



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

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

**RESIDENTIAL BUILDING PERMIT**

**BUILDING PERMIT#: ACC-1060**

**10/10/2019**

Parcel Number: 016881000  
 Location: 4878 NC 12 HWY – BUXTON  
 Subdivision: SUBDIVISION - NONE  
 Legal Description: LOT: BLK: SEC:

Owner Name: WILLIAM S III QUIDLEY  
 Owner Mail Address: P O BOX 336 BUXTON, NC 27920  
 Owner Phone and email:

Contractor Name: WILLIAM S QUIDLEY III  
 Contractor Mail Address: PO BOX 336, BUXTON, NC 27920  
 Contractor Phone: 252-995-2379 Contractor NC License#: UNLICENSED

**BUILDING INFORMATION**

Proposed Construction Use:	ACCESSORY STRUCT OVER 12 FT , NEW GARAGE		
Proposed Construction Type:	STR	Cost of Construction:	\$20,000
Finished Square Footage:	0	CAMA Permit#:	
Unfinished Square Footage:	720	Septic Permit#:	
Stories:	1.0	Septic Permit Date:	
Building Height:	0	Survey/Site Plan:	
Total Rooms:	0	Water Tap#:	
Footing Type:	CONCRETE	Water Type:	
Exterior Finish:		Flood Zone:	X
Proposed Finished Floor Elevation:		Base Flood Elevation:	0.0
Bedrooms:	0	Lot/Ground Elevation:	
		Baths/half baths:	0.00/0

**Comments:** Any deviation from the building plan or site plan requires prior approval. PERMIT FEE \$288.00

**TOTAL FEES: \$288.00**

Applicant Signature: W S Quidley WILLIAM S III QUIDLEY

Inspector Signature: \_\_\_\_\_ LMF



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**RESIDENTIAL BUILDING PERMIT**

**BUILDING PERMIT#: ACC-1083**

10/16/2019

Parcel Number: 012458329  
 Location: 23002 CROSS OF HONOR WAY – RODANTHE  
 Subdivision: MIRLO BEACH SEC. 3  
 Legal Description: LOT: 29 BLK: SEC: 3

Owner Name: JOHN WESLEY HUTCHINSON  
 Owner Mail Address: PO BOX 381 RODANTHE, NC 27968  
 Owner Phone and email:

Contractor Name: HATTERAS ISLAND SOUND CONSTRUCTION INC  
 Contractor Mail Address: PO BOX 157, FRISCO, NC 27936  
 Contractor Phone: 252-995-5961 Contractor NC License#: 55637

**BUILDING INFORMATION**

Proposed Construction Use:	MISC ACCESSORY , NEW RAMP, ELEVATOR, REPLACE SIDING		
Proposed Construction Type:	SFD	Cost of Construction:	\$284,515
Finished Square Footage:	0	CAMA Permit#:	N/A
Unfinished Square Footage:	0	Septic Permit#:	
Stories:	0.0	Septic Permit Date:	
Building Height:	0	Survey/Site Plan:	
Total Rooms:	0	Water Tap#:	
Footing Type:		Water Type:	
Exterior Finish:		Flood Zone:	
Proposed Finished Floor Elevation:		Base Flood Elevation:	0.0
Bedrooms:	0	Lot/Ground Elevation:	
		Baths/half baths:	0.00/0

Comments: Any deviation from the building plan or site plan requires prior approval.	PERMIT FEE	\$150.00
	HOME OWNERS RECOVERY FEE	10.00

**TOTAL FEES: \$160.00**

Applicant Signature: Cheryl Lynn Peele HATTERAS ISLAND SOUND CONSTRUCTION INC  
 Inspector Signature: CH/LX WWJ



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**RESIDENTIAL BUILDING PERMIT**

**BUILDING PERMIT#: R-1013**

**10/07/2019**

Parcel Number: 017414003  
 Location: CUTTY SARK DR – AVON  
 Subdivision: CUTTY SARK  
 Legal Description: LOT: 2 BLK: SEC:

Owner Name: JASON M ANDRZEJEWSKI  
 Owner Mail Address: 7524 RIO GRANDE WAY GAINESVILLE, VA 20155  
 Owner Phone and email:

Contractor Name: CARL WORSLEY AND ASSOCIATES INC  
 Contractor Mail Address: PO BOX 188, NAGS HEAD, NC 27959  
 Contractor Phone: 252-441-2327 Contractor NC License#: 58569

**BUILDING INFORMATION**

Proposed Construction Use:	SINGLE FAMILY DWELLING NEW , NEW SFD WITH ATTACHED POOL		
Proposed Construction Type:	SFD	Cost of Construction:	\$275,000
Finished Square Footage:	2622	CAMA Permit#:	N/A
Unfinished Square Footage:	1162	Septic Permit#:	28902
Stories:	2.0	Septic Permit Date:	07/24/2019
Building Height:	0	Survey/Site Plan:	YES
Total Rooms:	0	Water Tap#:	YES
Footing Type:	PILING	Water Type:	Central Water
Exterior Finish:	SMART LAP	Flood Zone:	AE
Proposed Finished Floor Elevation:	10	Base Flood Elevation:	8.0
Bedrooms:	4	Lot/Ground Elevation:	2.8
		Baths/half baths:	4.00/2

Comments: Any deviation from the building plan or site plan requires prior approval.	PERMIT FEE	\$2,431.30
	SWIMMING POOLS;HOT TUBS	300.00
	FLOOD DEVELOPMENT BLDG PERMIT	75.00
	HOME OWNERS RECOVERY FEE	10.00
	RESIDENTIAL ZONING APPROVAL	100.00
	<b>TOTAL FEES:</b>	<b>\$2,916.30</b>

Applicant Signature: *Carl Worsley* CARL WORSLEY AND ASSOCIATES INC  
 Inspector Signature: *CH/LF 10/7/19* LMF



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**RESIDENTIAL BUILDING PERMIT**

**BUILDING PERMIT#: R-1015**

**10/07/2019**

Parcel Number: 012554000  
 Location: 23791 NC 12 HWY – RODANTHE **A**  
 Subdivision: SUBDIVISION - NONE  
 Legal Description: LOT: PARCEL 2R BLK: SEC:


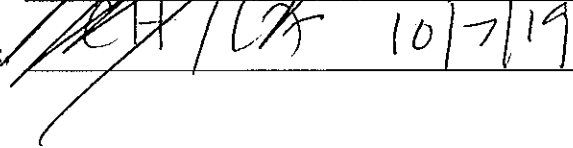
Owner Name: JEFFREY W GUTMANN  
 Owner Mail Address: PO BOX 566 RODANTHE, NC 27968  
 Owner Phone and email:

Contractor Name: RCI CUSTOM CONSTRUCTION INC  
 Contractor Mail Address: 35 SKYLINE DR, KITTY HAWK, NC 27949  
 Contractor Phone: 252-480-2516 Contractor NC License#: 54137

**BUILDING INFORMATION**

Proposed Construction Use:	SINGLE FAMILY DWELLING NEW , NEW SFD (MODULAR); BLDG A		
Proposed Construction Type:	SFD	Cost of Construction:	\$534,000
Finished Square Footage:	960	CAMA Permit#:	N/A
Unfinished Square Footage:	80	Septic Permit#:	28602
Stories:	1.0	Septic Permit Date:	03/29/2019
Building Height:	0	Survey/Site Plan:	YES
Total Rooms:	0	Water Tap#:	
Footing Type:	PILING	Water Type:	CENT
Exterior Finish:	VINYL	Flood Zone:	AE 9
Proposed Finished Floor Elevation:	10	Base Flood Elevation:	9.0
Bedrooms:	2	Lot/Ground Elevation:	
		Baths/half baths:	2.00/0

Comments: Any deviation from the building plan or site plan requires prior approval.	PERMIT FEE	\$752.00
	FLOOD DEVELOPMENT BLDG PERMIT	75.00
	HOME OWNERS RECOVERY FEE	10.00
	RESIDENTIAL ZONING APPROVAL	100.00
<b>TOTAL FEES:</b>		<b>\$937.00</b>

Applicant Signature:  RCLCUSTOM CONSTRUCTION INC  
 Inspector Signature:  10/7/19 LMF





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**RESIDENTIAL BUILDING PERMIT**

**BUILDING PERMIT#: R-1016**

**10/07/2019**

Parcel Number: 012554000  
 Location: 23791 NC 12 HWY – RODANTHE  
 Subdivision: SUBDIVISION - NONE  
 Legal Description: LOT: PARCEL 2R BLK: SEC:

*B*

Owner Name: JEFFREY W GUTMANN  
 Owner Mail Address: PO BOX 566 RODANTHE, NC 27968  
 Owner Phone and email:

Contractor Name: RCI CUSTOM CONSTRUCTION INC  
 Contractor Mail Address: 35 SKYLINE DR, KITTY HAWK, NC 27949  
 Contractor Phone: 252-480-2516 Contractor NC License#: 54137

**BUILDING INFORMATION**

Proposed Construction Use:	SINGLE FAMILY DWELLING NEW , NEW SFD; BLDG B	Cost of Construction:	\$85,440
Proposed Construction Type:	SFD	CAMA Permit#:	N/A
Finished Square Footage:	1045	Septic Permit#:	28604
Unfinished Square Footage:	80	Septic Permit Date:	03/29/201
Stories:	1.0	Survey/Site Plan:	YES
Building Height:	0	Water Tap#:	YES
Total Rooms:	0	Water Type:	Central Water
Footing Type:	PILING	Flood Zone:	AE
Exterior Finish:	VINYL	Base Flood Elevation:	9.0
Proposed Finished Floor Elevation:	10	Lot/Ground Elevation:	
Bedrooms:	3	Baths/half baths:	2.00/0

Comments: Any deviation from the building plan or site plan requires prior approval.	PERMIT FEE	\$815.75
	FLOOD DEVELOPMENT BLDG PERMIT	75.00
	HOME OWNERS RECOVERY FEE	10.00
	RESIDENTIAL ZONING APPROVAL	100.00

**TOTAL FEES: \$1,000.75**

Applicant Signature:  RCI CUSTOM CONSTRUCTION INC

Inspector Signature:  LMF



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**RESIDENTIAL BUILDING PERMIT**

**BUILDING PERMIT#: R-1018**

**10/07/2019**

Parcel Number: 012554000  
 Location: 23791 NC 12 HWY – RODANTHE  
 Subdivision: SUBDIVISION - NONE  
 Legal Description: LOT: PARCEL 2R BLK: SEC:

C

Owner Name: JEFFREY W GUTMANN  
 Owner Mail Address: PO BOX 566 RODANTHE, NC 27968  
 Owner Phone and email:

Contractor Name: RCI CUSTOM CONSTRUCTION INC  
 Contractor Mail Address: 35 SKYLINE DR, KITTY HAWK, NC 27949  
 Contractor Phone: 252-480-2516 Contractor NC License#: 54137

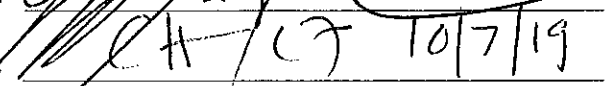
**BUILDING INFORMATION**

Proposed Construction Use:	SINGLE FAMILY DWELLING NEW , SFD; BLDG C		
Proposed Construction Type:	SFD	Cost of Construction:	\$85,440
Finished Square Footage:	1045	CAMA Permit#:	N/A
Unfinished Square Footage:	80	Septic Permit#:	28603
Stories:	1.0	Septic Permit Date:	03/29/2019
Building Height:	0	Survey/Site Plan:	YES
Total Rooms:	0	Water Tap#:	YES
Footing Type:	PILING	Water Type:	Central Water
Exterior Finish:	VINYL	Flood Zone:	AE
Proposed Finished Floor Elevation:	10	Base Flood Elevation:	9.0
Bedrooms:	3	Lot/Ground Elevation:	
		Baths/half baths:	2.00/0

<b>Comments:</b> Any deviation from the building plan or site plan requires prior approval.	PERMIT FEE	\$815.75
	FLOOD DEVELOPMENT BLDG PERMIT	75.00
	HOME OWNERS RECOVERY FEE	10.00
	RESIDENTIAL ZONING APPROVAL	100.00

**TOTAL FEES: \$1,000.75**

Applicant Signature:  RCI CUSTOM CONSTRUCTION INC

Inspector Signature:  LMF



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**RESIDENTIAL BUILDING PERMIT**

**BUILDING PERMIT#: R-1020**

**10/07/2019**

Parcel Number: 012554000  
 Location: 23791 NC 12 HWY – RODANTHE  
 Subdivision: SUBDIVISION - NONE  
 Legal Description: LOT: PARCEL 2R BLK: SEC:

D

Owner Name: JEFFREY W GUTMANN  
 Owner Mail Address: PO BOX 566 RODANTHE, NC 27968  
 Owner Phone and email:

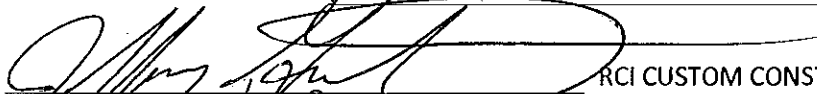

Contractor Name: RCI CUSTOM CONSTRUCTION INC  
 Contractor Mail Address: 35 SKYLINE DR, KITTY HAWK, NC 27949  
 Contractor Phone: 252-480-2516 Contractor NC License#: 54137

**BUILDING INFORMATION**

Proposed Construction Use:	SINGLE FAMILY DWELLING NEW , SFD; BLDG D		
Proposed Construction Type:	SFD	Cost of Construction:	\$85,440
Finished Square Footage:	1045	CAMA Permit#:	N/A
Unfinished Square Footage:	80	Septic Permit#:	28601
Stories:	1.0	Septic Permit Date:	03/29/2019
Building Height:	0	Survey/Site Plan:	YES
Total Rooms:	0	Water Tap#:	YES
Footing Type:	PILING	Water Type:	CENTRAL
Exterior Finish:	VINYL	Flood Zone:	AE
Proposed Finished Floor Elevation:	10	Base Flood Elevation:	9.0
Bedrooms:	3	Lot/Ground Elevation:	
		Baths/half baths:	2.00/0

<b>Comments:</b> Any deviation from the building plan or site plan requires prior approval.	PERMIT FEE	\$815.75
	FLOOD DEVELOPMENT BLDG PERMIT	75.00
	HOME OWNERS RECOVERY FEE	10.00
	RESIDENTIAL ZONING APPROVAL	100.00

**TOTAL FEES: \$1,000.75**

Applicant Signature:  RCI CUSTOM CONSTRUCTION INC  
 Inspector Signature:  LMF



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**RESIDENTIAL BUILDING PERMIT**

**BUILDING PERMIT#: R-1022**

**10/07/2019**

Parcel Number: 012554000  
 Location: 23791 NC 12 HWY – RODANTHE  
 Subdivision: SUBDIVISION - NONE  
 Legal Description: LOT: PARCEL 2R BLK: SEC:

E

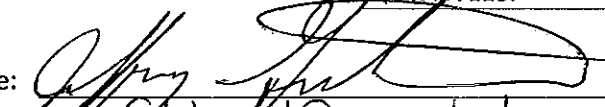
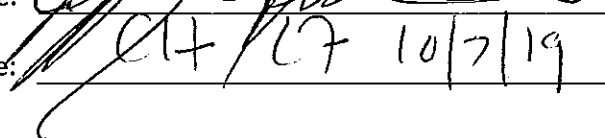
Owner Name: JEFFREY W GUTMANN  
 Owner Mail Address: PO BOX 566 RODANTHE, NC 27968  
 Owner Phone and email:

Contractor Name: RCI CUSTOM CONSTRUCTION INC  
 Contractor Mail Address: 35 SKYLINE DR, KITTY HAWK, NC 27949  
 Contractor Phone: 252-480-2516 Contractor NC License#: 54137

**BUILDING INFORMATION**

Proposed Construction Use:	SINGLE FAMILY DWELLING NEW , SFD; BLDG E		
Proposed Construction Type:	SFD	Cost of Construction:	\$88,110
Finished Square Footage:	960	CAMA Permit#:	N/A
Unfinished Square Footage:	80	Septic Permit#:	28605
Stories:	1.0	Septic Permit Date:	03/29/2019
Building Height:	0	Survey/Site Plan:	YES
Total Rooms:	0	Water Tap#:	YES
Footing Type:	PILING	Water Type:	Central Water
Exterior Finish:	VINYL	Flood Zone:	AE
Proposed Finished Floor Elevation:	10	Base Flood Elevation:	9.0
Bedrooms:	2	Lot/Ground Elevation:	
		Baths/half baths:	2.00/0

<b>Comments:</b> Any deviation from the building plan or site plan requires prior approval.	PERMIT FEE	\$752.00
	FLOOD DEVELOPMENT BLDG PERMIT	75.00
	HOME OWNERS RECOVERY FEE	10.00
	RESIDENTIAL ZONING APPROVAL	100.00
	<b>TOTAL FEES:</b>	<b>\$937.00</b>

Applicant Signature:  RCI CUSTOM CONSTRUCTION INC  
 Inspector Signature:  LMF



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RESIDENTIAL BUILDING PERMIT

BUILDING PERMIT#: R-1024

10/07/2019

Parcel Number: 012554000  
 Location: 23791 NC 12 HWY – RODANTHE  
 Subdivision: SUBDIVISION - NONE  
 Legal Description: LOT: PARCEL 2R BLK: SEC:

Owner Name: JEFFREY W GUTMANN  
 Owner Mail Address: PO BOX 566 RODANTHE, NC 27968  
 Owner Phone and email:

Contractor Name: RCI CUSTOM CONSTRUCTION INC  
 Contractor Mail Address: 35 SKYLINE DR, KITTY HAWK, NC 27949  
 Contractor Phone: 252-480-2516 Contractor NC License#: 54137

BUILDING INFORMATION

Proposed Construction Use:	SINGLE FAMILY DWELLING NEW , SFD; BLDG F		
Proposed Construction Type:	SFD	Cost of Construction:	\$88,110
Finished Square Footage:	960	CAMA Permit#:	N/A
Unfinished Square Footage:	80	Septic Permit#:	28606
Stories:	1.0	Septic Permit Date:	03/29/2019
Building Height:	0	Survey/Site Plan:	YES
Total Rooms:	0	Water Tap#:	YES
Footing Type:	PILING	Water Type:	CENTRAL
Exterior Finish:	VINYL	Flood Zone:	AE
Proposed Finished Floor Elevation:	10	Base Flood Elevation:	9.0
Bedrooms:	2	Lot/Ground Elevation:	
		Baths/half baths:	2.00/0

Comments: Any deviation from the building plan or site plan requires prior approval.

PERMIT FEE	\$752.00
FLOOD DEVELOPMENT BLDG PERMIT	75.00
HOME OWNERS RECOVERY FEE	10.00
RESIDENTIAL ZONING APPROVAL	100.00

**TOTAL FEES: \$937.00**

Applicant Signature:  RCI CUSTOM CONSTRUCTION INC

Inspector Signature:  LMF



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**RESIDENTIAL BUILDING PERMIT**

**BUILDING PERMIT#: R-1071**

**10/14/2019**

Parcel Number: 015415000  
 Location: 57144 KOHLER DR – HATTERAS  
 Subdivision: SUBDIVISION - NONE  
 Legal Description: LOT: BLK: SEC:

Owner Name: ANDREW TY WAGNER  
 Owner Mail Address: 4762 LAKEVIEW LN ELM CITY, NC 27822  
 Owner Phone and email: 252-299-0953

Contractor Name: OWNER/CONTRACTOR  
 Contractor Mail Address: SAA  
 Contractor Phone: Contractor NC License#:

**BUILDING INFORMATION**

Proposed Construction Use:	ELEVATION PERMIT PROJECT , RAISE SFD		
Proposed Construction Type:		Cost of Construction:	\$25,000
Finished Square Footage:	0	CAMA Permit#:	N/A
Unfinished Square Footage:	0	Septic Permit#:	26426
Stories:	0	Septic Permit Date:	01/24/2017
Building Height:	0	Survey/Site Plan:	
Total Rooms:	0	Water Tap#:	
Footing Type:		Water Type:	
Exterior Finish:		Flood Zone:	AE
Proposed Finished Floor Elevation:		Base Flood Elevation:	0.0
Bedrooms:	0	Lot/Ground Elevation:	
		Baths/half baths:	0/0

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

**TOTAL FEES: \$275.00**

Applicant Signature: Andrew Ty Wagner ANDREW TY WAGNER

Inspector Signature: LMF LMF



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**RESIDENTIAL BUILDING PERMIT**

**BUILDING PERMIT#: R-1120**

**10/23/2019**

Parcel Number: 015429001  
 Location: 57180 M V AUSTRALIA LN – HATTERAS  
 Subdivision: JOHN H HIGH SUB  
 Legal Description: LOT: 2 BLK: SEC:

Owner Name: JOHN H HIGH  
 Owner Mail Address: HIGH~ ROBERT MORTON WILMINGTON, NC 28409  
 Owner Phone and email:

Contractor Name: ROBERT HIGH DEVELOPMENT LLC  
 Contractor Mail Address: 223 GREENVILLE AVE, WILMINGTON, NC 28403  
 Contractor Phone: 910-790-9490 Contractor NC License#: 70647

**BUILDING INFORMATION**

Proposed Construction Use:	RESIDENTIAL ENCLOSURE , Enclosure/ Storage Under House		
Proposed Construction Type:	STR	Cost of Construction:	\$
Finished Square Footage:	0	CAMA Permit#:	NA
Unfinished Square Footage:	273	Septic Permit#:	29101
Stories:	0.0	Septic Permit Date:	10/22/2019
Building Height:	0	Survey/Site Plan:	
Total Rooms:	0	Water Tap#:	
Footing Type:		Water Type:	
Exterior Finish:		Flood Zone:	AE
Proposed Finished Floor Elevation:		Base Flood Elevation:	0.0
Bedrooms:	0	Lot/Ground Elevation:	
		Baths/half baths:	0.00/0

Comments: Any deviation from the building plan or site plan requires prior approval.	PERMIT FEE	\$109.20
	FLOOD DEVELOPMENT BLDG PERMIT	75.00
	HOME OWNERS RECOVERY FEE	10.00

**TOTAL FEES: \$194.20**

Applicant Signature: John H. High JOHN H HIGH  
 Inspector Signature: WS/CF LMF



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**COMMERCIAL BUILDING PERMIT**

**BUILDING PERMIT#: C-1031**

**10/07/2019**

Parcel Number: 017026000  
 Location: 47371 BUXTON BACK RD – BUXTON  
 Subdivision: SUBDIVISION - NONE  
 Legal Description: LOT: BLK: SEC:

Owner Name: CARTER LUMBER OF THE SOUTH INC  
 Owner Mail Address: 601 TALLMADGE RD KENT, OH 44240  
 Owner Phone and email:


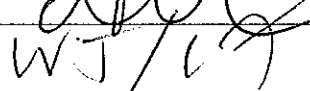
Contractor Name: VOTAVA CONSTRUCTION  
 Contractor Mail Address: 137 OLD US 17, HERTFORD, NC 27944  
 Contractor Phone: 252-340-1714 Contractor NC License#: 72751-L

**BUILDING INFORMATION**

Proposed Construction Use:	STORAGE/GARAGE , NEW STORAGE		
Occupancy:	STORAGE		
Proposed Construction Type:	II-B	Cost of Construction:	\$100,000
Finished Square Footage:	0	CAMA Permit#:	
Unfinished Square Footage:	3500	Septic Permit#:	
Stories:	1.0	Septic Permit Date:	
Building Height:	20	Survey/Site Plan:	YES
Total Rooms:	0	Water Tap#:	
Footing Type:	CONCRETE	Water Type:	
Exterior Finish:		Flood Zone:	AE
Sprinkler System:		Base Flood Elevation:	8.0
Proposed Finished Floor Elev:		Lot/Ground Elevation:	3.28
Bedrooms:	0	Baths/half baths:	0.00/0

Comments: Any deviation from the building plan or site plan requires prior approval.	PERMIT FEE	\$2,275.00
	FLOOD DEVELOPMENT BLDG PERMIT	75.00
	HOME OWNERS RECOVERY FEE	10.00

**TOTAL FEES: \$2,360.00**

Applicant Signature:  VOTAVA CONSTRUCTION  
 Inspector Signature:  LMF





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**DEMOLITION PERMIT**

**BUILDING PERMIT#: DEMO-1093**

**10/17/2019**

Parcel Number: 014150000  
 Location: 51011 BACCUS CT – FRISCO  
 Subdivision: ELEVY MANOR 1ST ADD  
 Legal Description: LOT: 15 BLK: SEC:

Owner Name: BOBBY H COX  
 Owner Mail Address: PO BOX 579 - FRISCO, NC 27936  
 Owner Contact Information:

Contractor Name: BOBBY H COX  
 Contractor Mail Address: PO BOX 579 - FRISCO, NC 27936

**BUILDING INFORMATION**

Proposed Construction Use: RESIDENTIAL - DEMOLITION PERMIT  
 STORM; DEMO SFD  
 Estimated Cost: \$5,000.00  
 Comments: STORM; DEMO SFD

**The Following Conditions Must Be Met:**

1. Septic tank and drain pipes will be removed if applicable
2. All types of glass will be removed before demolition begins
3. Pilings will be extracted and removed
4. All concrete must be removed
5. No burning! Site must be completely cleaned of all debris
6. Site to be inspected by building inspector when complete
7. Debris trip ticket must be submitted to Planning Dept

BY SIGNING THIS PERMIT, I FULLY  
 UNDERSTAND ALL CONDITIONS AND AGREE  
 TO COMPLETE THEM TO THE BEST OF MY  
 ABILITY.

