLEKIS, STEVEN A  
16071 DEER PARK DRIVE  
MONTCLAIR, VA 22026

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

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

**PARCEL:**

**PIN:** 988312966993

**Parcel Number:** 004231019

**Address:** 1223 WRIGHTSVILLE BLVD KILL DEVIL HILLS

**Addition:** KILL DEVIL HILLS SEC 1

**Zoning:**  
**Block:** 16 **Lot(s):** 19

**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>

**PAID**

**PROJECT DESCRIPTION:** Replace (2) exterior stairs.

OCT 18 2019

**BP2019-240**

**PROJECT NAME:** Slekis Stairs

**SITE ADDRESS:** 1223 WRIGHTSVILLE BLVD KILL DEVIL HILLS

**BUILDING**

**ISSUED:** 10/18/2019

**EXPIRES:** 04/15/2020

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**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	8.3
FINAL ELEVATION CERTIFICATE	N
CONSTRUCTION COST	2500.00
CONSTRUCTION TYPE	V
SURVEYOR NAME AND NUMBER	William S. Jones Jr. L 2532
OCCUPANCY TYPE	One & Two Family Dwelling

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**REQUIRED INSPECTIONS**

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.

\* Stair replacement must meet all aspects of the 2018 NCBC Residential Building Code.

**BP2019-240**

PROJECT NAME: Slekis Stairs

SITE ADDRESS: 1223 WRIGHTSVILLE BLVD KILL DEVIL HILLS

**BUILDING**

ISSUED: 10/18/2019

EXPIRES: 04/15/2020

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

PAID

OCT 21 2019

**Planning and Inspection Department**

TOWN OF  
KILL DEVIL HILLS

**BP2019-236**

**PROJECT NAME:** Rutan Stair Replacement  
**SITE ADDRESS:** 1217D VA DARE TRL S KILL DEVIL HILLS

**BUILDING**

**ISSUED:** 10/17/2019

**EXPIRES:** 04/14/2020

**APPLICANT:** Rutan, Russell  
11 Shannon Place  
STAUNTON, VA 24401

**OWNER:** Rutan, Russell  
11 Shannon Place  
STAUNTON, VA 24401

**CONTRACTOR:** BILL FROELICH  
UNKNOWN  
UNKNOWN, XX 00000  
207-7999

**BUILDING, REMODELING:** BILL FROELICH  
UNKNOWN  
UNKNOWN, XX 00000  
207-7999

**License:** 62232  
**Expires:** 12/31/2019

**PARCEL:**

**PIN:** 989305074572

**Parcel Number:** 004871000

**Address:** 1217D VA DARE TRL S KILL DEVIL HILLS

**Zoning:**

**Addition:**

**Block:** 5 **Lot(s):** 1

**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, rails and ne corner stair replacement

**BP2019-236**

**PROJECT NAME:** Rutan Stair Replacement

**SITE ADDRESS:** 1217D VA DARE TRL S KILL DEVIL HILLS

**BUILDING**

**ISSUED:** 10/17/2019

**EXPIRES:** 04/14/2020

**DETAILS**

**Permit**

<b>Name</b>	<b>Value</b>
CAMA PERMIT	N
CAMA EXEMPTION	N
ZONING DISTRICT	OIR
PURPOSE	Residential Repair/Remodel
FRONT YARD SETBACK	30
REAR YARD SETBACK	CAMA
FLOOD ZONE	VE
BASE FLOOD ELEVATION	11.0
FINAL ELEVATION CERTIFICATE	N
CONSTRUCTION COST	5000.00

**REQUIRED INSPECTIONS**

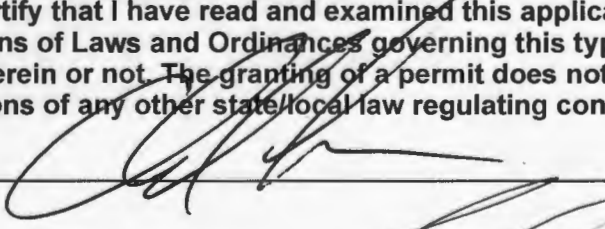
Zoning Final

Final

**CONDITIONS**

- \* This permit becomes null and void if work or construction authorized is not commenced within 6 months or if construction or work is suspended for a period of 12 months at any time after work has started.
- \* 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:** 10/21/19



**Town of Kill Devil Hills**

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

PAID  
WITH  
CASH  
OCT 21 2019

**Planning and Inspection Department**

TOWN OF  
KILL DEVIL HILLS

**BP2019-238**

**PROJECT NAME:** Hallford Stair Replacement  
**SITE ADDRESS:** 906 SWAN ST KILL DEVIL HILLS

**BUILDING**

**ISSUED:** 10/18/2019

**EXPIRES:** 04/15/2020

**APPLICANT:** Hallford, Jaycee  
906 Swan St  
Kill Devil Hills, NC 27948

**OWNER:** Hallford, Jaycee  
906 Swan St  
Kill Devil Hills, NC 27948

**CONTRACTOR:** Campbell, Kevin  
103 Aydlett Road  
Aydlett, NC 27916

**UNLICENSED BUILDER:** Campbell, Kevin  
103 Aydlett Road  
Aydlett, NC 27916

**License:** 12345  
**Expires:**

**PARCEL:**

**PIN:** 988312765976

**Parcel Number:** 004474000

**Address:** 906 SWAN ST KILL DEVIL HILLS

**Zoning:**

**Addition:** KILL DEVIL HILLS REALTY CORP

**Block:** 33 **Lot(s):** 4

**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:** Remove and replace front stairs to same footprint



**BP2019-238**

**PROJECT NAME:** Hallford Stair Replacement  
**SITE ADDRESS:** 906 SWAN ST KILL DEVIL HILLS

**BUILDING**

**ISSUED:** 10/18/2019

**EXPIRES:** 04/15/2020

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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	30
SIDE YARD SETBACK	10
REAR YARD SETBACK	20% Depth >30
FLOOD ZONE	X
FINAL ELEVATION CERTIFICATE	N
CONSTRUCTION COST	2000.00
SURVEYOR NAME AND NUMBER	William S. Jones L-2532
OCCUPANCY TYPE	One & Two Family Dwelling

---

**REQUIRED INSPECTIONS**

Zoning Final

Final

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**CONDITIONS**

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.....  
\* Zoning Final Inspection is required.

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

**BP2019-238**

**PROJECT NAME:** Hallford Stair Replacement  
**SITE ADDRESS:** 906 SWAN ST KILL DEVIL HILLS

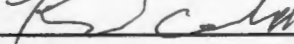
**BUILDING**

**ISSUED:** 10/18/2019

**EXPIRES:** 04/15/2020

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Issued By: 

Contractor or Authorized Agent: 

Date: 10-21-19



**Town of Kill Devil Hills**

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

PAID

OCT 21 2019

**Planning and Inspection Department**

TOWN OF  
KILL DEVIL HILLS

**BP2019-232**

**PROJECT NAME:** Bostic Deck/Stair replacement  
**SITE ADDRESS:** 1606 PRINCESS ANNE DR KILL DEVIL HILLS

**BUILDING**

**ISSUED:** 10/14/2019

**EXPIRES:** 04/11/2020

**APPLICANT:** Bostic, Mark  
713 College St  
OXFORD, NC 27565  
919-690-5184

**OWNER:** Bostic, Mark  
713 College St  
OXFORD, NC 27565  
919-690-5184

**CONTRACTOR:** Wernock, Robert  
1603 Princess Anne  
Kill Devil Hills, NC 27948

**UNLICENSED - REMODELING:** Wernock, Robert  
1603 Princess Anne  
Kill Devil Hills, NC 27948

**License:** 0000000  
**Expires:** 02/06/2020

**PARCEL:**

**PIN:** 988410466074

**Parcel Number:** 003136014

**Address:** 1606 PRINCESS ANNE DR KILL DEVIL HILLS

**Addition:** DELRAY BEACH RESUBDIV

**Zoning:**  
**Block:** 3 **Lot(s):** 14

**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:** remove and replace back upper and lower decking, handrails, and replace rear stair chase, all to same existing footprint

**BP2019-232**

**PROJECT NAME:** Bostic Deck/Stair replacement  
**SITE ADDRESS:** 1606 PRINCESS ANNE DR KILL DEVIL HILLS

**BUILDING**

ISSUED: 10/14/2019

EXPIRES: 04/11/2020

**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	10
REAR YARD SETBACK	20% Depth >30
FLOOD ZONE	AE
BASE FLOOD ELEVATION	8.3
FINAL ELEVATION CERTIFICATE	N
CONSTRUCTION COST	3500.00
SURVEYOR NAME AND NUMBER	F. Richard Quible L- 1157
OCCUPANCY TYPE	One & Two Family Dwelling

**REQUIRED INSPECTIONS**

Zoning Final

Final

**CONDITIONS**

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

**BP2019-232**

**PROJECT NAME:** Bostic Deck/Stair replacement  
**SITE ADDRESS:** 1606 PRINCESS ANNE DR KILL DEVIL HILLS

**BUILDING**

**ISSUED:** 10/14/2019

**EXPIRES:** 04/11/2020

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: 10-21-19



**Town of Kill Devil Hills**

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

OCT 22 2019

**Planning and Inspection Department**

<b>BP2019-230</b>	<b>BUILDING</b>
<b>PROJECT NAME:</b>	<b>ISSUED: 10/15/2019</b>
<b>SITE ADDRESS: 715 FIRST ST W KILL DEVIL HILLS</b>	<b>EXPIRES: 04/12/2020</b>

**APPLICANT:** Mooney, William  
715 First Street W  
Kill Devil Hills, NC 27948

**OWNER:** Mooney, William  
715 First Street W  
Kill Devil Hills, NC 27948

**BUILDING LIMITED:** JES Construction, LLC  
1741 Corporate Landing Parkway  
VIRGINIA BEACH, VA 23454

**License:** 69678  
**Expires:**

**PARCEL:**

**PIN:** 988413146001

**Parcel Number:** 027546084

**Address:** 715 FIRST ST W KILL DEVIL HILLS

**Zoning:**

**Addition:**

**Block:** 0 **Lot(s):** 84

**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 floor insulation removed during prohibited encapsulation of crawl space.

**BP2019-230**

**PROJECT NAME:**

**SITE ADDRESS:** 715 FIRST ST W KILL DEVIL HILLS

**BUILDING**

**ISSUED:** 10/15/2019

**EXPIRES:** 04/12/2020

**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	1850.00
CONSTRUCTION TYPE	V
OCCUPANCY TYPE	One & Two Family Dwelling

**REQUIRED INSPECTIONS**

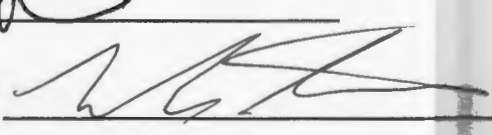
Final

**CONDITIONS**

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Issued By: 

Contractor or Authorized Agent: 

Date: 10/22/19



**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**

**BP2019-229**

**PROJECT NAME:** Almosthome Piling replacement  
**SITE ADDRESS:** 502 FIFTH ST W KILL DEVIL HILLS

**BUILDING**

**ISSUED:** 10/11/2019

**EXPIRES:** 04/08/2020

**APPLICANT:** Almost Home LLC  
240 Cedar Road  
POQUOSON, VA 23662

**OWNER:** Almost Home LLC  
240 Cedar Road  
POQUOSON, VA 23662

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

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

**License:** 79801  
**Expires:** 01/01/2020

**PARCEL:**

**PIN:** 988405186588

**Parcel Number:** 002071000

**Address:** 502 FIFTH ST W KILL DEVIL HILLS

**Addition:** WRIGHT'S SHORES

**Zoning:**  
**Block:** 0 **Lot(s):** 17

**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 7 pilings, no change to footprint of structure

OCT 23 2019



**BP2019-229**

**PROJECT NAME:** Almosthome Piling replacement  
**SITE ADDRESS:** 502 FIFTH ST W KILL DEVIL HILLS

**BUILDING****ISSUED:** 10/11/2019**EXPIRES:** 04/08/2020**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	6100.00
CONSTRUCTION TYPE	V
OCCUPANCY TYPE	One & Two Family Dwelling

**REQUIRED INSPECTIONS**

Zoning Final  
Final

Slab/Foundation/Piling

**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.

**BP2019-229**

**PROJECT NAME:** Almosthome Piling replacement  
**SITE ADDRESS:** 502 FIFTH ST W KILL DEVIL HILLS

**BUILDING**

**ISSUED:** 10/11/2019

**EXPIRES:** 04/08/2020

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

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

Contractor or Authorized Agent: \_\_\_\_\_ Date: 10/23/19



# Town of Kill Devil Hills

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

PAID

OCT 23 2019

## Planning and Inspection Department

**BP2019-244**

**PROJECT NAME:** SMALL ROOFING  
**SITE ADDRESS:** 1001 CROATAN HWY S KILL DEVIL HILLS

**BUILDING**

**ISSUED:** 10/23/2019

**EXPIRES:** 04/20/2020

**APPLICANT:** SMALL, PRISCILLA  
PO BOX 426  
Kill Devil Hills, NC 27948  
252-449-5565

**OWNER:** SMALL, PRISCILLA  
PO BOX 426  
Kill Devil Hills, NC 27948  
252-449-5565

**PLUMBING, CLASS I:** Robert Lane Plumbing & Maintenance  
4500 SOUTH Hesperides DR  
Kings Head, NC 27959  
252-202-9120

**License:** 17177  
**Expires:** 12/31/2019

**PARCEL:**

**PIN:** 988308877997

**Parcel Number:** 027929000

**Address:** 1001 CROATAN HWY S KILL DEVIL HILLS

**Addition:** KILL DEVIL HILLS REALTY CORP

**Zoning:**

**Block:** 4

**Lot(s):** PT 10 & PT 9

**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:** REMOVE RIDGE TOWER AND REPLACE SHINGLES

**BP2019-244**

PROJECT NAME: SMALL ROOFING

SITE ADDRESS: 1001 CROATAN HWY S KILL DEVIL HILLS

**BUILDING**

ISSUED: 10/23/2019

EXPIRES: 04/20/2020

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**DETAILS****Permit**

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<b>Name</b>	<b>Value</b>
CAMA PERMIT	N
CAMA EXEMPTION	N
ZONING DISTRICT	C
PURPOSE	Commercial Repair/Remodel
FRONT YARD SETBACK	30
SIDE YARD SETBACK	10
REAR YARD SETBACK	20% Depth >30
STREET SIDE SETBACK	15
FLOOD ZONE	AE
BASE FLOOD ELEVATION	8.00
FINAL ELEVATION CERTIFICATE	N
CONSTRUCTION COST	9500.00
CONSTRUCTION TYPE	V
OCCUPANCY TYPE	One & Two Family Dwelling

---

**REQUIRED INSPECTIONS**

Final

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**CONDITIONS**

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

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**BP2019-244**

**PROJECT NAME:** SMALL ROOFING

**SITE ADDRESS:** 1001 CROATAN HWY S KILL DEVIL HILLS

**BUILDING**

**ISSUED:** 10/23/2019

**EXPIRES:** 04/20/2020

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: \_\_\_\_\_

10-23-19



**Town of Kill Devil Hills**

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

OCT 23 2019

**Planning and Inspection Department**

**BP2019-242**

**PROJECT NAME:** Ashberry piling replacement  
**SITE ADDRESS:** 1812 CREEK ST KILL DEVIL HILLS

**BUILDING**

**ISSUED:** 10/23/2019

**EXPIRES:** 04/20/2020

**APPLICANT:** Ashberry, Claude R. and Holly Y.  
1812 Creek Street  
Kill Devil Hills, NC 27948  
757-513-4293

**OWNER:** Ashberry, Claude R. and Holly Y.  
1812 Creek Street  
Kill Devil Hills, NC 27948  
757-513-4293

**CONTRACTOR:** LIGHTING MARINE  
803 W Martin St  
Kill Devil Hills, NC 27948  
252-202-7713

**CONTRACTOR:** LIGHTING MARINE  
803 W Martin St  
Kill Devil Hills, NC 27948  
252-202-7713

**License:** LEGACY UNKNOWN  
**Expires:** 12/30/2019

**PARCEL:**

**PIN:** 988409271445

**Parcel Number:** 002451000

**Address:** 1812 CREEK ST KILL DEVIL HILLS

**Addition:** SEA HOLLY RIDGE

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

**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:** remove and replace 4 existing 6x6 pilings, amd 2 8x8 pilings

**BP2019-242**

**PROJECT NAME:** Ashberry piling replacement  
**SITE ADDRESS:** 1812 CREEK ST KILL DEVIL HILLS

**BUILDING****ISSUED:** 10/23/2019**EXPIRES:** 04/20/2020**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	4370.00
SURVEYOR NAME AND NUMBER	Manson Ray Meekins L- 2592
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.

**BP2019-242**

**PROJECT NAME:** Ashberry piling replacement  
**SITE ADDRESS:** 1812 CREEK ST KILL DEVIL HILLS

**BUILDING**

**ISSUED:** 10/23/2019

**EXPIRES:** 04/20/2020

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: \_\_\_\_\_

10/23/19





**Town of Kill Devil Hills**

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

PAID

OCT 25 2019

**Planning and Inspection Department**

**BP2019-220**

**PROJECT NAME:** Johnson Retaining Wall  
**SITE ADDRESS:** 3136 BAY DR KILL DEVIL HILLS

**BUILDING**

**ISSUED:** 10/03/2019

**EXPIRES:** 03/31/2020

**APPLICANT:** Johnson, Joseph  
1044 Walkers Cove Dr  
Colonial Hts., Va 23834

**OWNER:** Johnson, Joseph  
1044 Walkers Cove Dr  
Colonial Hts., Va 23834

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

**License:** 79801  
**Expires:** 01/01/2020

**PARCEL:**

**PIN:** 987516822655

**Parcel Number:** 001067000

**Address:** 3136 BAY DR KILL DEVIL HILLS

**Addition:** MOOR SHORES

**Zoning:**  
**Block:** 0 **Lot(s):** 131

**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:** Repair bulkhead and install 20' retaining wall at south end

**BP2019-220**

**PROJECT NAME:** Johnson Retaining Wall  
**SITE ADDRESS:** 3136 BAY DR KILL DEVIL HILLS

**BUILDING**

**ISSUED:** 10/03/2019

**EXPIRES:** 03/31/2020

**DETAILS**

**Permit**

Name	Value
CAMA PERMIT	N
CAMA EXEMPTION	N
ZONING DISTRICT	RL
PURPOSE	Residential Repair/Remodel
FLOOD ZONE	AE
BASE FLOOD ELEVATION	8
FINAL ELEVATION CERTIFICATE	N
CONSTRUCTION COST	4840.00

**REQUIRED INSPECTIONS**

Zoning Final

Final

**CONDITIONS**

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

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

Issued By: 

Contractor or Authorized Agent: 

Date: 10/25/19



# Town of Kill Devil Hills

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

## Planning and Inspection Department

**BP2019-239**

**PROJECT NAME:** Henderson Shed  
**SITE ADDRESS:** 311 CHOWAN ST W KILL DEVIL HILLS

**BUILDING**

**ISSUED:** 10/24/2019

**EXPIRES:** 04/21/2020

**APPLICANT:** HENDERSON, JOHN BRAD  
311 W CHOWAN STREET  
KILL DEVIL HILLS, NC 27948

**OWNER:** HENDERSON, JOHN BRAD  
311 W CHOWAN STREET  
KILL DEVIL HILLS, NC 27948

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

**License:** Unlicensed  
**Expires:** 12/31/2020

**PARCEL:**

**PIN:** 987520929288

**Parcel Number:** 000563000

**Address:** 311 CHOWAN ST W KILL DEVIL HILLS

**Addition:** VIRGINIA DARE SHORES

**Zoning:**  
**Block:** 42 **Lot(s):** 12-17

**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:** 12'x12' shed in rear yard

PAID  
OCT 24 2019

TOWN OF  
KILL DEVIL HILLS

**BP2019-239**

PROJECT NAME: Henderson Shed  
SITE ADDRESS: 311 CHOWAN ST W KILL DEVIL HILLS

**BUILDING**

ISSUED: 10/24/2019

EXPIRES: 04/21/2020

---

**DETAILS****Permit**

<b>Name</b>	<b>Value</b>
CAMA PERMIT	N
CAMA EXEMPTION	N
ZONING DISTRICT	RL
PURPOSE	Residential Accessory
FRONT YARD SETBACK	30
SIDE YARD SETBACK	10
REAR YARD SETBACK	20% Depth >30
FLOOD ZONE	AE
BASE FLOOD ELEVATION	8.3
FINAL ELEVATION CERTIFICATE	N
CONSTRUCTION COST	2000.00
LOT COVERAGE	17.00
SURVEYOR NAME AND NUMBER	Donald E. Wood
OCCUPANCY TYPE	One & Two Family Dwelling

---

**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.
- \* Zoning Final Inspection is required.

**BP2019-239**

**PROJECT NAME:** Henderson Shed

**SITE ADDRESS:** 311 CHOWAN ST W KILL DEVIL HILLS

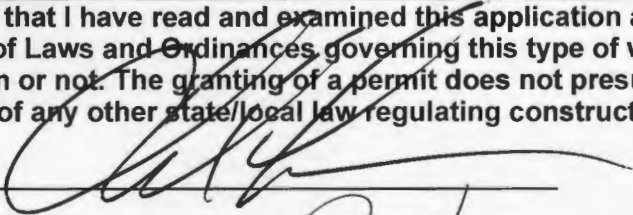
**BUILDING**

**ISSUED:** 10/24/2019

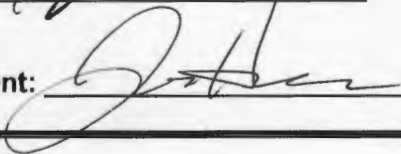
**EXPIRES:** 04/21/2020

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: \_\_\_\_\_



Date: 10-24-19



**Town of Kill Devil Hills**

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

PAID

OCT 25 2019

**Planning and Inspection Department**

**BP2019-246**

**PROJECT NAME:** MCNEAR ROOF PILINGS  
**SITE ADDRESS:** 111 CARLOW AVE KILL DEVIL HILLS

**BUILDING**

**ISSUED:** 10/25/2019

**EXPIRES:** 04/22/2020

**APPLICANT:** LOGAN MCNEAR  
430 LARK DR  
YORK HAVEN, PA 17370  
570-492-9570

**OWNER:** COLLIER, WAYNE F  
16108 AMETHYST LANE  
BOWIE, MD 00000

**ELECTRICAL - LIMITED:** Lawrence Cooper Barnes  
136 SCHOOLHOUSE RD  
Kill Devil Hills, NC 27948  
252-202-4162

**License:** 29254  
**Expires:** 04/26/2020

**PARCEL:**

**PIN:** 988419711646

**Parcel Number:** 003942000

**Address:** 111 CARLOW AVE KILL DEVIL HILLS

**Addition:** KITTY HAWK SHORES - REVISED

**Zoning:**  
**Block:** 41 **Lot(s):** 18

**Legal Description:**

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

**PROJECT DESCRIPTION:** REPLACE ROOF PILINGS AND GIRDER

**BP2019-246**

**PROJECT NAME:** MCNEAR ROOF PILINGS  
**SITE ADDRESS:** 111 CARLOW AVE KILL DEVIL HILLS

**BUILDING**

**ISSUED:** 10/25/2019

**EXPIRES:** 04/22/2020

**DETAILS**

Permit	
Name	Value
CAMA PERMIT	N
CAMA EXEMPTION	N
ZONING DISTRICT	RL
PURPOSE	Residential Repair/Remodel
FRONT YARD SETBACK	15
SIDE YARD SETBACK	6
REAR YARD SETBACK	20% Depth >30
FLOOD ZONE	AE
BASE FLOOD ELEVATION	8.00
FINAL ELEVATION CERTIFICATE	N
CONSTRUCTION COST	2500.00
CONSTRUCTION TYPE	V
OCCUPANCY TYPE	One & Two Family Dwelling

**REQUIRED INSPECTIONS**

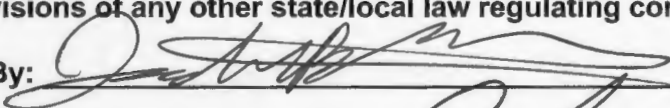
Zoning Final

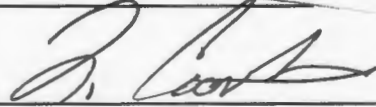
Final

**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: 10/25/19





**Town of Kill Devil Hills**

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

**Planning and Inspection Department**

<b>BP2019-247</b>	<b>BUILDING</b>
<b>PROJECT NAME:</b> TORCHIA DECKING AND STAIR	<b>ISSUED:</b> 10/30/2019
<b>SITE ADDRESS:</b> 808 Dean St. Kill Devil Hills	<b>EXPIRES:</b> 04/27/2020

<b>APPLICANT:</b> KEVIN TORCHIA 520 West Landing Drive Kill Devil Hills, NC 27948 252-480-2788	<b>OWNER:</b> KEVIN TORCHIA 520 West Landing Drive Kill Devil Hills, NC 27948 252-480-2788
---	---

<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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**PARCEL:**

<b>PIN:</b> 988316749424	<b>Parcel Number:</b> 004788001
<b>Address:</b> 808 Dean St. Kill Devil Hills	<b>Zoning:</b>
<b>Addition:</b> KILL DEVIL BEACH EXTENDED	<b>Block:</b> 4 <b>Lot(s):</b> 14
<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:** REBUILD EXTERIOR STAIR, DECKING AND RAILING

PAID  
OCT 30 2019  
TOWN OF  
KILL DEVIL HILLS

**BP2019-247****PROJECT NAME:** TORCHIA DECKING AND STAIR  
**SITE ADDRESS:** 808 Dean St. Kill Devil Hills**BUILDING****ISSUED:** 10/30/2019**EXPIRES:** 04/27/2020**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
STREET SIDE SETBACK	15
FLOOD ZONE	X
FINAL ELEVATION CERTIFICATE	N
CONSTRUCTION COST	6000.00
CONSTRUCTION TYPE	V
OCCUPANCY TYPE	One & Two Family Dwelling

**REQUIRED INSPECTIONS**

Zoning Final

Final

**CONDITIONS**

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

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

10-30-19



**Town of Kill Devil Hills**

OCT - 1 2019

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

**Planning and Inspection Department**

<b>BJ2019-170</b>	<b>BUILDING JOINT</b>
<b>PROJECT NAME:</b> Longo New 3 Bedroom House	<b>ISSUED:</b> 10/01/2019
<b>SITE ADDRESS:</b> 415 WALKER ST W KILL DEVIL HILLS	<b>EXPIRES:</b> 09/23/2020

<b>APPLICANT:</b> Sandy Bottom Homes 400 DaVinci Lane kitty hawk, nc 27949 757-448-8162	<b>OWNER:</b> LONGO, JAMES PO Box 193 Kill Devil Hills, NC 27948
--	--

<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
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**PARCEL:**

<b>PIN:</b> 988517010016	<b>Parcel Number:</b> 000656013
<b>Address:</b> 415 WALKER ST W KILL DEVIL HILLS	<b>Zoning:</b>
<b>Addition:</b> VIRGINIA DARE SHORES	<b>Block:</b> 53 <b>Lot(s):</b> 13,14,15
<b>Legal Description:</b>	

<b>FEES:</b>	<b>Paid</b>	<b>Due</b>	<b>BUILDING AREA:</b>	
Covered Porch Residential	\$170.25	\$0.00	# of Temporary Poles	1 EA
Open Deck Fee	\$150.00	\$0.00	Open Decks	1 EA
T-Pole	\$50.00	\$0.00	Residential Unheated (.40)	54 Sq. Ft
Res. Building Permit Fee	\$1,407.60	\$0.00	Residential Heated Space (.75)	1848 sq. Ft.
<b>Totals :</b>	<b>\$1,777.85</b>	<b>\$0.00</b>	Covered Porches/Decks	227 SQFT

**PROJECT DESCRIPTION:** New 3 Bedroom 3 Bath Single Family Dwelling

Town of Kill Devil Hills  
Water Charges

**PAID**

Water Tap #: T23759

**BJ2019-170**

**PROJECT NAME:** Longo New 3 Bedroom House  
**SITE ADDRESS:** 415 WALKER ST W KILL DEVIL HILLS

**BUILDING JOINT**

**ISSUED:** 10/01/2019

**EXPIRES:** 09/23/2020

**REQUIRED INSPECTIONS**

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

**CONDITIONS**

- \* NOTICE: Call Public Services Department (252) 480-4080 before pouring driveway!
- \* This permit becomes null and void if work or construction authorized is not commenced within 6 months or if construction or work is suspended for a period of 12 months at any time after work has started.
- \* Elevation Certificate will be required 21 days after establishment of the reference level in accordance with 151.41(C).
- \* As-built survey will be required prior to Certificate of Occupancy or Certificate of Compliance.
- \* The developer shall be responsible for maintaining erosion and sediment control at the disturbed area.
- \* 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.
- \* 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: 10-1-19



**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**

<b>BJ2019-171</b>	<b>BUILDING JOINT</b>
<b>PROJECT NAME:</b> James Hanks	<b>ISSUED:</b> 10/02/2019
<b>SITE ADDRESS:</b> 438 HAYMAN BLVD W KILL DEVIL HILLS	<b>EXPIRES:</b> 03/30/2020

**APPLICANT:** HANKS, JAMES  
3108 BAY DR  
KILL DEVIL HILLS, NC 27948  
252-457-7519

**OWNER:** HANKS, JAMES  
3108 BAY DR  
KILL DEVIL HILLS, NC 27948  
252-457-7519

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

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

**PARCEL:**

**PIN:** 987520913594

**Parcel Number:** 029802000

**Address:** 438 HAYMAN BLVD W KILL DEVIL HILLS

**Addition:** VIRGINIA DARE SHORES

**Zoning:**  
**Block:** 56      **Lot(s):** 38-40

**Legal Description:**

<b>FEES:</b>	<b>Paid</b>	<b>Due</b>	<b>BUILDING AREA:</b>	
Res. Building Permit Fee	\$456.00	\$0.00	Residential Heated Space	608 sq. Ft.
Covered Porch Residential	\$204.00	\$0.00	(.75)	
<b>Totals :</b>	<b>\$660.00</b>	<b>\$0.00</b>	Covered Porches/Decks	272 SQFT

**PROJECT DESCRIPTION:** Bedroom, bath and living room addition

OCT 2 2019

**BJ2019-171**

**PROJECT NAME:** James Hanks

**SITE ADDRESS:** 438 HAYMAN BLVD W KILL DEVIL HILLS

**BUILDING JOINT**

**ISSUED:** 10/02/2019

**EXPIRES:** 03/30/2020

- \* 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.
- \* Needs an updated proposed elevation certificate.
- \* Needs an updated survey showing 3 off-street parking spaces and wood patio meeting side yard setback requirements.
- \* Water Surety Bond required - \$40.00.
- \* See Public Services memo concerning driveway inverts.

I hereby certify that I have read and examined this application and know the same to be true and correct. All provisions of Laws and Ordinances governing this type of work will be complied with whether specified herein or not. The granting of a permit does not presume 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: 10/2/19



**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**

<b>BJ2019-176</b>	<b>BUILDING JOINT</b>
<b>PROJECT NAME:</b> YOUNG GARAGE ADDITION	<b>ISSUED:</b> 10/02/2019
<b>SITE ADDRESS:</b> 302 AIRSTRIP RD W KILL DEVIL HILLS	<b>EXPIRES:</b> 03/30/2020

<b>APPLICANT:</b> PAUL YOUNG 571 S. Darby Rd. Hermitage, PA 16148	<b>OWNER:</b> PAUL YOUNG 571 S. Darby Rd. Hermitage, PA 16148
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<b>BUILDER:</b> CROATAN CUSTOM HOMES 112 MARINERS VIEW kitty hawk, nc 27949 1-619-886-6107	<b>License:</b> 76893 <b>Expires:</b>
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<b>PARCEL:</b>			
<b>PIN:</b> 988312872051	<b>Parcel Number:</b>	027086000	
<b>Address:</b> 302 AIRSTRIP RD W KILL DEVIL HILLS	<b>Zoning:</b>		
<b>Addition:</b> KILL DEVIL HILLS REALTY CORP	<b>Block:</b> 22	<b>Lot(s):</b>	5
<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:** 14'X18' GARAGE ADDITION IN REAR YARD

OCT 2 2019



**BJ2019-176**

**PROJECT NAME:** YOUNG GARAGE ADDITION  
**SITE ADDRESS:** 302 AIRSTRIP RD W KILL DEVIL HILLS

**BUILDING JOINT**

ISSUED: 10/02/2019

EXPIRES: 03/30/2020

**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
CAMA PERMIT	N
CAMA EXEMPTION	N
FLOOD ZONE	X
SUBSTANTIAL IMPROVEMENT	NO
PURPOSE	Residential Addition
CONSTRUCTION TYPE	V
CONSTRUCTION COST	15000.00
GARAGE (SQFT)	252
CULVERT	N
DRIVEWAY INVERT 2	N
OCCUPANCY TYPE	One & Two Family Dwelling

**REQUIRED INSPECTIONS**

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.
- \* 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.
- \* Construction must meet all aspect of Chapter 153 Zoning including lot coverage and setbacks.
- \* Zoning Final Inspection is required.



**BJ2019-176**

**PROJECT NAME:** YOUNG GARAGE ADDITION

**SITE ADDRESS:** 302 AIRSTRIP RD W KILL DEVIL HILLS

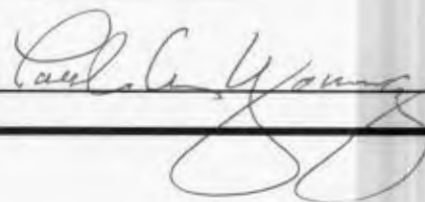
**BUILDING JOINT**

**ISSUED:** 10/02/2019

**EXPIRES:** 03/30/2020

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: 10/2/19



**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**

<b>BJ2019-173</b>	<b>BUILDING JOINT</b>
<b>PROJECT NAME:</b> Scarborough Bedroom Addition	<b>ISSUED:</b> 09/27/2019
<b>SITE ADDRESS:</b> 1805 SEA SWEPT RD KILL DEVIL HILLS	<b>EXPIRES:</b> 03/25/2020

<b>APPLICANT:</b> CHRIS SCARBOROUGH 1815 Seaswept Rd. KDH, NC 27948 252-202-3308	<b>OWNER:</b> CHRIS SCARBOROUGH 1815 Seaswept Rd. KDH, NC 27948 252-202-3308
---	---

<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> 988409161633	<b>Parcel Number:</b> 012324000
<b>Address:</b> 1805 SEA SWEPT RD KILL DEVIL HILLS	<b>Zoning:</b>
<b>Addition:</b> SEA HOLLY RIDGE	<b>Block:</b> C <b>Lot(s):</b> 1
<b>Legal Description:</b>	

<b>FEES:</b>	<u>Paid</u>	<u>Due</u>	<b>BUILDING AREA:</b>
Renovation/Remodel/Relocate	\$504.00	\$0.00	Remodel/Renovation      1120 SQFT
<b>Totals :</b>	<b>\$504.00</b>	<b>\$0.00</b>	

**PROJECT DESCRIPTION:** Add 1 bedroom and 1 bathroom to an existing SFD

OCT 3 2019

**BJ2019-173**

**PROJECT NAME:** Scarborough Bedroom Addition  
**SITE ADDRESS:** 1805 SEA SWEPT RD 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 #	29014
CAMA PERMIT	N
CAMA EXEMPTION	N
FLOOD ZONE	AE
BASE FLOOD ELEVATION	8.3
Proposed First Floor Elevation	9.40
SUBSTANTIAL IMPROVEMENT	NO
PURPOSE	Residential Addition
CONSTRUCTION TYPE	V
CONSTRUCTION COST	10000.00
LOT COVERAGE	35.20
LIVING SPACE (SQFT)	798
STORAGE (SQFT)	322
SURVEYOR NAME AND NUMBER	M Douglas Styons L-3227
CULVERT	N
DRIVEWAY INVERT 2	N
OCCUPANCY TYPE	One & Two Family Dwelling

**REQUIRED INSPECTIONS**

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

**CONDITIONS**

**BJ2019-173**

**PROJECT NAME:** Scarborough Bedroom Addition  
**SITE ADDRESS:** 1805 SEA SWEPT RD KILL DEVIL HILLS

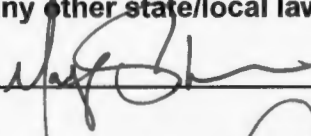
**BUILDING JOINT**

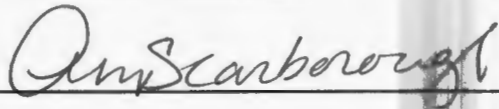
**ISSUED:** 09/27/2019

**EXPIRES:** 03/25/2020

- \* This permit becomes null and void if work or construction authorized is not commenced within 6 months or if construction or work is suspended for a period of 12 months at any time after work has started.
- \* Development must meet all aspects of Chapter 151 Flood Damage Prevention Ordinance including use and elevation.
- \* Construction must meet all aspect of Chapter 153 Zoning including lot coverage and setbacks.
- \* Zoning Final Inspection is required.

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

Issued By: 

Contractor or Authorized Agent:  Date: 10/3/19



**Town of Kill Devil Hills**

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

OCT 7 2019

**Planning and Inspection Department**

**BJ2019-165**

**PROJECT NAME:** Watson Garage Conversion  
**SITE ADDRESS:** 311 FIRST ST W KILL DEVIL HILLS

**BUILDING JOINT**

**ISSUED:** 09/10/2019

**EXPIRES:** 03/08/2020

**APPLICANT:** Watson, Craig  
311 West First Street  
Kill Devil Hills, NC 27948  
252-455-5718

**OWNER:** Watson, Craig  
311 West First Street  
Kill Devil Hills, NC 27948  
252-455-5718

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

**License:** Unlicensed  
**Expires:** 12/31/2020

**PARCEL:**

**PIN:** 988410353130

**Parcel Number:** 003439000

**Address:** 311 FIRST ST W KILL DEVIL HILLS

**Addition:** FIRST FLIGHT VILLAGE SEC 1

**Zoning:**  
**Block:** 0 **Lot(s):** 189

**Legal Description:**

<b>FEES:</b>	<u>Paid</u>	<u>Due</u>	<b>BUILDING AREA:</b>	
Res. Building Permit Fee	\$198.00	\$0.00	Residential Heated Space	264 sq. Ft.
			(.75)	
<b>Totals :</b>	<b>\$198.00</b>	<b>\$0.00</b>		

**PROJECT DESCRIPTION:** Remodel existing garage into rec room heated living space

**BJ2019-165**

**PROJECT NAME:** Watson Garage Conversion  
**SITE ADDRESS:** 311 FIRST ST W KILL DEVIL HILLS

**BUILDING JOINT**

ISSUED: 09/10/2019

EXPIRES: 03/08/2020

**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 #	28917
# PARKING SPACES/BEDROOM	3
CAMA PERMIT	N
CAMA EXEMPTION	N
FLOOD ZONE	AE
BASE FLOOD ELEVATION	8.3
Proposed First Floor Elevation	9.90
SUBSTANTIAL IMPROVEMENT	NO
PURPOSE	Residential Addition
CONSTRUCTION COST	10000.00
LOT COVERAGE	28.60
LIVING SPACE (SQFT)	264
SURVEYOR NAME AND NUMBER	M. Douglas Styons L-3227
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**

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

**BJ2019-165**

**PROJECT NAME:** Watson Garage Conversion  
**SITE ADDRESS:** 311 FIRST ST W KILL DEVIL HILLS

**BUILDING JOINT**

**ISSUED:** 09/10/2019

**EXPIRES:** 03/08/2020

- \* This permit becomes null and void if work or construction authorized is not commenced within 6 months or if construction or work is suspended for a period of 12 months at any time after work has started.
- \* As-built survey will be required prior to Certificate of Occupancy or Certificate of Compliance.
- \* 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.
- \* Per section 153.076(A)(7)(c) Materials for driveways and parking lots.  
Single Family and duplex residential driveway and parking areas can utilize approved commercial materials as in division (7) (a) or a minimum of four inches of compacted Aggregate Base Course with one inch of pea gravel as an approved surface. When ABC pea gravel option is utilized the following conditions shall apply. Loose stone surface shall be bordered by concrete or salt-treated timbers in a manner which retains the stone in the driveway or parking area.