PERMIT FEE	\$ .00
<hr/>	
<b>TOTAL FEES:</b>	<b>\$ .00</b>

Applicant Signature: \_\_\_\_\_ BOBBY H COX

Inspector Signature: WJ/LF \_\_\_\_\_ LMF



County of Dare  
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 PO Box Drawer 1000  
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Manteo: (252) 475-5870  
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 Frisco: (252) 475-5878

**ELECTRICAL PERMIT**

**ELECTRICAL PERMIT#: ELEC-961**

10/11/2019

Parcel Number: 016758005  
 Location: 4819 MAIL LANDING LN – BUXTON  
 Subdivision: SUBDIVISION - NONE  
 Legal Description: LOT: SOUTHERN PART PAR 2 BLK: SEC:

Owner Name: HENRY MAX SAUERS  
 Owner Mail Address: P O BOX 235 - WHITE MARSH, MD 21162  
 Owner Contact Information:

Contractor Name: DC ELECTRICAL CONTRACTOR  
 Contractor Mail Address: 774 LOOP RD - ROPER, NC 27970  
 Contractor Phone: 2523946156  
 Contractor NC License#: L-27730

**DETAILS** RESIDENTIAL

Cost of Job: \$1,500

Amp Increase: 0  
 Service Amps: 200

**ELECTRICAL PERMIT FEE: \$ .00**

**Comments:** STORM; REPLACE DISCONNECT (CHEC DISCON/RECON)

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

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

Applicant Signature: James B. P. [Signature] DC ELECTRICAL CONTRACTOR

Inspector Signature: WS/LJ 10/11/19 LMF



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**ELECTRICAL PERMIT**

**ELECTRICAL PERMIT#: ELEC-1026**

**10/07/2019**

Parcel Number: 015710000  
 Location: 57316 EAGLE PASS RD – HATTERAS  
 Subdivision: SUBDIVISION - NONE  
 Legal Description: LOT: BLK: SEC:

Owner Name: 57316 EAGLE PASS ROAD LLC  
 Owner Mail Address: 101 CREEK POINT CIR - WILLIAMSBURG, VA 23188  
 Owner Contact Information:

Contractor Name: HATTERAS ELECTRIC  
 Contractor Mail Address: PO BOX 161 - BUXTON, NC 27920  
 Contractor Phone: 252-216-8517  
 Contractor NC License#: 19768-L

**DETAILS** COMMERCIAL

Amp Increase:	0	Cost of Job:	\$1,200
Service Amps:	400	<b>ELECTRICAL PERMIT FEE:</b>	<b>\$ .00</b>

**Comments:** STORM; REPLACE 400 AMP SERVICE (ON THE 'ISLAND', TAKE FULCHER LN TO END)

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

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Applicant Signature: Bud Shaheen HATTERAS ELECTRIC

Inspector Signature: WJ/CJ 10/7/19 LMF



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 Frisco: (252) 475-5878

**ELECTRICAL PERMIT**

**ELECTRICAL PERMIT#: ELEC-1034**

**10/07/2019**

Parcel Number: 012522000  
 Location: 23298 E BEACON RD – RODANTHE  
 Subdivision: SOUTHERN VISTA  
 Legal Description: LOT: 6 BLK: SEC:

Owner Name: LUMINA HARBOR BEACH  
 Owner Mail Address: 187 GOLF CART LN - ROCKINGHAM, NC 28379  
 Owner Contact Information:

Contractor Name: OUTER BANKS ELECTRIC INC  
 Contractor Mail Address: 714 N HWY 64/264 - MANTEO, NC 27954  
 Contractor Phone: 2524733033  
 Contractor NC License#: U-24451

**DETAILS RESIDENTIAL**

Amp Increase:	0	Cost of Job:	\$1,000
Service Amps:	400	<b>ELECTRICAL PERMIT FEE:</b>	<b>\$ .00</b>

**Comments:** STORM; REPLACE/RE-ATTACH METER BASE, WEATHER MAST

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

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Applicant Signature:  OUTER BANKS ELECTRIC INC

Inspector Signature:  LMF



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ELECTRICAL PERMIT

ELECTRICAL PERMIT#: ELEC-1038

10/08/2019

Parcel Number: 017243000  
Location: TOWER CIRCLE RD - BUXTON  
Subdivision: TOWER BEACH SUBD BLK 3  
Legal Description: LOT: 2 BLK: 3 SEC:

Owner Name: OLIN E FINCH  
Owner Mail Address: 116 SANDY RIDGE RD - KITTY HAWK, NC 27949  
Owner Contact Information:

Contractor Name: DAVCO ELECTRIC  
Contractor Mail Address: 406 W LAKE DR - KILL DEVIL HILLS, NC 27948  
Contractor Phone: 2524414106  
Contractor NC License#: NA

DETAILS RESIDENTIAL

Cost of Job: \$600

Amp Increase:  
Service Amps:

ELECTRICAL PERMIT FEE: \$150.00

Comments: REPLACING 200A METER BASE

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

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

Applicant Signature:  DAVCO ELECTRIC

Inspector Signature: KEVIN CLARK AYT

Application Reference # 878 on 10/08/2019



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

**ELECTRICAL PERMIT**

**ELECTRICAL PERMIT#: ELEC-1066**

**10/14/2019**

Parcel Number: 013868000  
 Location: 39157 WEAKFISH DR – AVON  
 Subdivision: HATTERAS COLONY SEC 4  
 Legal Description: LOT: 243 BLK: SEC: 4

Owner Name: OUTLANDER PROPERTIES LLC  
 Owner Mail Address: P O BOX 1393 - P O BOX 1393 - BUXTON, NC 27920  
 Owner Contact Information:

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

**DETAILS RESIDENTIAL**

Amp Increase:	200	Cost of Job:	\$700
Service Amps:	200	<b>ELECTRICAL PERMIT FEE:</b>	<b>\$150.00</b>

**Comments:**

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

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

Applicant Signature: \_\_\_\_\_ SUBURBAN ELECTRIC SERVICES INC

Inspector Signature: \_\_\_\_\_ NHG



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**ELECTRICAL PERMIT**

**ELECTRICAL PERMIT#: ELEC-1108**

**10/21/2019**

Parcel Number: 016929002  
 Location: 47191 ROCKY ROLLINSON RD – BUXTON  
 Subdivision: SUBDIVISION - NONE  
 Legal Description: LOT: BLK: SEC:

Owner Name: DOUGLAS EDWARD JR DORIS  
 Owner Mail Address: P O BOX 827 - BUXTON, NC 27920  
 Owner Contact Information:

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

**DETAILS** RESIDENTIAL

Amp Increase:	0	Cost of Job:	\$300
Service Amps:	200	<b>ELECTRICAL PERMIT FEE:</b>	<b>\$150.00</b>

**Comments:** CHANGE MAIN BREAKER OF 200A SERVICE (ON POLE; 4TH TRAILER ON RIGHT)

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

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Applicant Signature:  MEEKINS ELECTRIC

Inspector Signature: \_\_\_\_\_ LMF



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**ELECTRICAL PERMIT**

**ELECTRICAL PERMIT#: ELEC-1146**

**10/29/2019**

Parcel Number: 026293000  
 Location: 48205 M QUIDLEY LN – BUXTON  
 Subdivision: SUBDIVISION - NONE  
 Legal Description: LOT: 2 BLK: SEC:

Owner Name: MICHAEL D QUIDLEY  
 Owner Mail Address: PO BOX 223 - BUXTON, NC 27920  
 Owner Contact Information:

Contractor Name: OWNER/CONTRACTOR  
 Contractor Mail Address: SAA  
 Contractor Phone: NA  
 Contractor NC License#: NA

**DETAILS** RESIDENTIAL

Cost of Job: \$500

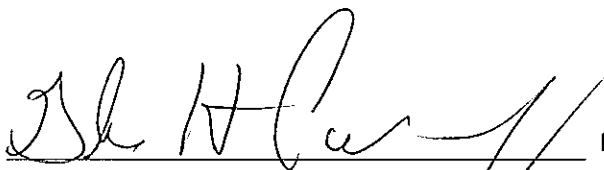
Amp Increase: 0  
 Service Amps: 200

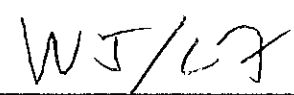
**ELECTRICAL PERMIT FEE: \$150.00**

**Comments:** NEW METER BASE, DISCONNECT/S; CHEC DISCON/RECON

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

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Applicant Signature:  MICHAEL D QUIDLEY

Inspector Signature:  LMF





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**ELECTRICAL PERMIT**

**ELECTRICAL PERMIT#: ELEC-1136**

**10/28/2019**

Parcel Number: 012047000  
 Location: 50125 TREACHER LN – FRISCO  
 Subdivision: BUCCANEER COVE SEC A  
 Legal Description: LOT: 15 BLK: SEC: A

Owner Name: DENNIS N ROBINSON  
 Owner Mail Address: P O BOX 303 - FRISCO, NC 27936  
 Owner Contact Information: 252-475-0711

Contractor Name: OWNER/CONTRATOR  
 Contractor Mail Address: -  
 Contractor Phone: NA  
 Contractor NC License#: NA

**DETAILS** RESIDENTIAL

Cost of Job: \$500

Amp Increase: 0  
 Service Amps: 200

**ELECTRICAL PERMIT FEE: \$150.00**

**Comments:** REPLACE METER BASE; CHEC DISCON/RECON

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Applicant Signature: Mary Robinson DENNIS N ROBINSON

Inspector Signature: WJ/LA LMF



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Frisco: (252) 475-5878

**ELECTRICAL PERMIT**

**ELECTRICAL PERMIT#: ELEC-1168**

**10/31/2019**

Parcel Number: 014599000  
Location: 40328 YOUNCE RD – AVON  
Subdivision: EARL S YOUNCE S/D- DB123-473  
Legal Description: LOT: 1 BLK: SEC:

Owner Name: EARL S JR YOUNCE  
Owner Mail Address: P O BOX 7 - AVON, NC 27915  
Owner Contact Information:

Contractor Name: EARL YOUNCE  
Contractor Mail Address: PO BOX 7 - AVON, NC 27915  
Contractor Phone: 252-995-2912  
Contractor NC License#: UNLICENSED

**DETAILS** RESIDENTIAL


Amp Increase: 0  
Service Amps: 200  
Cost of Job: \$300  
**ELECTRICAL PERMIT FEE: \$150.00**

**Comments:** REPLACE METER BASE; CHEC DISCON/RECON

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Applicant Signature:  EARL S JR YOUNCE

Inspector Signature:  LMF



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 Frisco: (252) 475-5878

**MECHANICAL PROJECT**

**MECHANICAL PROJECT#: MECH-966**

**10/01/2019**

Parcel Number: 016824000  
 Location: 47896 BUXTON BACK RD – BUXTON  
 Subdivision: SUBDIVISION - NONE  
 Legal Description: LOT: BLK: SEC:

Owner Name: EDMOND GORDON MIDGETT  
 Owner Mail Address: 72 RAMBO AVE - GIBBSTOWN, NJ 08027  
 Owner Contact Information:

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

**DETAILS RESIDENTIAL**

UNITS: 1.00 Cost of Job: \$6,300  
 Electrical Contractor ID: 30600-L  
**MECHANICAL PROJECT FEE: \$150.00**

**Comments: 1 INDOOR/OUTDOOR SYSTEM**

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

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Applicant Signature: *Jose Duran* 10/15/19 PAMLICO AIR INC

Inspector Signature: *WJ/LT* 10/1/19 LMF



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**MECHANICAL PROJECT**

**MECHANICAL PROJECT#: MECH-967**

**10/01/2019**

Parcel Number: 013865000  
 Location: 39158 WEAKFISH DR – AVON  
 Subdivision: HATTERAS COLONY SEC 4  
 Legal Description: LOT: 241 & PT OF LOT 240 BLK: SEC: 4

Owner Name: RICHARD W BRADY  
 Owner Mail Address: 10 EAST ST - WINCHESTER, MA 01890  
 Owner Contact Information:

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

**DETAILS RESIDENTIAL**

Cost of Job: \$12,000

Electrical Contractor ID: 30600-L

**MECHANICAL PROJECT FEE: \$ .00**

**Comments: STORM; 2 INDOOR/OUTDOOR SYSTEMS**

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Applicant Signature: Jose Duran 10/15/19 PAMLICO AIR INC

Inspector Signature: CH/CT 10/1/19 LMF



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 Frisco: (252) 475-5878

**MECHANICAL PROJECT**

**MECHANICAL PROJECT#: MECH-975**

**10/02/2019**

Parcel Number: 030937000  
 Location: NC 12 HWY – FRISCO  
 Subdivision: SURF & SOUND PH 4  
 Legal Description: LOT: 40 BLK: SEC:

Owner Name: TIMOTHY W CLARK  
 Owner Mail Address: 2637 S KINGS RD - VIRGINIA BEACH, VA 23452  
 Owner Contact Information:

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

**DETAILS** RESIDENTIAL

Cost of Job: \$7,500

Electrical Contractor ID: SP PH 32484

**MECHANICAL PROJECT FEE: \$ .00**

**Comments: STORM; REPLACE 2 HEAT PUMPS**

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

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

Inspector Signature: *WJ/LT 10/2/19* LMF



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 Frisco: (252) 475-5878

**MECHANICAL PROJECT**

**MECHANICAL PROJECT#: MECH-976**

**10/02/2019**

Parcel Number: 015840000  
 Location: 57151 LIGHTHOUSE RD – HATTERAS  
 Subdivision: HATTERAS COLONY SOUTH  
 Legal Description: LOT: 7 BLK: SEC: 1

Owner Name: ANDREW JOHN BARTLIK  
 Owner Mail Address: 291 TITICUS RD - NORTH SALEM, NY 10560  
 Owner Contact Information:

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

**DETAILS** RESIDENTIAL

Cost of Job: \$3,950

Electrical Contractor ID: SP PH 32484

**MECHANICAL PROJECT FEE: \$ .00**

**Comments: STORM; REPLACE 1 HP**

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

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

Inspector Signature: *WJ/LF 10/2/19* LMF



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**MECHANICAL PROJECT**

**MECHANICAL PROJECT#: MECH-977**

**10/02/2019**

Parcel Number: 028542000  
 Location: 57135 LIGHTHOUSE RD – HATTERAS  
 Subdivision: HATTERAS COLONY SOUTH  
 Legal Description: LOT: 5 BLK: SEC: 1

Owner Name: VICTORIA KREBS  
 Owner Mail Address: 612 GREENWOOD RD - CHAPEL HILL, NC 27514  
 Owner Contact Information:

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

**DETAILS** RESIDENTIAL

Electrical Contractor ID: SP PH 32484  
 Cost of Job: \$3,300  
 MECHANICAL PROJECT FEE: \$ .00

Comments: STORM; REPLACE 1 HP

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

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

Inspector Signature: *WT/LF 10/2/19* LMF



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**MECHANICAL PROJECT**

**MECHANICAL PROJECT#: MECH-979**

**10/02/2019**

Parcel Number: 027236000  
 Location: OLD LIGHTHOUSE RD MULT -- BUXTON  
 Subdivision: SUBDIVISION - NONE  
 Legal Description: LOT: BLK: SEC:

Owner Name: BUXTON BEACH ASSOCIATES LLC  
 Owner Mail Address: 10824 CHATHAM RIDGE WAY - SPOTSYLVANIA, VA 22551  
 Owner Contact Information:

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

**DETAILS RESIDENTIAL**

Cost of Job: \$12,600

Electrical Contractor ID: SP PH 32045

**MECHANICAL PROJECT FEE: \$ .00**

**Comments: STORM; REPLACE 4 OUTDOOR UNITS**

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

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Applicant Signature: Ulesamarie Stevenson C BREEZE HEATING AND AIR CONDITIONING LL

Inspector Signature: WJ/LJ 10/2/19 LMF





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**MECHANICAL PROJECT**

**MECHANICAL PROJECT#: MECH-980**

**10/02/2019**

Parcel Number: 015311004  
 Location: SUNSET STRIP – FRISCO  
 Subdivision: DAVID R. ROLLISON ETAL DIV.  
 Legal Description: LOT: 3 BLK: SEC:

Owner Name: DANNY WOODFORD ROWE  
 Owner Mail Address: PO BOX 1283 - BUXTON, NC 27920  
 Owner Contact Information:

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

**DETAILS** RESIDENTIAL

Cost of Job: \$3,100

Electrical Contractor ID: SP PH 32045

**MECHANICAL PROJECT FEE: \$ .00**

**Comments: STORM; REPLACE DUCT WORK UNDER HOUSE**

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

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

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

Inspector Signature: WO/CF 10/2/19 LMF



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

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

**MECHANICAL PROJECT**

**MECHANICAL PROJECT#: MECH-982**

**10/02/2019**

Parcel Number: 014822023  
 Location: OCEAN VIEW DR – AVON  
 Subdivision: KINNAKEET SHORES PHASE 5  
 Legal Description: LOT: 23 BLK: SEC: 5

Owner Name: TIMOTHY W MEEHAN  
 Owner Mail Address: 5802 HUBNAIL CT - FREDERICK, MD 21703  
 Owner Contact Information:

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

**DETAILS** RESIDENTIAL

UNITS: 1.00 Cost of Job: \$3,400

Electrical Contractor ID: SP PH 32045

**MECHANICAL PROJECT FEE: \$150.00**

Comments: 1 OUTDOOR UNIT

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

Inspector Signature: CH/CT 10/2/19 LMF



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**MECHANICAL PROJECT**

**MECHANICAL PROJECT#: MECH-983**

**10/02/2019**

Parcel Number: 027374000  
 Location: 25291 SEA ISLE HILLS DR – WAVES  
 Subdivision: SEA ISLE HILLS SEC 5  
 Legal Description: LOT: 9 BLK: SEC: 5

Owner Name: HAROLD MACMURREN  
 Owner Mail Address: 293 CR 519 - SUSSEX, NJ 07461  
 Owner Contact Information:

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

**DETAILS RESIDENTIAL**

UNITS: 2.00 Cost of Job: \$6,100  
 Electrical Contractor ID: SP PH 32045

**MECHANICAL PROJECT FEE: \$150.00**

**Comments: 1 INDOOR/OUTDOOR SYSTEM**

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

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

Inspector Signature: CH/CF 10/2/19 LMF



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 Frisco: (252) 475-5878

**MECHANICAL PROJECT**

**MECHANICAL PROJECT#: MECH-984**

**10/02/2019**

Parcel Number: 014822011  
 Location: OCEAN VIEW DR – AVON  
 Subdivision: KINNAKEET SHORES PHASE 5  
 Legal Description: LOT: 11 BLK: SEC: 5

Owner Name: OBX BEACH HOUSE LLC  
 Owner Mail Address: 14 WILDFLOWER WAY - COHOES, NY 12047  
 Owner Contact Information:

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

**DETAILS RESIDENTIAL**

UNITS: 2.00 Cost of Job: \$6,000  
 Electrical Contractor ID: SP PH 32045

**MECHANICAL PROJECT FEE: \$150.00**

Comments: 1 INDOOR/OUTDOOR SYSTEM

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

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

Inspector Signature: CH/CF 10/2/19 LMF



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**MECHANICAL PROJECT**

**MECHANICAL PROJECT#: MECH-998**

**10/03/2019**

Parcel Number: 015893000  
 Location: 57218 ISLAND CLUB LN – HATTERAS  
 Subdivision: HATTERAS ISLAND CLUB  
 Legal Description: LOT: 14 BLK: SEC:

Owner Name: MICHAEL RAY VAUGHAN  
 Owner Mail Address: 15399 LAWSON CREEK LN - SMITHFIELD, VA 23430  
 Owner Contact Information:

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


**DETAILS** RESIDENTIAL

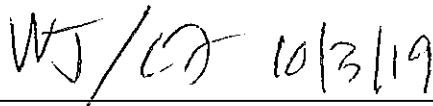
Electrical Contractor ID: 19768-L  
 Cost of Job: \$4,500  
 MECHANICAL PROJECT FEE: \$ .00

**Comments:** STORM; REPLACE 1 HP

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

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Applicant Signature:  CALLAHAN HVAC REPAIRS AND SERVICE LLC

Inspector Signature:  LMF



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MECHANICAL PROJECT

MECHANICAL PROJECT#: MECH-999

10/03/2019

Parcel Number: 026563016  
 Location: NC 12 HWY 16 – HATTERAS  
 Subdivision: SEA WHISPER CONDO  
 Legal Description: LOT: UT 16 BLK: SEC:

Owner Name: DAVID W REED  
 Owner Mail Address: 120 WALLACE AVE - LEECHBURG, PA 15656  
 Owner Contact Information:

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

DETAILS RESIDENTIAL

Cost of Job: \$3,525

Electrical Contractor ID: SP PH 32484

MECHANICAL PROJECT FEE: \$ .00

Comments: STORM; REPLACE 1 HP

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

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

Inspector Signature: *WJ/LA 10/3/19* LMF



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 Frisco: (252) 475-5878

MECHANICAL PROJECT

MECHANICAL PROJECT#: MECH-1000

10/03/2019

Parcel Number: 026563005  
 Location: 56358 NC 12 HWY 5 – HATTERAS  
 Subdivision: SEA WHISPER CONDO  
 Legal Description: LOT: UT 5 BLK: SEC:

Owner Name: ROGER G LAMBERT  
 Owner Mail Address: 710 TRATON CIR - CONCORD, NC 28025  
 Owner Contact Information:

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

DETAILS RESIDENTIAL

Electrical Contractor ID: SP PH 32484  
 Cost of Job: \$3,475  
 MECHANICAL PROJECT FEE: \$ .00

Comments: STORM; REPLACE 1 HP

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

Inspector Signature: *WJ/08 10/3/19* LMF



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**MECHANICAL PROJECT**

**MECHANICAL PROJECT#: MECH-1042**

**10/08/2019**

Parcel Number: 030539000  
 Location: SURF OR SOUND DR – FRISCO  
 Subdivision: SURF & SOUND PH 3  
 Legal Description: LOT: 37 BLK: SEC: 3

Owner Name: DAVID C HAMANN  
 Owner Mail Address: PO BOX 603 - FRISCO, NC 27936  
 Owner Contact Information:

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

**DETAILS** RESIDENTIAL

Cost of Job: \$6,450

Electrical Contractor ID: SP PH 32045

**MECHANICAL PROJECT FEE: \$ .00**

**Comments:** STORM; REPLACE 1 INDOOR/OUTDOOR SYSTEM

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

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

Inspector Signature: WT/LX LMF





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**MECHANICAL PROJECT**

**MECHANICAL PROJECT#: MECH-1043**

**10/09/2019**

Parcel Number: 000507003  
 Location: COAST GUARD RD – HATTERAS  
 Subdivision: HATTERAS LANDING PH 1  
 Legal Description: LOT: 3 BLK: SEC:

Owner Name: SUSAN TTEE KUBANIS  
 Owner Mail Address: 99 CORTE FEDORA DR - GREENBRAE, CA 94904  
 Owner Contact Information:

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

**DETAILS** RESIDENTIAL

UNITS: 2.00 Cost of Job: \$4,500

Electrical Contractor ID: SP PH 32045

**MECHANICAL PROJECT FEE: \$150.00**

**Comments: 1 INDOOR/OUTDOOR SYSTEM (MID-LEVEL REPLACEMENT)**

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

Inspector Signature: WJ/LJ LMF



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**MECHANICAL PROJECT**

**MECHANICAL PROJECT#: MECH-1044**

**10/09/2019**

Parcel Number: 023760000  
 Location: 46677 NC 12 HWY – BUXTON  
 Subdivision: SUBDIVISION - NONE  
 Legal Description: LOT: BLK: SEC:

Owner Name: LIGHTHOUSE VIEW MOTEL INC  
 Owner Mail Address: PO BOX 39 - BUXTON, NC 27920  
 Owner Contact Information:

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

**DETAILS** COMMERCIAL

Cost of Job: \$2,000

Electrical Contractor ID: 15935-L

**MECHANICAL PROJECT FEE: \$ .00**

**Comments:** STORM; REPLACE DUCT WORK UNDER HOUSE

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Applicant Signature: *Jan C. Muir Jr* AUGUST AIR LLC

Inspector Signature: *WJ/LJ* LMF



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 Frisco: (252) 475-5878

**MECHANICAL PROJECT**

**MECHANICAL PROJECT#: MECH-1045**

**10/09/2019**

Parcel Number: 014447024  
 Location: NORTH END RD – AVON  
 Subdivision: SUBDIVISION - NONE  
 Legal Description: LOT: BLK: SEC:

Owner Name: BRADLEY W DOERR  
 Owner Mail Address: P O BOX 595 - AVON, NC 27915  
 Owner Contact Information:

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

**DETAILS** RESIDENTIAL

Cost of Job: \$16,000

Electrical Contractor ID: 15935-L

**MECHANICAL PROJECT FEE: \$ .00**

**Comments:** STORM; 2 OUTDOOR UNITS, 1 AIR HANDLER, 1 INDOOR COIL

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

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Applicant Signature: *Jan C Thomas, Jr* AUGUST AIR LLC

Inspector Signature: *CH/LA* LMF



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**MECHANICAL PROJECT**

**MECHANICAL PROJECT#: MECH-1046**

**10/09/2019**

Parcel Number: 011674000  
 Location: LASSITER LN – FRISCO  
 Subdivision: WIND-HAVEN SHORES  
 Legal Description: LOT: 23 & W 1/2 LT 22 BLK: SEC:

Owner Name: SCOTTY W III NICHOLSON  
 Owner Mail Address: P O BOX 354 - P O BOX 354 - GLENVILLE, WV 26351  
 Owner Contact Information:

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

**DETAILS** RESIDENTIAL

Cost of Job: \$13,500

Electrical Contractor ID: 15935-L

**MECHANICAL PROJECT FEE: \$ .00**

**Comments:** STORM; REPLACE 3 OUTDOOR HP

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

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Applicant Signature: Jan C. Thomas Jr AUGUST AIR LLC

Inspector Signature: WJ/LX LMF



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Manteo: (252) 475-5870  
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Frisco: (252) 475-5878

**MECHANICAL PROJECT**

**MECHANICAL PROJECT#: MECH-1047**

**10/09/2019**

Parcel Number: 015466000  
Location: 57654 NC 12 HWY – HATTERAS  
Subdivision: SUBDIVISION - NONE  
Legal Description: LOT: BLK: SEC:

Owner Name: HATTERAS FIRST METHODIST CHURCH  
Owner Mail Address: XXXXX - HATTERAS NC 27943 - XXXXX, XX XXXXX  
Owner Contact Information:

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

**DETAILS RESIDENTIAL**

Electrical Contractor ID: 15935-L  
Cost of Job: \$500  
**MECHANICAL PROJECT FEE: \$ .00**

**Comments:** STORM; REPLACE DUCT WORK UNDER HOUSE

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

Inspector Signature: \_\_\_\_\_ LMF



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Frisco: (252) 475-5878

**MECHANICAL PROJECT**

**MECHANICAL PROJECT#: MECH-1050**

**10/09/2019**

Parcel Number: 014521000  
Location: 40102 HARBOR RD – AVON  
Subdivision: SUBDIVISION - NONE  
Legal Description: LOT: BLK: SEC:

Owner Name: VERNON RODNEY JR HEIRS OF HODGE  
Owner Mail Address: 12314 EDWINS LN - KING GEORGE, VA 22485  
Owner Contact Information:

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

**DETAILS** RESIDENTIAL

Cost of Job: \$800

Electrical Contractor ID: 15935-L

**MECHANICAL PROJECT FEE: \$ .00**

**Comments:** STORM; REPLACE DUCT WORK UNDER HOUSE

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

Inspector Signature: CH/LX LMF



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**MECHANICAL PROJECT**

**MECHANICAL PROJECT#: MECH-1054**

**10/09/2019**

Parcel Number: 012171016  
 Location: 52131 GONDYKE WAY – FRISCO  
 Subdivision: ROGUES RETREAT  
 Legal Description: LOT: 16 BLK: SEC:

Owner Name: MATTHEW R MINSHALL  
 Owner Mail Address: 5530 DIETRICH AVE - ORIENT, OH 43146  
 Owner Contact Information:

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

**DETAILS** RESIDENTIAL

Electrical Contractor ID: 15935-L  
 Cost of Job: \$1,100  
 MECHANICAL PROJECT FEE: \$ .00

**Comments:** STORM; REPLACE DUCT WORK UNDER HOUSE

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

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

Inspector Signature: *WJ/LJ* LMF



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**MECHANICAL PROJECT**

**MECHANICAL PROJECT#: MECH-1055**

**10/09/2019**

Parcel Number: 014692023  
 Location: 40191 AVLONA DR – AVON  
 Subdivision: AVON SHORES SEC 2  
 Legal Description: LOT: 23 BLK: SEC: 2

Owner Name: TIMOTHY R GALDERISE  
 Owner Mail Address: 4134 SEAFARE AVE - NORFOLK, VA 23518  
 Owner Contact Information:

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

DETAILS RESIDENTIAL

Cost of Job: \$400

Electrical Contractor ID: 15935-L

**MECHANICAL PROJECT FEE: \$ .00**

**Comments: STORM; REPLACE DUCT WORK UNDER HOUSE**

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Applicant Signature: Jan C. Thomas Jr AUGUST AIR LLC

Inspector Signature: CH / CT LMF





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Frisco: (252) 475-5878

MECHANICAL PROJECT

MECHANICAL PROJECT#: MECH-1056

10/09/2019

Parcel Number: 014692025  
Location: 40189 AVLONA DR – AVON  
Subdivision: AVON SHORES SEC 2  
Legal Description: LOT: 25 BLK: SEC: 2

Owner Name: TERRI M CALLAHAN  
Owner Mail Address: PO BOX 562 - AVON, NC 27915  
Owner Contact Information:

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

DETAILS RESIDENTIAL

Electrical Contractor ID: 15935-L  
Cost of Job: \$400  
MECHANICAL PROJECT FEE: \$ .00

Comments: STORM; REPLACE DUCT WORK UNDER HOUSE

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

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

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

Inspector Signature: CH/LJ LMF



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

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

**MECHANICAL PROJECT**

**MECHANICAL PROJECT#: MECH-1057**

**10/09/2019**

Parcel Number: 015305000  
Location: 54212 SHORESURF LN – FRISCO  
Subdivision: SHORESURF  
Legal Description: LOT: 21 BLK: SEC:

Owner Name: RICKY L GOODLING  
Owner Mail Address: 505 CASCADE RD - MECHANICSBURG, PA 17055  
Owner Contact Information:

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

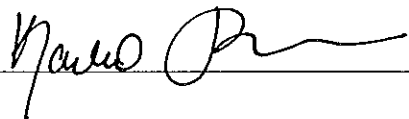
**DETAILS RESIDENTIAL**

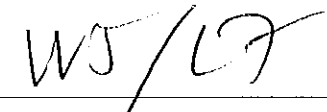
Electrical Contractor ID: 26975-I  
Cost of Job: \$6,600  
MECHANICAL PROJECT FEE: \$ .00

**Comments: STORM; REPLACE 1 HP**

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

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Applicant Signature:  VILLAGE AIR INC

Inspector Signature:  LMF



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**MECHANICAL PROJECT**

**MECHANICAL PROJECT#: MECH-1058**

**10/10/2019**

Parcel Number: 014987002  
 Location: 52245 HENRY DR – FRISCO  
 Subdivision: SUBDIVISION - NONE  
 Legal Description: LOT: PARCEL 2 BLK: SEC:

Owner Name: JOHN MCGLONE  
 Owner Mail Address: 11 SECOND ST - NORTH GRAFTON, MA 01536  
 Owner Contact Information:

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

**DETAILS** RESIDENTIAL

Cost of Job: \$10,000

Electrical Contractor ID: 26975-I

**MECHANICAL PROJECT FEE: \$ .00**

**Comments:** STORM; REMOVE DUCT WORK FROM UNDER HOUSE, INSTALL MINI SPLIT SYSTEM

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

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Applicant Signature:  VILLAGE AIR INC

Inspector Signature:  LMF



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 Frisco: (252) 475-5878

**MECHANICAL PROJECT**

**MECHANICAL PROJECT#: MECH-1076**

**10/14/2019**

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

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

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

**DETAILS** RESIDENTIAL

Cost of Job: \$6,800

Electrical Contractor ID: 30600-L

**MECHANICAL PROJECT FEE: \$ .00**

**Comments:** STORM; REPLACE 2 HP

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

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Applicant Signature: *Jose Luvu* PAMLICO AIR INC

Inspector Signature: *CH/LX* LMF



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

**MECHANICAL PROJECT**

**MECHANICAL PROJECT#: MECH-1086**

**10/16/2019**

Parcel Number: 014998000  
 Location: 51247 LULLABY LN – FRISCO  
 Subdivision: ELEVY MANOR 2ND ADD  
 Legal Description: LOT: E BLK: SEC:

Owner Name: DONNA T SWAIN  
 Owner Mail Address: PO BOX 84 - FRISCO, NC 27936  
 Owner Contact Information:

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

**DETAILS** RESIDENTIAL

Cost of Job: \$3,600

Electrical Contractor ID: 15935-L

**MECHANICAL PROJECT FEE: \$ .00**

**Comments:** STORM; REPLACE 1 OUTDOOR HP UNIT

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

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Applicant Signature: James C. Thomas Jr AUGUST AIR LLC

Inspector Signature: WJ/LF LMF



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**MECHANICAL PROJECT**

**MECHANICAL PROJECT#: MECH-1097**

**10/17/2019**

Parcel Number: 027890026  
 Location: 57211 ATLANTIC VIEW DR 202 – HATTERAS  
 Subdivision: ATLANTIC VIEW VILLAS CONDO  
 Legal Description: LOT: UNIT 202 BLK: SEC:

Owner Name: WESLEY SCOTT HUFF  
 Owner Mail Address: P O BOX 954 - P O BOX 954 - POWHATAN, VA 23139  
 Owner Contact Information:

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

**DETAILS RESIDENTIAL**

UNITS: 2.00 Cost of Job: \$2,800  
 Electrical Contractor ID: SP PH 32045

**MECHANICAL PROJECT FEE: \$150.00**

**Comments: 2 UNITS; 1 INDOOR/OUTDOOR SYSTEM**

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

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

Inspector Signature: WS/17 LMF



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 Frisco: (252) 475-5878

**MECHANICAL PROJECT**

**MECHANICAL PROJECT#: MECH-1098**

**10/17/2019**

Parcel Number: 031149000  
 Location: 27211 SEA CHEST CT – SALVO  
 Subdivision: SOUTH BEACH  
 Legal Description: LOT: 33 BLK: SEC:

Owner Name: MARC SHARP  
 Owner Mail Address: 16 BRAY WOOD DR - WILLIAMSBURG, VA 23185  
 Owner Contact Information:

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

**DETAILS RESIDENTIAL**

UNITS: 2.00 Cost of Job: \$6,450  
 Electrical Contractor ID: SP PH 32045  
**MECHANICAL PROJECT FEE: \$150.00**

**Comments: 2 UNITS; 1 INDOOR/OUTDOOR SYSTEM**

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

Inspector Signature: CH/LG LMF



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**MECHANICAL PROJECT**

**MECHANICAL PROJECT#: MECH-1099**

**10/17/2019**

Parcel Number: 013818000  
 Location: 39030 BLUEFISH CT – AVON  
 Subdivision: HATTERAS COLONY SEC 4  
 Legal Description: LOT: 189 BLK: SEC: 4

Owner Name: KENNETH O JONES  
 Owner Mail Address: 2440 GARDNER-HOLT RD - BURLINGTON, NC 27215  
 Owner Contact Information:

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

**DETAILS** RESIDENTIAL

UNITS: 2.00 Cost of Job: \$4,200

Electrical Contractor ID: SP PH 32045

**MECHANICAL PROJECT FEE: \$150.00**

**Comments: 2 UNITS; 1 INDOOR/OUTDOOR SYSTEM**

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

Inspector Signature: CH/LJ LMF





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**MECHANICAL PROJECT**

**MECHANICAL PROJECT#: MECH-1101**

**10/17/2019**

Parcel Number: 026563009  
 Location: NC 12 HWY 9 – HATTERAS  
 Subdivision: SEA WHISPER CONDO  
 Legal Description: LOT: UT 9 BLK: SEC:

Owner Name: RALPH ANDERSON JR FUQUA  
 Owner Mail Address: 216 FUQUA RD - LEASBURG, NC 27921  
 Owner Contact Information:

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

**DETAILS** RESIDENTIAL

Cost of Job: \$3,875

Electrical Contractor ID: SP PH 32484

**MECHANICAL PROJECT FEE: \$ .00**

**Comments: STORM; REPLACE 1 HP**

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

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

Inspector Signature: *WJ/LJ* LMF



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 Manteo NC 27954

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

MECHANICAL PROJECT

MECHANICAL PROJECT#: MECH-1102

10/18/2019

Parcel Number: 026563017  
 Location: 56358 NC 12 HWY 17 – HATTERAS  
 Subdivision: SEA WHISPER CONDO  
 Legal Description: LOT: UT 17 BLK: SEC:

Owner Name: MARK ERIC STENOV  
 Owner Mail Address: 22 SWEETWATER OAKS DR - FLETCHER, NC 28732  
 Owner Contact Information:

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

DETAILS RESIDENTIAL

Cost of Job: \$3,875

Electrical Contractor ID: SP PH 32484

MECHANICAL PROJECT FEE: \$ .00

Comments: STORM; REPLACE 1 HP

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

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Applicant Signature: *H. Lennwood Cartwright* CARTWRIGHTS HEATING AND AIR INC

Inspector Signature: *WO/LJ* LMF



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Frisco: (252) 475-5878

MECHANICAL PROJECT

MECHANICAL PROJECT#: MECH-1103

10/17/2019

Parcel Number: 026563004  
Location: 56358 NC 12 HWY 4 – HATTERAS  
Subdivision: SEA WHISPER CONDO  
Legal Description: LOT: UT 4 BLK: SEC:

Owner Name: STEPHEN HARRINGTON  
Owner Mail Address: PO BOX 78 - JOHNSBURG, NY 12843  
Owner Contact Information:

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

DETAILS RESIDENTIAL

Electrical Contractor ID: SP PH 32484  
Cost of Job: \$3,875  
MECHANICAL PROJECT FEE: \$ .00

Comments: STORM; REPLACE 1 HP

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

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

Inspector Signature: *WJ/LJ* LMF



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**MECHANICAL PROJECT**

**MECHANICAL PROJECT#: MECH-1109**

**10/21/2019**

Parcel Number: 015542000  
 Location: 57181 PRICILLA CURVE RD – HATTERAS  
 Subdivision: SUBDIVISION - NONE  
 Legal Description: LOT: BLK: SEC:

Owner Name: MICHAEL ODEN PEELE  
 Owner Mail Address: P O BOX 10 - HATTERAS, NC 27943  
 Owner Contact Information:

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

**DETAILS** RESIDENTIAL

Cost of Job: \$1,800

Electrical Contractor ID: SP PH 30245

**MECHANICAL PROJECT FEE: \$ .00**

**Comments: STORM; REPLACE 1 OUTDOOR UNIT**

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Applicant Signature: Ken Day 10/29/19 C BREEZE HEATING AND AIR CONDITIONING LL

Inspector Signature: WJ/LX LMF









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**MECHANICAL PROJECT**

**MECHANICAL PROJECT#: MECH-1143**

**10/29/2019**

Parcel Number: 012872000  
 Location: 26209 QUAY CT – SALVO  
 Subdivision: HATTERAS COLONY SEC E  
 Legal Description: LOT: 41 BLK: SEC: E

Owner Name: E ALLEN AMMONS  
 Owner Mail Address: PO BOX 7314 - RICHMOND, VA 23221  
 Owner Contact Information:

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

**DETAILS** RESIDENTIAL

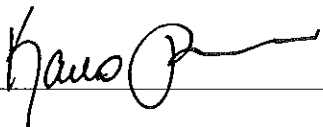
UNITS: 2.00 Cost of Job: \$5,800  
 Electrical Contractor ID: 26975-I


**MECHANICAL PROJECT FEE: \$150.00**

**Comments: INSTAL 1 SYSTEM**

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

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Applicant Signature:  VILLAGE AIR INC

Inspector Signature:  LMF





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**MECHANICAL PROJECT**

**MECHANICAL PROJECT#: MECH-1144**

**10/29/2019**

Parcel Number: 012767039  
 Location: 24242 SEASHORE DR – RODANTHE  
 Subdivision: TRADE WINDS BEACHES  
 Legal Description: LOT: 39 BLK: SEC:

Owner Name: LAWRENCE T JR MCGEE  
 Owner Mail Address: 10 FLOCEE LN - HAMPTON BAYS, NY 11946  
 Owner Contact Information:

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

**DETAILS RESIDENTIAL**

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

**MECHANICAL PROJECT FEE: \$150.00**

**Comments: REPLACE 1 HP**

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Applicant Signature:  VILLAGE AIR INC

Inspector Signature:  LMF



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 Frisco: (252) 475-5878

**MECHANICAL PROJECT**

**MECHANICAL PROJECT#: MECH-1157**

**10/30/2019**

Parcel Number: 011953000  
 Location: 50314 KINGS POINT DR – FRISCO  
 Subdivision: BRIGANDS BAY  
 Legal Description: LOT: 303 BLK: SEC:

Owner Name: PAUL F BURCH  
 Owner Mail Address: PO BOX 326 - FRISCO, NC 27936  
 Owner Contact Information:

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

DETAILS RESIDENTIAL

Cost of Job: \$12,000

Electrical Contractor ID: 24451-U

MECHANICAL PROJECT FEE: \$ .00

Comments: STORM; REPLACE 2 HPS

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Applicant Signature: \_\_\_\_\_ CALLAHAN HVAC REPAIRS AND SERVICE LLC

Inspector Signature: WJ/LJ LMF



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

**RESIDENTIAL BUILDING PERMIT**

**BUILDING PERMIT#: REMD-1003**

**10/04/2019**

Parcel Number: 015216000  
 Location: 53248 ROBIN LN – FRISCO  
 Subdivision: HIGH TOR SANDS  
 Legal Description: LOT: 8 BLK: SEC:

Owner Name: BRYAN F MCFADDEN  
 Owner Mail Address: 114 COTTONWOOD CRK RD D-1 DURANGO, CO 81301  
 Owner Phone and email: 732-232-1030

Contractor Name: SAA  
 Contractor Mail Address: SAA  
 Contractor Phone: SAA Contractor NC License#:

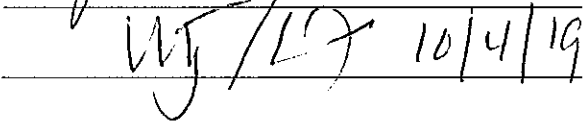
**BUILDING INFORMATION**

Proposed Construction Use:	REMODEL RES OR COM , RE-SKIN AND ENLARGE DECK	Cost of Construction:	\$10,000
Proposed Construction Type:	SFD	CAMA Permit#:	N/A
Finished Square Footage:	0	Septic Permit#:	29033
Unfinished Square Footage:	0	Septic Permit Date:	09/26/2019
Stories:	2.0	Survey/Site Plan:	
Building Height:	0	Water Tap#:	
Total Rooms:	0	Water Type:	
Footing Type:	PILING	Flood Zone:	AE
Exterior Finish:		Base Flood Elevation:	8.0
Proposed Finished Floor Elevation:		Lot/Ground Elevation:	
Bedrooms:	0	Baths/half baths:	0.00/0

Comments: Any deviation from the building plan or site plan requires prior approval.	PERMIT FEE	\$150.00
	HOME OWNERS RECOVERY FEE	10.00

**TOTAL FEES: \$160.00**

Applicant Signature:  BRYAN F MCFADDEN

Inspector Signature:  10/4/19 LMF



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

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

**COMMERCIAL BUILDING PERMIT**

**BUILDING PERMIT#: REMD-1067**

**10/14/2019**

Parcel Number: 012902000  
 Location: 26204 RAMPART ST – SALVO  
 Subdivision: HATTERAS COLONY SEC E  
 Legal Description: LOT: 71A BLK: SEC: E

Owner Name: SURF OR SOUND SALVO LLC  
 Owner Mail Address: PO BOX 100 AVON, NC 27915  
 Owner Phone and email:

Contractor Name: FORREST SEAL LLC  
 Contractor Mail Address: 4266 WORTHINGTON LN, KITTY HAWK, NC 27949  
 Contractor Phone: 252-599-2521 Contractor NC License#: 57289

**BUILDING INFORMATION**

Proposed Construction Use: COMMERCIAL BUILDING USE , ADDITION

Occupancy:

Proposed Construction Type:		Cost of Construction:	\$200,000
Finished Square Footage:	0	CAMA Permit#:	
Unfinished Square Footage:	0	Septic Permit#:	
Stories:	0.0	Septic Permit Date:	
Building Height:	0	Survey/Site Plan:	
Total Rooms:	0	Water Tap#:	
Footing Type:		Water Type:	
Exterior Finish:		Flood Zone:	AE
Sprinkler System:		Base Flood Elevation:	0.0
Proposed Finished Floor Elev:		Lot/Ground Elevation:	
Bedrooms:	0	Baths/half baths:	0.00/0

Comments: Any deviation from the building plan or site plan requires prior approval. PERMIT FEE \$2,000.00

**TOTAL FEES: \$2,000.00**

Applicant Signature:  FORREST SEAL LLC

Inspector Signature:  LMF



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

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

**RESIDENTIAL BUILDING PERMIT**

**BUILDING PERMIT#: REMD-1070**

**10/14/2019**

Parcel Number: 015299000  
 Location: 54226 SHORESURF LN – FRISCO  
 Subdivision: SHORESURF  
 Legal Description: LOT: 15 BLK: SEC:

Owner Name: RICHARD L TTEE LANGLOIS  
 Owner Mail Address: P O BOX 766 FRISCO, NC 27936  
 Owner Phone and email:

Contractor Name: HI CALIBER KITCHEN & BATH  
 Contractor Mail Address: PO BOX 771, FRISCO, NC 27936  
 Contractor Phone: 252-565-7200 Contractor NC License#: 81589

**BUILDING INFORMATION**

Proposed Construction Use:	REMODEL RES OR COM , REMOD KITCHEN AND LIVING ROOM		
Proposed Construction Type:	SFD	Cost of Construction:	\$42,000
Finished Square Footage:	0	CAMA Permit#:	
Unfinished Square Footage:	0	Septic Permit#:	
Stories:	0.0	Septic Permit Date:	
Building Height:	0	Survey/Site Plan:	
Total Rooms:	0	Water Tap#:	
Footing Type:		Water Type:	
Exterior Finish:		Flood Zone:	AE
Proposed Finished Floor Elevation:		Base Flood Elevation:	9.0
Bedrooms:	0	Lot/Ground Elevation:	
		Baths/half baths:	0.00/0

**Comments:** Any deviation from the building plan or site plan requires prior approval. PERMIT FEE \$420.00

HOME OWNERS RECOVERY FEE 10.00

**TOTAL FEES: \$430.00**

Applicant Signature:  HI CALIBER KITCHEN & BATH

Inspector Signature:  LMF



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 Frisco: (252) 475-5878

**RESIDENTIAL BUILDING PERMIT**

**BUILDING PERMIT#: REMD-1080**

**10/14/2019**

Parcel Number: 013490000  
 Location: 40263 DOLPHIN LN – AVON  
 Subdivision: HATTERAS COLONY SEC 1  
 Legal Description: LOT: 103 BLK: SEC: 1

Owner Name: DANIEL R REGISTER  
 Owner Mail Address: P O BOX 1021 AVON, NC 27915  
 Owner Phone and email:

Contractor Name: ANDREW DICKERSON  
 Contractor Mail Address: PO BOX, AVON, NC 27915  
 Contractor Phone: 804-402-3810 Contractor NC License#: UNLICENSED

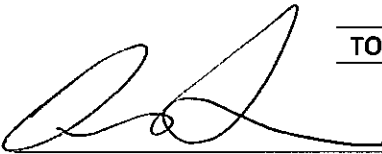
**BUILDING INFORMATION**

Proposed Construction Use:	REMODEL RES OR COM , ADDING 1/2 BATH/SHOWER ONLY	Cost of Construction:	\$3,000
Proposed Construction Type:		CAMA Permit#:	
Finished Square Footage:	0	Septic Permit#:	
Unfinished Square Footage:	0	Septic Permit Date:	
Stories:	0	Survey/Site Plan:	
Building Height:	0	Water Tap#:	
Total Rooms:	0	Water Type:	
Footing Type:		Flood Zone:	AE
Exterior Finish:		Base Flood Elevation:	0.0
Proposed Finished Floor Elevation:		Lot/Ground Elevation:	
Bedrooms:	0	Baths/half baths:	0/0

Comments: Any deviation from the building plan or site plan requires prior approval.

PERMIT FEE	\$150.00
HOME OWNERS RECOVERY FEE	10.00

**TOTAL FEES: \$160.00**

Applicant Signature:  ANDREW DICKERSON  
 Inspector Signature: \_\_\_\_\_ LMF



County of Dare  
 Planning Office  
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 Manteo NC 27954

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

**RESIDENTIAL BUILDING PERMIT**

**BUILDING PERMIT#: REMD-1091**

**10/17/2019**

Parcel Number: 008322000  
 Location: GREENWOOD PL – AVON  
 Subdivision: KINNAKEET SHORES PHASE 1  
 Legal Description: LOT: 68 BLK: SEC:

Owner Name: GARY A TTEE NEWCOMB  
 Owner Mail Address: 52 ORCHARD ST GREENFIELD, MA 01301  
 Owner Phone and email:

Contractor Name: LEIGH TAYLOR CONSTRUCTION  
 Contractor Mail Address: PO BOX 1154, KITTY HAWK, NC 27949  
 Contractor Phone: 252-305-4668 Contractor NC License#:

**BUILDING INFORMATION**

Proposed Construction Use:	REMODEL RES OR COM , REMOD LAUN TO BATH, DECK TO POOL		
Proposed Construction Type:	SFD	Cost of Construction:	\$28,360
Finished Square Footage:	0	CAMA Permit#:	HI2019-13
Unfinished Square Footage:	0	Septic Permit#:	28963
Stories:	0.0	Septic Permit Date:	0815/2019
Building Height:	0	Survey/Site Plan:	
Total Rooms:	0	Water Tap#:	
Footing Type:		Water Type:	
Exterior Finish:		Flood Zone:	
Proposed Finished Floor Elevation:		Base Flood Elevation:	0.0
Bedrooms:	0	Lot/Ground Elevation:	
		Baths/half baths:	0.00/0

Comments: Any deviation from the building plan or site plan requires prior approval.	PERMIT FEE	\$290.00
	HOME OWNERS RECOVERY FEE	10.00

**TOTAL FEES: \$300.00**

Applicant Signature:  LEIGH TAYLOR CONSTRUCTION

Inspector Signature: \_\_\_\_\_ LMF



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

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

RESIDENTIAL BUILDING PERMIT

BUILDING PERMIT#: REPAIR-974

10/02/2019

Parcel Number: 015137013  
 Location: SANDPIPER DR – FRISCO  
 Subdivision: SURF & SOUND SEC 1  
 Legal Description: LOT: 13 BLK: SEC: 1

Owner Name: JVC LAND LIMITED LIABILITY COMPANY  
 Owner Mail Address: 108 KOHOUT DR MAHWAH, NJ 07430  
 Owner Phone and email:

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

BUILDING INFORMATION

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

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

HOME OWNERS RECOVERY FEE 10.00

**TOTAL FEES: \$160.00**

Applicant Signature: Justin Curcio JUSTIN CURCIO

Inspector Signature: WS/CG 10/2/19 LMF





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 Manteo NC 27954

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

**RESIDENTIAL BUILDING PERMIT**

**BUILDING PERMIT#: REPAIR-1010**

**10/07/2019**

Parcel Number: 014114017  
 Location: MARE VISTA PL – FRISCO  
 Subdivision: SEA COLONY INC  
 Legal Description: LOT: 17 BLK: SEC:

Owner Name: ELIZABETH ANN HENDRIKS  
 Owner Mail Address: 9036 CHELSEA DR RALEIGH, NC 27603  
 Owner Phone and email:

Contractor Name: BATCHELOR HOMES  
 Contractor Mail Address: PO BOX 787, BUXTON, NC 27920  
 Contractor Phone: 252-305-4346 Contractor NC License#: 82295-L

**BUILDING INFORMATION**

Proposed Construction Use:	REPAIR , STORM; REPLACING INSUL, SHEET ROCK, FLOORING, PAINT/TRIM		
Proposed Construction Type:	SFD	Cost of Construction:	\$120,000
Finished Square Footage:	0	CAMA Permit#:	
Unfinished Square Footage:	0	Septic Permit#:	
Stories:	0.0	Septic Permit Date:	
Building Height:	0	Survey/Site Plan:	
Total Rooms:	0	Water Tap#:	
Footing Type:		Water Type:	
Exterior Finish:		Flood Zone:	
Proposed Finished Floor Elevation:		Base Flood Elevation:	0.0
Bedrooms:	0	Lot/Ground Elevation:	
		Baths/half baths:	0.00/0

Comments: Any deviation from the building plan or site plan requires prior approval. PERMIT FEE \$ .00

HOME OWNERS RECOVERY FEE

**TOTAL FEES: \$ .00**

Applicant Signature:  BATCHELOR HOMES

Inspector Signature:  LMF



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 Frisco: (252) 475-5878

**RESIDENTIAL BUILDING PERMIT**

**BUILDING PERMIT#: REPAIR-1115**

**10/21/2019**

Parcel Number: 011880000  
 Location: 50145 KINGS POINT DR – FRISCO  
 Subdivision: BRIGANDS BAY  
 Legal Description: LOT: 325 BLK: SEC:

Owner Name: STUART S TAYLOR  
 Owner Mail Address: 116 73RD ST VIRGINIA BEACH, VA 23451  
 Owner Phone and email:

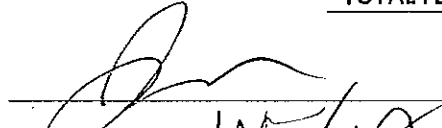
Contractor Name: EMANUELSON AND DAD INC  
 Contractor Mail Address: PO BOX 448, NAGS HEAD, NC 27959  
 Contractor Phone: 252-261-2212 Contractor NC License#: 79801

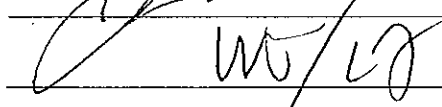
**BUILDING INFORMATION**

Proposed Construction Use:	REPAIR , REPAIR/REPLACE 21 SFD/DECK PILINGS		
Proposed Construction Type:	SFD	Cost of Construction:	\$19,840
Finished Square Footage:	0	CAMA Permit#:	
Unfinished Square Footage:	0	Septic Permit#:	
Stories:	0.0	Septic Permit Date:	
Building Height:	0	Survey/Site Plan:	
Total Rooms:	0	Water Tap#:	
Footing Type:	PILING	Water Type:	
Exterior Finish:		Flood Zone:	
Proposed Finished Floor Elevation:		Base Flood Elevation:	8.0
Bedrooms:	0	Lot/Ground Elevation:	
		Baths/half baths:	0.00/0

Comments: Any deviation from the building plan or site plan requires prior approval.	PERMIT FEE	\$150.00
	HOME OWNERS RECOVERY FEE	10.00

**TOTAL FEES: \$160.00**

Applicant Signature:  EMANUELSON AND DAD INC

Inspector Signature:  LMF



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 Frisco: (252) 475-5878

**RESIDENTIAL BUILDING PERMIT**

**BUILDING PERMIT#: REPAIR-1116**

**10/21/2019**

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

Owner Name: LUCAS B MALLORY  
 Owner Mail Address: 205 EARLY AVE SANDSTON, VA 23150  
 Owner Phone and email:

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

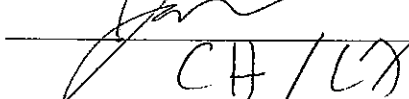
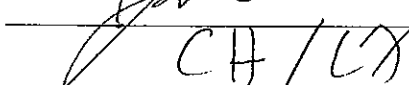
**BUILDING INFORMATION**

Proposed Construction Use:	REPAIR , REPLACE PILINGS	Cost of Construction:	\$17,600
Proposed Construction Type:	SFD	CAMA Permit#:	
Finished Square Footage:	0	Septic Permit#:	
Unfinished Square Footage:	0	Septic Permit Date:	
Stories:	0.0	Survey/Site Plan:	
Building Height:	0	Water Tap#:	
Total Rooms:	0	Water Type:	
Footing Type:		Flood Zone:	
Exterior Finish:		Base Flood Elevation:	0.0
Proposed Finished Floor Elevation:		Lot/Ground Elevation:	
Bedrooms:	0	Baths/half baths:	0.00/0

Comments: Any deviation from the building plan or site plan requires prior approval.

PERMIT FEE	\$150.00
HOME OWNERS RECOVERY FEE	10.00

**TOTAL FEES: \$160.00**

Applicant Signature:  EMANUELSON AND DAD INC  
 Inspector Signature:  LMF



County of Dare  
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 PO Box Drawer 1000  
 Manteo NC 27954

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

**RESIDENTIAL BUILDING PERMIT**

**BUILDING PERMIT#: REPAIR-1027**

**10/07/2019**

Parcel Number: 014822049  
 Location: 41230 TERN ST – AVON  
 Subdivision: KINNAKEET SHORES PHASE 4  
 Legal Description: LOT: 12 BLK: SEC: 4

Owner Name: CATHY TTEE RAICH  
 Owner Mail Address: PO BOX 1234 AVON, NC 27915  
 Owner Phone and email:


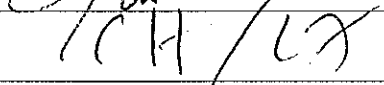
Contractor Name: CARL JERRY REID JR  
 Contractor Mail Address:  
 Contractor Phone: 919-616-6111 Contractor NC License#: UNLICENSED

**BUILDING INFORMATION**

Proposed Construction Use:	REPAIR , REPLACE SIDING, 11 WINDOWS, PAINT		
Proposed Construction Type:	SFD	Cost of Construction:	\$16,000
Finished Square Footage:	0	CAMA Permit#:	
Unfinished Square Footage:	0	Septic Permit#:	
Stories:	0.0	Septic Permit Date:	
Building Height:	0	Survey/Site Plan:	
Total Rooms:	0	Water Tap#:	
Footing Type:		Water Type:	
Exterior Finish:		Flood Zone:	
Proposed Finished Floor Elevation:		Base Flood Elevation:	0.0
Bedrooms:	0	Lot/Ground Elevation:	
		Baths/half baths:	0.00/0

Comments: Any deviation from the building plan or site plan requires prior approval.	PERMIT FEE	\$150.00
	HOME OWNERS RECOVERY FEE	10.00

**TOTAL FEES: \$160.00**

Applicant Signature:  CATHY TTEE RAICH  
 Inspector Signature:  LMF



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

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

**RESIDENTIAL BUILDING PERMIT**

**BUILDING PERMIT#: REPAIR-1028**

**10/07/2019**

Parcel Number: 027072000  
 Location: 50472 TIMBER TRL – FRISCO  
 Subdivision: INDIANTOWN SHORES  
 Legal Description: LOT: 28&29 BLK: B SEC:

Owner Name: BRUCE J DZIELINSKI  
 Owner Mail Address: 7769 COBLENTZ RD MIDDLETOWN, MD 21769  
 Owner Phone and email:

Contractor Name: SEA QUEST CONSTRUCTION LLC  
 Contractor Mail Address: PO BOX 1257, BUXTON, NC 27920  
 Contractor Phone: 2524750091 Contractor NC License#: 74865

**BUILDING INFORMATION**

Proposed Construction Use:	REPAIR , STORM; RE-FRAME DAMAGED ROOF		
Proposed Construction Type:	SFD	Cost of Construction:	\$25,000
Finished Square Footage:	0	CAMA Permit#:	
Unfinished Square Footage:	0	Septic Permit#:	
Stories:	0.0	Septic Permit Date:	
Building Height:	0	Survey/Site Plan:	
Total Rooms:	0	Water Tap#:	
Footing Type:		Water Type:	
Exterior Finish:		Flood Zone:	
Proposed Finished Floor Elevation:		Base Flood Elevation:	0.0
Bedrooms:	0	Lot/Ground Elevation:	
		Baths/half baths:	0.00/0

**Comments:** Any deviation from the building plan or site plan requires prior approval.

PERMIT FEE	\$ .00
HOME OWNERS RECOVERY FEE	10.00

**TOTAL FEES: \$10.00**

Applicant Signature: Tom Hunter SEA QUEST CONSTRUCTION LLC  
 Inspector Signature: WJ / LMF LMF



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

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

**RESIDENTIAL BUILDING PERMIT**

**BUILDING PERMIT#: REPAIR-1167**

**10/31/2019**

Parcel Number: 014822020  
 Location: 41053 OCEAN VIEW DR – AVON  
 Subdivision: KINNAKEET SHORES PHASE 5  
 Legal Description: LOT: 20 BLK: SEC: 5

Owner Name: MARYANN COONEY  
 Owner Mail Address: 4379 KAREN LN BLOOMFIELD HILLS, MI 48302  
 Owner Phone and email:

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

**BUILDING INFORMATION**

Proposed Construction Use:	REPAIR , REPLACE SIDING, WINDOWS, DOORS, TUB, TOILETS	Cost of Construction:	\$29,500
Proposed Construction Type:	SFD	CAMA Permit#:	
Finished Square Footage:	0	Septic Permit#:	
Unfinished Square Footage:	0	Septic Permit Date:	
Stories:	0.0	Survey/Site Plan:	
Building Height:	0	Water Tap#:	
Total Rooms:	0	Water Type:	
Footing Type:		Flood Zone:	
Exterior Finish:		Base Flood Elevation:	0.0
Proposed Finished Floor Elevation:		Lot/Ground Elevation:	
Bedrooms:	0	Baths/half baths:	0.00/0

<b>Comments:</b> Any deviation from the building plan or site plan requires prior approval.	PERMIT FEE	\$150.00
	HOME OWNERS RECOVERY FEE	10.00

**TOTAL FEES: \$160.00**

Applicant Signature: *Sam Hagedon* SAMUEL D HAGEDON  
 Inspector Signature: *CH/LJ* LMF



County of Dare  
 Planning Office  
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 Manteo NC 27954

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

**DOCKS;PIERS;BULKHEADS;DUNEWLK**

**DOCKS;PIERS;BULKHEADS;DUNEWLK#: ACC-1155**

**10/30/2019**

Parcel Number: 020533000  
 Location: 107 CRAIGY CT – COLINGTON  
 Subdivision: COLINGTON HARBOR SEC T  
 Legal Description: LOT: 55 & 56 BLK: SEC: T

Owner Name: JOHNNIE T WALKER  
 Owner Mail Address: 332 SHORELAND DR - FORT MYERS, FL 33905  
 Owner Contact Information:

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

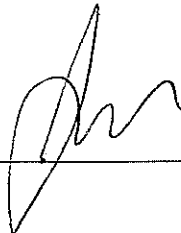
**DETAILS** RESIDENTIAL

CAMA Permit	73882	Cost of Job:	\$3,400
Lot/Ground elevation (ft)		<b>DOCKS;PIERS;BULKHEADS; DUNEWLK FEE:</b>	<b>\$250.00</b>

**Comments:** ADD 2-6' RETURNS TO BULKHEAD

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

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

Applicant Signature:  EMANUELSON & DAD INC

Inspector Signature: KEVIN CLARK AYT



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

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**GAS INSTALLATION PERMIT**

**GAS INSTALLATION PERMIT#: GAS-1158**

**10/30/2019**

Parcel Number: 028590008  
 Location: 4029 MARTINS POINT RD – MARTIN'S POINT  
 Subdivision: MARTIN'S POINT SECTION 1  
 Legal Description: LOT: 8 BLK: 5 SEC: 1

Owner Name: DIANE P LUMPKIN  
 Owner Mail Address: 4029 MARTINS POINT RD - KITTY HAWK, NC 27949  
 Owner Contact Information:

Contractor Name: OUTER BANKS LP GAS AND APPLIANCE  
 Contractor Mail Address: 538 PARKWOOD DR - KILL DEVIL HILLS, NC 27948  
 Contractor Phone: 252-202-4673  
 Contractor NC License#: L.21896

**DETAILS** RESIDENTIAL

Cost of Job:	\$1,000
<b>GAS INSTALLATION PERMIT FEE:</b>	<b>\$150.00</b>

**Comments:** GAS LINE FOR GENERATOR

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

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

Applicant Signature:  OUTER BANKS LP GAS AND APPLIANCE

Inspector Signature: KEVIN CLARK AYT





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

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

**ELECTRICAL PERMIT**

**ELECTRICAL PERMIT#: ELEC-1160**

**10/30/2019**

Parcel Number: 029306038  
Location: 7040 CURRITUCK RD – MARTIN'S POINT  
Subdivision: MARTIN'S POINT SECTION 2  
Legal Description: LOT: 38 BLK: 1 SEC: 2

Owner Name: BATCAVE LLC  
Owner Mail Address: 733 OXFORD AVE - MARINA DEL REY, CA 90292  
Owner Contact Information:

Contractor Name: GAULT ELECTRIC, LLC  
Contractor Mail Address: 11840 CANON BLVD, STE 200 NEWPORT NEWS, VA 23606  
Contractor Phone: 757-930-0587  
Contractor NC License#: U29762

**DETAILS** RESIDENTIAL

Cost of Job: \$3,719

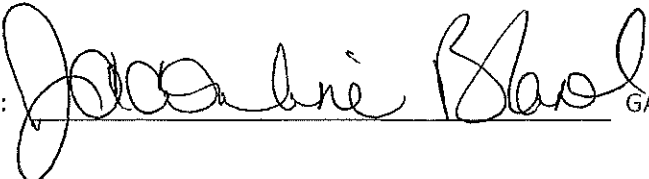
Amp Increase:

Service Amps: **ELECTRICAL PERMIT FEE: \$150.00**

**Comments: INSTALL 22KW GENERATOR ON (2) 200 AMP**

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

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

Applicant Signature:  GAULT ELECTRIC LLC

Inspector Signature: KEVIN CLARK AYT



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

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

**GAS INSTALLATION PERMIT**

**GAS INSTALLATION PERMIT#: GAS-1165**

**10/31/2019**

Parcel Number: 029243000  
 Location: 4048 MARTINS POINT RD – MARTIN'S POINT  
 Subdivision: MARTIN'S POINT SECTION 1  
 Legal Description: LOT: 60 BLK: 1 SEC: 1

Owner Name: JEANETTA ALLEMAN BUCHANAN  
 Owner Mail Address: 2108 GROVE POINT LN - WINDERMERE, FL 34786  
 Owner Contact Information:

Contractor Name: NORRIS MECHANICAL LLC  
 Contractor Mail Address: 100 FREEDOM AVE - POWELLS POINT, NC 491-2673  
 Contractor Phone: 252-491-2673  
 Contractor NC License#: L11100