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

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

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

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



# Town of Kill Devil Hills

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

## Planning and Inspection Department

**BJ2019-178**

**PROJECT NAME:** Action Plumbing Remodel  
**SITE ADDRESS:** 2010 Croatan Hwy. HWY S. KILL DEVIL HILLS

**BUILDING JOINT**

**ISSUED:** 10/04/2019

**EXPIRES:** 04/01/2020

**APPLICANT:** Wigwam Caravan, LLC  
PO Box 842  
nags head, nc 27959

**OWNER:** Wigwam Caravan, LLC  
PO Box 842  
nags head, nc 27959

**CONTRACTOR:** ACTION PLUMBING, INC.  
4885 The Woods Road  
Kitty Hawk, NC 27949

**PLUMBING:** ACTION PLUMBING, INC.  
4885 The Woods Road  
Kitty Hawk, NC 27949

**License:** 19207  
**Expires:** 12/31/2019

**PARCEL:**

**PIN:** 98931303326511

**Parcel Number:** 029858000

**Address:** 2010 Croatan Hwy. HWY S. KILL DEVIL HILLS

**Addition:**

**Zoning:**

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

**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:** remodel existing bathroom increasing size, rewire, make ada compliant

OCT 9 2019



**BJ2019-178**

**PROJECT NAME:** Action Plumbing Remodel  
**SITE ADDRESS:** 2010 Croatan Hwy. HWY S. KILL DEVIL HILLS

**BUILDING JOINT**

ISSUED: 10/04/2019

EXPIRES: 04/01/2020

**DETAILS****Permit**

Name	Value
ZONING DISTRICT	LI-1
CAMA PERMIT	N
CAMA EXEMPTION	N
FLOOD ZONE	X
SUBSTANTIAL IMPROVEMENT	NO
PURPOSE	Commercial Repair/Remodel
CONSTRUCTION COST	8500.00
CULVERT	N
DRIVEWAY INVERT 2	N

**REQUIRED INSPECTIONS**

In-Slab Plumbing	Insulation
Framing	Final
Rough In	Zoning Final

**CONDITIONS**

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

I hereby certify that I have read and examined this application and know the same to be true and correct. All provisions of Laws and Ordinances governing this type of work will be complied with whether specified herein or not. The granting of a permit does not presume 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: 10-9-19



# Town of Kill Devil Hills

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

PAYD

OCT 9 2019

## Planning and Inspection Department

**BJ2019-179**

**PROJECT NAME:** MOORE GROUND FLOOR STORAGE  
**SITE ADDRESS:** 110 CAMELLIA DR KILL DEVIL HILLS

**BUILDING JOINT**

**ISSUED:** 10/08/2019

**EXPIRES:** 04/05/2020

**APPLICANT:** SAM MOORE  
PO BOX 956  
MANTEO, NC 27954  
252-475-7084

**OWNER:** SAM MOORE  
PO BOX 956  
MANTEO, NC 27954  
252-475-7084

**GENERAL BUILDING-LIMITED:** SOUNDSIDE CONSTRUCTION  
P. O. Box 956  
Manteo, NC 27954  
252-305-2526

**License:** 26759  
**Expires:** 01/13/2020

**PARCEL:**

**PIN:** 988411552430

**Parcel Number:** 003135000

**Address:** 110 CAMELLIA DR KILL DEVIL HILLS

**Addition:** W R DEATON - DELRAY BEACH

**Zoning:**

**Block:** 2 **Lot(s):** PT 18

**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:** REMOVE PANELING AND PLUMBING BELOW BASE FLOOD AND RETURN ROOM TO UNFINISHED STORAGE

**BJ2019-179**

**PROJECT NAME:** MOORE GROUND FLOOR STORAGE  
**SITE ADDRESS:** 110 CAMELLIA DR KILL DEVIL HILLS

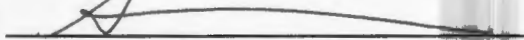
**BUILDING JOINT**

**ISSUED:** 10/08/2019

**EXPIRES:** 04/05/2020

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

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

Contractor or Authorized Agent:  \_\_\_\_\_ Date: 10-9-19



**Town of Kill Devil Hills**

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

**Planning and Inspection Department**

**BJ2019-177**

**PROJECT NAME:** Martone New Single Family Dwelling  
**SITE ADDRESS:** 430 EDEN ST W KILL DEVIL HILLS

**BUILDING JOINT**

**ISSUED:** 10/14/2019

**EXPIRES:** 04/11/2020

**APPLICANT:** MARTONE, VICKI  
P O BOX 469  
KITTY HAWK, NC 27949

**OWNER:** MARTONE, VICKI  
P O BOX 469  
KITTY HAWK, NC 27949

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

**License:** Unlicensed  
**Expires:** 12/31/2020

**PARCEL:**

**PIN:** 988517000615

**Parcel Number:** 003017000

**Address:** 430 EDEN ST W KILL DEVIL HILLS

**Addition:** VIRGINIA DARE SHORES

**Zoning:**  
**Block:** 52 **Lot(s):** 34-36

**Legal Description:**

<b>FEES:</b>	<b>Paid</b>	<b>Due</b>	<b>BUILDING AREA:</b>	
Covered Porch Residential	\$171.00	\$0.00	Covered Porches/Decks	228 SQFT
Res. Building Permit Fee	\$1,901.15	\$0.00	Residential Unheated (.40)	656 Sq. Ft
T-Pole	\$50.00	\$0.00	Residential Heated Space	2185 sq. Ft.
Land Disturbing	\$100.00	\$0.00	(.75)	
<b>Totals :</b>	<b>\$2,222.15</b>	<b>\$0.00</b>	<b># of Temporary Poles</b>	<b>1 EA</b>

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

OCT 15 2019

**BJ2019-177****PROJECT NAME:** Martone New Single Family Dwelling  
**SITE ADDRESS:** 430 EDEN ST W KILL DEVIL HILLS**BUILDING JOINT****ISSUED:** 10/14/2019**EXPIRES:** 04/11/2020

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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	10
HEALTH DEPARTMENT PERMIT #	29015
# PARKING SPACES/BEDROOM	3
CAMA PERMIT	N
CAMA EXEMPTION	N
FLOOD ZONE	AE
BASE FLOOD ELEVATION	8.3
Proposed First Floor Elevation	11.10
SUBSTANTIAL IMPROVEMENT	NO
PURPOSE	Residential New
CONSTRUCTION TYPE	V
CONSTRUCTION COST	235000.00
LOT COVERAGE	32.80
LIVING SPACE (SQFT)	2185
COVERED PORCHES/DECKS (SQFT)	228
GARAGE (SQFT)	656
TOTAL SQUARE FOOTAGE	3069
SURVEYOR NAME AND NUMBER	Jamie E. Furr L-4692
ENGINEER AND LICENSE NUMBER	Barrett C. Crook 027540
CULVERT	N
DRIVEWAY INVERT 2	Y
OCCUPANCY TYPE	One & Two Family Dwelling

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**BJ2019-177**

**PROJECT NAME:** Martone New Single Family Dwelling  
**SITE ADDRESS:** 430 EDEN ST W KILL DEVIL HILLS

**BUILDING JOINT**

**ISSUED:** 10/14/2019

**EXPIRES:** 04/11/2020

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

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

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

Contractor or Authorized Agent: Richard J. Martone

Date: Oct 15, 2019



# Town of Kill Devil Hills

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

OCT 15 2019

## Planning and Inspection Department

**BJ2019-180**

**PROJECT NAME:** Fennell Elevator  
**SITE ADDRESS:** 2017 VA DARE TRL N KILL DEVIL HILLS

**BUILDING JOINT**

**ISSUED:** 10/11/2019

**EXPIRES:** 04/08/2020

**APPLICANT:** Fennell, James  
2334 Mt Tabor Road  
GAMBRILLS, MD 21054

**OWNER:** Fennell, James  
2334 Mt Tabor Road  
GAMBRILLS, MD 21054

**CONTRACTOR:** Coastal Cottage Contracting  
PO Box 433  
nags head, nc 27959  
252-715-2576

**BUILDING-UNLIMITED:** Coastal Cottage Contracting  
PO Box 433  
nags head, nc 27959  
252-715-2576

**License:** 75876  
**Expires:**

**PARCEL:**

**PIN:** 988518306215

**Parcel Number:** 002347000

**Address:** 2017 VA DARE TRL N KILL DEVIL HILLS

**Addition:** MILES CLARK

**Zoning:**  
**Block:** 0 **Lot(s):** 39 & 41

**Legal Description:**

<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:** Add elevator shaft and elevator from ground floor to mid floor on existing structure



**BJ2019-180**

PROJECT NAME: Fennell Elevator

SITE ADDRESS: 2017 VA DARE TRL N KILL DEVIL HILLS

**BUILDING JOINT**

ISSUED: 10/11/2019

EXPIRES: 04/08/2020

**DETAILS****Permit**

<b>Name</b>	<b>Value</b>
ZONING DISTRICT	OIR
FRONT YARD SETBACK	30
REAR YARD SETBACK	CAMA
SIDE YARD SETBACK	12
CAMA PERMIT	N
CAMA EXEMPTION	N
FLOOD ZONE	VE
BASE FLOOD ELEVATION	11.0
SUBSTANTIAL IMPROVEMENT	NO
PURPOSE	Residential Accessory
CONSTRUCTION COST	25000.00
SURVEYOR NAME AND NUMBER	Gloria J. Rogers L-3531
ENGINEER AND LICENSE NUMBER	Michael Osteen 032628
CULVERT	N
DRIVEWAY INVERT 2	N
OCCUPANCY TYPE	One & Two Family Dwelling

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



**BJ2019-180**

**PROJECT NAME:** Fennell Elevator

**SITE ADDRESS:** 2017 VA DARE TRL N KILL DEVIL HILLS

**BUILDING JOINT**

**ISSUED:** 10/11/2019

**EXPIRES:** 04/08/2020

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

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

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

*Coastal College Contracting, LLC*

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

*10/15/19*

*By Taylor Robinson member/manager*



**Town of Kill Devil Hills**

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

PAD

OCT 16 2019

**Planning and Inspection Department**

TOWN OF  
KILL DEVIL HILLS

**BJ2019-181**

**PROJECT NAME:**

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

**BUILDING JOINT**

**ISSUED:** 10/11/2019

**EXPIRES:** 04/08/2020

**APPLICANT:** Milbrand, Phillip & Julie  
PO Box 3160  
kitty hawk, nc 27949  
415-730-9171

**OWNER:** Milbrand, Phillip & Julie  
PO Box 3160  
kitty hawk, nc 27949  
415-730-9171

**GENERAL:** Empire Construction Services LLC  
PO Box 1263  
Wanchese, NC 27954

**License:** unlicensed  
**Expires:**

**PARCEL:**

**PIN:** 98841156647315

**Parcel Number:** 002781015

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

**Addition:**

**Zoning:**

**Block:** B

**Lot(s):** UT 305 16-20

**Legal Description:**

<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:** Remodel 2 bathrooms and kitchen.

**BJ2019-181**

**PROJECT NAME:**

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

**BUILDING JOINT**

**ISSUED:** 10/11/2019

**EXPIRES:** 04/08/2020

**DETAILS**

**Permit**

<b>Name</b>	<b>Value</b>
ZONING DISTRICT	OIR
CAMA PERMIT	N
CAMA EXEMPTION	N
FLOOD ZONE	VE
BASE FLOOD ELEVATION	11
SUBSTANTIAL IMPROVEMENT	NO
CONSTRUCTION TYPE	V
CONSTRUCTION COST	27131.00
CULVERT	N
DRIVEWAY INVERT 2	N

**REQUIRED INSPECTIONS**

Framing	Insulation
Rough In	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!

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

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

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

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



**Town of Kill Devil Hills**

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

**Planning and Inspection Department**

<b>BJ2019-187</b>	<b>BUILDING JOINT</b>
<b>PROJECT NAME:</b> Stephanie Hall	<b>ISSUED:</b> 10/18/2019
<b>SITE ADDRESS:</b> 410 WILKINSON ST W KILL DEVIL HILLS	<b>EXPIRES:</b> 04/15/2020

<b>APPLICANT:</b> Hall, Stephanie 410 WILKINSON ST KILL DEVIL HILLS, NC 27948	<b>OWNER:</b> Hall, Stephanie 410 WILKINSON ST KILL DEVIL HILLS, NC 27948
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<b>CONTRACTOR:</b>	SAME AS OWNER UNKNOWN UNKNOWN, XX 00000	<b>License:</b> Same as Owner <b>Expires:</b> 12/30/2019
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**PARCEL:**

<b>PIN:</b> 987520922366	<b>Parcel Number:</b> 000681000
<b>Address:</b> 410 WILKINSON ST W KILL DEVIL HILLS	<b>Zoning:</b>
<b>Addition:</b> VIRGINIA DARE SHORES	<b>Block:</b> 59 <b>Lot(s):</b> 26-28
<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:** Add storage under house - parking not affected

OCT 18 2019

**BJ2019-187**

PROJECT NAME: Stephanie Hall

SITE ADDRESS: 410 WILKINSON ST W KILL DEVIL HILLS

**BUILDING JOINT**

ISSUED: 10/18/2019

EXPIRES: 04/15/2020

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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
# PARKING SPACES/BEDROOM	3
CAMA PERMIT	N
CAMA EXEMPTION	N
FLOOD ZONE	X
SUBSTANTIAL IMPROVEMENT	NO
CONSTRUCTION COST	1000.00
SURVEYOR NAME AND NUMBER	C. Robert Moore III
CULVERT	N
DRIVEWAY INVERT 2	N

---

**REQUIRED INSPECTIONS**

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.

\* 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.

**BJ2019-187**

**PROJECT NAME:** Stephanie Hall

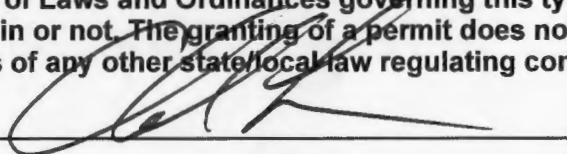
**SITE ADDRESS:** 410 WILKINSON ST W KILL DEVIL HILLS

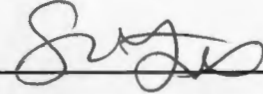
**BUILDING JOINT**

**ISSUED:** 10/18/2019

**EXPIRES:** 04/15/2020

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: 10/18/19



**Town of Kill Devil Hills**

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

OCT 22 2019

**Planning and Inspection Department**

<b>BJ2019-184</b>	<b>BUILDING JOINT</b>
<b>PROJECT NAME:</b> Chinchilla New SFD	<b>ISSUED:</b> 10/22/2019
<b>SITE ADDRESS:</b> 704 AIRSTRIP RD W KILL DEVIL HILLS	<b>EXPIRES:</b> 04/19/2020

<b>APPLICANT:</b> CHINCHILLA, TITO 1310 Maxine Street Kill Devil Hills, NC 27948	<b>OWNER:</b> CHINCHILLA, TITO 1310 Maxine Street 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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**PARCEL:**

<b>PIN:</b> 988311752952	<b>Parcel Number:</b> 004554000
<b>Address:</b> 704 AIRSTRIP RD W KILL DEVIL HILLS	<b>Zoning:</b>
<b>Addition:</b> KILL DEVIL HILLS REALTY CORP	<b>Block:</b> 46 <b>Lot(s):</b> 6
<b>Legal Description:</b>	

<b>FEES:</b>	<b>Paid</b>	<b>Due</b>	<b>BUILDING AREA:</b>	
Covered Porch Residential	\$493.50	\$0.00	Residential Heated Space	4409 sq. Ft.
T-Pole	\$50.00	\$0.00	(.75)	
Res. Building Permit Fee	\$4,079.15	\$0.00	Covered Porches/Decks	658 SQFT
			# of Temporary Poles	1 EA
<b>Totals :</b>	<b>\$4,622.65</b>	<b>\$0.00</b>	Residential Unheated (.40)	1931 Sq. Ft

**PROJECT DESCRIPTION:** New 4 Bedroom Single Family Dwelling

Town of Kill Devil Hills  
Water Charges  
**PAID**  
Water Tap #: T 23767

**BJ2019-184****PROJECT NAME:** Chinchilla New SFD  
**SITE ADDRESS:** 704 AIRSTRIP RD W KILL DEVIL HILLS**BUILDING JOINT****ISSUED:** 10/22/2019**EXPIRES:** 04/19/2020

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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	10
HEALTH DEPARTMENT PERMIT #	29039
# PARKING SPACES/BEDROOM	4
CAMA PERMIT	N
CAMA EXEMPTION	N
FLOOD ZONE	X
SUBSTANTIAL IMPROVEMENT	NO
PURPOSE	Residential New
CONSTRUCTION COST	500000.00
LOT COVERAGE	37.14
LIVING SPACE (SQFT)	4409
COVERED PORCHES/DECKS (SQFT)	658
GARAGE (SQFT)	1931
TOTAL SQUARE FOOTAGE	6998
SURVEYOR NAME AND NUMBER	Carlos F. Gomez 014071
ENGINEER AND LICENSE NUMBER	Carlos Gomez 14071
CULVERT	N
ROLL OUT CAN	1
DRIVEWAY INVERT 2	Y
OCCUPANCY TYPE	One & Two Family Dwelling

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**BJ2019-184**

**PROJECT NAME:** Chinchilla New SFD  
**SITE ADDRESS:** 704 AIRSTRIP RD W KILL DEVIL HILLS

**BUILDING JOINT**

**ISSUED:** 10/22/2019

**EXPIRES:** 04/19/2020

**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!
- \* As-built survey will be required prior to Certificate of Occupancy or Certificate of Compliance.
- \* The developer shall be responsible for maintaining erosion and sediment control at the disturbed area.
- \* Per §153.082(B)(1)(c) Mechanical equipment, including HVAC equipment and LP Gas equipment shall not project into a minimum yard setback more than four (4) feet.
- \* Per §153.186(D)(1) Mechanical equipment shall not be visible from any right-of-way and (2) All Mechanical equipment and appurtenances shall be screened.
- \* Must comply with Wind Borne Debris requirements as defined in NCBC R301.2.1.2 and NCBC 1609.2.
- \* Construction must meet all aspect of Chapter 153 Zoning including lot coverage and setbacks.
- \* Zoning Final Inspection is required.
- \* Engineered truss cut sheets required for all floor and roof trusses before they are installed.

I hereby certify that I have read and examined this application and know the same to be true and correct. All provisions of Laws and Ordinances governing this type of work will be complied with whether specified herein or not. The granting of a permit does not presume 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: 10-22-19



# Town of Kill Devil Hills

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

## Planning and Inspection Department

**BJ2019-186**

**PROJECT NAME:** Thomas and Robin Nida  
**SITE ADDRESS:** 1004 SEVENTH AVE KILL DEVIL HILLS

**BUILDING JOINT**

**ISSUED:** 10/25/2019

**EXPIRES:** 04/22/2020

**APPLICANT:** SNEARER, PAUL / SNEARER  
CONSTRUCTION INC  
133 Bayberry Trail  
PO Box 2875  
Kitty Hawk, NC 27949

**OWNER:** Nida, Thomas/Robin  
6445 Luzon Ave NW 517  
PO Box 1687  
Washington DC, DC 20012  
202-809-7711

**GENERAL UNLIMITED:** SNEARER, PAUL / SNEARER CONSTRUCTION INC  
133 Bayberry Trail  
PO Box 2875  
Kitty Hawk, NC 27949  
**License:** 25865  
**Expires:** 12/31/2019

**PARCEL:**

**PIN:** 988311762172      **Parcel Number:** 004552000  
**Address:** 1004 SEVENTH AVE KILL DEVIL HILLS  
**Addition:** KILL DEVIL HILLS REALTY CORP      **Zoning:**  
**Legal Description:**      **Block:** 46      **Lot(s):** 3

<b>FEES:</b>	<b>Paid</b>	<b>Due</b>	<b>BUILDING AREA:</b>	
T-Pole	\$50.00	\$0.00	Open Decks	1 EA
Res. Building Permit Fee	\$1,723.85	\$0.00	# of Temporary Poles	1 EA
Covered Porch Residential	\$144.00	\$0.00	Residential Unheated (.40)	494 Sq. Ft
Open Deck Fee	\$150.00	\$0.00	Covered Porches/Decks	192 SQFT
<b>Totals :</b>	<b>\$2,067.85</b>	<b>\$0.00</b>	Residential Heated Space (.75)	2035 sq. Ft.

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

OCT 28 2019

**BJ2019-186****PROJECT NAME:** Thomas and Robin Nida  
**SITE ADDRESS:** 1004 SEVENTH AVE KILL DEVIL HILLS**BUILDING JOINT****ISSUED:** 10/25/2019**EXPIRES:** 04/22/2020

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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	10
STREET SIDE SETBACK	15
HEALTH DEPARTMENT PERMIT #	29069
# PARKING SPACES/BEDROOM	4
CAMA PERMIT	N
CAMA EXEMPTION	N
FLOOD ZONE	X
SUBSTANTIAL IMPROVEMENT	NO
CONSTRUCTION COST	315000.00
LOT COVERAGE	28.70
LIVING SPACE (SQFT)	2035
COVERED PORCHES/DECKS (SQFT)	192
GARAGE (SQFT)	494
OPEN DECK (SQFT)	88
TOTAL SQUARE FOOTAGE	2809
SURVEYOR NAME AND NUMBER	Styons Surveying Services
ARCHITECT NAME AND LICENSE NUMBER	Thomas Franchi 028963
CULVERT	N
ROLL OUT CAN	1
DRIVEWAY INVERT 2	Y

---

**BJ2019-186**

**PROJECT NAME:** Thomas and Robin Nida  
**SITE ADDRESS:** 1004 SEVENTH AVE KILL DEVIL HILLS

**BUILDING JOINT**

**ISSUED:** 10/25/2019

**EXPIRES:** 04/22/2020

**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!
- \* As-built survey will be required prior to Certificate of Occupancy or Certificate of Compliance.
- \* The developer shall be responsible for maintaining erosion and sediment control at the disturbed area.
- \* Per §153.082(B)(1)(c) Mechanical equipment, including HVAC equipment and LP Gas equipment shall not project into a minimum yard setback more than four (4) feet.
- \* Must comply with Wind Borne Debris requirements as defined in NCBC R301.2.1.2 and NCBC 1609.2.
- \* 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: 10-28-19



**Town of Kill Devil Hills**

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

PAID

OCT 28 2019

**Planning and Inspection Department**

**BJ2019-189**

**PROJECT NAME:** Thomas Renovation  
**SITE ADDRESS:** 106 AVIATION AVE E KILL DEVIL HILLS

**BUILDING JOINT**

**ISSUED:** 10/28/2019

**EXPIRES:** 04/25/2020

**APPLICANT:** THOMAS, SCOTT  
3954 Beeler Street  
DENVER, CO 80238

**OWNER:** THOMAS, SCOTT  
3954 Beeler Street  
DENVER, CO 80238

**CONTRACTOR:** ALBEMARLE CONTRACTING COMPANY  
PO Box 1771  
NAGS HEAD, NC 27959  
252-599-2999

**BUILDING LIMITED:** ALBEMARLE CONTRACTING COMPANY  
PO Box 1771  
NAGS HEAD, NC 27959  
252-599-2999

**License:** 58406  
**Expires:** 12/30/2019

**PARCEL:**

**PIN:** 988419713047

**Parcel Number:** 003906000

**Address:** 106 AVIATION AVE E KILL DEVIL HILLS

**Zoning:**

**Addition:** KITTY HAWK SHORES - REVISED

**Block:** 39 **Lot(s):** 9

**Legal Description:**

<b>FEES:</b>	<b>Paid</b>	<b>Due</b>	<b>BUILDING AREA:</b>
Renovation/Remodel/Relocate	\$491.40	\$0.00	Remodel/Renovation 1092 SQFT
<b>Totals :</b>	<b>\$491.40</b>	<b>\$0.00</b>	

**PROJECT DESCRIPTION:** replace decks, windows, siding, insulation, cabinets, flooring, bathrooms and add 8x12 storage room

**BJ2019-189**

**PROJECT NAME:** Thomas Renovation

**SITE ADDRESS:** 106 AVIATION AVE E KILL DEVIL HILLS

**BUILDING JOINT**

**ISSUED:** 10/28/2019

**EXPIRES:** 04/25/2020

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**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
# PARKING SPACES/BEDROOM	3
CAMA PERMIT	N
CAMA EXEMPTION	N
FLOOD ZONE	AE
BASE FLOOD ELEVATION	8.3
SUBSTANTIAL IMPROVEMENT	YES
PURPOSE	Residential Repair/Remodel
CONSTRUCTION TYPE	V
CONSTRUCTION COST	120000.00
LOT COVERAGE	33.00
LIVING SPACE (SQFT)	1092
SURVEYOR NAME AND NUMBER	Michael D. Barr L-1756
CULVERT	N
DRIVEWAY INVERT 2	N
OCCUPANCY TYPE	One & Two Family Dwelling

---

**REQUIRED INSPECTIONS**

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

---

**CONDITIONS**

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

---

**BJ2019-189**

**PROJECT NAME:** Thomas Renovation

**SITE ADDRESS:** 106 AVIATION AVE E KILL DEVIL HILLS

**BUILDING JOINT**

**ISSUED:** 10/28/2019

**EXPIRES:** 04/25/2020

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

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

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

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

\* Zoning Final Inspection is required.