**DETAILS** RESIDENTIAL

Cost of Job: \$3,100

**GAS INSTALLATION PERMIT FEE: \$150.00**

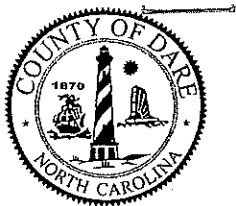
**Comments:**

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

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Applicant Signature: Henry B... NORRIS MECHANICAL LLC

Inspector Signature: KEVIN CLARK AYT



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**MECHANICAL PROJECT**

**MECHANICAL PROJECT#: MECH-1166**

**10/31/2019**

Parcel Number: 017246000  
 Location: 46215 TOWER CIRCLE RD – BUXTON  
 Subdivision: TOWER BEACH SUBD BLK 4  
 Legal Description: LOT: 1 BLK: 4 SEC:

Owner Name: BOOGIE FISH PROPERTY LLC  
 Owner Mail Address: 17 CHESTNUT HILL SOUTH - LOUDONVILLE, NY 12211  
 Owner Contact Information: 518-463-4154

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

**DETAILS** RESIDENTIAL

UNITS: 3.00 Cost of Job: \$10,300  
 Electrical Contractor ID: 32935

**MECHANICAL PROJECT FEE: \$150.00**

**Comments:** REMOVE AND REPLACE 3 HEAT PUMPS TRANE 1ST, 2.5T AND 3T

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Applicant Signature: \_\_\_\_\_ AIR HANDLERS OBX

Inspector Signature: WAYLAND JEANETTE AYT



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REMODEL RES OR COM

REMODEL RES OR COM#: REMD-1007

10/07/2019

Parcel Number: 019273000  
 Location: 211 SOUNDVIEW DR – COLINGTON  
 Subdivision: COLINGTON HARBOR SEC E  
 Legal Description: LOT: 100 BLK: SEC: E

Owner Name: MICHAEL D KEAR  
 Owner Mail Address: 45440 GABLE SQ - STERLING, VA 20164  
 Owner Contact Information:

Contractor Name: KEVIN CAMPBELL  
 Contractor Mail Address: 103 AYDLETT RD - AYDLETT, NC 27916  
 Contractor Phone: 252-619-8022  
 Contractor NC License#: NA

DETAILS RESIDENTIAL

CAMA Permit	Cost of Job:	\$15,000
Septic Permit	REMODEL RES OR COM FEE:	\$150.00

Comments:

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Applicant Signature: Kevin Campbell KEVIN CAMPBELL

Inspector Signature: KEVIN CLARK AYT



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REMODEL RES OR COM

REMODEL RES OR COM#: CO-1104

10/18/2019

Parcel Number: 019266000  
 Location: 227 SOUNDVIEW DR – COLINGTON  
 Subdivision: COLINGTON HARBOR SEC E  
 Legal Description: LOT: 92 BLK: SEC: E

Owner Name: JAMES J RADZVILLE  
 Owner Mail Address: 43 S BEARWOOD DR - PALMYRA, VA 22963  
 Owner Contact Information:

Contractor Name: MICHAEL JOHNSTON  
 Contractor Mail Address: 324 W WALKER ST - KILL DEVIL HILLS, NC 27948  
 Contractor Phone: 252-573-9854  
 Contractor NC License#: NA

DETAILS RESIDENTIAL

CAMA Permit		Cost of Job:	\$3,500
Septic Permit	29017	REMODEL RES OR COM FEE:	\$ .00

Comments:

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

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Applicant Signature:  \_\_\_\_\_ MICHAEL JOHNSTON

Inspector Signature: KEVIN CLARK \_\_\_\_\_ AYT



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**DOCKS;PIERS;BULKHEADS;DUNEWLK**

**DOCKS;PIERS;BULKHEADS;DUNEWLK#: ACC-1011**

**10/07/2019**

Parcel Number: 019770000  
 Location: 318 SOUNDVIEW DR – COLINGTON  
 Subdivision: COLINGTON HARBOR SEC M  
 Legal Description: LOT: 9 BLK: SEC: M

Owner Name: MARK A BARKER  
 Owner Mail Address: 318 SOUNDVIEW DR - KILL DEVIL HILLS, NC 27948  
 Owner Contact Information:

Contractor Name: ABLE MARINE CONSTRUCTION LLC  
 Contractor Mail Address: 101 AIRSTRIP RD #390 - KILL DEVIL HILLS, NC 27948  
 Contractor Phone: 252-573-8043  
 Contractor NC License#: NA

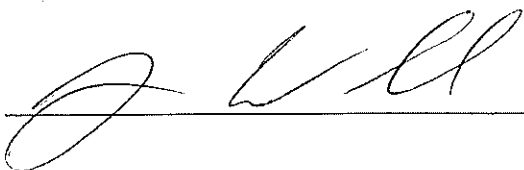
**DETAILS** RESIDENTIAL

CAMA Permit	73633	Cost of Job:	\$8,000
Lot/Ground elevation (ft)		<b>DOCKS;PIERS;BULKHEADS; DUNEWLK FEE:</b>	<b>\$250.00</b>

**Comments:**

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Applicant Signature:  ABLE MARINE CONSTRUCTION LLC

Inspector Signature: KEVIN CLARK AYT



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**DOCKS;PIERS;BULKHEADS;DUNEWLK**

**DOCKS;PIERS;BULKHEADS;DUNEWLK#: ACC-1009**

**10/07/2019**

Parcel Number: 020898000  
 Location: 101 SIR JOHN WHITE CT – COLINGTON  
 Subdivision: COLINGTON HARBOR SEC Z  
 Legal Description: LOT: 73 BLK: SEC: Z

Owner Name: KENDRA P RYAN  
 Owner Mail Address: 101 SIR JOHN WHITE CT - KILL DEVIL HILLS, NC 27948  
 Owner Contact Information:

Contractor Name: ABLE MARINE CONSTRUCTION LLC  
 Contractor Mail Address: 101 AIRSTRIP RD #390 - KILL DEVIL HILLS, NC 27948  
 Contractor Phone: 252-573-8043  
 Contractor NC License#: NA

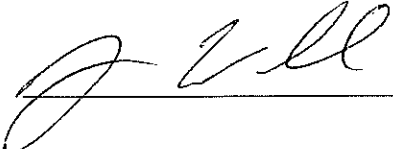
**DETAILS** RESIDENTIAL

CAMA Permit	73804	Cost of Job:	\$
Lot/Ground elevation (ft)		<b>DOCKS;PIERS;BULKHEADS; DUNEWLK FEE:</b>	<b>\$250.00</b>

**Comments:**

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Applicant Signature:  ABLE MARINE CONSTRUCTION LLC

Inspector Signature: KEVIN CLARK AYT



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REPAIR

REPAIR#: REPAIR-962

10/01/2019

Parcel Number: 018798000  
Location: 177 WILLIAMS DR – COLINGTON  
Subdivision: WILLIAMS COLINGTON ESTATE  
Legal Description: LOT: 8 BLK: SEC:

Owner Name: TERRI READLING  
Owner Mail Address: 177 WILLIAMS DRIVE - KILL DEVIL HILLS, NC 27948  
Owner Contact Information: 252-564-5060

Contractor Name: SHOREFIRE  
Contractor Mail Address: 2705 B N CROATAN HWY - KILL DEVIL HILLS, NC 27948  
Contractor Phone: 252-202-5591  
Contractor NC License#: 22748

DETAILS RESIDENTIAL

Cost of Job: \$1,640

REPAIR FEE: \$150.00

Comments:

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

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Applicant Signature: *Andy Douds* SHOREFIRE

Inspector Signature: KEVIN CLARK AYT





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**REMODEL RES OR COM**

**REMODEL RES OR COM#: REMD-978**

**10/02/2019**

Parcel Number: 009151000  
 Location: 111 ST CLAIR RD – KILL DEVIL HILLS  
 Subdivision: BAUM BAY HARBOR SECS 1-4  
 Legal Description: LOT: 6 BLK: SEC: 2

Owner Name: JOHNNIE W III TTEE NOLAND  
 Owner Mail Address: 16410 LOCUST HILL DR - ROCKVILLE, VA 23146  
 Owner Contact Information:

Contractor Name: PREMIERE COASTAL CONTRACTING LLC  
 Contractor Mail Address: PO BOX 2359 - MANTEO, NC 27954  
 Contractor Phone: 2523058067  
 Contractor NC License#: 78086

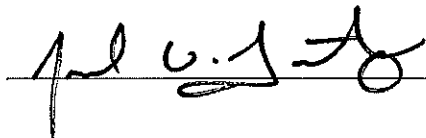
**DETAILS RESIDENTIAL**

CAMA Permit	Cost of Job:	\$9,400
Septic Permit	<b>REMODEL RES OR COM FEE:</b>	<b>\$150.00</b>

**Comments:**

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Applicant Signature:  PREMIERE COASTAL CONTRACTING LLC

Inspector Signature: KEVIN CLARK AYT



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MISC ACCESSORY

MISC ACCESSORY#: ACC-963

10/01/2019

Parcel Number: 029302000  
Location: 6035 CURRITUCK RD – MARTIN'S POINT  
Subdivision: MARTIN'S POINT SECTION 2  
Legal Description: LOT: 1 BLK: 2 SEC: 2

Owner Name: JEFFREY D JACOBSON  
Owner Mail Address: 6035 CURRITUCK RD - KITTY HAWK, NC 27949  
Owner Contact Information:

Contractor Name: HAROLD DAVIS JR  
Contractor Mail Address: 1403 N RESEARCH WAY BLDG J - OREM, UT 84097  
Contractor Phone: 385-482-0045  
Contractor NC License#: 14977

DETAILS RESIDENTIAL

Cost of Job: \$50,000

CAMA Permit

Lot/Ground elevation (ft)

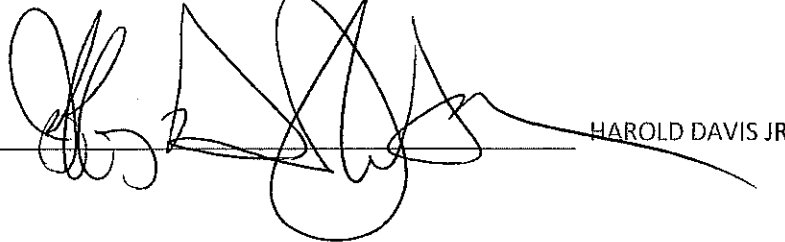
MISC ACCESSORY FEE: \$150.00

Comments: SOLAR PANELS ON ROOF

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Applicant Signature:

  
HAROLD DAVIS JR

Inspector Signature:

KEVIN CLARK AYT



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**ELECTRICAL PERMIT**

**ELECTRICAL PERMIT#: ELEC-996**

**10/03/2019**

Parcel Number: 029577000  
Location: GREENWOOD PL – AVON  
Subdivision: KINNAKEET SHORES PHASE 1  
Legal Description: LOT: 70 BLK: SEC:

Owner Name: WILLIAM Z HASKELL  
Owner Mail Address: 4104 OVERLOOK CT - DUNKIRK, MD 20754  
Owner Contact Information:

Contractor Name: COMBS ELECTRIC  
Contractor Mail Address: 360 SANDPIPER DR KDH 27948  
Contractor Phone: 3369718055  
Contractor NC License#: L-12940

**DETAILS** RESIDENTIAL

Cost of Job: \$1,500

Amp Increase:  
Service Amps: **ELECTRICAL PERMIT FEE: \$150.00**

**Comments:** INSTALL NEW SERVICE RISER CABLE, METER BASE GROUND SERVICE & INSTALL NEW SERVICE CABLE FROM METER BASE TO INDOOR MAIN PANEL

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Applicant Signature: *William Z Haskell* COMBS ELECTRIC

Inspector Signature: *Wayland Jeanette* AYT



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**ELECTRICAL PERMIT**

**ELECTRICAL PERMIT#: ELEC-1039**

**10/08/2019**

Parcel Number: 028543000  
 Location: 25217 WIMBLE SHORES NORTH – WAVES  
 Subdivision: WIMBLE SHORES NORTH  
 Legal Description: LOT: 32 BLK: SEC:

Owner Name: CYNTHIA A BOYDSTON  
 Owner Mail Address: PO BOX 617 - RODANTHE, NC 27968  
 Owner Contact Information:

Contractor Name: BEAR ROCK ELECTRIC INC  
 Contractor Mail Address: PO BOX 1604 - KITTY HAWK, NC 27949  
 Contractor Phone: 8886889927  
 Contractor NC License#: U-30667

**DETAILS** RESIDENTIAL

Cost of Job: \$8,926

Amp Increase:  
 Service Amps: **ELECTRICAL PERMIT FEE: \$150.00**

**Comments:** INSTALL GENERAC 22KW AIR-COOLED STANDBY GENERATOR

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

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Applicant Signature: *Kevin Clark* BEAR ROCK ELECTRIC INC

Inspector Signature: KEVIN CLARK AYT



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**DOCKS;PIERS;BULKHEADS;DUNEWLK**

**DOCKS;PIERS;BULKHEADS;DUNEWLK#: ACC-1030**

**10/08/2019**

Parcel Number: 020315000  
 Location: 109 ROANOKE DR – COLINGTON  
 Subdivision: COLINGTON HARBOR SEC R  
 Legal Description: LOT: 4S BLK: SEC: R

Owner Name: CHARLES EVERETTE III TOMLIN  
 Owner Mail Address: 109 ROANOKE DR - KILL DEVIL HILLS, NC 27948  
 Owner Contact Information:

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

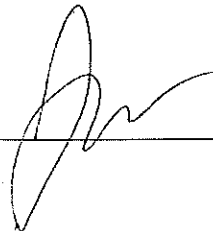
**DETAILS** RESIDENTIAL

CAMA Permit	73843	Cost of Job:	\$14,340
Lot/Ground elevation (ft)		<b>DOCKS;PIERS;BULKHEADS; DUNEWLK FEE:</b>	<b>\$250.00</b>

**Comments:** 50' VINYL BULKHEAD  
 MATERIAL INVOICE , MATERIAL INSPECTION, TYE BACK INSPECTION

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Applicant Signature:  EMANUELSON AND DAD INC

Inspector Signature: KEVIN CLARK AYT



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**MECHANICAL PROJECT**

**MECHANICAL PROJECT#: MECH-1001**

**10/04/2019**

Parcel Number: 020032000  
 Location: 2008 HARBOUR VIEW DR – COLINGTON  
 Subdivision: COLINGTON HARBOR SEC O  
 Legal Description: LOT: C BLK: SEC: O

Owner Name: JAMES H TTEE MORGAN  
 Owner Mail Address: 316 COURT ST - PORTSMOUTH, VA 23704  
 Owner Contact Information:

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

**DETAILS** RESIDENTIAL


UNITS: 1.00 Cost of Job: \$16,260  
 Electrical Contractor ID: 15973-004

**MECHANICAL PROJECT FEE: \$150.00**

**Comments:** replace hvac with 16.70 eer 31/2 ton water furnace geothermal heat pump & air handler

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

Inspector Signature: KEVIN CLARK AYT



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**ELECTRICAL PERMIT**

**ELECTRICAL PERMIT#: ELEC-1040**

**10/08/2019**

Parcel Number: 015483000  
Location: 57783 NC 12 HWY – HATTERAS  
Subdivision: SUBDIVISION - NONE  
Legal Description: LOT: BLK: SEC:

Owner Name: MIDGETT REALTY A/B LLC  
Owner Mail Address: P O BOX 250 - HATTERAS, NC 27943  
Owner Contact Information:

Contractor Name: BEAR ROCK ELECTRIC INC  
Contractor Mail Address: PO BOX 1604 - KITTY HAWK, NC 27949  
Contractor Phone: 8886889927  
Contractor NC License#: U-30667

**DETAILS** COMMERCIAL

Cost of Job: \$9,284

Amp Increase:

**ELECTRICAL PERMIT FEE: \$150.00**

Service Amps:

**Comments: INSTALL GENERAC 22KW AIR COOLED STANBY GENERATOR**

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

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Applicant Signature: \_\_\_\_\_

BEAR ROCK ELECTRIC INC

Inspector Signature: \_\_\_\_\_

KEVIN CLARK

AYT



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**ELECTRICAL PERMIT**

**ELECTRICAL PERMIT#: ELEC-1008**

**10/07/2019**

Parcel Number: 019657000  
 Location: 230 SUNSET DR – COLINGTON  
 Subdivision: COLINGTON HARBOR SEC L  
 Legal Description: LOT: 36 BLK: SEC: L

Owner Name: JOHN A RUEPPEL  
 Owner Mail Address: 6221 WOODLAND RD - LINTHICUM, MD 21090  
 Owner Contact Information:

Contractor Name: **GEORGE**  
 Contractor Mail Address: **532 HARBORVIEW DR**  
 Contractor Phone: **252-473-8552**  
 Contractor NC License#:

**DETAILS RESIDENTIAL**

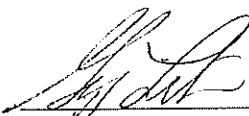
Cost of Job: \$3,500

Amp Increase:  
 Service Amps: **ELECTRICAL PERMIT FEE: \$150.00**

**Comments: REPLACE WEATHER HEAD, METER BASE MAIN PANEL**

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

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

Applicant Signature:  LITWIN, GEORGE

Inspector Signature: KEVIN CLARK AYT





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

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

**MECHANICAL PROJECT**

**MECHANICAL PROJECT#: MECH-1029**

**10/08/2019**

Parcel Number: 023455000  
Location: 172 HOOKER RD – WANCHESE  
Subdivision: SUBDIVISION - NONE  
Legal Description: LOT: BLK: SEC:

Owner Name: LOUIE B REBER  
Owner Mail Address: 209 AIRPORT RD - MANTEO, NC 27954  
Owner Contact Information:

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

**DETAILS**

UNITS: 1.00 Cost of Job: \$6,689  
Electrical Contractor ID: 159763-004

**MECHANICAL PROJECT FEE: \$150.00**

**Comments: REPLACE HVAC WITH 14 SEER 3/12 CARRIER AIR HANDLER & HEAT PUMP**

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

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

Applicant Signature: *Don M. Clark* OBHC INC DBA ONE HOUR HEATING & AIR COND

Inspector Signature: KEVIN CLARK AYT



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**RESIDENTIAL BUILDING PERMIT**

**BUILDING PERMIT#: R-1068**

**10/14/2019**

Parcel Number: 019915000  
 Location: 1160 HARBOUR VIEW DR – COLINGTON  
 Subdivision: COLINGTON HARBOR SEC N  
 Legal Description: LOT: 23 BLK: SEC: N


Owner Name: THOMAS DEARING  
 Owner Mail Address: 1160 HARBOURVIEW DR KILL DEVIL HILLS, NC 27948  
 Owner Phone and email: 757-879-8247

Contractor Name: OWNER  
 Contractor Mail Address: ,  
 Contractor Phone: Contractor NC License#:

**BUILDING INFORMATION**

Proposed Construction Use:	SINGLE FAMILY DWELLING NEW , NEW CONSTRUCTION		
Proposed Construction Type:	SFD	Cost of Construction:	\$230,000
Finished Square Footage:	2058	CAMA Permit#:	2019-21
Unfinished Square Footage:	465	Septic Permit#:	29038
Stories:	0.0	Septic Permit Date:	09/30/2019
Building Height:	0	Survey/Site Plan:	YES
Total Rooms:	4	Water Tap#:	472768
Footing Type:	PILING	Water Type:	
Exterior Finish:	VINYL SIDING	Flood Zone:	AE
Proposed Finished Floor Elevation:	13.7	Base Flood Elevation:	8.0
Bedrooms:	0	Lot/Ground Elevation:	4.7
		Baths/half baths:	2.00/1

<b>Comments:</b> Any deviation from the building plan or site plan requires prior approval.	PERMIT FEE	\$1,729.50
	FLOOD DEVELOPMENT BLDG PERMIT	75.00
	HOME OWNERS RECOVERY FEE	10.00
	RESIDENTIAL ZONING APPROVAL	100.00
	<b>TOTAL FEES:</b>	<b>\$1,914.50</b>

Applicant Signature:  THOMAS DEARING

Inspector Signature: KEVIN CLARK AYT



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**MECHANICAL PROJECT**

**MECHANICAL PROJECT#: MECH-1033**

**10/08/2019**

Parcel Number: 012893000  
Location: 26087 GALLEON DR – SALVO  
Subdivision: HATTERAS COLONY SEC E  
Legal Description: LOT: 63 BLK: SEC: E

Owner Name: CRAIG R MORROW  
Owner Mail Address: 12590 ROCK RIDGE RD - HERNDON, VA 20170  
Owner Contact Information:

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

**DETAILS** RESIDENTIAL

Cost of Job: \$7,544

Electrical Contractor ID:

**MECHANICAL PROJECT FEE: \$150.00**

**Comments: REMOVE AND REPLACE 2T SYSTEM AND UPGRADE STAND**

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

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Applicant Signature:

AIR HANDLERS OBX

Inspector Signature: KEVIN CLARK

AYT



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Frisco: (252) 475-5878

**ELECTRICAL PERMIT**

**ELECTRICAL PERMIT#: ELEC-1038**

**10/08/2019**

Parcel Number: 017243000  
Location: TOWER CIRCLE RD – BUXTON  
Subdivision: TOWER BEACH SUBD BLK 3  
Legal Description: LOT: 2 BLK: 3 SEC:

Owner Name: OLIN E FINCH  
Owner Mail Address: 116 SANDY RIDGE RD - KITTY HAWK, NC 27949  
Owner Contact Information:

Contractor Name: DAVCO ELECTRIC  
Contractor Mail Address: 406 W LAKE DR - KILL DEVIL HILLS, NC 27948  
Contractor Phone: 2524414106  
Contractor NC License#: NA

**DETAILS** RESIDENTIAL

Cost of Job: \$600


Amp Increase:  
Service Amps:

**ELECTRICAL PERMIT FEE: \$150.00**

**Comments:** REPLACING 200A METER BASE

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

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Applicant Signature:  DAVCO ELECTRIC

Inspector Signature: KEVIN CLARK AYT



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**DOCKS;PIERS;BULKHEADS;DUNEWLK**

**DOCKS;PIERS;BULKHEADS;DUNEWLK#: ACC-1082**

**10/16/2019**

Parcel Number: 019775000  
Location: 328 SOUNDVIEW DR – COLINGTON  
Subdivision: COLINGTON HARBOR SEC M  
Legal Description: LOT: 14 BLK: SEC: M

Owner Name: MARK THOMAS  
Owner Mail Address: 115 BASS ST - MOYOCK, NC 27958  
Owner Contact Information:

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

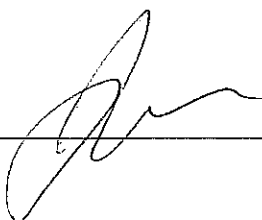
**DETAILS** RESIDENTIAL

CAMA Permit	73871	Cost of Job:	\$14,300
Lot/Ground elevation (ft)		<b>DOCKS;PIERS;BULKHEADS; DUNEWLK FEE:</b>	<b>\$250.00</b>

**Comments:** MATERIAL INVOICE, MATERIAL INSPECTION, TYE BACK, FINAL

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Applicant Signature:  EMANUELSON AND DAD INC

Inspector Signature: KEVIN CLARK AYT



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**REMODEL RES OR COM**

**REMODEL RES OR COM#: REMD-1085**

**10/16/2019**

Parcel Number: 019254000  
 Location: 216 SOUNDVIEW DR – COLINGTON  
 Subdivision: COLINGTON HARBOR SEC E  
 Legal Description: LOT: 80 BLK: SEC: E

Owner Name: MARK R DUNCAN  
 Owner Mail Address: 10711 JORDANS DR - LAUREL, MD 20723  
 Owner Contact Information:

Contractor Name: MARK DUNCAN  
 Contractor Mail Address: 216 SOUNDVIEW DR - KDH, NC 27949  
 Contractor Phone: 443-535-7304  
 Contractor NC License#: NA

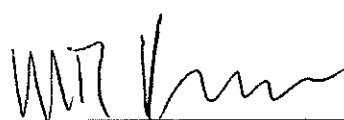
**DETAILS**

CAMA Permit	Cost of Job:	\$6,000
Septic Permit	<b>REMODEL RES OR COM FEE:</b>	<b>\$150.00</b>

**Comments:**

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Applicant Signature:  MARK R DUNCAN

Inspector Signature: KEVIN CLARK AYT



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RESIDENTIAL BUILDING PERMIT

BUILDING PERMIT#: REMD-1075

10/15/2019

Parcel Number: 018788120  
 Location: 120 JIMMY CT – COLINGTON  
 Subdivision: BAY CLIFF  
 Legal Description: LOT: 120 BLK: SEC:

Owner Name: EMILY BOYD HOLMES  
 Owner Mail Address: 120 JIMMY CT KILL DEVIL HILLS, NC 27948  
 Owner Phone and email:

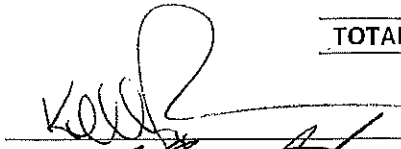

Contractor Name: PIDDINGTON CONSTRUCTION  
 Contractor Mail Address: 2 GINGUITE TRL, KITTY HAWK, NC 27949  
 Contractor Phone: 2522552300 Contractor NC License#: 52198

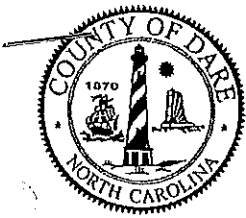
BUILDING INFORMATION

Proposed Construction Use:	REMODEL RES OR COM , Remodel bathroom: install new plumbing, add 8 can lights downstairs and a wet bar		
Proposed Construction Type:		Cost of Construction:	\$12,000
Finished Square Footage:	0	CAMA Permit#:	
Unfinished Square Footage:	0	Septic Permit#:	
Stories:	0	Septic Permit Date:	
Building Height:	0	Survey/Site Plan:	
Total Rooms:	0	Water Tap#:	
Footing Type:		Water Type:	
Exterior Finish:		Flood Zone:	AE
Proposed Finished Floor Elevation:		Base Flood Elevation:	0.0
Bedrooms:	0	Lot/Ground Elevation:	
		Baths/half baths:	0/0

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

**TOTAL FEES: \$150.00**

Applicant Signature:  PIDDINGTON CONSTRUCTION  
 Inspector Signature:  NHG



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**ELECTRICAL PERMIT**

**ELECTRICAL PERMIT#: ELEC-1077**

**10/15/2019**

Parcel Number: 019437000  
 Location: 213 KITTY HAWK BAY DR – COLINGTON  
 Subdivision: COLINGTON HARBOR SEC G  
 Legal Description: LOT: 184 BLK: SEC: G

Owner Name: ROBERT M SERIDO  
 Owner Mail Address: 213 KITTY HAWK BAY DR - KILL DEVIL HILLS, NC 27948  
 Owner Contact Information:

Contractor Name:  
 Contractor Mail Address: -  
 Contractor Phone: NA  
 Contractor NC License#: NA

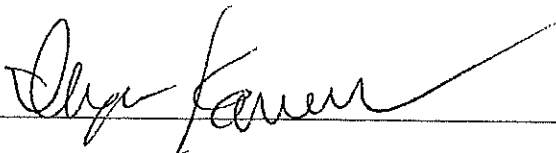
**DETAILS**

Amp Increase:	200	Cost of Job:	\$5,049
Service Amps:	200	<b>ELECTRICAL PERMIT FEE:</b>	<b>\$150.00</b>

Comments:

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Applicant Signature:  RVA Electrical Services

Inspector Signature: \_\_\_\_\_ NHG





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Frisco: (252) 475-5878

**PLUMBING PROJECT**

**PLUMBING PROJECT#: PLMB-1079**

**10/16/2019**

Parcel Number: 029240000  
Location: 1040 MARTINS POINT RD – MARTIN'S POINT  
Subdivision: MARTIN'S POINT SECTION 1  
Legal Description: LOT: 10 BLK: 1 SEC: 1

Owner Name: JERALD E HUNTSINGER  
Owner Mail Address: 149 NORTH QUARTER - WILLIAMSBURG, VA 23185  
Owner Contact Information:

Contractor Name: ABSOLUTE PLUMBING INC  
Contractor Mail Address: 8295 CARATOKE HWY - POWELS POINT, NC 27966  
Contractor Phone: 252-489-1439  
Contractor NC License#: 30190

**DETAILS** RESIDENTIAL

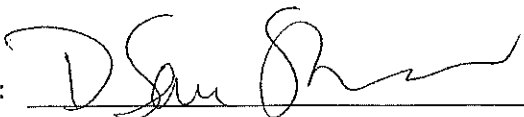
Cost of Job: \$5,400

**PLUMBING PROJECT FEE: \$150.00**

**Comments:** REPLACEMENT OF 300' OF WATER SERVICE FROM STREET TO GARAGE

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

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Applicant Signature:  ABSOLUTE PLUMBING INC

Inspector Signature: KEVIN CLARK AYT



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REPAIR

REPAIR#: REPAIR-1117

10/22/2019

Parcel Number: 020403000  
Location: 471 HARBOUR VIEW DR – COLINGTON  
Subdivision: COLINGTON HARBOR SEC S  
Legal Description: LOT: 1 BLK: SEC: S

Owner Name: ERNEST R III ZIKES  
Owner Mail Address: 13100 JAMES RIVER DR - N PRINCE GEORGE, VA 23860  
Owner Contact Information:

Contractor Name: GARY FRAZIER  
Contractor Mail Address: 505 HARBOUR VIEW  
Contractor Phone: 252-207-2342  
Contractor NC License#: NA

DETAILS RESIDENTIAL

Cost of Job: \$12,000

REPAIR FEE: \$150.00

Comments:

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

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Applicant Signature:  GARY FRAZIER

Inspector Signature: KEVIN CLARK AYT

Application Reference # 917 on 10/16/2019



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RESIDENTIAL BUILDING PERMIT

BUILDING PERMIT#: REMD-1118

10/23/2019

Parcel Number: 020167000  
 Location: 105 ROANOKE DR – COLINGTON  
 Subdivision: COLINGTON HARBOR SEC Q  
 Legal Description: LOT: 1&2 BLK: SEC: Q

Owner Name: BASA LLC  
 Owner Mail Address: 3717 BENSON DR RALEIGH, NC 27609  
 Owner Phone and email:

Contractor Name: WILLIAM ALEXANDER  
 Contractor Mail Address: 3717 BENSON DR RALIEGH  
 Contractor Phone: Contractor NC License#:

BUILDING INFORMATION

Proposed Construction Use:	REMODEL RES OR COM , REMODEL . REPAIR	Cost of Construction:	\$40,000
Proposed Construction Type:	SFD	CAMA Permit#:	2019-22
Finished Square Footage:	0	Septic Permit#:	29054
Unfinished Square Footage:	0	Septic Permit Date:	10/04/2019
Stories:	0.0	Survey/Site Plan:	
Building Height:	0	Water Tap#:	
Total Rooms:	0	Water Type:	
Footing Type:		Flood Zone:	AE
Exterior Finish:		Base Flood Elevation:	8.0
Proposed Finished Floor Elevation:		Lot/Ground Elevation:	
Bedrooms:	0	Baths/half baths:	0.00/0

Comments: Any deviation from the building plan or site plan requires prior approval. PERMIT FEE \$400.00

**TOTAL FEES: \$400.00**

Applicant Signature: Shelia A. Alexander BASA LLC

Inspector Signature: KEVIN CLARK AYT



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**MECHANICAL PROJECT**

**MECHANICAL PROJECT#: MECH-1090**

**10/16/2019**

Parcel Number: 024410002  
 Location: 125 FORT HUGAR WAY – MANTEO  
 Subdivision: HERITAGE POINT PHASE 2  
 Legal Description: LOT: 44 BLK: SEC:

Owner Name: JOSEPH CORBACHO  
 Owner Mail Address: 125 FORT HUGAR WAY - MANTEO, NC 27954  
 Owner Contact Information:

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

**DETAILS** RESIDENTIAL

UNITS: 1.00 Cost of Job: \$23,499

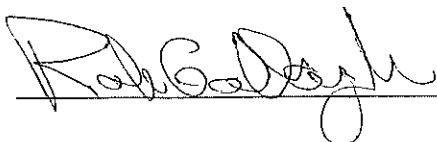
Electrical Contractor ID:

**MECHANICAL PROJECT FEE: \$150.00**

**Comments:** CHANGE OUT 4 TON & 2 TON 18 SEER TRANE SYSTEM GROUND WEST & GROUN EAST WITH (2) T CONT850 THERMOSTATS

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

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Applicant Signature:  R A HOY HEATING AND AIR CONDITIONING INC

Inspector Signature: KEVIN CLARK AYT



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**ELECTRICAL PERMIT**

**ELECTRICAL PERMIT#: ELEC-1095**

**10/18/2019**

Parcel Number: 029306035  
 Location: 7052 CURRITUCK RD – MARTIN'S POINT  
 Subdivision: MARTIN'S POINT SECTION 2  
 Legal Description: LOT: 35 BLK: 1 SEC: 2

Owner Name: FAMILY REUNION LLC  
 Owner Mail Address: 7037 SE HARBOR CIR - STUART, FL 34996  
 Owner Contact Information:

Contractor Name: SEACOAST ELECTRIC  
 Contractor Mail Address: 4400 RIDGE RD - KITTY HAWK, NC 27949  
 Contractor Phone: 2522616229  
 Contractor NC License#: I-07781

**DETAILS** RESIDENTIAL

Cost of Job: \$1,000

Amp Increase:  
 Service Amps: **ELECTRICAL PERMIT FEE: \$150.00**

**Comments: INSTALL CIRCUIT FOR HOT TUB TO BACK DECK AND MAKE CONNECTION TO HOT TUB**

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

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Applicant Signature: James J. Boyle SEACOAST ELECTRIC

Inspector Signature: Kevin Clark AYT

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**MECHANICAL PROJECT**

**MECHANICAL PROJECT#: MECH-1096**

**10/18/2019**

Parcel Number: 024906000  
Location: 49 CHIEF WANCHESE RD – WANCHESE  
Subdivision: LARRY & ALTON TILLET DIVISION  
Legal Description: LOT: 2 BLK: SEC:

Owner Name: KENNETH CHARLES WELLS  
Owner Mail Address: 49 CHIEF WANCHESE RD - WANCHESE, NC 27981  
Owner Contact Information:

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

**DETAILS** RESIDENTIAL

UNITS: 1.00 Cost of Job: \$4,157  
Electrical Contractor ID:

**MECHANICAL PROJECT FEE: \$150.00**

**Comments:** REPLACE HEAT PUMP (OUTDOOR ONLY) WITH 14 SEER 3 TON DAIKIN HEAT PUMP

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

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

Applicant Signature: Paul McDonald OBHC INC DBA ONE HOUR HEATING & AIR COND

Inspector Signature: KEVIN CLARK AYT



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

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

**REMODEL RES OR COM**

**REMODEL RES OR COM#: REMD-1154**

**10/30/2019**

Parcel Number: 020508000  
 Location: 809 HARBOUR VIEW DR – COLINGTON  
 Subdivision: COLINGTON HARBOR SEC T  
 Legal Description: LOT: 23 BLK: SEC: T

Owner Name: LARRY C COLUMBO  
 Owner Mail Address: 2220 WESTWOOD PINE DR - MOSELEY, VA 23120  
 Owner Contact Information:

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

**DETAILS** RESIDENTIAL

Cost of Job: \$12,340

CAMA Permit

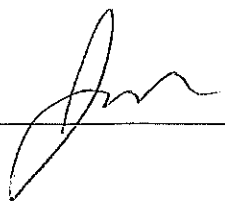
Septic Permit 29080

**REMODEL RES OR COM FEE: \$150.00**

**Comments:**

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Applicant Signature:  EMANUELSON AND DAD INC

Inspector Signature: KEVIN CLARK AYT



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Frisco: (252) 475-5878

**ELECTRICAL PERMIT**

**ELECTRICAL PERMIT#: ELEC-1114**

**10/22/2019**

Parcel Number: 026714000  
Location: 1708 HARBOUR VIEW DR – COLINGTON  
Subdivision: COLINGTON HARBOR SEC O  
Legal Description: LOT: 102 BLK: SEC: O

Owner Name: DANIEL E DEITRICK  
Owner Mail Address: 5263 SADBERRY LN - WOODBRIDGE, VA 22193  
Owner Contact Information:

Contractor Name: GAULT ELECTRIC LLC  
Contractor Mail Address: STE 200 - 11840 CANON BLVD - NEWPORT NEWS, VA 23606  
Contractor Phone: 7579300587  
Contractor NC License#: U-29762

**DETAILS** RESIDENTIAL

Cost of Job: \$3,120

Amp Increase:

Service Amps:

**ELECTRICAL PERMIT FEE: \$150.00**

**Comments:**

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Applicant Signature:

GAULT ELECTRIC LLC

Inspector Signature:

ALD





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

**RESIDENTIAL BUILDING PERMIT**

**BUILDING PERMIT#: ACC-1126**

**10/24/2019**

Parcel Number: 019243000  
 Location: 102 SOUNDVIEW DR – COLINGTON  
 Subdivision: COLINGTON HARBOR SEC E  
 Legal Description: LOT: 69 BLK: SEC: E

Owner Name: PETER C TUREK  
 Owner Mail Address: 102 SOUNDVIEW DR KILL DEVIL HILLS, NC 27948  
 Owner Phone and email:

Contractor Name:  
 Contractor Mail Address:  
 Contractor Phone: Contractor NC License#:

**BUILDING INFORMATION**

Proposed Construction Use:	MISC ACCESSORY , WHEELCHAIR RAMP	Cost of Construction:	\$3,500
Proposed Construction Type:		CAMA Permit#:	
Finished Square Footage:	0	Septic Permit#:	
Unfinished Square Footage:	0	Septic Permit Date:	
Stories:	0	Survey/Site Plan:	
Building Height:	0	Water Tap#:	
Total Rooms:	0	Water Type:	
Footing Type:		Flood Zone:	
Exterior Finish:		Base Flood Elevation:	0.0
Proposed Finished Floor Elevation:		Lot/Ground Elevation:	
Bedrooms:	0	Baths/half baths:	0/0

Comments: Any deviation from the building plan or site plan requires prior approval. **PERMIT FEE \$150.00**  
 ADDING WHEELCHAIR ACCESS RAMP ADDING HANDICAP ACCESSIBLE TUB

**TOTAL FEES: \$150.00**

Applicant Signature: Peter C Turek PETER C TUREK

Inspector Signature: ALD ALD



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Frisco: (252) 475-5878

**GAS INSTALLATION PERMIT**

**GAS INSTALLATION PERMIT#: GAS-1132**

**10/25/2019**

Parcel Number: 026714000  
Location: 1708 HARBOUR VIEW DR – COLINGTON  
Subdivision: COLINGTON HARBOR SEC O  
Legal Description: LOT: 102 BLK: SEC: O

Owner Name: DANIEL E DEITRICK  
Owner Mail Address: 5263 SADBERRY LN - WOODBRIDGE, VA 22193  
Owner Contact Information:

Contractor Name:  
Contractor Mail Address: -  
Contractor Phone: NA  
Contractor NC License#: NA

DETAILS RESIDENTIAL

Cost of Job: \$1,900

**GAS INSTALLATION  
PERMIT FEE: \$150.00**

**Comments: RUNNING GAS LINE FOR GENERATOR**

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

Applicant Signature: *Reed Oil Company* REED OIL COMPANY

Inspector Signature: KEVIN CLARK AYT

Application Reference # 960 on 10/25/2019



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

**MECHANICAL PROJECT**

**MECHANICAL PROJECT#: MECH-1137**

**10/28/2019**

Parcel Number: 019129001  
 Location: 104 LANCER CT – COLINGTON  
 Subdivision: COLINGTON HARBOR SEC D  
 Legal Description: LOT: 83 BLK: SEC: D

Owner Name: KRISTOPHER J SIEGEL  
 Owner Mail Address: 104 LANCER CT - KILL DEVIL HILLS, NC 27948  
 Owner Contact Information:

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

**DETAILS** RESIDENTIAL

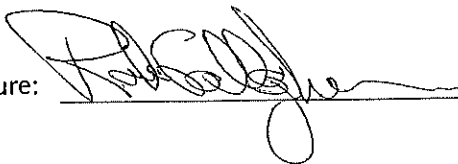
UNITS: 1.00 Cost of Job: \$6,640  
 Electrical Contractor ID: 22222L

**MECHANICAL PROJECT FEE: \$150.00**

**Comments:** CHANGE OUT 2 TON 16 SEER TRANE SYSTEM WHOLE HOUSE WITH XL724 THERMOSTAT

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Applicant Signature:  R A HOY HEATING AND AIR CONDITIONING INC

Inspector Signature: KEVIN CLARK AYT



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**DOCKS;PIERS;BULKHEADS;DUNEWLK**

**DOCKS;PIERS;BULKHEADS;DUNEWLK#: ACC-1156**

**10/30/2019**

Parcel Number: 019434000  
 Location: 221 KITTY HAWK BAY DR – COLINGTON  
 Subdivision: COLINGTON HARBOR SEC G  
 Legal Description: LOT: 180 BLK: SEC: G

Owner Name: BRADLEY P BUTTERWORTH  
 Owner Mail Address: PO BOX 1371 - HOPEWELL, VA 23860  
 Owner Contact Information:

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

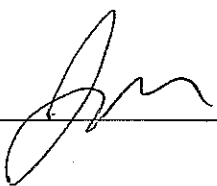
**DETAILS RESIDENTIAL**

CAMA Permit	75643	Cost of Job:	\$5,840
Lot/Ground elevation (ft)		<b>DOCKS;PIERS;BULKHEADS; DUNEWLK FEE:</b>	<b>\$250.00</b>

**Comments: INSTALL 25' GROIN (BREAKWATER)**

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Applicant Signature:  EMANUELSON AND DAD INC

Inspector Signature:  AYT



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### RESIDENTIAL BUILDING PERMIT DATA

**BUILDING PERMIT#: 1048**

**Permit Date: 2019-10-09**

Parcel Number: **031116005**  
 PIN Number: 988013036011  
 Location: 129 PERCY CT MANTEO NC  
 Subdivision Name: ISLAND WOODS  
 Legal Description: LOT: 7 BLK: SEC:

Owner: ISLAND WOODS LLC  
 Owner Address: P O BOX 90 KILL DEVIL HILLS NC 27948  
 Owner Phone: N/A

#### CONTRACTOR

Builder Name: SAGA CONSTRUCTION INC  
 Builder Address: PO BOX 90 KILL DEVIL HILLS NC 27948  
 Builder Phone:  
 NC License #: License Type:

#### BUILDING INFORMATION

Proposed Construction Type:	SFDN - SINGLE FAMILY DWELLING NEW		
Proposed Construction Use:	NEW CONSTRUCTION		
Cost of Construction:	\$100,000	Number of Stories:	1.0
Heated Living Space:	1332	Number of habitable rooms:	7
Non Living Space:	239	Number of Bedrooms:	3
Foundation/Footing Type:	PILI	Number of Full Bathrooms:	2.00
Exterior Walls:	LAP	Number of Half Bathrooms:	0
Base Fld Elev	7.0	Flood Zone:	
CAMA Permit	NA		
Water Tap	52952		
Survey/Site Plan	YES		
Height (ft)	18'00"		
Lot/Ground elevation (ft)	5.5		
Proposed floor elevation (ft)	9.5		
Parking (zoning)	2 impervious 1 pervious		

FLOOD WITH BLDG PERMIT FEE	75.00
HOME OWNERS RECOVERY FEE	10.00
HEATED/FINISHED SQFT RES	999.00
RESIDENTIAL ZONE APPROVAL FEE	100.00
UNHEATED/UNFINISHED SQFT RES	96.00
<b>TOTAL FEES:</b>	<b>\$1280.00</b>

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(252)475-5878**

**RESIDENTIAL BUILDING PERMIT DATA**

**BUILDING PERMIT#: 1005**

**Permit Date: 2019-10-04**

Parcel Number: **023663000**  
 PIN Number: 979711772108  
 Location: 202 BROTHERS LN WANCHESE NC  
 Subdivision Name: SUBDIVISION - NONE  
 Legal Description: LOT: BLK: SEC:

Owner: JAMIE DUANE ROLLINSON  
 Owner Address: P O BOX 765 WANCHESE NC 27981  
 Owner Phone: N/A

**CONTRACTOR**

Builder Name: TO THE T CONSTRUCTION  
 Builder Address: 209 GREENS DR MANTEO NC 27954  
 Builder Phone: 252-216-8991  
 NC License #: 63750 License Type: LIMITED

**BUILDING INFORMATION**

Proposed Construction Type: SFDN - SINGLE FAMILY DWELLING NEW  
 Proposed Construction Use: construct 2200 sqft house

Cost of Construction:	\$340,000	Number of Stories:	2.0
Heated Living Space:	2253	Number of habitable rooms:	7
Non Living Space:	718	Number of Bedrooms:	4
Foundation/Footing Type:	PILI	Number of Full Bathrooms:	3.00
Exterior Walls:	LAP	Number of Half Bathrooms:	1
Base Fld Elev	8.0	Flood Zone:	
CAMA Permit	NA		
Septic Permit	28866		
Septic Permit Date	7/10/2019		
Survey/Site Plan	YES		
Height (ft)	38'		
Lot/Ground elevation (ft)	4.4		
Proposed floor elevation (ft)	13.4		
Parking (zoning)	2 pervious 2 impervious		

FLOOD WITH BLDG PERMIT FEE	75.00
HOME OWNERS RECOVERY FEE	10.00
HEATED/FINISHED SQFT RES	1690.00
RESIDENTIAL ZONE APPROVAL FEE	100.00
UNHEATED/UNFINISHED SQFT RES	287.00
<b>TOTAL FEES:</b>	<b>\$2162.00</b>

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### RESIDENTIAL BUILDING PERMIT DATA

**BUILDING PERMIT#: 1051**

**Permit Date: 2019-10-09**

Parcel Number: **031116004**  
 PIN Number: 988013037054  
 Location: 125 PERCY CT MANTEO NC  
 Subdivision Name: ISLAND WOODS  
 Legal Description: LOT: 6 BLK: SEC:

Owner: ISLAND WOODS LLC  
 Owner Address: P O BOX 90 KILL DEVIL HILLS NC 27948  
 Owner Phone: N/A

#### CONTRACTOR

Builder Name: SAGA CONSTRUCTION INC  
 Builder Address: PO BOX 90 KILL DEVIL HILLS NC 27948  
 Builder Phone:  
 NC License #: License Type:

#### BUILDING INFORMATION

Proposed Construction Type:	SFDN - SINGLE FAMILY DWELLING NEW		
Proposed Construction Use:	NEW CONSTRUCTION		
Cost of Construction:	\$100,000	Number of Stories:	1.0
Heated Living Space:	1321	Number of habitable rooms:	6
Non Living Space:	391	Number of Bedrooms:	3
Foundation/Footing Type:	PILI	Number of Full Bathrooms:	2.00
Exterior Walls:	LAP	Number of Half Bathrooms:	0
Base Fld Elev	7.0	Flood Zone:	
CAMA Permit	NA		
Water Tap	52951		
Survey/Site Plan	YES		
Height (ft)	18'00"		
Lot/Ground elevation (ft)	5.5		
Proposed floor elevation (ft)	9.5		
Parking (zoning)	2 impervious 1 pervious		

FLOOD WITH BLDG PERMIT FEE	75.00
HOME OWNERS RECOVERY FEE	10.00
HEATED/FINISHED SQFT RES	991.00
RESIDENTIAL ZONE APPROVAL FEE	100.00
UNHEATED/UNFINISHED SQFT RES	156.00
<b>TOTAL FEES:</b>	<b>\$1332.00</b>

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**RESIDENTIAL BUILDING PERMIT DATA**

**BUILDING PERMIT#: 1092**

**Permit Date: 2019-10-17**

Parcel Number: **016267000**  
 PIN Number: 987007697994  
 Location: 149 BRAKEWOOD RD MANTEO NC  
 Subdivision Name: BRAKEWOOD  
 Legal Description: LOT: 11 BLK: SEC: 1

Owner: DAVID A STUPKA  
 Owner Address: P O BOX 73 POLAND NY 13431  
 Owner Phone: N/A

**CONTRACTOR**

Builder Name: ACS OBX LLC  
 Builder Address: 405 WEST BRIDGE LANE NAGS HEAD NC 27959  
 Builder Phone: 252-441-3176  
 NC License #: 80229 License Type:

**BUILDING INFORMATION**

Proposed Construction Type:	SFDN - SINGLE FAMILY DWELLING NEW		
Proposed Construction Use:	Build new single family dwelling		
Cost of Construction:	\$360,000	Number of Stories:	2.0
Heated Living Space:	2395	Number of habitable rooms:	8
Non Living Space:	1000	Number of Bedrooms:	3
Foundation/Footing Type:	PILI	Number of Full Bathrooms:	2.00
Exterior Walls:	LAP	Number of Half Bathrooms:	1
Base Fld Elev	.0	Flood Zone:	
CAMA Permit	NA		
Septic Permit	29075		
Septic Permit Date	10/15/2019		
Survey/Site Plan	YES		
Height (ft)	28		
Lot/Ground elevation (ft)	13		
Proposed floor elevation (ft)	15		
Parking (zoning)	2 Impervious 1 pervious		

HOME OWNERS RECOVERY FEE	10.00
HEATED/FINISHED SQFT RES	1796.00
RESIDENTIAL ZONE APPROVAL FEE	100.00
UNHEATED/UNFINISHED SQFT RES	400.00
<b>TOTAL FEES:</b>	<b>\$2306.00</b>

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### RESIDENTIAL BUILDING PERMIT DATA

**BUILDING PERMIT#: 1169**

**Permit Date: 2019-10-31**

Parcel Number: **016164000**  
 PIN Number: 987119526196  
 Location: 121 ALGONKIAN DR MANTEO NC  
 Subdivision Name: BECKONRIDGE ESTATES  
 Legal Description: LOT: 22 BLK: SEC:

Owner: WILLIE MCCOY III LONG  
 Owner Address: 103 BAYVIEW DR AYDLETT NC 27916  
 Owner Phone: N/A

#### CONTRACTOR

Builder Name: WILLIE MCCOY LONG III  
 Builder Address: 100-A AMHERST DR POWELS POINT NC 27966  
 Builder Phone: 252-207-4990  
 NC License #: License Type:

#### BUILDING INFORMATION

Proposed Construction Type:	SFDN - SINGLE FAMILY DWELLING NEW		
Proposed Construction Use:	NEW CONSTRUCTION		
Cost of Construction:	\$308,000	Number of Stories:	2.0
Heated Living Space:	1812	Number of habitable rooms:	8
Non Living Space:	1597	Number of Bedrooms:	3
Foundation/Footing Type:	COMB	Number of Full Bathrooms:	2.00
Exterior Walls:	LAP	Number of Half Bathrooms:	0
Base Fld Elev	.0	Flood Zone:	X
Septic Permit	29109		
Septic Permit Date	10/24/2019		
Water Tap	52954		
Parking (zoning)	2 impervious		

**Comments:** As- Built survey required before CO

FLOOD WITH BLDG PERMIT FEE	75.00
HOME OWNERS RECOVERY FEE	10.00
HEATED/FINISHED SQFT RES	1359.00
RESIDENTIAL ZONE APPROVAL FEE	100.00
UNHEATED/UNFINISHED SQFT RES	639.00
<b>TOTAL FEES:</b>	<b>\$2183.00</b>

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Applicant Signature: WILLIE MCCOY LONG III



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**MOBILE HOME PERMIT DATA**

**PERMIT#: 964**

**Permit Date: 2019-10-01**

Parcel Number: **025596001**  
 PIN Number: 978906491991  
 Location: 700 A FERNANDO ST MANTEO  
 Legal Description: LOT: 1 BLK: SEC:

**OWNER/MOVER/INSTALLER INFORMATION**

CONTRACTOR	CLAYTON HOMES INC	1560 NORTH ROAD ST ELIZABETH CITY NC 27909	252-335-1070
MOBILE HOME INSTALLER	D & D Movers	7838 17 N Hwy Washington NC 27889	252-944-6422
OWNER	LYDIA M PETERSON	ROBERT E PETERSON	P O BOX 1279 MANTEO NC 27954

**DETAILS**

**Proposed Construction Use:** MOBILE HOME - Install New Mobile Home

Cost of Construction:	\$167,000	Flood Zone:	
Heated Living Space:	2432	Base fld Elev	8.0
Non Living Space:	0		
Foundation/Footing Type:	CONC		
CAMA Permit	na		
Septic Permit	28667		
Septic Permit Date	04/23/2019		
Make	CMH		
Model	Fisher King		
Year	2019		
Serial #	OHC028832NCAB		
HUD #	NTA1898767, NTA1898768		
Hurricane Built	3		
Width in Feet	32		
Length in Feet	72		
Lot/Ground elevation (ft)	4.3		
Proposed floor elevation (ft)	10.5		
Mobile Home Park:	no		
Parking (zoning)	2 impervious 2 pervious		

FLOOD WITH BLDG PERMIT FEE	75.00
HEATED SQFT MOBILE HOME	1216.00
<b>TOTAL FEES:</b>	<b>\$1291.00</b>

Applicant Signature: CLAYTON HOMES INC  
 Inspector Signature: SIGNATURE ON FILE  
 Application Reference: 788



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**MOBILE HOME PERMIT DATA**

**PERMIT#: 1128**

**Permit Date: 2019-10-24**

Parcel Number: **017748063**  
 PIN Number: 975911669085  
 Location: 6025 RICHARD DR MANNS HARBOR  
 Legal Description: LOT: A2 BLK: SEC:

**OWNER/MOVER/INSTALLER INFORMATION**

CONTRACTOR	CLAYTON HOMES INC	1560 NORTH ROAD ST ELIZABETH CITY NC 27909	252-335-1070
MOBILE HOME INSTALLER	CLAYTON HOMES INC	1560 NORTH ROAD ST ELIZABETH CITY NC 27909	252-335-1070
MOBILE HOME MOVER	ADKINS AND SONS	258 WILLEYTON RD GATES NC 27937	757-297-4436
OWNER	SNUG HARBOR PROPERTIES LLC	PO BOX 172 MANNS HARBOR NC 27953	

**DETAILS**

**Proposed Construction Use:**

MOBILE HOME - INSTALL MOBILE HOME

Cost of Construction:	\$47,000	Flood Zone:	AE
Heated Living Space:	1216	Base Fld Elev	.0
Non Living Space:	0		
Foundation/Footing Type:	CONC		
Septic Permit	29104		
Septic Permit Date	10/22/2019		
Make	Cavalier-Nashville		
Model	Anniversary		
Year	2018		
Serial #	CBG05050952NC		
HUD #	NTA1797791		
Hurricane Built	3		
Width in Feet	16		
Length in Feet	76		
Lot/Ground elevation (ft)	3.2		
Proposed floor elevation (ft)	7.5		
Mobile Home Park:	Snug Harbor		

FLOOD WITH BLDG PERMIT FEE	75.00
HEATED SQFT MOBILE HOME	608.00
<b>TOTAL FEES:</b>	<b>\$683.00</b>

Applicant Signature: CLAYTON HOMES INC  
 Inspector Signature: SIGNATURE ON FILE  
 Application Reference: 955



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

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

**RESIDENTIAL BUILDING PERMIT**

**BUILDING PERMIT#: ACC-1161**

**10/30/2019**

Parcel Number: 027209000  
 Location: 333 MOTHER VINEYARD RD – MANTEO  
 Subdivision: MOTHER VINEYARD SECTION 1  
 Legal Description: LOT: 23 BLK: SEC: 1

Owner Name: PATRICIA GANNON  
 Owner Mail Address: 333 MOTHER VINEYARD RD MANTEO, NC 27954  
 Owner Phone and email:

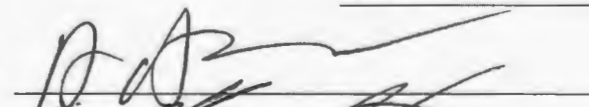
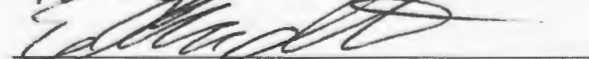
Contractor Name: D&B BULKHEADS  
 Contractor Mail Address: 1105 SWORD FISH WAY, KITTY HAWK, NC 27949  
 Contractor Phone: 252-455-6322 Contractor NC License#: MARINE

**BUILDING INFORMATION**

Proposed Construction Use:	DOCKS;PIERS;BULKHEADS;DUNEWLK , BULKHEAD REPAIR	Cost of Construction:	\$14,000
Proposed Construction Type:		CAMA Permit#:	73886
Finished Square Footage:	0	Septic Permit#:	
Unfinished Square Footage:	0	Septic Permit Date:	
Stories:	0	Survey/Site Plan:	
Building Height:	0	Water Tap#:	
Total Rooms:	0	Water Type:	
Footing Type:		Flood Zone:	
Exterior Finish:		Base Flood Elevation:	0.0
Proposed Finished Floor Elevation:		Lot/Ground Elevation:	
Bedrooms:	0	Baths/half baths:	0/0

**Comments:** Any deviation from the building plan or site plan requires prior approval. PERMIT FEE \$250.00

**TOTAL FEES: \$250.00**

Applicant Signature:  DANIEL ANDRONOWITZ  
 Inspector Signature:  ALD



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

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

**RESIDENTIAL BUILDING PERMIT**

**BUILDING PERMIT#: REPAIR-1163**

**10/31/2019**

Parcel Number: 016327000  
 Location: 145 ROANOKE TRL – MANTEO  
 Subdivision: ROANOKE COLONY  
 Legal Description: LOT: 9 BLK: SEC: 2

Owner Name: JAMES M JR ALBERT  
 Owner Mail Address: 145 ROANOKE TRL MANTEO, NC 27954  
 Owner Phone and email:

Contractor Name: JES CONSTRUCTION LLC  
 Contractor Mail Address: 1741 CORPORATE LANDING PKWY STE 101, VIRGINIA BEACH, VA 23454  
 Contractor Phone: 757-558-9909 Contractor NC License#: 69678

**BUILDING INFORMATION**

Proposed Construction Use:	REPAIR , CRAWL SPACE CARPENTRY AND ENCAPSULATION	Cost of Construction:	\$19,500
Proposed Construction Type:		CAMA Permit#:	
Finished Square Footage:	0	Septic Permit#:	
Unfinished Square Footage:	0	Septic Permit Date:	
Stories:	0	Survey/Site Plan:	
Building Height:	0	Water Tap#:	
Total Rooms:	0	Water Type:	
Footing Type:		Flood Zone:	
Exterior Finish:		Base Flood Elevation:	0.0
Proposed Finished Floor Elevation:		Lot/Ground Elevation:	
Bedrooms:	0	Baths/half baths:	0/0

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

**TOTAL FEES: \$150.00**

Applicant Signature:  JES CONSTRUCTION LLC

Inspector Signature: Ed Kindervater ALD



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

RESIDENTIAL BUILDING PERMIT

BUILDING PERMIT#: REMD-1162

10/31/2019

Parcel Number: 026067000  
 Location: 118 PUGH RD – WANCHESE  
 Subdivision: SUBDIVISION - NONE  
 Legal Description: LOT: BLK: SEC:

Owner Name: LEWIS E DAVENPORT  
 Owner Mail Address: 118 PUGH RD WANCHESE, NC 27981  
 Owner Phone and email:

Contractor Name: JES CONSTRUCTION LLC  
 Contractor Mail Address: 1741 CORPORATE LANDING PKWY STE 101, VIRGINIA BEACH, VA 23454  
 Contractor Phone: 757-558-9909 Contractor NC License#: 69678

**BUILDING INFORMATION**

Proposed Construction Use:	REMODEL RES OR COM , STABILIZING EXIST. FOUNDATION INTELLIJACKS & ENCAPSULATION		
Proposed Construction Type:		Cost of Construction:	\$28,700
Finished Square Footage:	0	CAMA Permit#:	
Unfinished Square Footage:	0	Septic Permit#:	
Stories:	0	Septic Permit Date:	
Building Height:	0	Survey/Site Plan:	
Total Rooms:	0	Water Tap#:	
Footing Type:		Water Type:	
Exterior Finish:		Flood Zone:	
Proposed Finished Floor Elevation:		Base Flood Elevation:	0.0
Bedrooms:	0	Lot/Ground Elevation:	
		Baths/half baths:	0/0

Comments: Any deviation from the building plan or site plan requires prior approval. PERMIT FEE \$290.00

**TOTAL FEES: \$290.00**

Applicant Signature:  JES CONSTRUCTION LLC

Inspector Signature: Ed Kindervater ALD



County of Dare  
 Planning Office  
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 Manteo NC 27954

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

ELECTRICAL PERMIT

ELECTRICAL PERMIT#: ELEC-969

10/01/2019

Parcel Number: 017730004  
 Location: 6951 PECAN LN – MANNS HARBOR  
 Subdivision: HESTER T DWYER DIVISION  
 Legal Description: LOT: 2 BLK: SEC:

Owner Name: JAMES P TOBIN  
 Owner Mail Address: P O BOX 243 - MANNS HARBOR, NC 27953  
 Owner Contact Information:

Contractor Name:  
 Contractor Mail Address: -  
 Contractor Phone: NA  
 Contractor NC License#: NA

DETAILS

Amp Increase:	Cost of Job:	\$4,000
Service Amps:	ELECTRICAL PERMIT FEE:	\$150.00

Comments:

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

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

Applicant Signature: J.P.T. JAMES P TOBIN

Inspector Signature: E. Shuck DC



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

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

**ELECTRICAL PERMIT**

**ELECTRICAL PERMIT#: ELEC-1053**

**10/09/2019**

Parcel Number: 024410065  
Location: 132 FORT HUGAR WAY – MANTEO  
Subdivision: HERITAGE POINT PHASE 3  
Legal Description: LOT: 106 BLK: SEC:

Owner Name: ANNETTE JONES  
Owner Mail Address: 132 FORT HUGAR WAY - MANTEO, NC 27954  
Owner Contact Information:

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


**DETAILS**

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

**Comments:**

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

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Applicant Signature:  SUBURBAN ELECTRIC SERVICES INC

Inspector Signature: Ed Kundewater DC





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**ELECTRICAL PERMIT**

**ELECTRICAL PERMIT#: ELEC-1105**

**10/21/2019**

Parcel Number: 027279000  
Location: 295 OLD SCHOOLHOUSE RD – WANCHESE  
Subdivision: SUBDIVISION - NONE  
Legal Description: LOT: BLK: SEC:

Owner Name: WANCHESE COMMUNITY CENTER  
Owner Mail Address: XXXXX - UNKNOWN - XXXXX, XX XXXXX  
Owner Contact Information:

Contractor Name: Willis Repair and Service  
Contractor Mail Address: 365 Old Schoolhouse Rd - Wanchese, NC 27981  
Contractor Phone: NA  
Contractor NC License#: 11230

**DETAILS** COMMERCIAL

Cost of Job: \$400

Amp Increase: 200

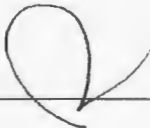
Service Amps: 200

**ELECTRICAL PERMIT FEE: \$ .00**

**Comments:**

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

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Applicant Signature:  Willis Repair and Service

Inspector Signature:  DC



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Frisco: (252) 475-5878

**ELECTRICAL PERMIT**

**ELECTRICAL PERMIT#: ELEC-1113**

**10/21/2019**

Parcel Number: 016182000  
Location: 125 FOREST AVENUE – MANTEO  
Subdivision: VIRGINIA DARE PARK  
Legal Description: LOT: 6 BLK: 4 SEC:

Owner Name: ALVAH H JR WARD  
Owner Mail Address: P O BOX 266 - MANTEO, NC 27954  
Owner Contact Information:

Contractor Name: BEACON ELECTRICAL CONTRACTOR  
Contractor Mail Address: 129 SCUPPERNONG RD - MANTEO, NC 27954  
Contractor Phone: 2524895680  
Contractor NC License#: I-28692

**DETAILS**

Cost of Job: \$8,500  
ELECTRICAL PERMIT FEE: \$150.00

Amp Increase:  
Service Amps:

**Comments:**

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

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Applicant Signature:  BEACON ELECTRICAL CONTRACTOR

Inspector Signature:  EK



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 Frisco: (252) 475-5878

**ELECTRICAL PERMIT**

**ELECTRICAL PERMIT#: ELEC-1119**

**10/23/2019**

Parcel Number: 024210003  
 Location: 120 HOLLY RIDGE RD – MANTEO  
 Subdivision: HOLLY RIDGE  
 Legal Description: LOT: 1 BLK: SEC:

Owner Name: RYAN P DODSON  
 Owner Mail Address: 120 HOLLY RIDGE RD - MANTEO, NC 27954  
 Owner Contact Information:

Contractor Name: BEACON ELECTRICAL CONTRACTOR  
 Contractor Mail Address: 129 SCUPPERNONG RD - MANTEO, NC 27954  
 Contractor Phone: 2524895680  
 Contractor NC License#: I-28692

**DETAILS RESIDENTIAL**

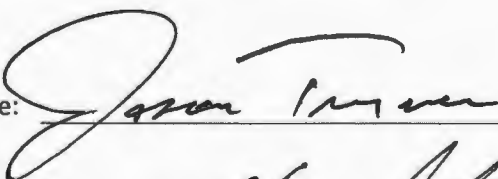
Cost of Job: \$8,500

Amp Increase:  
 Service Amps: **ELECTRICAL PERMIT FEE: \$150.00**

**Comments:** Generator install / transfer switch

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

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Applicant Signature: 

Inspector Signature:  ALD



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 Manteo NC 27954

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

**MECHANICAL PROJECT**

**MECHANICAL PROJECT#: MECH-1002**

**10/04/2019**

Parcel Number: 023604000  
 Location: 4025 MILL LANDING RD – WANCHESE  
 Subdivision: SUBDIVISION - NONE  
 Legal Description: LOT: BLK: SEC:

Owner Name: WILLIAM GATLING WILSON  
 Owner Mail Address: 291 E R DANIELS RD - WANCHESE, NC 27981  
 Owner Contact Information:

Contractor Name: ARMSTRONG AND SON HEATING AND AIR LLC  
 Contractor Mail Address: 3978 ALBEMARLE CHURCH RD - COLUMBIA, NC 27925  
 Contractor Phone: 252-797-4100  
 Contractor NC License#: L22516

**DETAILS** RESIDENTIAL

Electrical Contractor ID: L-07391  
 Cost of Job: \$2,500  
 MECHANICAL PROJECT FEE: \$150.00

**Comments:**

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

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

Applicant Signature:  ARMSTRONG AND SON HEATING AND AIR LLC

Inspector Signature:  NHG



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

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

**MECHANICAL PROJECT**

**MECHANICAL PROJECT#: MECH-1074**

**10/15/2019**

Parcel Number: 029808007  
Location: 117 SKINNERS LANDING CT – WANCHESE  
Subdivision: SKINNER'S LANDING PH 2  
Legal Description: LOT: 7 BLK: SEC:

Owner Name: JOSEPH M DANIELS  
Owner Mail Address: 117 SKINNERS LANDING - WANCHESE, NC 27981  
Owner Contact Information:

Contractor Name: ARMSTRONG AND SON HEATING AND AIR LLC  
Contractor Mail Address: 3978 ALBEMARLE CHURCH RD - COLUMBIA, NC 27925  
Contractor Phone: 252-797-4100  
Contractor NC License#: L22516

**DETAILS** RESIDENTIAL

Cost of Job: \$4,800

Electrical Contractor ID:

**MECHANICAL PROJECT FEE: \$150.00**

**Comments:**

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

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

Applicant Signature: \_\_\_\_\_

ARMSTRONG AND SON HEATING AND AIR LLC

Inspector Signature: \_\_\_\_\_

NHG



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

Manteo  
 (252)475-5870  
 Northern Beach  
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 Buxton  
 (252)475-5878

### RESIDENTIAL BUILDING PERMIT DATA

**BUILDING PERMIT#: 1100**

**Permit Date: 2019-10-18**

Parcel Number: **026548026**  
 PIN Number: 988010462416  
 Location: 146 ARBOR DR MANTEO NC  
 Subdivision Name: ARBOR WAY  
 Legal Description: LOT: 26 BLK: SEC: 2

Owner: FRANK TUMINELLO  
 Owner Address: 32 INDIAN VALLEY RD RAMSEY NJ 07446  
 Owner Phone: N/A

#### CONTRACTOR

Builder Name: A FRAME CONTRACTING INC.  
 Builder Address: 405 ARCH ST KILL DEVIL HILLS NC 27948  
 Builder Phone: 252-207-2420  
 NC License #: 77248 License Type: Limited

#### BUILDING INFORMATION

Proposed Construction Type: REMD - REMODEL  
 Proposed Construction Use: bathroom remodel  
 Cost of Construction: \$15,000

REMODEL FEE	150.00
<b>TOTAL FEES:</b>	<b>\$150.00</b>

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

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

Applicant Signature: A FRAME CONTRACTING INC.  
 Inspector Signature: SIGNATURE ON FILE  
 Application Reference: 922



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

Manteo  
 (252)475-5870  
 Northern Beach  
 (252)475-5871  
 Buxton  
 (252)475-5878