\* Parking must be brought into compliance Per 153.053 Zoning Nonconformity.

I hereby certify that I have read and examined this application and know the same to be true and correct. All provisions of Laws and Ordinances governing this type of work will be complied with whether specified herein or not. The granting of a permit does not presume 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: 10-28-19





# Town of Kill Devil Hills

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

## Planning and Inspection Department

**BJ2019-190**

**PROJECT NAME:** 505 LLC Enclosure and driveway addition  
**SITE ADDRESS:** 3318 VA DARE TRL N KILL DEVIL HILLS

**BUILDING JOINT**

**ISSUED:** 10/28/2019

**EXPIRES:** 04/25/2020

**APPLICANT:** 505 LLC  
312 W. Tateway Rd.  
kitty hawk, nc 27949

**OWNER:** 505 LLC  
312 W. Tateway Rd.  
kitty hawk, nc 27949

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

**License:** Unlicensed  
**Expires:** 12/31/2020

**PARCEL:**

**PIN:** 988509053257

**Parcel Number:** 000060000

**Address:** 3318 VA DARE TRL N KILL DEVIL HILLS

**Addition:** ORVILLE BEACH BLK 2

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

**Legal Description:**

<b>FEES:</b>	<b>Paid</b>	<b>Due</b>	<b>BUILDING AREA:</b>	
Res. Building Permit Fee	\$159.20	\$0.00	Residential Unheated (.40)	398 Sq. Ft
<b>Totals :</b>	<b>\$159.20</b>	<b>\$0.00</b>		

**PROJECT DESCRIPTION:** addition to existing driveway, add enclosure underneath house with breakaway walls

PAID

OCT 28 2019

TOWN OF  
KILL DEVIL HILLS



**BJ2019-190**

**PROJECT NAME:** 505 LLC Enclosure and driveway addition  
**SITE ADDRESS:** 3318 VA DARE TRL N KILL DEVIL HILLS

**BUILDING JOINT****ISSUED:** 10/28/2019**EXPIRES:** 04/25/2020**DETAILS****Permit**

<b>Name</b>	<b>Value</b>
ZONING DISTRICT	C
FRONT YARD SETBACK	30
REAR YARD SETBACK	20% Depth >30
SIDE YARD SETBACK	10
# PARKING SPACES/BEDROOM	4
CAMA PERMIT	N
CAMA EXEMPTION	N
FLOOD ZONE	VE
BASE FLOOD ELEVATION	11.0
Proposed First Floor Elevation	11.80
SUBSTANTIAL IMPROVEMENT	NO
PURPOSE	Residential Addition
CONSTRUCTION COST	10000.00
LOT COVERAGE	30.50
GARAGE (SQFT)	398
SURVEYOR NAME AND NUMBER	M Douglas Styons L-3227
ARCHITECT NAME AND LICENSE NUMBER	Chris Jenkins 11903
CULVERT	N
DRIVEWAY INVERT 2	N
OCCUPANCY TYPE	One & Two Family Dwelling

**REQUIRED INSPECTIONS**

Slab/Foundation/Piling	Final
Framing	Zoning Final
Rough In	

**CONDITIONS**

**BJ2019-190**

PROJECT NAME: 505 LLC Enclosure and driveway addition  
SITE ADDRESS: 3318 VA DARE TRL N KILL DEVIL HILLS

**BUILDING JOINT**

ISSUED: 10/28/2019

EXPIRES: 04/25/2020

- \* This permit becomes null and void if work or construction authorized is not commenced within 6 months or if construction or work is suspended for a period of 12 months at any time after work has started.
- \* As-built survey will be required prior to Certificate of Occupancy or Certificate of Compliance.
- \* Development must meet all aspects of Chapter 151 Flood Damage Prevention Ordinance including use and elevation.
- \* 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 herejn or not. The granting of a permit does not presume to give authority to violate or cancel the provisions of any other state/local law regulating construction or the performance of construction.

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

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

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



**Town of Kill Devil Hills**

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

**Planning and Inspection Department**

**BJ2019-183**

**PROJECT NAME:** Mendez New 4 Bedroom SFD  
**SITE ADDRESS:** 1815 WYANDOTTE ST KILL DEVIL HILLS

**BUILDING JOINT**

**ISSUED:** 10/25/2019

**EXPIRES:** 04/22/2020

**APPLICANT:** Mendez, Julio  
 1008 W 5th Street  
 Kill Devil Hills, NC 27948

**OWNER:** Mendez, Julio  
 1008 W 5th Street  
 Kill Devil Hills, NC 27948

**CONTRACTOR:** J.D. Johnson Realty & Construction, LLC  
 PO BOX 340  
 Wanchese, NC 27954  
 252-305-9982

**GENERAL LIMITED:** J.D. Johnson Realty & Construction, LLC  
 PO BOX 340  
 Wanchese, NC 27954  
 252-305-9982

**License:** 73168  
**Expires:**

**PARCEL:**

**PIN:** 988409177351

**Parcel Number:** 002432000

**Address:** 1815 WYANDOTTE ST KILL DEVIL HILLS

**Zoning:**

**Addition:** SEA HOLLY RIDGE

**Block:** F **Lot(s):** 6

**Legal Description:**

<b>FEES:</b>	<b>Paid</b>	<b>Due</b>	<b>BUILDING AREA:</b>	
Open Deck Fee	\$150.00	\$0.00	Open Decks	1 EA
Res. Building Permit Fee	\$1,994.00	\$0.00	Residential Unheated (.40)	320 Sq. Ft
T-Pole	\$50.00	\$0.00	Residential Heated Space	2488 sq. Ft.
Land Disturbing	\$100.00	\$0.00	(.75)	
<b>Totals :</b>	<b>\$2,294.00</b>	<b>\$0.00</b>	# of Temporary Poles	1 EA

**PROJECT DESCRIPTION:** New 4 Bedroom Single Family Dwelling

Town of Kill Devil Hills  
 Water Charges

OCT 28 2019

**PAID**

Water Tap

T23766

**BJ2019-183****PROJECT NAME:** Mendez New 4 Bedroom SFD  
**SITE ADDRESS:** 1815 WYANDOTTE ST KILL DEVIL HILLS**BUILDING JOINT****ISSUED:** 10/25/2019**EXPIRES:** 04/22/2020

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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
HEALTH DEPARTMENT PERMIT #	29028
# PARKING SPACES/BEDROOM	4
CAMA PERMIT	N
CAMA EXEMPTION	N
FLOOD ZONE	X
SUBSTANTIAL IMPROVEMENT	NO
PURPOSE	Residential New
CONSTRUCTION TYPE	V
CONSTRUCTION COST	300000.00
LOT COVERAGE	39.40
LIVING SPACE (SQFT)	2488
GARAGE (SQFT)	320
OPEN DECK (SQFT)	220
TOTAL SQUARE FOOTAGE	3028
SURVEYOR NAME AND NUMBER	Manson Ray Meekins L-2592
ENGINEER AND LICENSE NUMBER	Mike Osteen 032628
CULVERT	N
DRIVEWAY INVERT 2	N
OCCUPANCY TYPE	One & Two Family Dwelling

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**BJ2019-183**

**PROJECT NAME:** Mendez New 4 Bedroom SFD  
**SITE ADDRESS:** 1815 WYANDOTTE ST KILL DEVIL HILLS

**BUILDING JOINT**

**ISSUED:** 10/25/2019

**EXPIRES:** 04/22/2020

**REQUIRED INSPECTIONS**

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

**CONDITIONS**

- \* NOTICE: Call Public Services Department (252) 480-4080 before pouring driveway!
- \* This permit becomes null and void if work or construction authorized is not commenced within 6 months or if construction or work is suspended for a period of 12 months at any time after work has started.
- \* As-built survey will be required prior to Certificate of Occupancy or Certificate of Compliance.
- \* The developer shall be responsible for maintaining erosion and sediment control at the disturbed area.
- \* Per §153.082(B)(1)(c) Mechanical equipment, including HVAC equipment and LP Gas equipment shall not project into a minimum yard setback more than four (4) feet.
- \* Per §153.186(D)(1) Mechanical equipment shall not be visible from any right-of-way and (2) All Mechanical equipment and appurtenances shall be screened.
- \* Must comply with Wind Borne Debris requirements as defined in NCBC R301.2.1.2 and NCBC 1609.2.
- \* Construction must meet all aspect of Chapter 153 Zoning including lot coverage and setbacks.
- \* Zoning Final Inspection is required.

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

Issued By: 

Contractor or Authorized Agent: 

Date: 10-25-19



**Town of Kill Devil Hills** Town of Kill Devil Hills

Water Charges

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

**PAID**

Water Tap #: T2376p

Planning and Inspection Department

<b>BJ2019-191</b>	<b>BUILDING JOINT</b>
<b>PROJECT NAME:</b> SAGA 28 Bedroom New SFD	<b>ISSUED:</b> 10/30/2019
<b>SITE ADDRESS:</b> 1213 VA DARE TRL S KILL DEVIL HILLS	<b>EXPIRES:</b> 04/27/2020

<b>APPLICANT:</b> 1213 SVDT LLC PO Box 90 Kill Devil Hills, NC 27948	<b>OWNER:</b> 1213 SVDT LLC PO Box 90 Kill Devil Hills, NC 27948
--	--

**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
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**PARCEL:**

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

FEES:	Paid	Due	BUILDING AREA:
Covered Porch Residential	\$2,433.00	\$0.00	Covered Porches/Decks 3244 SQFT
Land Disturbing	\$100.00	\$0.00	Open Decks 1 EA
Open Deck Fee	\$150.00	\$0.00	Residential Heated Space 15893 sq. Ft.
Pool/Hot Tub	\$200.00	\$0.00	(.75)
Res. Building Permit Fee	\$11,919.75	\$0.00	# of Temporary Poles 1 EA
T-Pole	\$50.00	\$0.00	
<b>Totals :</b>			
	<b>\$14,852.75</b>	<b>\$0.00</b>	

**PROJECT DESCRIPTION:** New 28 Bedroom Single Family Dwelling

**DETAILS**

**BJ2019-191****PROJECT NAME:** SAGA 28 Bedroom New SFD  
**SITE ADDRESS:** 1213 VA DARE TRL S KILL DEVIL HILLS**BUILDING JOINT****ISSUED:** 10/30/2019**EXPIRES:** 04/27/2020**Permit**

<b>Name</b>	<b>Value</b>
# OF DUMPSTERS	2.00
ZONING DISTRICT	OIR
FRONT YARD SETBACK	30
REAR YARD SETBACK	CAMA
SIDE YARD SETBACK	10
# PARKING SPACES/BEDROOM	28
CAMA PERMIT	Y
CAMA EXEMPTION	N
FLOOD ZONE	VE
BASE FLOOD ELEVATION	11.0
SUBSTANTIAL IMPROVEMENT	NO
PURPOSE	Residential New
CONSTRUCTION TYPE	V
CONSTRUCTION COST	2500000.00
# OF UNITS	1
LOT COVERAGE	53.40
LIVING SPACE (SQFT)	15893
COVERED PORCHES/DECKS (SQFT)	3244
ACCESSORY STRUCTURE (SQFT)	0
GARAGE (SQFT)	0
STORAGE (SQFT)	0
OPEN DECK (SQFT)	112
TOTAL SQUARE FOOTAGE	19249
SURVEYOR NAME AND NUMBER	Michael W. Robinson 18944
ENGINEER AND LICENSE NUMBER	Mike Osteen 032628
CULVERT	N
DRIVEWAY INVERT 2	Y
OCCUPANCY TYPE	One & Two Family Dwelling



**BJ2019-191**

**PROJECT NAME:** SAGA 28 Bedroom New SFD  
**SITE ADDRESS:** 1213 VA DARE TRL S KILL DEVIL HILLS

**BUILDING JOINT**

**ISSUED:** 10/30/2019

**EXPIRES:** 04/27/2020

**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!
- \* As-built survey will be required prior to Certificate of Occupancy or Certificate of Compliance.
- \* The developer shall be responsible for maintaining erosion and sediment control at the disturbed area.
- \* Development must meet all aspects of Chapter 151 Flood Damage Prevention Ordinance including use and elevation.
- \* THIS PROPERTY IS LOCATED IN A SPECIAL FLOOD HAZARD AREA.
  1. All Special Flood Hazard Areas limit the use of enclosures below the lowest floor for parking, building access and limited storage only.
  2. In the VE Zone, there shall be no alteration of the sand dunes which would increase potential flood damage.
  3. In the VE Zone, there shall be no fill used for structural support.
  4. Elevation Certificate will be required at time of application, 21 days from the establishment of the lowest floor and at construction completion.

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

- \* Per §153.082(B)(1)(c) Mechanical equipment, including HVAC equipment and LP Gas equipment shall not project into a minimum yard setback more than four (4) feet.
- \* Per §153.186(D)(1) Mechanical equipment shall not be visible from any right-of-way and (2) All Mechanical equipment and appurtenances shall be screened.
- \* Must comply with Wind Borne Debris requirements as defined in NCBC R301.2.1.2 and NCBC 1609.2.
- \* Construction must meet all aspect of Chapter 153 Zoning including lot coverage and setbacks.
- \* Zoning Final Inspection is required.
- \* Construction and Land Disturbance must comply with the submitted sedimentation and erosion control plan.
- \* Building Height Certification must be submitted prior to Certificate of Occupancy.
- \* Submit manufacturer's specifications detailing code compliance for windows M12 and M6 as shown on construction drawings sheet A001, or, provide documentation from a properly licensed design professional addressing the requirements of these two windows.



**BJ2019-191**

**PROJECT NAME:** SAGA 28 Bedroom New SFD  
**SITE ADDRESS:** 1213 VA DARE TRL S KILL DEVIL HILLS

**BUILDING JOINT**

**ISSUED:** 10/30/2019

**EXPIRES:** 04/27/2020

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: Grace Mueck Date: 10.30.19



**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**

**BJ2019-192**

**PROJECT NAME:** Condo remodel  
**SITE ADDRESS:** 1712 S VA. Dare Tr Kill Devil Hills

**BUILDING JOINT**

**ISSUED:** 10/30/2019

**EXPIRES:** 04/27/2020

**APPLICANT:** Parmer, Michael  
3223 Charleston Blvd  
HARRISONBURG, VA 22801  
540-908-0547

**OWNER:** Parmer, Michael  
3223 Charleston Blvd  
HARRISONBURG, VA 22801  
540-908-0547

**BUILDING UNLIMITED:** Surf Shack Builder  
PO Box 180  
kitty hawk, nc 27949  
252-202-1511

**License:** 53325  
**Expires:** 12/31/2019

**PARCEL:**

**PIN:** 98930915009605

**Parcel Number:**

**Address:** 1712 S VA. Dare Tr Kill Devil Hills

**Zoning:**

**Addition:**

**Block:**

**Lot(s):**

**Legal Description:** Two Bedroom, two bath condo

<b>FEES:</b>	<b>Paid</b>	<b>Due</b>	<b>BUILDING AREA:</b>	
Renovation/Remodel/Relocate	\$488.70	\$0.00	Remodel/Renovation	1086 SQFT
<b>Totals :</b>	<b>\$488.70</b>	<b>\$0.00</b>		

**PROJECT DESCRIPTION:** Remodel condo, new kitchen, shower and electrical devices

PAID  
OCT 30 2019

**BJ2019-192**

**PROJECT NAME:** Condo remodel  
**SITE ADDRESS:** 1712 S VA. Dare Tr Kill Devil Hills

**BUILDING JOINT**

ISSUED: 10/30/2019

EXPIRES: 04/27/2020

**DETAILS****Permit**

Name	Value
ZONING DISTRICT	C
CAMA PERMIT	N
CAMA EXEMPTION	N
FLOOD ZONE	AE
BASE FLOOD ELEVATION	9
SUBSTANTIAL IMPROVEMENT	NO
PURPOSE	Residential Repair/Remodel
CONSTRUCTION COST	28000.00
CULVERT	N
DRIVEWAY INVERT 2	N

**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!

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

10/30/19



**Town of Kill Devil Hills**

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

OCT 8 2019

**Planning and Inspection Department**

**SG2019-023**

**PROJECT NAME:** RC THEATERS SIGN  
**SITE ADDRESS:** 1803 CROATAN HWY N KILL DEVIL HILLS

**SIGN**

**ISSUED:** 10/08/2019

**EXPIRES:** 04/05/2020

**APPLICANT:** OUTER BANKS THEATERS LLC  
PO BOX 357  
Murfreesboro, NC 27855

**OWNER:** OUTER BANKS THEATERS LLC  
PO BOX 357  
Murfreesboro, NC 27855

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

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

**PARCEL:**

**PIN:** 988406386196

**Parcel Number:** 002736000

**Address:** 1803 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>
Sign Permit Fee	\$100.00	\$0.00
<b>Totals :</b>	<b>\$100.00</b>	<b>\$0.00</b>

**PROJECT DESCRIPTION:** FREESTANDING SIGN FACE REPLACEMENT



**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>SG2019-024</b>	<b>SIGN</b>
<b>PROJECT NAME:</b> Shane Cook	<b>ISSUED:</b> 10/11/2019
<b>SITE ADDRESS:</b> 2407 CROATAN HWY N KILL DEVIL HILLS	<b>EXPIRES:</b> 04/08/2020

<b>APPLICANT:</b> Shane, Cook 918 Colington Drive Kill Devil Hills, NC 27948 252-207-2665	<b>OWNER:</b> For The Dogs OBX LLC 308 W Helga Street Kill Devil Hills, NC 27948
--	--

<b>CONTRACTOR:</b>	SAME AS APPLICANT 0000000 00000000, nc 00000	<b>License:</b> 123456 <b>Expires:</b> 04/30/2020
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**PARCEL:**

<b>PIN:</b> 988517115645	<b>Parcel Number:</b> 003038000
<b>Address:</b> 2407 CROATAN HWY N KILL DEVIL HILLS	
<b>Addition:</b> VIRGINIA DARE SHORE AMD BLK 22	<b>Zoning:</b>
<b>Legal Description:</b>	<b>Block:</b> 22 <b>Lot(s):</b> 9

<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:** Add to free-standing sign

OCT 14 2019



**Town of Kill Devil Hills**

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

OCT 23 2019

**Planning and Inspection Department**

**SG2019-025**

**PROJECT NAME:** Styons Surveying Services  
**SITE ADDRESS:** 2700 CROATAN HWY N KILL DEVIL HILLS

**SIGN**

**ISSUED:** 10/22/2019

**EXPIRES:** 04/19/2020

**APPLICANT:** HARRIS, RICHARD LAWRENCE  
M DOUGLAS STYONS JR  
302 REMELE COURT  
KILL DEVIL HILLS, NC 27948

**OWNER:** HARRIS, RICHARD LAWRENCE  
M DOUGLAS STYONS JR  
302 REMELE COURT  
KILL DEVIL HILLS, NC 27948

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

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

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

**PARCEL:**

**PIN:** 988517029079

**Parcel Number:** 003002000

**Address:** 2700 CROATAN HWY N KILL DEVIL HILLS

**Addition:** VIRGINIA DARE SHORES

**Zoning:**  
**Block:** 19 **Lot(s):** 38-40 PT 37 & 2 LOT

**Legal Description:**

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

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

**SG2019-025**

**PROJECT NAME:** Styons Surveying Services  
**SITE ADDRESS:** 2700 CROATAN HWY N KILL DEVIL HILLS

**SIGN**

**ISSUED:** 10/22/2019

**EXPIRES:** 04/19/2020

**DETAILS**

**Permit**

<b>Name</b>	<b>Value</b>
# OF SIGNS	1
SIGN - FREE STANDING PERMITTED (SQFT)	64.00
SIGN - FREE STANDING PROPOSED (SQ FT)	47.34
ZONING DISTRICT	C
PURPOSE	Commercial Accessory
CONSTRUCTION COST	7000.00
FLOOD ZONE	AE

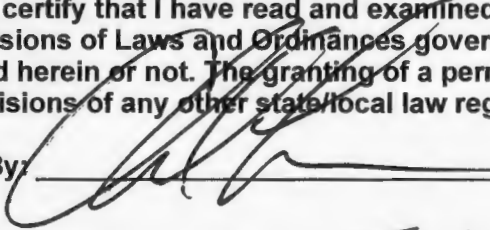
**REQUIRED INSPECTIONS**

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: 10-23-19



**Town of Kill Devil Hills**

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

OCT 4 2019

**Planning and Inspection Department**

<b>EL2019-075</b>	<b>ELECTRICAL</b>
<b>PROJECT NAME:</b> FEREBEE METER BASE CHANGE OUT	<b>ISSUED:</b> 10/03/2019
<b>SITE ADDRESS:</b> 203 VA DARE TRL S KILL DEVIL HILLS	<b>EXPIRES:</b> 03/31/2020

<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
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<b>ELECTRICAL:</b>	VUYOVICH ELECTRIC P.O. Box 191 Point Harbor, NC 27964 252-202-1407	<b>License:</b> 18077-U <b>Expires:</b> 03/31/2020
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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>Zoning:</b>
<b>Addition:</b> KITTY HAWK SHORES - REVISED	<b>Block:</b> 1 <b>Lot(s):</b> C
<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:** METER BASE CHANGE OUT





# Town of Kill Devil Hills

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

PAD  
OCT 10 2019

## Planning and Inspection Department

**EL2019-078**

**PROJECT NAME:** GARREN SERVICE CHANGE OUT  
**SITE ADDRESS:** 307 THIRD ST W KILL DEVIL HILLS

**ELECTRICAL**

**ISSUED:** 10/10/2019

**EXPIRES:** 04/07/2020

**APPLICANT:** GARREN, TROY S  
JUDY W GARREN  
3712 COLUMBIA ST  
PORTSMOUTH, VA 23707

**OWNER:** GARREN, TROY S  
JUDY W GARREN  
3712 COLUMBIA ST  
PORTSMOUTH, VA 23707

**ELECTRICAL - UNLIMITED:** KREISER ELECTRIC INC  
3847 IVY LN  
kitty hawk, nc 27949  
252-564-2367

**License:** 31684  
**Expires:**

**PARCEL:**

**PIN:** 988410277271

**Parcel Number:** 009140000

**Address:** 307 THIRD ST W KILL DEVIL HILLS

**Zoning:**

**Addition:** CROATAN SHORES INC SEC 1

**Block:** 2 **Lot(s):** 4

**Legal Description:**

<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:** METER BASE AND SERVICE CABLE REPLACEMENT

**EL2019-078**

**PROJECT NAME:** GARREN SERVICE CHANGE OUT  
**SITE ADDRESS:** 307 THIRD ST W KILL DEVIL HILLS

**ELECTRICAL**

**ISSUED:** 10/10/2019

**EXPIRES:** 04/07/2020

**DETAILS**

**Permit**

<b>Name</b>	<b>Value</b>
ZONING DISTRICT	RL
PURPOSE	Residential Repair/Remodel
CONSTRUCTION COST	900.00
CONSTRUCTION TYPE	V
FLOOD ZONE	AE
BASE FLOOD ELEVATION	8.00
OCCUPANCY TYPE	One & Two Family Dwelling

**REQUIRED INSPECTIONS**

Final

**CONDITIONS**

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

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

Issued By: 

Contractor or Authorized Agent: 

Date: 10-10-19



# Town of Kill Devil Hills

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

## Planning and Inspection Department

**EL2019-077**

**PROJECT NAME:** Recycle building outlet  
**SITE ADDRESS:** 701 BERMUDA BAY BLVD KILL DEVIL HILLS

**ELECTRICAL**

**ISSUED:** 10/07/2019

**EXPIRES:** 04/04/2020

**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:**

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

**License:** 19403  
**Expires:** 10/02/2020

**PARCEL:**

**PIN:** 988307695235-7282

**Parcel Number:**

**Address:** 701 BERMUDA BAY BLVD KILL DEVIL HILLS

**Zoning:**

**Addition:**

**Block:**

**Lot(s):**

**Legal Description:**

<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>

*Value \$200.00*

**PROJECT DESCRIPTION:** Add receptacle next service disconnect on recycle building

### DETAILS

### REQUIRED INSPECTIONS

Final

*PAID*

### CONDITIONS

OCT 15 2019

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

**EL2019-077**

**PROJECT NAME:** Recycle building outlet

**SITE ADDRESS:** 701 BERMUDA BAY BLVD KILL DEVIL HILLS

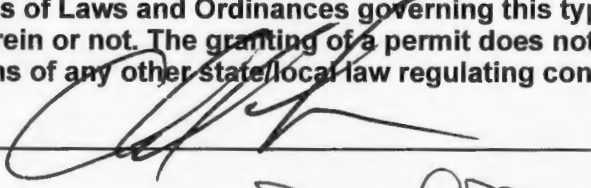
**ELECTRICAL**

**ISSUED:** 10/07/2019

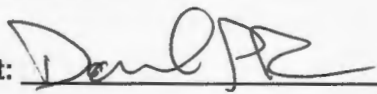
**EXPIRES:** 04/04/2020

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

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



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



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

10-15-19



**Town of Kill Devil Hills**

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

OCT 21 2019

**Planning and Inspection Department**

**EL2019-079**

**PROJECT NAME:** John Yancey Fire Alarm  
**SITE ADDRESS:** 2009 VA DARE TRL S KILL DEVIL HILLS

**ELECTRICAL**

**ISSUED:** 10/21/2019

**EXPIRES:** 04/18/2020

**APPLICANT:** John Yancy LLC.  
2009 SOUTH Va. Dare Tr.  
P.O. Box 71125  
Bethesda, MD 20813  
252-207-8710

**OWNER:** John Yancy LLC.  
2009 SOUTH Va. Dare Tr.  
P.O. Box 71125  
Bethesda, MD 20813  
252-207-8710

**ELECTRICAL:** JOHNS BROTHERS SECURITY  
UNKNOWN  
UNKNOWN, XX 00000  
252-491-5729

**License:** 28841-sp-lv  
**Expires:** 05/28/2020

**PARCEL:**

**PIN:** 989313148592

**Parcel Number:** 005180000

**Address:** 2009 VA DARE TRL S KILL DEVIL HILLS

**Addition:** H B CAWTHORNE ESTATE LANDS

**Zoning:**  
**Block:** 0 **Lot(s):** H,I,J

**Legal Description:**

<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:** Repair/replace fire sensor and control panel

**EL2019-079**

**PROJECT NAME:** John Yancey Fire Alarm  
**SITE ADDRESS:** 2009 VA DARE TRL S KILL DEVIL HILLS

**ELECTRICAL**

**ISSUED:** 10/21/2019

**EXPIRES:** 04/18/2020

**DETAILS**

**Permit**

<b>Name</b>	<b>Value</b>
ZONING DISTRICT	OIR
PURPOSE	Commercial Repair/Remodel
CONSTRUCTION COST	24500.00
CONSTRUCTION TYPE	III
FLOOD ZONE	AE
BASE FLOOD ELEVATION	10
OCCUPANCY TYPE	Residential

**REQUIRED INSPECTIONS**

Final

**CONDITIONS**

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

Contractor or Authorized Agent: Ray T. - Schools <sup>JBS</sup> <sub>NC</sub> Date: 10/24/19



## Town of Kill Devil Hills

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

OCT 22 2019

### Planning and Inspection Department

**EL2019-080**

**PROJECT NAME:** Pruitt Meter Base  
**SITE ADDRESS:** 116 WILSON ST KILL DEVIL HILLS

**ELECTRICAL**

**ISSUED:** 10/22/2019

**EXPIRES:** 04/19/2020

**APPLICANT:** ERIC PRUITT  
2057 Newbern St  
KDH, NC 27948  
449-6801

**OWNER:** ERIC PRUITT  
2057 Newbern St  
KDH, NC 27948  
449-6801

**ELECTRICAL-UNLIMITED:** DAVCO ELECTRIC INC.  
406 W Lake Drive  
Kill Devil Hills, NC 27948  
441-4106

**License:** 04354  
**Expires:** 02/28/2020

**PARCEL:**

**PIN:** 988517204780

**Parcel Number:** 001812000

**Address:** 116 WILSON ST KILL DEVIL HILLS

**Addition:** AVALON BEACH ANNEX 1

**Zoning:**  
**Block:** 0 **Lot(s):** 363

**Legal Description:**

<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:** C/O 200amp meter base and weatherhead

### DETAILS

**Permit**

<b>Name</b>	<b>Value</b>
ZONING DISTRICT	C
PURPOSE	Residential Repair/Remodel
CONSTRUCTION COST	800.00
FLOOD ZONE	AE
BASE FLOOD ELEVATION	9

**EL2019-080**

**PROJECT NAME:** Pruitt Meter Base  
**SITE ADDRESS:** 116 WILSON ST KILL DEVIL HILLS

**ELECTRICAL**

**ISSUED:** 10/22/2019

**EXPIRES:** 04/19/2020

**REQUIRED INSPECTIONS**

Final

**CONDITIONS**

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

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

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

10/24/19





# Town of Kill Devil Hills

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

PAD

OCT 23 2019

## Planning and Inspection Department

**EL2019-083**

**PROJECT NAME:** DALEY METER BASE  
**SITE ADDRESS:** 302 SPORTSMAN DR W KILL DEVIL HILLS

**ELECTRICAL**

**ISSUED:** 10/23/2019

**EXPIRES:** 04/20/2020

**APPLICANT:** JOHN DALEY  
P.O. BOX 128  
KILL DEVIL HILLS, NC 27948

**OWNER:** JOHN DALEY  
P.O. BOX 128  
KILL DEVIL HILLS, NC 27948

**ELECTRICAL-LIMITED:** BRS ELECTRICAL SERVICES  
1607 Sir Walter Rd.  
Kill Devil Hills, NC 27948  
252-207-5334

**License:** 23077  
**Expires:** 07/31/2020

**PARCEL:**

**PIN:** 988517102556

**Parcel Number:** 001774001

**Address:** 302 SPORTSMAN DR W KILL DEVIL HILLS

**Addition:** AVALON BEACH

**Zoning:**  
**Block:** 0      **Lot(s):** 146

**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:** METER BASE CHANGE OUT, UPGRADE SERVICE TO 200A PANEL

**EL2019-083**

**PROJECT NAME:** DALEY METER BASE  
**SITE ADDRESS:** 302 SPORTSMAN DR W KILL DEVIL HILLS

**ELECTRICAL**  
**ISSUED:** 10/23/2019  
**EXPIRES:** 04/20/2020

**DETAILS**

**Permit**

<b>Name</b>	<b>Value</b>
ZONING DISTRICT	RL
PURPOSE	Residential Repair/Remodel
CONSTRUCTION COST	1400.00
CONSTRUCTION TYPE	V
FLOOD ZONE	AE
BASE FLOOD ELEVATION	8.00
OCCUPANCY TYPE	One & Two Family Dwelling

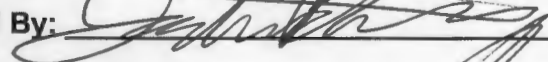
**REQUIRED INSPECTIONS**

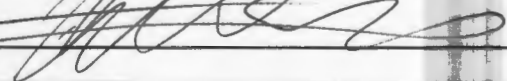
Final

**CONDITIONS**

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Issued By: 

Contractor or Authorized Agent: 

Date: 10/23/19



**Town of Kill Devil Hills**

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

NOV  
OCT 23 2019

**Planning and Inspection Department**

<b>EL2019-082</b>	<b>ELECTRICAL</b>
<b>PROJECT NAME:</b> SEIGLER METER BASE	<b>ISSUED:</b> 10/23/2019
<b>SITE ADDRESS:</b> 101 ROCKY MOUNT ST KILL DEVIL HILLS	<b>EXPIRES:</b> 04/20/2020

<b>APPLICANT:</b> JANE SEIGLER 321 GRAYSON ST PORTSMOUTH, VA 23707 757-641-3961	<b>OWNER:</b> JANE SEIGLER 321 GRAYSON ST PORTSMOUTH, VA 23707 757-641-3961
--	--

<b>ELECTRICAL-LIMITED:</b>	BRS ELECTRICAL SERVICES 1607 Sir Walter Rd. Kill Devil Hills, NC 27948 252-207-5334	<b>License:</b> 23077 <b>Expires:</b> 07/31/2020
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**PARCEL:**

<b>PIN:</b> 988517203128	<b>Parcel Number:</b> 001929000
<b>Address:</b> 101 ROCKY MOUNT ST KILL DEVIL HILLS	<b>Zoning:</b>
<b>Addition:</b> AVALON BEACH ANNEX 1	<b>Block:</b> 0 <b>Lot(s):</b> 493
<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:** METER BASE CHANGE OUT AND OVER HEAD SERVICE

**EL2019-082**

**PROJECT NAME:** SEIGLER METER BASE

**SITE ADDRESS:** 101 ROCKY MOUNT ST KILL DEVIL HILLS

**ELECTRICAL**

**ISSUED:** 10/23/2019

**EXPIRES:** 04/20/2020

**DETAILS**

**Permit**

<b>Name</b>	<b>Value</b>
ZONING DISTRICT	C
PURPOSE	Residential Repair/Remodel
CONSTRUCTION COST	750.00
CONSTRUCTION TYPE	V
FLOOD ZONE	AE
BASE FLOOD ELEVATION	9.00
OCCUPANCY TYPE	One & Two Family Dwelling

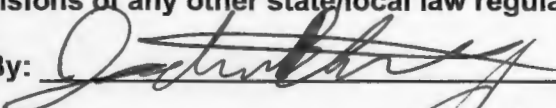
**REQUIRED INSPECTIONS**

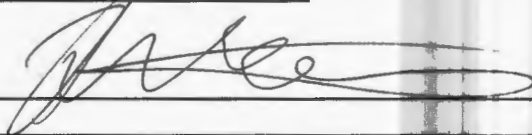
Final

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Issued By: 

Contractor or Authorized Agent: 

Date: 10/23/19



**Town of Kill Devil Hills**

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

OCT 24 2019

**Planning and Inspection Department**

<b>EL2019-076</b>	<b>ELECTRICAL</b>
<b>PROJECT NAME:</b> Sea Oats Condo Fire Alarm	<b>ISSUED:</b> 10/07/2019
<b>SITE ADDRESS:</b> 1401 VA DARE TRL N KILL DEVIL HILLS	<b>EXPIRES:</b> 04/04/2020

**APPLICANT:** C/O ADLAM VENTURES  
P.O. Box 2391  
KITTY HAWK, NC 27949

**OWNER:** C/O ADLAM VENTURES  
P.O. Box 2391  
KITTY HAWK, NC 27949

**ELECTRICAL -LIMITED:**

Stanley CSS  
1533 Technology Dr #101  
CHESAPEAKE, VA 23320  
757-549-3260

**License:** 23471  
**Expires:** 08/07/2020

**PARCEL:**

**PIN:** 98841165410700

**Parcel Number:** 028116999

**Address:** 1401 VA DARE TRL N KILL DEVIL HILLS

**Addition:**

**Zoning:**

**Block:** 0

**Lot(s):** COMMON PROPERTY

**Legal Description:**

<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:** Replace damaged fire alarm equipment/ install new strobes and pull stations

**DETAILS**

**Permit**

<b>Name</b>	<b>Value</b>
ZONING DISTRICT	OIR
CONSTRUCTION COST	6503.00
CONSTRUCTION TYPE	V
FLOOD ZONE	X



**Town of Kill Devil Hills**

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

PAID

OCT 25 2019

**Planning and Inspection Department**

TOWN OF  
KILL DEVIL HILLS

**EL2019-084**

**PROJECT NAME:** Kurtz Panel Replacement  
**SITE ADDRESS:** 617 LANDING DR W KILL DEVIL HILLS

**ELECTRICAL**  
**ISSUED:** 10/25/2019  
**EXPIRES:** 04/22/2020

**APPLICANT:** KURTZ, LAWRENCE  
P O BOX 1121  
VIRGINIA BEACH, VA 23451-0121

**OWNER:** KURTZ, LAWRENCE  
P O BOX 1121  
VIRGINIA BEACH, VA 23451-0121

**ELECTRICAL - UNLIMITED:** ABOVE CODE ELECTRIC  
PO BOX 688  
kitty hawk, nc 27949  
252-375-3232

**License:** U.31933  
**Expires:** 01/01/2020

**PARCEL:**

**PIN:** 988413129978

**Parcel Number:** 003616000

**Address:** 617 LANDING DR W KILL DEVIL HILLS

**Addition:** LANDING SECTION 3, THE

**Zoning:**  
**Block:** 0 **Lot(s):** 100

**Legal Description:**

<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:** C/O 200amp panel box

**EL2019-084**

**PROJECT NAME:** Kurtz Panel Replacement  
**SITE ADDRESS:** 617 LANDING DR W KILL DEVIL HILLS

**ELECTRICAL**

**ISSUED:** 10/25/2019

**EXPIRES:** 04/22/2020

**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	8

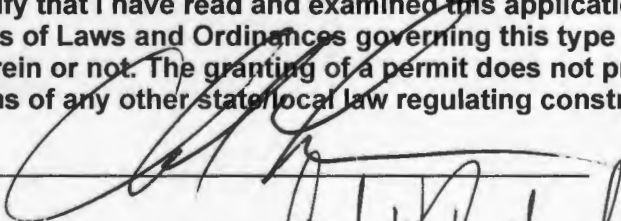
**REQUIRED INSPECTIONS**

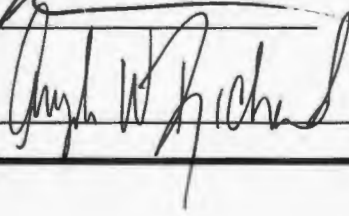
Final

**CONDITIONS**

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Issued By: 

Contractor or Authorized Agent: 

Date: 10/25/19





# Town of Kill Devil Hills

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

OCT 31 2019

## Planning and Inspection Department

<b>EL2019-085</b>	<b>ELECTRICAL</b>
<b>PROJECT NAME:</b> GRANT RANGE CIRCUIT	<b>ISSUED:</b> 10/31/2019
<b>SITE ADDRESS:</b> 408 BURNS DR KILL DEVIL HILLS	<b>EXPIRES:</b> 04/28/2020

<b>APPLICANT:</b> KATHRYN A GRANT 408 burns dr kill devil hills, nc 00000	<b>OWNER:</b> KATHRYN A GRANT 408 burns dr kill devil hills, nc 00000
---	---

<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> 988316834773	<b>Parcel Number:</b> 004967000
<b>Address:</b> 408 BURNS DR KILL DEVIL HILLS	<b>Zoning:</b>
<b>Addition:</b> OCEAN ACRES TRACT 3 SEC 2	<b>Block:</b> E <b>Lot(s):</b> 16
<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:** REMOVE UNPERMITTED, ILLEGAL RANGE CIRCUIT ON GROUND FLOOR



**EL2019-085**

**PROJECT NAME:** GRANT RANGE CIRCUIT  
**SITE ADDRESS:** 408 BURNS DR KILL DEVIL HILLS

**ELECTRICAL**

**ISSUED:** 10/31/2019

**EXPIRES:** 04/28/2020

**DETAILS**

**Permit**

<b>Name</b>	<b>Value</b>
ZONING DISTRICT	RL
PURPOSE	Residential Repair/Remodel
CONSTRUCTION COST	200.00
CONSTRUCTION TYPE	V
FLOOD ZONE	X
OCCUPANCY TYPE	One & Two Family Dwelling

**REQUIRED INSPECTIONS**

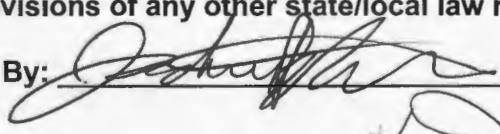
Final

**CONDITIONS**

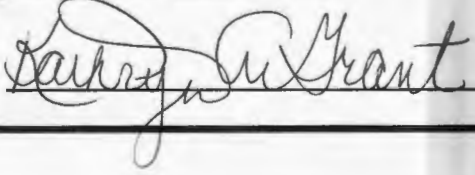
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Issued By: \_\_\_\_\_



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



Date: 10-31-19



# Town of Kill Devil Hills

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

## Planning and Inspection Department

**ZP2019-072**

**PROJECT NAME:** Divito Fence  
**SITE ADDRESS:** 427 Palmetto Street Kill Devil Hills

**ZONING PERMIT**

**ISSUED:** 10/04/2019

**EXPIRES:** 04/01/2020

**APPLICANT:** Divito, Joeseeph  
427 Palmetto Street W  
Kill Devil Hills, NC 27948

**OWNER:** Divito, Joeseeph  
427 Palmetto Street W  
Kill Devil Hills, NC 27948

**CONTRACTOR:** AAA Lawn Enforcement  
4227 Worthington Lane  
kitty hawk, nc 27949  
252-207-6496

**GENERAL:** AAA Lawn Enforcement  
4227 Worthington Lane  
kitty hawk, nc 27949  
252-207-6496

**License:** 123456  
**Expires:** 10/31/2025

**PARCEL:**

**PIN:** 988517002259

**Parcel  
Number:**

**Address:** 427 Palmetto Street Kill Devil Hills

**Zoning:**

**Addition:**

**Block:**

**Lot(s):**

**Legal Description:** Lot 3R, Block 50, Virginia Dare Shores Subdivision

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

**PROJECT DESCRIPTION:** Fence along property line in rear yard

OCT 7 2019

**ZP2019-072**

**PROJECT NAME:** Divito Fence

**SITE ADDRESS:** 427 Palmetto Street Kill Devil Hills

**ZONING PERMIT**

**ISSUED:** 10/04/2019

**EXPIRES:** 04/01/2020

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: Paul W. [Signature]

Date: 10-7-19



**Town of Kill Devil Hills**

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

PAID

OCT 17 2019

TOWN OF  
KILL DEVIL HILLS

**Planning and Inspection Department**

<b>ZP2019-073</b>	<b>ZONING PERMIT</b>
<b>PROJECT NAME:</b> Dare Center Fences	<b>ISSUED:</b> 10/16/2019
<b>SITE ADDRESS:</b> 1700 CROATAN HWY N KILL DEVIL HILLS	<b>EXPIRES:</b> 04/13/2020

<b>APPLICANT:</b> OLIVOLA, MARK NANCY O WALTON P O BOX 364 KILL DEVIL HILLS, NC 27948	<b>OWNER:</b> OLIVOLA, MARK NANCY O WALTON P O BOX 364 KILL DEVIL HILLS, NC 27948
--	--

<b>CONTRACTOR:</b> AAA Lawn Enforcement 4227 Worthington Lane kitty hawk, nc 27949 252-207-6496
--

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

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

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

**PROJECT DESCRIPTION:** Install 3 foot fence around the west side of the south east corner Drainage Pond, Install 4 foot fence on west side of north drainage pond

**ZP2019-073**

**PROJECT NAME:** Dare Center Fences  
**SITE ADDRESS:** 1700 CROATAN HWY N KILL DEVIL HILLS

**ZONING PERMIT**

**ISSUED:** 10/16/2019

**EXPIRES:** 04/13/2020

**DETAILS**

**Permit**

<b>Name</b>	<b>Value</b>
ZONING DISTRICT	C
FRONT YARD SETBACK	30
SIDE YARD SETBACK	10
STREET SIDE SETBACK	15
CAMA PERMIT	N
CAMA EXEMPTION	N
FLOOD ZONE	AE
BASE FLOOD ELEVATION	9.0
PURPOSE	Commercial Accessory
CONSTRUCTION COST	14500.00
SURVEYOR NAME AND NUMBER	W.C. Owen L-3216
CULVERT	N
DRIVEWAY INVERT 2	N

**REQUIRED INSPECTIONS**

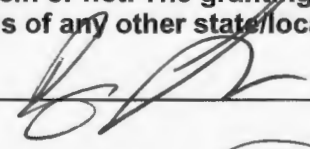
Final

Zoning Final

**CONDITIONS**

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

Issued By: 

Contractor or Authorized Agent: 

Date: 10-17-19



**Town of Kill Devil Hills**

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

**PAID**

OCT 23 2019

**Planning and Inspection Department**

TOWN OF  
KILL DEVIL HILLS

**ZP2019-074**

**PROJECT NAME:** Battaile Fence  
**SITE ADDRESS:** 211 SOTHEL ST W KILL DEVIL HILLS

**ZONING PERMIT**

**ISSUED: 10/22/2019**

**EXPIRES: 04/19/2020**

**APPLICANT:** BATTAILE, BENJAMIN  
211 SOTHEL STREET W  
Kill Devil Hills, NC 27948

**OWNER:** BATTAILE, BENJAMIN  
211 SOTHEL STREET W  
Kill Devil Hills, NC 27948

**CONTRACTOR:** Radford, Jeff  
517 W. Archdale St.  
Kill Devil Hills, NC 27948  
252-207-2910

**UNLICENSED - REMODELING:** JEFF RADFORD  
517 WEST ARCHDALE ST  
Kill Devil Hills, NC 27948  
252-207-2910

**License:** 0000  
**Expires:**

**PARCEL:**

**PIN:** 988517025382

**Parcel Number:** 000509000

**Address:** 211 SOTHEL ST W KILL DEVIL HILLS

**Addition:** VIRGINIA DARE SHORES

**Zoning:**  
**Block:** 31 **Lot(s):** 10-12

**Legal Description:**

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

**PROJECT DESCRIPTION:** fence around rear and side yard

**ZP2019-074**

**PROJECT NAME:** Battaile Fence  
**SITE ADDRESS:** 211 SOTHEL ST W KILL DEVIL HILLS

**ZONING PERMIT**

**ISSUED:** 10/22/2019

**EXPIRES:** 04/19/2020

**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
CAMA PERMIT	N
CAMA EXEMPTION	N
FLOOD ZONE	AE
BASE FLOOD ELEVATION	9
PURPOSE	Residential Accessory
CONSTRUCTION COST	5000.00
SURVEYOR NAME AND NUMBER	Carlos F. Gomez L-3241
CULVERT	N
DRIVEWAY INVERT 2	N

**REQUIRED INSPECTIONS**

Stringline

Final

**CONDITIONS**

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Issued By: 

Contractor or Authorized Agent: 

Date: 10/23/19





# Town of Kill Devil Hills

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

## Planning and Inspection Department

**ZP2019-075**

**PROJECT NAME:** Alexander Fence  
**SITE ADDRESS:** 1814 SIOUX ST KILL DEVIL HILLS

**ZONING PERMIT**

**ISSUED:** 10/28/2019

**EXPIRES:** 04/25/2020

**APPLICANT:** Alexander, Mark  
7 Santiago Drive  
BRICK, NJ 08723

**OWNER:** Alexander, Mark  
7 Santiago Drive  
BRICK, NJ 08723

**CONTRACTOR:** ALL ABOUT FENCES TOO  
989 BURNSIDE RD  
Manteo, NC 27954  
252-377-7379

**BUILDER:** ALL ABOUT FENCES TOO  
989 BURNSIDE RD  
Manteo, NC 27954  
252-377-7379

**License:** 0000  
**Expires:**

**PARCEL:**

**PIN:** 988409178367

**Parcel Number:** 002435000

**Address:** 1814 SIOUX ST KILL DEVIL HILLS

**Addition:** SEA HOLLY RIDGE

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

**Legal Description:**

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

**PROJECT DESCRIPTION:** Fence around rear and side yards

PAID  
OCT 28 2019  
TOWN OF  
KILL DEVIL HILLS

**ZP2019-075**

**PROJECT NAME:** Alexander Fence  
**SITE ADDRESS:** 1814 SIOUX ST KILL DEVIL HILLS

**ZONING PERMIT**

**ISSUED:** 10/28/2019

**EXPIRES:** 04/25/2020

**DETAILS**

**Permit**

<b>Name</b>	<b>Value</b>
FRONT YARD SETBACK	30
SIDE YARD SETBACK	8
CAMA PERMIT	N
CAMA EXEMPTION	N
FLOOD ZONE	X
PURPOSE	Residential Accessory
CONSTRUCTION COST	7400.00
SURVEYOR NAME AND NUMBER	William S. Jones
CULVERT	N
DRIVEWAY INVERT 2	N

**REQUIRED INSPECTIONS**

Stringline

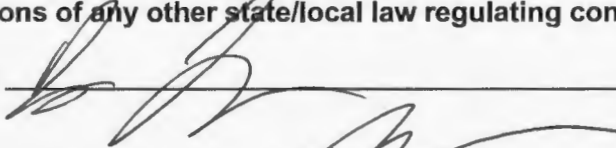
Final

**CONDITIONS**

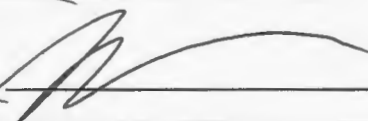
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Issued By:



Contractor or Authorized Agent:



Date:

10/28/19



# Town of Kill Devil Hills

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

## Planning and Inspection Department

**ZP2019-076**

**PROJECT NAME:** WEST FENCE  
**SITE ADDRESS:** 2912 RAYMOND AVE KILL DEVIL HILLS

**ZONING PERMIT**

**ISSUED:** 10/30/2019

**EXPIRES:** 04/27/2020

**APPLICANT:** VALERIE WEST  
2912 RAYMOND AVE  
Kill Devil Hills, NC 27948  
804-314-3361

**OWNER:** VALERIE WEST  
2912 RAYMOND AVE  
Kill Devil Hills, NC 27948  
804-314-3361

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

**License:** Unlicensed  
**Expires:** 12/31/2020

**PARCEL:**

**PIN:** 988513120930

**Parcel Number:** 000426000

**Address:** 2912 RAYMOND AVE KILL DEVIL HILLS

**Addition:** VIRGINIA DARE SHORES

**Zoning:**

**Block:** 17

**Lot(s):** 17-18

**Legal Description:**

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

**PROJECT DESCRIPTION:** FENCE ALONG NORTHERN PROPERTY LINE

PAID  
OCT 30 2019

**ZP2019-076**

**PROJECT NAME: WEST FENCE**

**SITE ADDRESS: 2912 RAYMOND AVE KILL DEVIL HILLS**

**ZONING PERMIT**

**ISSUED: 10/30/2019**

**EXPIRES: 04/27/2020**

**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
STREET SIDE SETBACK	15
CAMA PERMIT	N
CAMA EXEMPTION	N
FLOOD ZONE	AE
BASE FLOOD ELEVATION	9.00
PURPOSE	Residential Repair/Remodel
CONSTRUCTION COST	3225.00
CULVERT	N
DRIVEWAY INVERT 2	N

**REQUIRED INSPECTIONS**

Final

Zoning Final

**CONDITIONS**

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

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Issued By: 

Contractor or Authorized Agent: Valerie West Date: 10-30-19



# Town of Kill Devil Hills

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

OCT - 1 2019

## Planning and Inspection Department

<b>MC2019-282</b>	<b>MECHANICAL</b>
<b>PROJECT NAME:</b>	<b>ISSUED: 10/01/2019</b>
<b>SITE ADDRESS: 530 WALKER ST W KILL DEVIL HILLS</b>	<b>EXPIRES: 03/29/2020</b>

<b>APPLICANT:</b> Joseph Madison 530 W. Walker st. Kill Devil Hills, NC 27948 208-920-3606	<b>OWNER:</b> Joseph Madison 530 W. Walker st. Kill Devil Hills, NC 27948 208-920-3606
---	---

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

<b>PIN:</b> 987520902884	<b>Parcel Number:</b> 000723000
<b>Address:</b> 530 WALKER ST W KILL DEVIL HILLS	<b>Zoning:</b>
<b>Addition:</b> VIRGINIA DARE SHORES	<b>Block:</b> 71 <b>Lot(s):</b> 31-38
<b>Legal Description:</b>	

<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 changout

**MC2019-282**

**PROJECT NAME:**

**SITE ADDRESS:** 530 WALKER ST W KILL DEVIL HILLS

**MECHANICAL**

**ISSUED:** 10/01/2019

**EXPIRES:** 03/29/2020

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**DETAILS**

**Permit**

<b>Name</b>	<b>Value</b>
PURPOSE	Residential Repair/Remodel
CONSTRUCTION COST	5650.00
CONSTRUCTION TYPE	V
FLOOD ZONE	AE
BASE FLOOD ELEVATION	8
NATURAL GAS SIGNOFF	N
OCCUPANCY TYPE	One & Two Family Dwelling

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**REQUIRED INSPECTIONS**

Final

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**CONDITIONS**

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

**Contractor or Authorized Agent:** \_\_\_\_\_ **Date:** 10.1.19



# 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

<b>MC2019-283</b>	<b>MECHANICAL</b>
<b>PROJECT NAME:</b>	<b>ISSUED: 10/09/2019</b>
<b>SITE ADDRESS: 700 F3 FIRST ST W KILL DEVIL HILLS</b>	<b>EXPIRES: 04/06/2020</b>

<b>APPLICANT:</b> POHN, MICHAEL A RIESLINGSTR 43 WIESBADEN, GERMA, GE 65207	<b>OWNER:</b> POHN, MICHAEL A RIESLINGSTR 43 WIESBADEN, GERMA, GE 65207
---	---

<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
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**PARCEL:**

<b>PIN:</b> 98841314042673	<b>Parcel Number:</b> 008075603
<b>Address:</b> 700 F3 FIRST ST W KILL DEVIL HILLS	<b>Zoning:</b>
<b>Addition:</b>	<b>Block:</b> 0 <b>Lot(s):</b> UT 3 BLDG F
<b>Legal Description:</b>	

<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 replacement

( 9 2019



**MC2019-283**

**PROJECT NAME:**

**SITE ADDRESS:** 700 F3 FIRST ST W KILL DEVIL HILLS

**MECHANICAL**

**ISSUED:** 10/09/2019

**EXPIRES:** 04/06/2020

**DETAILS**

**Permit**

<b>Name</b>	<b>Value</b>
PURPOSE	Residential Repair/Remodel
CONSTRUCTION COST	5901.00
CONSTRUCTION TYPE	V
FLOOD ZONE	AE
BASE FLOOD ELEVATION	9
NATURAL GAS SIGNOFF	N
OCCUPANCY TYPE	Residential

**REQUIRED INSPECTIONS**

Final

**CONDITIONS**

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Issued By: 

Contractor or Authorized Agent:  Date: 10-9-19



**Town of Kill Devil Hills**

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

PAD

OCT 15 2019

**Planning and Inspection Department**

**MC2019-284**

**PROJECT NAME:** Paris HVAC  
**SITE ADDRESS:** 1107 FOX ST KILL DEVIL HILLS

**MECHANICAL**

**ISSUED:** 10/15/2019

**EXPIRES:** 04/12/2020

**APPLICANT:** MS. CARMEN I PARIS  
1107 Fox Street  
Kill Devil Hills, NC 27948

**OWNER:** MS. CARMEN I PARIS  
1107 Fox Street  
Kill Devil Hills, NC 27948

**MECHANICAL H-3:**

ARMSTRONG AND SON  
3978 Albermarle Curch rd.  
Columbia, NC 27925  
252-394-5316

**License:** 22516  
**Expires:** 12/31/2019

**PARCEL:**

**PIN:** 988312866757

**Parcel Number:** 004387000

**Address:** 1107 FOX ST KILL DEVIL HILLS

**Addition:** KILL DEVIL HILLS REALTY CORP

**Zoning:**  
**Block:** 17 **Lot(s):** 10

**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 1.5 Ton HVAC System

**DETAILS**

**Permit**

Name	Value
PURPOSE	Residential Repair/Remodel
CONSTRUCTION COST	3500.00
FLOOD ZONE	AE
BASE FLOOD ELEVATION	9
NATURAL GAS SIGNOFF	N

**MC2019-284**

PROJECT NAME: Paris HVAC  
SITE ADDRESS: 1107 FOX ST KILL DEVIL HILLS

**MECHANICAL**

ISSUED: 10/15/2019

EXPIRES: 04/12/2020

**REQUIRED INSPECTIONS**

Final

**CONDITIONS**

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

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

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

10-15-19



**Town of Kill Devil Hills**

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

**PAID**

OCT 21 2019

**Planning and Inspection Department**

TOWN OF  
KILL DEVIL HILLS

**MC2019-286**

**PROJECT NAME:** K-Mart  
**SITE ADDRESS:** 1901 CROATAN HWY N KILL DEVIL HILLS

**MECHANICAL**

**ISSUED:** 10/16/2019

**EXPIRES:** 04/13/2020

**APPLICANT:** WRIGHT CO INC  
7461 NORTH SHORE ROAD  
NORFOLK, VA 23505

**OWNER:** WRIGHT CO INC  
7461 NORTH SHORE ROAD  
NORFOLK, VA 23505

**MECHANICAL, H-2, H-3:**

REFRIGERATION SERVICES INCORPORATED  
UNKNOWN  
UNKNOWN, XX 00000

**License:** 23303  
**Expires:** 12/31/2020

**PARCEL:**

**PIN:** 988406383994

**Parcel Number:** 029832000

**Address:** 1901 CROATAN HWY N KILL DEVIL HILLS

**Addition:** WRIGHT'S SHORES

**Zoning:**

**Block:** 0

**Lot(s):** KMART

**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 6 roof top units like for like.

**MC2019-286**

**PROJECT NAME:** K-Mart

**SITE ADDRESS:** 1901 CROATAN HWY N KILL DEVIL HILLS

**MECHANICAL**

**ISSUED:** 10/16/2019

**EXPIRES:** 04/13/2020

**DETAILS**

**Permit**

<b>Name</b>	<b>Value</b>
PURPOSE	Commercial Repair/Remodel
CONSTRUCTION COST	127028.00
CONSTRUCTION TYPE	II
FLOOD ZONE	AE
BASE FLOOD ELEVATION	8
NATURAL GAS SIGNOFF	N
OCCUPANCY TYPE	Merchantile

**REQUIRED INSPECTIONS**

Final

**CONDITIONS**

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Issued By: Marty Shaw

Contractor or Authorized Agent: L. A. Boy Date: 10-29-19



**Town of Kill Devil Hills**

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

**PAID**

OCT 21 2019

TOWN OF  
KILL DEVIL HILLS

**Planning and Inspection Department**

<b>MC2019-287</b>	<b>MECHANICAL</b>
<b>PROJECT NAME:</b> JOLLY ROGER HVAC	<b>ISSUED:</b> 10/21/2019
<b>SITE ADDRESS:</b> 1836 VA DARE TRL N KILL DEVIL HILLS	<b>EXPIRES:</b> 04/18/2020

<b>APPLICANT:</b> CHELLO INC P O BOX 2517 KILL DEVIL HILLS, NC 27948	<b>OWNER:</b> CHELLO INC P O BOX 2517 KILL DEVIL HILLS, NC 27948
--	--

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

<b>PIN:</b> 988406389793	<b>Parcel Number:</b> 002863000
<b>Address:</b> 1836 VA DARE TRL N KILL DEVIL HILLS	<b>Zoning:</b>
<b>Addition:</b> Croatan Shores Amended	<b>Block:</b> G <b>Lot(s):</b> 1,2,20,21
<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:** REPLACE A/C CONDENSOR, EVAPORATOR COIL

**MC2019-287**

**PROJECT NAME:** JOLLY ROGER HVAC

**SITE ADDRESS:** 1836 VA DARE TRL N KILL DEVIL HILLS

**MECHANICAL**

**ISSUED:** 10/21/2019

**EXPIRES:** 04/18/2020

**DETAILS**

**Permit**

<b>Name</b>	<b>Value</b>
PURPOSE	Commercial Repair/Remodel
CONSTRUCTION COST	6200.00
CONSTRUCTION TYPE	V
FLOOD ZONE	AE
BASE FLOOD ELEVATION	8.00
NATURAL GAS SIGNOFF	N
OCCUPANCY TYPE	Assembly

**REQUIRED INSPECTIONS**

Final

**CONDITIONS**

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Issued By:

Contractor or Authorized Agent:

Date:





**Town of Kill Devil Hills**

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

PAID  
OCT 22 2019

**Planning and Inspection Department**

<b>MC2019-292</b>	<b>MECHANICAL</b>
<b>PROJECT NAME:</b> GRAY HVAC RELOCATION	<b>ISSUED:</b> 10/22/2019
<b>SITE ADDRESS:</b> 2009 WRIGHTSVILLE BLVD KILL DEVIL HILLS	<b>EXPIRES:</b> 04/19/2020

<b>APPLICANT:</b> GAIL GRAY PO BOX 7356 Kill Devil Hills, NC 27948 252-441-4077	<b>OWNER:</b> GAIL GRAY PO BOX 7356 Kill Devil Hills, NC 27948 252-441-4077
--	--

<b>MECHANICAL:</b> Trademark Heating & Cooling PO Box 2554 Kill Devil Hills, NC 27948	<b>License:</b> 31311 <b>Expires:</b> 12/31/2019
---	---

**PARCEL:**

<b>PIN:</b> 98931313596807	<b>Parcel Number:</b> 029015000
<b>Address:</b> 2009 WRIGHTSVILLE BLVD KILL DEVIL HILLS	<b>Zoning:</b>
<b>Addition:</b>	<b>Block:</b> 0 <b>Lot(s):</b> UNIT 3-D
<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:** RELOCATE HEAT PUMP

**MC2019-292**

**PROJECT NAME:** GRAY HVAC RELOCATION

**SITE ADDRESS:** 2009 WRIGHTSVILLE BLVD KILL DEVIL HILLS

**MECHANICAL**

**ISSUED:** 10/22/2019

**EXPIRES:** 04/19/2020

**DETAILS**

**Permit**

<b>Name</b>	<b>Value</b>
PURPOSE	Residential Repair/Remodel
CONSTRUCTION COST	1635.00
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: Barbara K. Guren

Date: 10/22/19



**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**

<b>MC2019-294</b>	<b>MECHANICAL</b>
<b>PROJECT NAME:</b> Michael HVAC	<b>ISSUED:</b> 10/29/2019
<b>SITE ADDRESS:</b> 1518 VA DARE TRL N KILL DEVIL HILLS	<b>EXPIRES:</b> 04/26/2020

**APPLICANT:** MICHAEL, ROBERT O  
817 HOLLY GROVE LANE  
RICHMOND, VA 23235

**OWNER:** MICHAEL, ROBERT O  
817 HOLLY GROVE LANE  
RICHMOND, VA 23235

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

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

**PARCEL:**

**PIN:** 988411555790

**Parcel Number:** 002832000

**Address:** 1518 VA DARE TRL N KILL DEVIL HILLS

**Addition:** CROATAN SHORES

**Zoning:**  
**Block:** D **Lot(s):** 11

**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 1.5 Ton HVAC System

**DETAILS**

**Permit**

<b>Name</b>	<b>Value</b>
CONSTRUCTION COST	5451.00
CONSTRUCTION TYPE	V
FLOOD ZONE	AE
BASE FLOOD ELEVATION	8
NATURAL GAS SIGNOFF	N

PAID

OCT 29 2019

TOWN OF  
KILL DEVIL HILLS

**MC2019-294**

**PROJECT NAME:** Michael HVAC

**SITE ADDRESS:** 1518 VA DARE TRL N KILL DEVIL HILLS

**MECHANICAL**

**ISSUED:** 10/29/2019

**EXPIRES:** 04/26/2020

**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: \_\_\_\_\_

6/29/19



**Town of Kill Devil Hills**

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

**PAID**

OCT 2 2019

TOWN OF  
KILL DEVIL HILLS

**Planning and Inspection Department**

<b>EG2019-013</b>	<b>EXCAVATION AND GRADING</b>
<b>PROJECT NAME:</b> Delp Lot Clearing	<b>ISSUED:</b> 10/01/2019
<b>SITE ADDRESS:</b> 0 Sixth Avenue Kill Devil Hills	<b>EXPIRES:</b> 03/29/2020

<b>APPLICANT:</b> Delp, Earnest 32 Woodlawn Drive PALMYRA, VA 22963	<b>OWNER:</b> Delp, Earnest 32 Woodlawn Drive PALMYRA, VA 22963
---	---

**CONTRACTOR:** MOYE, CHRISTOPHER A  
3923 SMITH ST  
kitty hawk, nc 27949  
252-216-8155

<b>GENERAL BUILDING-LIMITED:</b>	MOYE, CHRISTOPHER A 3923 SMITH ST kitty hawk, nc 27949 252-216-8155	<b>License:</b> 76610 <b>Expires:</b> 12/31/2019
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**PARCEL:**

<b>PIN:</b> 9883171107	<b>Parcel Number:</b>
<b>Address:</b> 804 0 Sixth Avenue Kill Devil Hills	
<b>Addition:</b>	<b>Zoning:</b>
<b>Legal Description:</b> Lot 3, Block 38 Kill Devil Hills Realty Corp	<b>Block:</b> <b>Lot(s):</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 for new construction

**EG2019-013**

**PROJECT NAME:** Delp Lot Clearing  
**SITE ADDRESS:** 0 Sixth Avenue Kill Devil Hills

**EXCAVATION AND GRADING**

**ISSUED:** 10/01/2019

**EXPIRES:** 03/29/2020

**DETAILS**

**Permit**

<b>Name</b>	<b>Value</b>
ESTIMATED CONSTRUCTION COST	2500.00
ZONING DISTRICT	RL
CAMA PERMIT	N
FLOOD ZONE	X
SURVEYOR NAME AND NUMBER	Hugh Sorrell L-2849

**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.
- \* 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: 10-2-19



# Town of Kill Devil Hills

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

OCT - 1 2019

## Planning and Inspection Department

### DM2019-011

**PROJECT NAME:** Nida Demo  
**SITE ADDRESS:** 1004 SEVENTH AVE KILL DEVIL HILLS

### DEMOLITION

**ISSUED:** 10/01/2019

**EXPIRES:** 03/29/2020

**APPLICANT:** Nida, Thomas/Robin  
6445 Luzon Ave NW 517  
PO Box 1687  
Washington DC, DC 20012  
202-809-7711

**OWNER:** Nida, Thomas/Robin  
6445 Luzon Ave NW 517  
PO Box 1687  
Washington DC, DC 20012  
202-809-7711

**GENERAL UNLIMITED:**

SNEARER, PAUL / SNEARER CONSTRUCTION INC  
133 Bayberry Trail  
PO Box 2875  
Kitty Hawk, NC 27949

**License:** 25865  
**Expires:** 12/31/2019

**PARCEL:**

**PIN:** 988311762172

**Parcel Number:** 004552000

**Address:** 1004 SEVENTH AVE KILL DEVIL HILLS

**Zoning:**

**Addition:** KILL DEVIL HILLS REALTY CORP

**Block:** 46 **Lot(s):** 3

**Legal Description:**

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

**PROJECT DESCRIPTION:** Demo existing house

### DETAILS

**Permit**

Name	Value
ZONING DISTRICT	RL
FLOOD ZONE	X
CONSTRUCTION COST	12000.00



**DM2019-011**

**PROJECT NAME:** Nida Demo

**SITE ADDRESS:** 1004 SEVENTH AVE KILL DEVIL HILLS

**DEMOLITION**

**ISSUED:** 10/01/2019

**EXPIRES:** 03/29/2020

**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: \_\_\_\_\_

10.1.19



**Town of Kill Devil Hills**

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

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OCT 3 2019

**Planning and Inspection Department**

TOWN OF  
KILL DEVIL HILLS

<b>DM2019-012</b>	<b>DEMOLITION</b>
<b>PROJECT NAME:</b> 1207 Demo	<b>ISSUED:</b> 10/03/2019
<b>SITE ADDRESS:</b> 1207 VA DARE TRL S KILL DEVIL HILLS	<b>EXPIRES:</b> 03/31/2020

<b>APPLICANT:</b> 1207 SVDT LLC PO Box 90 Kill Devil Hills, NC 27948 252-441-9003	<b>OWNER:</b> 1207 SVDT LLC PO Box 90 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
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**PARCEL:**

<b>PIN:</b> 989305072665	<b>Parcel Number:</b> 004275000
<b>Address:</b> 1207 VA DARE TRL S KILL DEVIL HILLS	<b>Zoning:</b>
<b>Addition:</b> KILL DEVIL HILLS SEC 1	<b>Block:</b> 5 <b>Lot(s):</b> 4-5
<b>Legal Description:</b>	

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

**PROJECT DESCRIPTION:** Remove existing structure, septic and driveway

**DETAILS**

Permit	
Name	Value
ZONING DISTRICT	OIR
FLOOD ZONE	VE
CONSTRUCTION COST	10000.00

**DM2019-012**

PROJECT NAME: 1207 Demo

SITE ADDRESS: 1207 VA DARE TRL S KILL DEVIL HILLS

**DEMOLITION**

ISSUED: 10/03/2019

EXPIRES: 03/31/2020

**REQUIRED INSPECTIONS**

Final

**CONDITIONS**

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

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

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

10/3/19



**Town of Kill Devil Hills**

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

OCT 18 2019

**Planning and Inspection Department**

<b>DM2019-014</b>	<b>DEMOLITION</b>
<b>PROJECT NAME:</b> Demo House	<b>ISSUED:</b> 10/11/2019
<b>SITE ADDRESS:</b> 1730 SOBLE DR KILL DEVIL HILLS	<b>EXPIRES:</b> 04/08/2020

**APPLICANT:** Giulian, Joseph  
41636 Carter Ridge Ln  
Leesburg, VA 20176

**OWNER:** Giulian, Joseph  
41636 Carter Ridge Ln  
Leesburg, VA 20176

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

**License:** Unlicensed  
**Expires:** 12/31/2020

**PARCEL:**

**PIN:** 988410379479

**Parcel Number:** 002738000

**Address:** 1730 SOBLE DR KILL DEVIL HILLS

**Addition:** SUBDIVISION - NONE

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

**Legal Description:**

<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:** Remove existing structure

**DETAILS**

**Permit**

<b>Name</b>	<b>Value</b>
ZONING DISTRICT	RL
FLOOD ZONE	AE
CONSTRUCTION COST	2800.00

**DM2019-014**

**PROJECT NAME:** Demo House

**SITE ADDRESS:** 1730 SOBLE DR KILL DEVIL HILLS

**DEMOLITION**

**ISSUED:** 10/11/2019

**EXPIRES:** 04/08/2020

**REQUIRED INSPECTIONS**

Final

**CONDITIONS**

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

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

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



**Town of Kill Devil Hills**

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

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OCT 10 2019

TOWN OF  
KILL DEVIL HILLS

**Planning and Inspection Department**

<b>DW2019-014</b>	<b>DRIVEWAY</b>
<b>PROJECT NAME:</b> Marx Driveway Addition	<b>ISSUED:</b> 09/18/2019
<b>SITE ADDRESS:</b> 703 SUFFOLK ST KILL DEVIL HILLS	<b>EXPIRES:</b> 03/16/2020

**APPLICANT:** Marx, Paula  
703 Suffolk Street  
Kill Devil Hills, NC 27948

**OWNER:** Marx, Paula  
703 Suffolk Street  
Kill Devil Hills, NC 27948

**CONTRACTOR:** Dave's Concrete  
231 W. Lookout  
nags head, nc 27959  
252-305-9677

**UNLICENSED BUILDER:** Dave's Concrete  
231 W. Lookout  
nags head, nc 27959  
252-305-9677

**License:** 12345  
**Expires:**

**PARCEL:**

**PIN:** 988405096582

**Parcel Number:** 001137000

**Address:** 703 SUFFOLK ST KILL DEVIL HILLS

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

**Zoning:**  
**Block:** 0 **Lot(s):** 934

**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:** 12x31 driveway addition

**DW2019-014**

**PROJECT NAME:** Marx Driveway Addition  
**SITE ADDRESS:** 703 SUFFOLK ST KILL DEVIL HILLS

**DRIVEWAY**

**ISSUED:** 09/18/2019

**EXPIRES:** 03/16/2020

**DETAILS**

**Permit**

Name	Value
DRIVEWAY INVERT 2	N
CULVERT	N
SURVEYOR NAME AND NUMBER	Robert S. Rogers L-4293
ZONING DISTRICT	RH
CONSTRUCTION COST	3420.00
FLOOD ZONE	AE
BASE FLOOD ELEVATION	8.3
LOT COVERAGE	36.00
TOTAL SQUARE FOOTAGE	276

**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.
- \* NOTICE: Call Public Services Department (252) 480-4080 before pouring driveway!
- \* As-built survey will be required prior to Certificate of Occupancy or Certificate of Compliance.

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

Issued By: 

Contractor or Authorized Agent: 

Date: 10/10/19





**Town of Kill Devil Hills**

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

OCT 11 2019

**Planning and Inspection Department**

<b>DM2019-013</b>	<b>DEMOLITION</b>
<b>PROJECT NAME:</b> Myrick demolition	<b>ISSUED:</b> 10/11/2019
<b>SITE ADDRESS:</b> 101 GREENSBORO ST KILL DEVIL HILLS	<b>EXPIRES:</b> 04/08/2020

**APPLICANT:** MYRICK, MURRY W JR  
5716 OAK TERRACE DRIVE  
VA BEACH, VA 23464

**OWNER:** MYRICK, MURRY W JR  
5716 OAK TERRACE DRIVE  
VA BEACH, VA 23464

**CONTRACTOR:** JIM DAVIS OF DAVIS BROTHERS  
CONSTRUCTION COMPANY INC.  
242 Broadbay Drive  
Kill Devil Hills, NC 27948  
252-441-3810

**GENERAL:** JIM DAVIS OF DAVIS BROTHERS CONSTRUCTION COMPANY INC.  
242 Broadbay Drive  
Kill Devil Hills, NC 27948  
252-441-3810  
**License:** 23261  
**Expires:**

**PARCEL:**

**PIN:** 988406295765

**Parcel Number:** 001936000

**Address:** 101 GREENSBORO ST KILL DEVIL HILLS

**Addition:** AVALON BEACH ANNEX 1

**Zoning:**  
**Block:** 0 **Lot(s):** 509

**Legal Description:**

<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:** demolish existing house and clear the lot



# Town of Kill Devil Hills

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

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OCT 3 2019

## Planning and Inspection Department

<b>PL2019-011</b>	<b>PLUMBING</b>
<b>PROJECT NAME:</b> SALAZAR WATER LINE	<b>ISSUED:</b> 10/03/2019
<b>SITE ADDRESS:</b> 1005 NINTH AVE KILL DEVIL HILLS	<b>EXPIRES:</b> 03/31/2020

<b>APPLICANT:</b> NEMESIO SALAZAR PO BOX 2183 Kill Devil Hills, NC 27948 252-489-3437	<b>OWNER:</b> IVES, ELLIS H 4118 MINGO TRAIL CHESAPEAKE, VA 23325
--	---

<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> 988311659745	<b>Parcel Number:</b> 004590000
<b>Address:</b> 1005 NINTH AVE KILL DEVIL HILLS	<b>Zoning:</b>
<b>Addition:</b> KILL DEVIL HILLS REALTY CORP	<b>Block:</b> 51 <b>Lot(s):</b> 8
<b>Legal Description:</b>	

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

**PROJECT DESCRIPTION:** TRENCH AND INSTALL NEW WATER DISTRIBUTION LINE

DETAILS	
Permit	
Name	Value
PURPOSE	Residential Repair/Remodel
CONSTRUCTION COST	500.00
CONSTRUCTION TYPE	V
OCCUPANCY TYPE	One & Two Family Dwelling

Town of Kill Devil Hills  
Water Charges  
**PAID**  
Water Tap #: T23761

**PL2019-011**

**PROJECT NAME:** SALAZAR WATER LINE  
**SITE ADDRESS:** 1005 NINTH AVE KILL DEVIL HILLS

**PLUMBING**

**ISSUED:** 10/03/2019

**EXPIRES:** 03/31/2020

**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: \_\_\_\_\_

10-03-19



**Town of Kill Devil Hills**

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

OCT 7 20 9

**Planning and Inspection Department**

<b>PL2019-012</b>	<b>PLUMBING</b>
<b>PROJECT NAME:</b>	<b>ISSUED: 10/07/2019</b>
<b>SITE ADDRESS: 501 AIRSTRIP RD W KILL DEVIL HILLS</b>	<b>EXPIRES: 04/04/2020</b>

<b>APPLICANT:</b> CUMMINGS, TODD 501 WEST AIRSTRIP RD Kill Devil Hills, NC 27948	<b>OWNER:</b> CUMMINGS, TODD 501 WEST AIRSTRIP RD Kill Devil Hills, NC 27948
--	--

**PARCEL:**

<b>PIN:</b> 988312769336	<b>Parcel Number:</b> 004486000
<b>Address:</b> 501 AIRSTRIP RD W KILL DEVIL HILLS	<b>Zoning:</b>
<b>Addition:</b> KILL DEVIL HILLS REALTY CORP	<b>Block:</b> 35 <b>Lot(s):</b> 4
<b>Legal Description:</b>	

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

**PROJECT DESCRIPTION:** Transfer water service from private well to city water supply.

<b>DETAILS</b>	
<b>Permit</b>	<b>Value</b>
<b>Name</b>	
PURPOSE	Residential Repair/Remodel
CONSTRUCTION COST	200.00
CONSTRUCTION TYPE	V
FLOOD ZONE	X
OCCUPANCY TYPE	One & Two Family Dwelling

Town of Kill Devil Hills  
Water Charges  
**PAID**  
Water Tap #: T23702

**PL2019-012**

**PROJECT NAME:**

**SITE ADDRESS:** 501 AIRSTRIP RD W KILL DEVIL HILLS

**PLUMBING**

**ISSUED:** 10/07/2019

**EXPIRES:** 04/04/2020

**REQUIRED INSPECTIONS**

Final

Rough In

**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: Marty Shaw

Contractor or Authorized Agent: John D. Cap...

Date: 10/7/19



# Town of Kill Devil Hills

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

PAID

OCT 18 2019

## Planning and Inspection Department

TOWN OF  
KILL DEVIL HILLS

**PL2019-013**

**PROJECT NAME:** Ramada Inn  
**SITE ADDRESS:** 1701 VA DARE TRL S KILL DEVIL HILLS

**PLUMBING**

**ISSUED:** 10/18/2019

**EXPIRES:** 04/15/2020

**APPLICANT:** O W L NEAL PARTNERSHIP  
PO BOX 2716  
KILL DEVIL HILLS, NC 27948

**OWNER:** O W L NEAL PARTNERSHIP  
PO BOX 2716  
KILL DEVIL HILLS, NC 27948

**PLUMBING CLASS I:** ABSOLUTE PLUMBING  
101 Quarter Landing  
Harbinger, NC 27941  
252-489-1439

**License:** 30190  
**Expires:** 12/31/2019

**PARCEL:**

**PIN:** 989309154444

**Parcel Number:** 008235000

**Address:** 1701 VA DARE TRL S KILL DEVIL HILLS

**Addition:** OCEAN ACRES INC

**Zoning:**  
**Block:** 0      **Lot(s):** C & D

**Legal Description:**

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

**PROJECT DESCRIPTION:** Replace re-circulation pump and pump isolation valves.

**PL2019-013**

**PROJECT NAME:** Ramada Inn

**SITE ADDRESS:** 1701 VA DARE TRL S KILL DEVIL HILLS

**PLUMBING**

**ISSUED:** 10/18/2019

**EXPIRES:** 04/15/2020

**DETAILS**

**Permit**

<b>Name</b>	<b>Value</b>
PURPOSE	Commercial Repair/Remodel
CONSTRUCTION COST	1500.00
CONSTRUCTION TYPE	II
FLOOD ZONE	VE
BASE FLOOD ELEVATION	11
OCCUPANCY TYPE	Residential

**REQUIRED INSPECTIONS**

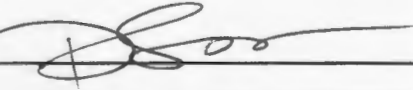
Final

**CONDITIONS**

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Issued By: 

Contractor or Authorized Agent:  Date: 10/18/19





**Town of Kill Devil Hills**

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

OCT 7 2019

**Planning and Inspection Department**

TOWN OF  
KILL DEVIL HILLS

**HUR2019-002**

**PROJECT NAME:** Mariner Roof and Walkway Repair  
**SITE ADDRESS:** 1801 VA DARE TRL N KILL DEVIL HILLS

**HURRICANE PERMIT**

**ISSUED:** 09/13/2019

**EXPIRES:** 03/11/2020

**APPLICANT:** C AND S REALTY CORP  
301 N Va. Dare Trail  
DANVILLE, VA 24543

**OWNER:** C AND S REALTY CORP  
301 N Va. Dare Trail  
DANVILLE, VA 24543

**GENERAL BUILDING - UNLIMITED:** OVERTON CORPORATION  
1703 Harbour View Drive  
PO Box 3989  
Kill Devil Hills, NC 27948

**License:** 54642  
**Expires:** 12/31/2019

**PARCEL:**

**PIN:** 988406486187

**Parcel Number:** 002803000

**Address:** 1801 VA DARE TRL N KILL DEVIL HILLS

**Addition:** Croatan Shores Amended

**Zoning:**  
**Block:** D **Lot(s):** 17-19

**Legal Description:**

<b>FEES:</b>	<b>Paid</b>	<b>Due</b>
Com. Building Permit Fees	\$0.00	\$0.00
<b>Totals :</b>	<b>\$0.00</b>	<b>\$0.00</b>

**PROJECT DESCRIPTION:** Repair damaged roof and deck walkway

**HUR2019-002**

**PROJECT NAME:** Mariner Roof and Walkway Repair  
**SITE ADDRESS:** 1801 VA DARE TRL N KILL DEVIL HILLS

**HURRICANE PERMIT**

**ISSUED:** 09/13/2019

**EXPIRES:** 03/11/2020

**DETAILS****Permit**

<b>Name</b>	<b>Value</b>
ZONING DISTRICT	OIR
FRONT YARD SETBACK	30
REAR YARD SETBACK	CAMA
SIDE YARD SETBACK	12
STREET SIDE SETBACK	15
CAMA PERMIT	N
FLOOD ZONE	VE
BASE FLOOD ELEVATION	11
PURPOSE	Commercial Repair/Remodel
CONSTRUCTION COST	30000.00
CULVERT	N

**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!

**HUR2019-002**

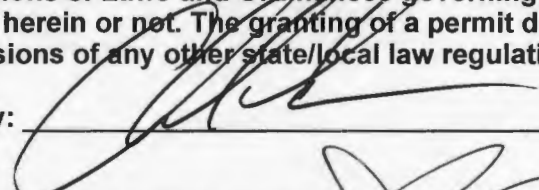
**PROJECT NAME:** Mariner Roof and Walkway Repair  
**SITE ADDRESS:** 1801 VA DARE TRL N KILL DEVIL HILLS

**HURRICANE PERMIT**

**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: 10-7-19



**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**

**HUR2019-009**

**PROJECT NAME:** Mosley Fence Repair Hurricane Damage  
**SITE ADDRESS:** 900 FOX ST KILL DEVIL HILLS

**HURRICANE PERMIT**

**ISSUED:** 10/10/2019

**EXPIRES:** 04/07/2020

**APPLICANT:** MOSELEY, JOHN MICHAEL  
P O BOX 1902  
KILL DEVIL HILLS, NC 27948

**OWNER:** MOSELEY, JOHN MICHAEL  
P O BOX 1902  
KILL DEVIL HILLS, NC 27948

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

**License:** Unlicensed  
**Expires:** 12/31/2020

**PARCEL:**

**PIN:** 988308779649

**Parcel Number:** 004400000

**Address:** 900 FOX ST KILL DEVIL HILLS

**Addition:** KILL DEVIL HILLS REALTY CORP

**Zoning:**  
**Block:** 21 **Lot(s):** 1

**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:** replace existing fence due to hurricane damage

PAID  
OCT 10 2019  
TOWN OF  
KILL DEVIL HILLS

**HUR2019-009**

**PROJECT NAME:** Mosley Fence Repair Hurricane Damage  
**SITE ADDRESS:** 900 FOX ST KILL DEVIL HILLS

**HURRICANE PERMIT**

**ISSUED:** 10/10/2019

**EXPIRES:** 04/07/2020

**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	9.0
PURPOSE	Residential Repair/Remodel
CONSTRUCTION COST	3500.00
SURVEYOR NAME AND NUMBER	Manson Ray Meekins L-2592
CULVERT	N
OCCUPANCY TYPE	One & Two Family Dwelling

**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.

**HUR2019-009**

**PROJECT NAME:** Mosley Fence Repair Hurricane Damage  
**SITE ADDRESS:** 900 FOX ST KILL DEVIL HILLS

**HURRICANE PERMIT**

**ISSUED:** 10/10/2019

**EXPIRES:** 04/07/2020

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: 10/10/19



**Town of Kill Devil Hills**

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

OCT 14 2019

**Planning and Inspection Department**

**HUR2019-010**

**PROJECT NAME:** HURRICANE REPAIR PERMIT  
**SITE ADDRESS:** 1205 VA DARE TRL S KILL DEVIL HILLS

**HURRICANE PERMIT**

**ISSUED:** 10/14/2019

**EXPIRES:** 04/11/2020

**APPLICANT:** Rickie Thomas and Mary Baxter  
1696 Dey Cove Dr  
VIRGINIA BEACH, VA 23454  
804-405-2414

**OWNER:** Rickie Thomas and Mary Baxter  
1696 Dey Cove Dr  
VIRGINIA BEACH, VA 23454  
804-405-2414

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

**License:** Unlicensed  
**Expires:** 12/31/2020

**PARCEL:**

**PIN:** 989305072732

**Parcel Number:** 004272001

**Address:** 1205 VA DARE TRL S KILL DEVIL HILLS

**Addition:** KILL DEVIL HILLS SEC 1

**Zoning:**  
**Block:** 5 **Lot(s):** 3

**Legal Description:**

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

**PROJECT DESCRIPTION:** Repair pool fence. Re-attached portion of barrier that had blown down.



**HUR2019-010**

**PROJECT NAME:** HURRICANE REPAIR PERMIT  
**SITE ADDRESS:** 1205 VA DARE TRL S KILL DEVIL HILLS

**HURRICANE PERMIT**

**ISSUED:** 10/14/2019

**EXPIRES:** 04/11/2020

**DETAILS**

**Permit**

<b>Name</b>	<b>Value</b>
ZONING DISTRICT	OIR
CAMA PERMIT	N
FLOOD ZONE	VE
BASE FLOOD ELEVATION	11
PURPOSE	Residential Repair/Remodel
CONSTRUCTION TYPE	V
CONSTRUCTION COST	200.00
CULVERT	N
OCCUPANCY TYPE	One & Two Family Dwelling

**REQUIRED INSPECTIONS**

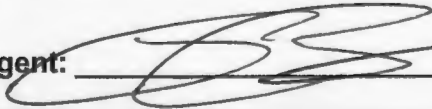
Final

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

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

Issued By: 

Contractor or Authorized Agent: 

Date: 10-14-19



**Town of Kill Devil Hills**

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

120

OCT 25 2019

**Planning and Inspection Department**

<b>HUR2019-007</b>	<b>HURRICANE PERMIT</b>
<b>PROJECT NAME:</b> John Yancy Roof Repair Hurricane	<b>ISSUED:</b> 09/25/2019
<b>SITE ADDRESS:</b> 2009 VA DARE TRL S KILL DEVIL HILLS	<b>EXPIRES:</b> 03/23/2020

<b>APPLICANT:</b> John Yancy LLC. 2009 SOUTH Va. Dare Tr. P.O. Box 71125 Bethesda, MD 20813 252-207-8710	<b>OWNER:</b> John Yancy LLC. 2009 SOUTH Va. Dare Tr. P.O. Box 71125 Bethesda, MD 20813 252-207-8710
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<b>CONTRACTOR:</b> Frasca, William - Frasca Custom Homes 2401 Colington Road Kill Devil Hills, NC 27948 252-480-0515	
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<b>CONTRACTOR:</b> Frasca, William - Frasca Custom Homes 2401 Colington Road Kill Devil Hills, NC 27948 252-480-0515	<b>License:</b> 72094 <b>Expires:</b> 01/01/2020
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**PARCEL:**

<b>PIN:</b> 989313148592	<b>Parcel Number:</b> 005180000
<b>Address:</b> 2009 VA DARE TRL S KILL DEVIL HILLS	
<b>Addition:</b> H B CAWTHORNE ESTATE LANDS	<b>Zoning:</b>
<b>Legal Description:</b>	<b>Block:</b> 0 <b>Lot(s):</b> H,I,J

<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:** Replacement of the damaged roof, installing new ISO and roof membrane roofing system

**HUR2019-007**

**PROJECT NAME:** John Yancy Roof Repair Hurricane  
**SITE ADDRESS:** 2009 VA DARE TRL S KILL DEVIL HILLS

**HURRICANE PERMIT**

ISSUED: 09/25/2019

EXPIRES: 03/23/2020

**DETAILS****Permit**

Name	Value
ZONING DISTRICT	OIR
FRONT YARD SETBACK	30
REAR YARD SETBACK	CAMA
SIDE YARD SETBACK	12
CAMA PERMIT	N
FLOOD ZONE	VE
BASE FLOOD ELEVATION	11.0
PURPOSE	Commercial Repair/Remodel
CONSTRUCTION COST	109850.00
CULVERT	N
OCCUPANCY TYPE	Residential

**REQUIRED INSPECTIONS**

Final

Zoning Final

**CONDITIONS**

- \* This permit becomes null and void if work or construction authorized is not commenced within 6 months or if construction or work is suspended for a period of 12 months at any time after work has started.
- \* Must comply with Wind Borne Debris requirements as defined in NCBC R301.2.1.2 and NCBC 1609.2.

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

Issued By: 

Contractor or Authorized Agent:  Date: 10/25/19



**Town of Kill Devil Hills**

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

OCT 3 2019

**Planning and Inspection Department**

TOTAL OF  
FEE(S) \$156.75

<b>OP2019-061</b>	<b>OCCUPANCY</b>
<b>PROJECT NAME:</b> Bakopoulos New Single Family Dwelling	<b>ISSUED:</b> 10/03/2019
<b>SITE ADDRESS:</b> 514 WEST EDEN STREET Kill Devil Hills	<b>EXPIRES:</b>

PARENT PERMIT #: BJ2019-082

<b>APPLICANT:</b> BAKOPOULOS, NICHOLAS 107 ST CLAIR RD KILL DEVIL HILLS, NC 27948	<b>OWNER:</b> BAKOPOULOS, NICHOLAS 107 ST CLAIR RD KILL DEVIL HILLS, NC 27948
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<b>BUILDING LIMITED:</b> Hughes, Ryland James 3945 Pineway Drive kitty hawk, nc 27949	<b>License:</b> 76503 <b>Expires:</b> 12/31/2019
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**PARCEL:**

<b>PIN:</b> 987520906496	<b>Parcel Number:</b>
<b>Address:</b> 514 WEST EDEN STREET Kill Devil Hills	<b>Zoning:</b>
<b>Addition:</b>	<b>Block:</b>
<b>Legal Description:</b> Lot 27 and 28 Block 73	<b>Lot(s):</b>

FEES:	<u>Paid</u>	<u>Due</u>
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:** New 3 Bedroom Single Family Dwelling

**DETAILS**

**Permit**

Name	Value
# OF TRASH CANS	1

**CONDITIONS**

**OP2019-061**

**PROJECT NAME:** Bakopoulos New Single Family Dwelling  
**SITE ADDRESS:** 514 WEST EDEN STREET Kill Devil Hills

**OCCUPANCY**

**ISSUED:** 10/03/2019

**EXPIRES:**

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

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

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

Date: 10-3-19



# Town of Kill Devil Hills

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

OCT 14 2019

## Planning and Inspection Department

**OP2019-062**

**PROJECT NAME:** Natures Walk - Phase 2  
**SITE ADDRESS:** 900 Corrigan St. KILL DEVIL HILLS

**OCCUPANCY**  
**ISSUED:** 10/14/2019

**EXPIRES:**

**APPLICANT:** LONE CEDAR DEVELOPMENT, LLC  
136 LONE CEDAR DR  
NAGS HEAD, NC 00000

**OWNER:** LONE CEDAR DEVELOPMENT, LLC  
136 LONE CEDAR DR  
NAGS HEAD, NC 00000

**GENERAL, UNLIMITED:** COASTLINE REALTY & CONSTRUCTION LLC  
281 Kilmarlic Club  
Powels Point, NC 27966  
305-8077

**License:** 62368  
**Expires:** 12/31/2019

**PARCEL:**

**PIN:** 988311664286

**Parcel Number:** 030494000

**Address:** 900 Corrigan St. KILL DEVIL HILLS

**Zoning:**

**Addition:** KILL DEVIL HILLS REALTY CORP

**Block:** 54 **Lot(s):** 5 & 6

**Legal Description:**

<b>FEES:</b>	<b>Paid</b>	<b>Due</b>
Certificate of Occupancy Fee	\$50.00	\$0.00
<b>Totals :</b>	<b>\$50.00</b>	<b>\$0.00</b>

**PROJECT DESCRIPTION:** (3) - 3 bedroom townhome, (1) - 2 bedroom townhome - Building #3 as shown on site plan.

### DETAILS

**Permit**

<b>Name</b>	<b>Value</b>
# OF TRASH CANS	0
PURPOSE	Residential New
ZONING DISTRICT	LI-2
FLOOD ZONE	X
OCCUPANCY TYPE	Residential

**OP2019-062**

**PROJECT NAME:** Natures Walk - Phase 2  
**SITE ADDRESS:** 900 Corrigan St. KILL DEVIL HILLS

**OCCUPANCY**

**ISSUED:** 10/14/2019

**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: \_\_\_\_\_

10-14-19





**Town of Kill Devil Hills**

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

**PAID**

OCT 15 2019

**Planning and Inspection Department**

TOWN OF  
KILL DEVIL HILLS

<b>OP2019-063</b>	<b>OCCUPANCY</b>
<b>PROJECT NAME:</b> Kay Jones-Lifting house/remodel	<b>ISSUED:</b> 10/15/2019
<b>SITE ADDRESS:</b> 109 ST CLAIR ST E KILL DEVIL HILLS	<b>EXPIRES:</b>

PARENT PERMIT #: BJ2019-064

<b>APPLICANT:</b> Ives, Kay 909 Thatcher Way CHESAPEAKE, VA 23320	<b>OWNER:</b> Ives, Kay 909 Thatcher Way CHESAPEAKE, VA 23320
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<b>CONTRACTOR:</b> PSS Construction PO Box 713 Kill Devil Hills, NC 27948 252-202-1280
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<b>BUILDING LIMITED:</b> PSS Construction PO Box 713 Kill Devil Hills, NC 27948 252-202-1280	<b>License:</b> 57425 <b>Expires:</b>
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<b>PARCEL:</b>			
<b>PIN:</b> 988308891593	<b>Parcel Number:</b>	003799000	
<b>Address:</b> 109 ST CLAIR ST E KILL DEVIL HILLS			
<b>Addition:</b> KITTY HAWK SHORES - REVISED	<b>Zoning:</b>	<b>Block:</b> 32	<b>Lot(s):</b> 16
<b>Legal Description:</b>			

<b>FEES:</b>	<b>Paid</b>	<b>Due</b>
Certificate of Occupancy Fee	\$50.00	\$0.00
<b>Totals :</b>	<b>\$50.00</b>	<b>\$0.00</b>

**PROJECT DESCRIPTION:** Raise house, changing current bedroom to extension of living room, add new 3rd bedroom, new den, kitchen and living room and bath on new floor 1st floor



**OP2019-063**

**PROJECT NAME:** Kay Jones-Lifting house/remodel  
**SITE ADDRESS:** 109 ST CLAIR ST E KILL DEVIL HILLS

**OCCUPANCY**  
**ISSUED:** 10/15/2019

**EXPIRES:**

**DETAILS**


**Permit**

<b>Name</b>	<b>Value</b>
# OF TRASH CANS	0
PURPOSE	Residential Addition
ZONING DISTRICT	C
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: 10/15/19



# Town of Kill Devil Hills

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

OCT 16 2019

## Planning and Inspection Department

**OP2019-064**

**PROJECT NAME:** Joseph Foti and Amanda Jones  
**SITE ADDRESS:** 1719 WYANDOTTE ST KILL DEVIL HILLS

**OCCUPANCY**

**ISSUED:** 10/16/2019

**EXPIRES:**

**PARENT PERMIT #:** BJ2018-197

**APPLICANT:** Nelson, Ben/Southern Cottage Realty, Inc.  
1706 Virginia Ave.  
Kill Devil Hills, NC 27949  
252-207-9837

**OWNER:** Nelson, Ben/Southern Cottage Realty, Inc.  
1706 Virginia Ave.  
Kill Devil Hills, NC 27949  
252-207-9837

**CONTRACTOR:** Nelson, Ben/Southern Cottage Realty, Inc.  
1706 Virginia Ave.  
Kill Devil Hills, NC 27949  
252-207-9837

**License:** 80428  
**Expires:** 10/31/2019

**CONTRACTOR:** Nelson, Ben/Southern Cottage Realty, Inc.  
1706 Virginia Ave.  
Kill Devil Hills, NC 27949  
252-207-9837

**License:** 80428  
**Expires:** 10/31/2019

**PARCEL:**

**PIN:** 988409261557 **Parcel Number:** 002691000

**Address:** 1719 WYANDOTTE ST KILL DEVIL HILLS

**Addition:** HIGH VIEW - HEDRICKS ADD

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

**Legal Description:**

<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 4 bedroom single family dwelling

**OP2019-064**

**PROJECT NAME:** Joseph Foti and Amanda Jones  
**SITE ADDRESS:** 1719 WYANDOTTE ST KILL DEVIL HILLS

**OCCUPANCY**

**ISSUED:** 10/16/2019

**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: 10/16/2019



# Town of Kill Devil Hills

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

## Planning and Inspection Department

<b>OP2019-066</b>	<b>OCCUPANCY</b>
<b>PROJECT NAME:</b> IG HOLDINGS RESTAURANT - (CONDITIONAL APPROVAL)	<b>ISSUED:</b> 10/18/2019
<b>SITE ADDRESS:</b> 101 E. Atlantic St. KILL DEVIL HILLS	<b>EXPIRES:</b>

<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>GENERAL, UNLIMITED:</b>	CHESSON, A. R. 315 W Main St Williamston, NC 27892 252-792-4486	<b>License:</b> 13540 <b>Expires:</b> 12/31/2019
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<b>PARCEL:</b>			
<b>PIN:</b>	988312967138	<b>Parcel Number:</b>	004750000
<b>Address:</b>	101 E. Atlantic St. KILL DEVIL HILLS		
<b>Addition:</b>	KILL DEVIL BEACH SEC 1 REVISED	<b>Zoning:</b>	
<b>Legal Description:</b>		<b>Block:</b>	J Lot(s): 3-5

<b>FEES:</b>	<b>Paid</b>	<b>Due</b>
Certificate of Occupancy Fee	\$50.00	\$0.00
<b>Totals :</b>	<b>\$50.00</b>	<b>\$0.00</b>

**PROJECT DESCRIPTION:** 3000 SF 100 SEAT RESTAURANT (Conditional approval: See conditions)

### DETAILS

#### Permit

Name	Value
# OF TRASH CANS	0
PURPOSE	Commercial New
ZONING DISTRICT	C
FLOOD ZONE	AE
BASE FLOOD ELEVATION	9.0
OCCUPANCY TYPE	Assembly

PAID  
OCT 18 2019

**OP2019-066**

**PROJECT NAME:** IG HOLDINGS RESTAURANT - (CONDITIONAL APPROVAL)

**SITE ADDRESS:** 101 E. Atlantic St. KILL DEVIL HILLS

**OCCUPANCY**  
**ISSUED:** 10/18/2019

**EXPIRES:**

**CONDITIONS**

\* All following conditions shall be completed by 11/18/19: Parking space (11) southern curbing does not meet 5' required setback. Curbing/parking space shall be corrected to meet 5' required setback.  
Required survey revisions: Development details must be added to notes. Curb stops must be shown where located along rear concrete wall (parking spaces 29-26). Provide dimension on narrowest portion of the drive aisle (must be 24'). Provide dimension on parking space 11 edge of curbing to southern property line. Note #8: confirm what lot coverage reduction percentage for porous concrete is correct from what materials were used on site. Lighting: shields installed and orientation changed on 10/17/19. Changes need to be verified by designer that the lighting produced on site is contained within perimeter of the site.  
Complete right of way site work per approved plans. Site inspection on 10/17/19: Observed the following that need to be addressed: Install ROW swale per approved plan, repair crushed pipe inlet at south east corner of Atlantic Street, install sidewalk shoulders per approved drawing detail, remove truncated domes along US158 per approved plan, side slopes along swale at SE corner of Atlantic street shall be graded so they can be adequately stabilized and maintained. Attached are site inspection details from Assistant Public Services Derek Dail.

**I hereby certify that I have read and examined this application and know the same to be true and correct. All provisions of Laws and Ordinances governing this type of work will be complied with whether specified herein or not. The granting of a permit does not presume 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:** 10/18/19



**Town of Kill Devil Hills**

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

OCT 22 2019

**Planning and Inspection Department**

<b>OP2019-065</b>	<b>OCCUPANCY</b>
<b>PROJECT NAME:</b> Haddon Homes, Inc.	<b>ISSUED:</b> 10/17/2019
<b>SITE ADDRESS:</b> 508 PALMETTO ST ST W KILL DEVIL HILLS	<b>EXPIRES:</b>

PARENT PERMIT #: BJ2018-166

<b>APPLICANT:</b> HADDON HOMES, INC. PO Box 1868 Nags Head, NC 27959 267-2287	<b>OWNER:</b> HADDON HOMES, INC. PO Box 1868 Nags Head, NC 27959 267-2287
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<b>CONTRACTOR:</b> HADDON HOMES, INC. PO Box 1868 Nags Head, NC 27959 267-2287	<b>License:</b> 55566 <b>Expires:</b> 01/05/2020
<b>CONTRACTOR:</b> HADDON HOMES, INC. PO Box 1868 Nags Head, NC 27959 267-2287	<b>License:</b> 55566 <b>Expires:</b> 01/05/2020

**PARCEL:**

<b>PIN:</b> 987520908277	<b>Parcel Number:</b> 000726003
<b>Address:</b> 508 PALMETTO ST ST W KILL DEVIL HILLS	<b>Zoning:</b>
<b>Addition:</b> VIRGINIA DARE SHORES	<b>Block:</b> 74 <b>Lot(s):</b> 25R
<b>Legal Description:</b>	

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 3 bedroom single family dwelling

**DETAILS**

Permit	
Name	Value
# OF TRASH CANS	1

**OP2019-065**

**PROJECT NAME:** Haddon Homes, Inc.  
**SITE ADDRESS:** 508 PALMETTO ST ST W KILL DEVIL HILLS

**OCCUPANCY**

**ISSUED:** 10/17/2019

**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: \_\_\_\_\_





**Town of Kill Devil Hills**

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

OCT 22 2019

**Planning and Inspection Department**

<b>OP2019-067</b>	<b>OCCUPANCY</b>
PROJECT NAME: William Diggs	ISSUED: 10/22/2019
SITE ADDRESS: 1410 HILL ST KILL DEVIL HILLS	EXPIRES:

PARENT PERMIT #: BJ2018-227

**APPLICANT:** DIGGS, WILLIAM S. III  
P.O. Box 349  
Kitty Hawk, NC 27949  
252-202-2214

**OWNER:** Zongolowicz, Brian  
333 W Archdale  
Kill Devil Hills, NC 27948  
252-256-3058

**GENERAL:** DIGGS, WILLIAM S. III  
P.O. Box 349  
Kitty Hawk, NC 27949  
252-202-2214

**License:** 32915  
**Expires:**

**GENERAL:** DIGGS, WILLIAM S. III  
P.O. Box 349  
Kitty Hawk, NC 27949  
252-202-2214

**License:** 32915  
**Expires:**

**PARCEL:**

**PIN:** 988315639989

**Parcel Number:** 004840000

**Address:** 1410 HILL ST KILL DEVIL HILLS

**Addition:** KILL DEVIL BEACH EXTENDED

**Zoning:**  
**Block:** 14      **Lot(s):** 6

**Legal Description:**

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:** New 4 Bedroom SFD

**DETAILS**

**Permit**

Name	Value
# OF TRASH CANS	1

**OP2019-067**

PROJECT NAME: William Diggs  
SITE ADDRESS: 1410 HILL ST KILL DEVIL HILLS

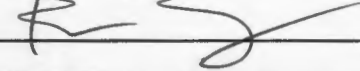
**OCCUPANCY**  
ISSUED: 10/22/2019

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: 10/22/19



# 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

**OP2019-068**

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

**OCCUPANCY**

**ISSUED:** 10/22/2019

**EXPIRES:**

**PARENT PERMIT #:** BJ2019-110

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

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

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

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

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

**PARCEL:**

**PIN:** 988405280364

**Parcel Number:** 002111000

**Address:** 411 MITCHELL CT KILL DEVIL HILLS

**Addition:** WRIGHT'S SHORES

**Zoning:**  
**Block:** 0 **Lot(s):** 151

**Legal Description:**

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:** New 4 Bedroom SFD

### DETAILS

**Permit**

00 23 2019

Name	Value
# OF TRASH CANS	1

**OP2019-068**

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

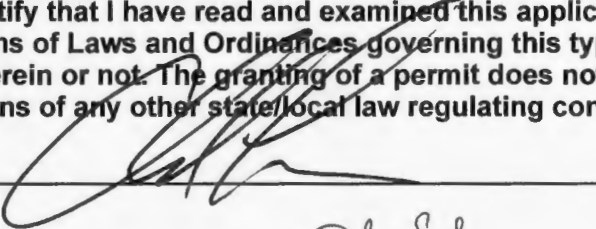
**OCCUPANCY**

**ISSUED:** 10/22/2019

**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: Ch Sl Date: 10/23/19



**Town of Kill Devil Hills**

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

PAID  
OCT 25 2019

**Planning and Inspection Department**

<b>OP2019-069</b>	PAID VAIL C/28	<b>OCCUPANCY</b>
<b>PROJECT NAME:</b> Yong Dong		<b>ISSUED:</b> 10/25/2019
<b>SITE ADDRESS:</b> 209 W Ocean Acres Drive Kill Devil Hills		<b>EXPIRES:</b>

**PARENT PERMIT #: BJ2018-238**

**APPLICANT:** Wang, Xiu Yu  
107 First Colony Court  
Manteo, NC 27954

**OWNER:** WANG, XIU YU  
107 FIRST COLONY CT  
MANTEO, NC 27954  
917-862-9006

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

**License:** Unlicensed  
**Expires:** 12/31/2020

**PARCEL:**

**PIN:** 008416000

**Parcel Number:**

**Address:** 209 W Ocean Acres Drive Kill Devil Hills

**Zoning:**

**Addition:**

**Block:**

**Lot(s):**

**Legal Description:** Lot 9 Block C Section 1 Ocean Acres Tract 3 Sec 1

<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:** New 4 Bedroom SFD

**OP2019-069**

**PROJECT NAME:** Yong Dong

**SITE ADDRESS:** 209 W Ocean Acres Drive Kill Devil Hills

**OCCUPANCY**

**ISSUED:** 10/25/2019

**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**

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Issued By: 

Contractor or Authorized Agent: 

Date: 10/25/19



# Town of Kill Devil Hills

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

OCT 31 2019

## Planning and Inspection Department

### OP2019-070

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

### OCCUPANCY

ISSUED: 10/31/2019

EXPIRES:

PARENT PERMIT #: BJ2019-111

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

**OWNER:** Boothe, Thomas  
1047 Camera RD  
WAVERLY, VA 23890  
804-731-5129

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

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

#### PARCEL:

**PIN:** 987408993926

**Parcel Number:** 000775006

**Address:** 604 PALMETTO ST W KILL DEVIL HILLS

**Addition:** VIRGINIA DARE SH BLK 77 RECOMB

**Zoning:**  
**Block:** 77 **Lot(s):** 6

**Legal Description:**

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

### CONDITIONS



**OP2019-070**

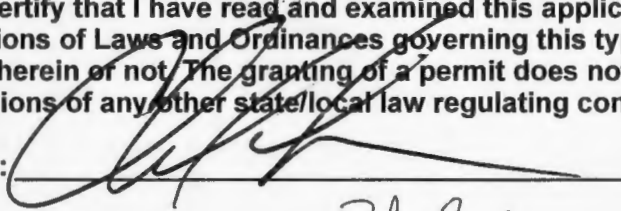
**PROJECT NAME:** Thomas and Gayle Boothe  
**SITE ADDRESS:** 604 PALMETTO ST W KILL DEVIL HILLS

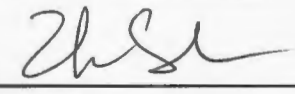
**OCCUPANCY**

**ISSUED:** 10/31/2019

**EXPIRES:**

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Issued By: 

Contractor or Authorized Agent:  Date: 10-31-19