### RESIDENTIAL BUILDING PERMIT DATA

**BUILDING PERMIT#: 1088**

**Permit Date: 2019-10-16**

Parcel Number: **023147000**  
 PIN Number: 988014332506  
 Location: 722 FRANCIS DRAKE ST MANTEO NC  
 Subdivision Name: ROANOKE PARK AMENDED  
 Legal Description: LOT: PORTIONS 16~17~18 BLK: 2 SEC:

Owner: ROBERT H COOPER  
 Owner Address: 722 FRANCIS DRAKE ST MANTEO NC 27954  
 Owner Phone: N/A

#### CONTRACTOR

Builder Name: ROBERT H COOPER  
 Builder Address: 722 FRANCIS DRAKE ST MANTEO NC 27954  
 Builder Phone: 252-435-9189  
 NC License #: License Type:

#### BUILDING INFORMATION

Proposed Construction Type: ACC1 - ACCESSORY STRUCTURE OVER 12FT  
 Proposed Construction Use: Install two 12'x24' stateline buildings  
 Cost of Construction: \$12,000  
 CAMA Permit: NA

FLOOD WITH BLDG PERMIT FEE	75.00
UNHEATED/UNFINISHED SQFT RES	230.40
<b>TOTAL FEES:</b>	<b>\$305.40</b>

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

Applicant Signature: ROBERT H COOPER  
 Inspector Signature: SIGNATURE ON FILE  
 Application Reference: 904





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

Manteo  
 (252)475-5870  
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 (252)475-5878

### RESIDENTIAL BUILDING PERMIT DATA

**BUILDING PERMIT#: 1084**

**Permit Date: 2019-10-16**

Parcel Number: **016299000**  
 PIN Number: 987008898483  
 Location: 123 BROUGHTON ST MANTEO NC  
 Subdivision Name: BROUGHTON CIRCLE  
 Legal Description: LOT: 6 BLK: SEC:

Owner: ENOCHS ENTERPRISES, LLC  
 Owner Address: P.O. BOX 1100 MANTEO NC 27954  
 Owner Phone: N/A

#### CONTRACTOR

Builder Name: ADP SWIMMING POOLS & CONSTRUCTION LLC  
 Builder Address: 801 INDIAN DR KILL DEVIL HILLS NC 27948  
 Builder Phone: 252-305-8088  
 NC License #: 53785 License Type: LIMITED

#### BUILDING INFORMATION

Proposed Construction Type: REMD - REMODEL  
 Proposed Construction Use: Remodel SFD, replace rotten floor and interior framing  
 Cost of Construction: \$75,000  
 CAMA Permit: NA  
 Septic Permit: NA  
 Septic Permit Date: NA  
 Water Tap Number: NA  
 Survey/Site Plan: NA  
 Height (ft): NA  
 Parking (zoning): NA

REMODEL FEE 750.00  
**TOTAL FEES: \$750.00**

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

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Applicant Signature: ADP SWIMMING POOLS & CONSTRUCTION LLC  
 Inspector Signature: SIGNATURE ON FILE  
 Application Reference: 914





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

Manteo  
 (252)475-5870  
 Northern Beach  
 (252)475-5871  
 Buxton  
 (252)475-5878

### RESIDENTIAL BUILDING PERMIT DATA

**BUILDING PERMIT#: 1162**

**Permit Date: 2019-10-31**

Parcel Number: **026067000**  
 PIN Number: 979706482052  
 Location: 118 PUGH RD WANCHESE NC  
 Subdivision Name: SUBDIVISION - NONE  
 Legal Description: LOT: BLK: SEC:

Owner: LEWIS E DAVENPORT  
 Owner Address: 118 PUGH RD WANCHESE NC 27981  
 Owner Phone: N/A

#### CONTRACTOR

Builder Name: JES CONSTRUCTION LLC  
 Builder Address: 1741 CORPORATE LANDING PKWY STE 101 VIRGINIA BEACH VA 23454  
 Builder Phone: 757-558-9909  
 NC License #: 69678 License Type: LIMITED

#### BUILDING INFORMATION

Proposed Construction Type: REMD - REMODEL  
 Proposed Construction Use: STABILIZING EXIST. FOUNDATION INTELLIJACKS & ENCAPSULATION  
 Cost of Construction: \$28,700

REMODEL FEE	290.00
<b>TOTAL FEES:</b>	<b>\$290.00</b>

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

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Applicant Signature: JES CONSTRUCTION LLC  
 Inspector Signature: SIGNATURE ON FILE  
 Application Reference: 973



Department of Community Development  
 PO Box 8369  
 1200 Duck Road  
 Town of Duck, North Carolina 27949  
 (252) 255-1234

Date Issued:

OCT 01 2019  
 Permit #:  
 B19-000223

**Building/Floodplain Development Permit**

**Project Address:** 155 BUFFELL HEAD RD  
**Property Owner:** BETTERLY, DONALD

**PIN #:** 995015743467  
**Mailing Address:** 3 BANKS AVE  
 MCADOO, PA 18237

**Contractor:**

**Company Name:** Starco Realty and Construction  
**Phone:** (252) 202-8861  
**Email:** starcorealty@gmail.com

**Contact Name:** Duke Garrity  
**Address:** PO Box 2598  
 Manteo, NC 27954

**Classification:** General Contractor  
**NC State License #:** 46732  
**Expiration Date:**

**Description of Work:** Remodel three bathrooms, walls, ceiling and floor; new ceramic tile, replace fixtures in existing locations

**Use:**  
 Single Family

**Structure/Work Type:**  
 Primary Structure: 3.Remodel  
 Pool/Hot Tub:  
 Deck:  
 Demo:

**Accessory Building:**  
 Bukhead (L.F.):  
 Pier (L.F.):  
 House Moving:

**Permit Amount:**  
 130.50

**Proposed Area Schedule (Sq.Ft.):** Heated: Unheated: Remodel Heated: 241 Remodel Unheated:

**Proposed Finished Grade (ft.):** N/A:  House: Pool: Driveway: Parking: Other:

**Floodplain Development:** Flood Zone: VE-12 Structure Value: Storage Below BFE:

**Vegetation Management (Sq.Ft.):** N/A:  Required Coverage: 0.0 Area Preserved: Required Plantings: 0.0

Project Cost Estimate:	Building	Electrical	Mechanical	Plumbing	Gas	Other	Total
	\$27,500.00	\$800.00	\$0.00	\$9,200.00	\$0.00	\$0.00	\$37,500.00

**Permit Conditions:**

- The erection (including excavation), demolition, alteration or repair of any building in a residential or business district other than between the hours of 7 am and 6 pm, Monday through Saturday is prohibited.
- Repair & maintenance only
- No change to coverage or footprint.
- Typical trade inspections required
- Call for final inspection.

This permit is issued on the expressed condition that all information is correct and all work will comply with the State Building Code and all other applicable State and Local laws, ordinances and regulations. All provisions of laws and ordinances governing this type of work will be complied with whether specified herein or not.

*Duke Garrity*  
 Applicant Signature 10-1-19  
Date



Department of Community Development  
 PO Box 8369, 1200 Duck Road  
 Town of Duck, North Carolina 27949  
 (252) 255-1234

Date Issued:

OCT 01 2019  
 Permit #:  
 B19-000219

**Building Permit**

**Project Address:** 116 MAINSAIL CT  
**Property Owner:** SHIPS WATCH ASSOCIATION

**PIN #:** 985908881895  
**Mailing Address:** 1251 DUCK RD  
 KITTY HAWK, NC 27949

**Contractor/Company Name:** Emanuelson & Dad, Inc.  
**Phone:** 252-261-2212  
**Email:** emanuelson@embarqmail.com

**Contact Name:** Jon Midgett  
**Address:** PO Box 448  
 Nags Head, NC 27959

**Classification:** Unlicensed Contractor  
**NC State License #:**  
**Expiration Date:**

**Description of Work:** REPLACE 2 ROTTEN PILINGS

**Use:**  
 Single Family

**Structure/Work Type:**  
 Primary Structure: 4.Repair/Maintenance  
 Pool/Hot Tub:  
 Deck:  
 Demo:

**Permit Amount:**  
 \$100.00

**Accessory Building:**  
 Bulkhead (L.F.):  
 Pier (L.F.):  
 House Moving:

<b>Proposed Area Schedule (Sq.Ft.):</b>	<b>Heated:</b>	<b>Unheated:</b>	<b>Accessory Heated:</b>	<b>Accessory Unheated:</b>			
<b>Proposed Finished Grade (ft.):</b>	N/A: <input checked="" type="checkbox"/>	House:	Pool:	Driveway:	Parking:	Other:	
<b>Vegetation Management (Sq.Ft.):</b>	N/A: <input checked="" type="checkbox"/>	Area Preserved:	Required Coverage: 0.0	Required Plantings: 0.0			
<b>Project Cost Estimate:</b>	<b>Building</b> \$3,000.00	<b>Electrical</b> \$0.00	<b>Mechanical</b> \$0.00	<b>Plumbing</b> \$0.00	<b>Gas</b> \$0.00	<b>Other</b> \$0.00	<b>Total</b> \$3,000.00

**Permit Conditions:**

- Any change or changes in the plans for development, construction or land use activities will require a re-evaluation and modification of this permit.
- The erection (including excavation), demolition, alteration or repair of any building in a residential or business district other than between the hours of 7 am and 6 pm, Monday through Saturday is prohibited.
- Repair & maintenance only
- No change to coverage or footprint.
- Call for final inspection.

This permit is issued on the expressed condition that all information is correct and all work will comply with the State Building Code and all other applicable State and Local laws, ordinances and regulations. All provisions of laws and ordinances governing this type of work will be complied with whether specified herein or not.

Applicant Signature \_\_\_\_\_ Date 10/1/19



Department of Community Development  
 PO Box 8369, 1200 Duck Road  
 Town of Duck, North Carolina 27949  
 (252) 255-1234

Date Issued:  
 OCT 01 2019  
 Permit #:  
 B19-000221

**Building Permit**

**Project Address:** 107 SHELDRAKE CT  
**Property Owner:** REISBICK, JOHN N P

**PIN #:** 986917008528  
**Mailing Address:** 27 RIDING PATH  
 HAMPTON, VA 23669

**Contractor/Company Name:** Beach Construction Group, LLC  
**Phone:** (252) 441-8224  
**Email:** info@beachpainting.com

**Contact Name:** Matt Brauer  
**Address:** 1496 Colington Road  
 Kill Devil Hills, NC 27948

**Classification:** General Contractor  
**NC State License #:** 77114  
**Expiration Date:** 12/31/2017

**Description of Work:** Deck replacement; rear deck to be repaired per attached, stamped drawings; side deck to be replaced and brought up to code; pilings will remain

<b>Use:</b> Other	<b>Structure/Work Type:</b> Primary Structure: Pool/Hot Tub: Deck: <b>Repair</b> Demo:	<b>Accessory Building:</b> Bukhead (L.F.): Pier (L.F.): House Moving:
<b>Permit Amount:</b> \$110.00		

**Proposed Area Schedule (Sq.Ft.):** Heated: Unheated: Remodel Heated: Remodel Unheated: 486

**Proposed Finished Grade (ft.):** N/A:  House: Pool: Driveway: Parking: Other:


**Vegetation Management (Sq.Ft.):** N/A:  Area Preserved: Required Coverage: 0.0 Required Plantings: 0.0

<b>Project Cost Estimate:</b>	<b>Building</b>	<b>Electrical</b>	<b>Mechanical</b>	<b>Plumbing</b>	<b>Gas</b>	<b>Other</b>	<b>Total</b>
	\$35,000.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$35,000.00

**Permit Conditions:**

- The erection (including excavation), demolition, alteration or repair of any building in a residential or business district other than between the hours of 7 am and 6 pm, Monday through Saturday is prohibited.
- Any change or changes in the plans for development, construction or land use activities will require a re-evaluation and modification of this permit.
- Repair & maintenance only
- No change to coverage or footprint.
- 2- 3/8" bolts required per post. All spacing of openings shall be constructed so that a 4" sphere cannot pass through.
- Call for final inspection.

This permit is issued on the expressed condition that all information is correct and all work will comply with the State Building Code and all other applicable State and Local laws, ordinances and regulations. All provisions of laws and ordinances governing this type of work will be complied with whether specified herein or not.

  
 Applicant Signature

10/1/19  
 Date



Department of Community Development  
 PO Box 8369, 1200 Duck Road  
 Town of Duck, North Carolina 27949  
 (252) 255-1234

Date Issued: **OCT 01 2019**  
 Permit #: B19-000222

**Building Permit**

**Project Address:** 103 COOK DR  
**Property Owner:** GIBSON, MELISSA JEAN MILLER

**PIN #:** 985912862793  
**Mailing Address:** 103 COOK DR  
 KITTY HAWK, NC 27949

**Contractor/Company Name:** Aubrey C. Kitchin  
**Phone:** (252) 202-8520  
**Email:**

**Contact Name:** Aubrey Kitchin  
**Address:** 114 Seahawk Drive West  
 Duck, NC 27949

**Classification:** General Contractor  
**NC State License #:** 16865  
**Expiration Date:** 12/31/2010

**Description of Work:** Remodel master bedroom and bathroom

**Use:**  
 Single Family

**Structure/Work Type:**  
 Primary Structure: 3.Remodel  
 Pool/Hot Tub:  
 Deck:  
 Demo:

**Accessory Building:**  
 Bulkhead (L.F.):  
 Pier (L.F.):  
 House Moving:

**Permit Amount:**  
 \$276.00

<b>Proposed Area Schedule (Sq.Ft.):</b>	Heated:	Unheated:	Remodel Heated: 532	Remodel Unheated:
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<b>Proposed Finished Grade (ft.):</b>	N/A: <input checked="" type="checkbox"/>	House:	Pool:	Driveway:	Parking:	Other:
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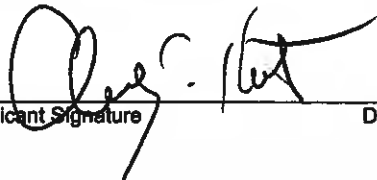
<b>Vegetation Management (Sq.Ft.):</b>	N/A: <input checked="" type="checkbox"/>	Area Preserved:	Required Coverage: 0.0	Required Plantings: 0.0
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<b>Project Cost Estimate:</b>	<b>Building</b>	<b>Electrical</b>	<b>Mechanical</b>	<b>Plumbing</b>	<b>Gas</b>	<b>Other</b>	<b>Total</b>
	\$38,508.00	\$2,100.00	\$0.00	\$2,200.00	\$0.00	\$0.00	\$42,808.00

**Permit Conditions:**

- Any change or changes in the plans for development, construction or land use activities will require a re-evaluation and modification of this permit.
- The erection (including excavation), demolition, alteration or repair of any building in a residential or business district other than between the hours of 7 am and 6 pm, Monday through Saturday is prohibited.
- No change to coverage or footprint.
- Typical trade inspections required
- Call for final inspection.

This permit is issued on the expressed condition that all information is correct and all work will comply with the State Building Code and all other applicable State and Local laws, ordinances and regulations. All provisions of laws and ordinances governing this type of work will be complied with whether specified herein or not.

 \_\_\_\_\_  
 Applicant Signature Date 10-1-19



Department of Community Development  
PO Box 8369  
1200 Duck Road  
Town of Duck, North Carolina 27949  
(252) 255-1234

**Date Issued:**  
10/01/2019

**Permit #:**  
TR19-000269

## Mechanical Trade Permit

**Project Address:** 123 BUFFELL HEAD RD  
**Property Owner:** EQUALE, MICHELE T TRUSTEE OF THE

**PIN #:** 995011659621

**Mailing Address:** 11400 SPUR WHEEL LN  
POTOMAC, MD 20854

### Permit Types:

Plumbing    Electrical     Mechanical    Gas

### Contractor:

**Company Name:** R.A. Hoy Heating & A/C  
**Phone:** (252) 261-2008

**Contact Name:** Douglas Wakeley  
P.O. Box 179

**NC State License #:** 13056

**Address:**  
Kitty Hawk, NC 27949

**Description of Work:** C/O 3 TON AIR HANDLER ONLY MID LEVEL

**Project Cost Estimate:** 4,644.00

**Permit Amount:** 130.00

I hereby certify that all the information provided by me in support of this application is true and accurate to the best of my knowledge. I certify that I will comply with all applicable state and local laws and regulations pertaining to the work for which this permit is issued, and that I possess all trade contractor licenses required by the NC General Statutes and the NC Administrative Code. If I resign or am no longer affiliated with this project, I will notify the local authority (Town of Duck Building Inspector) immediately by phone or in person and in writing within three (3) working days.

RAH      10-2-19  
Applicant Signature      Date





Department of Community Development  
 PO Box 8369, 1200 Duck Road  
 Town of Duck, North Carolina 27949  
 (252) 255-1234

Date Issued:

10/02/2019

Permit #: B19-000214

**Building Permit**

**Project Address:** 125 SPRIGTAIL DR  
**Property Owner:** CAROLINA DUNES ASSOCIATION INC

**PIN #:** 995011654615  
**Mailing Address:** P O BOX 8153  
 KITTY HAWK, NC 27949

**Contractor/Company Name:** Ryan Waddell  
**Phone:** (252) 599-1611  
**Email:** ryanwaddell@rocketmail.com

**Contact Name:** Ryan Waddell  
**Address:** 2604 S. Memorial Avenue  
 Nags Head, NC 27959

**Classification:** Unlicensed Contractor  
**NC State License #:**  
**Expiration Date:**

**Description of Work:** Build a 12 X 16 storage shed for Carolina Dunes Assoc, Inc

**Use:** Other  
**Structure/Work Type:** Primary Structure: 1.New Construction  
 Pool/Hot Tub:  
 Deck:  
 Demo:  
**Permit Amount:** \$100.00  
**Accessory Building:**   
**Bukhead (L.F.):**  
**Pier (L.F.):**  
**House Moving:**

**Proposed Area Schedule (Sq.Ft.):** Heated: Unheated: Accessory Heated: Accessory Unheated: 192

**Proposed Finished Grade (ft.):** N/A:  House: Pool: Driveway: Parking: Other:

**Vegetation Management (Sq.Ft.):** N/A:  Area Preserved: Required Coverage: 2250.0 Required Plantings: 2250.0

Project Cost Estimate:	Building	Electrical	Mechanical	Plumbing	Gas	Other	Total
	\$5,000.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$5,000.00

**Permit Conditions:**

- Any change or changes in the plans for development, construction or land use activities will require a re-evaluation and modification of this permit.
- The erection (including excavation), demolition, alteration or repair of any building in a residential or business district other than between the hours of 7 am and 6 pm, Monday through Saturday is prohibited.
- All principal and accessory structures must meet MBL setbacks.
- Stabilize all disturbed areas prior to CO.
- Provide Fire Extinguisher inside building, mounted and in plain sight.
- Continuous anchoring to be provided from rafter to ground.
- Call for final inspection.

This permit is issued on the expressed condition that all information is correct and all work will comply with the State Building Code and all other applicable State and Local laws, ordinances and regulations. All provisions of laws and ordinances governing this type of work will be complied with whether specified herein or not.

Applicant Signature

Date



Department of Community Development  
 PO Box 8369  
 1200 Duck Road  
 Town of Duck, North Carolina 27949  
 (252) 255-1234

Date Issued:  
**OCT 02 2019**

Permit #:  
 B19-000217

**Building/Floodplain Development Permit**

Project Address: 116 SUNFLOWER CT  
 Property Owner: CLEMANS, KATHRYN H B

PIN #: 986917107907  
 Mailing Address: 5606 OVERLEA RD  
 BETHESDA, MD 20816

**Contractor:**

Company Name: Carolina Coast Construction  
 Phone: (252) 256-0020  
 Email: randy@carolinacoastconstruction.com

Contact Name: Randy Hargis  
 Address: 53 Skyline Drive  
 Southern Shores, NC 27949

Classification: Unlicensed Contractor  
 NC State License #:  
 Expiration Date:

**Description of Work:** 8 x 16 deck extension on first floor and change window to sliding door for access to bedroom

**Use:** Single Family  
**Structure/Work Type:** Primary Structure: 4.Repair/Maintenance  
 Pool/Hot Tub:  
 Deck: Addition  
 Demo:

Accessory Building:  
 Bukhead (L.F.):  
 Pier (L.F.):  
 House Moving:

**Permit Amount:**  
 100.00

**Proposed Area Schedule (Sq.Ft.):** Heated: Unheated: 128 Accessory Heated: Accessory Unheated:

**Proposed Finished Grade (ft.):** N/A:  House: Pool: Driveway: Parking: Other:

**Floodplain Development:** Flood Zone: AE-9 Structure Value: Storage Below BFE:

**Vegetation Management (Sq.Ft.):** N/A:  Required Coverage: 0.0 Area Preserved: Required Plantings: 0.0

Project Cost Estimate:	Building	Electrical	Mechanical	Plumbing	Gas	Other	Total
	\$5,000.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$5,000.00

**Permit Conditions:**

- Any change or changes in the plans for development, construction or land use activities will require a re-evaluation and modification of this permit.
- The erection (including excavation), demolition, alteration or repair of any building in a residential or business district other than between the hours of 7 am and 6 pm, Monday through Saturday is prohibited.
- No change to coverage.
- Deck expansion must be located entirely within the MBL limits.
- As the proposed deck addition will be located close to the northern side setback line, it is strongly recommended that the applicant locate this property line prior to construction to ensure that the addition will not encroach into the 10' setback.
- As-built Survey required prior to CO.
- Call for final inspection

This permit is issued on the expressed condition that all information is correct and all work will comply with the State Building Code and all other applicable State and Local laws, ordinances and regulations. All provisions of laws and ordinances governing this type of work will be complied with whether specified herein or not.

  
 Applicant Signature

10-2-19  
 Date





Department of Community Development  
 PO Box 8369  
 1200 Duck Road  
 Town of Duck, North Carolina 27949  
 (252) 255-1234

Date issued:

**OCT 02 2019**

Permit #: B19-000227

**Building/Floodplain Development Permit**

Project Address: 104 GANNET LN  
 Property Owner: DABNEY, DONNA C

PIN #: 995118320422  
 Mailing Address: 303 GRANDE CT  
 RICHMOND, VA 23229

**Contractor:**

Company Name: Ken Green & Associates  
 Phone: (252) 491-8127  
 Email: kgreen@kg-a.com

Contact Name: Ken Green  
 Address: P.O. Box 372  
 Harbinger, NC 27941

Classification: General Contractor  
 NC State License #: 68343  
 Expiration Date:

**Description of Work:** Elevator addition on side of house

**Use:** Other  
**Structure/Work Type:** Primary Structure: 2.Addition  
 Pool/Hot Tub:  
 Deck:  
 Demo:

Accessory Building:  
 Bukhead (L.F.):  
 Pier (L.F.):  
 House Moving:

**Permit Amount:**  
 235.00

**Proposed Area Schedule (Sq.Ft.):** Heated: Unheated: 50 Accessory Heated: Accessory Unheated:

**Proposed Finished Grade (ft.):** N/A:  House: Pool: Driveway: Parking: Other:

**Floodplain Development:** Flood Zone: AE-7 Structure Value: Storage Below BFE:

**Vegetation Management (Sq.Ft.):** N/A:  Required Coverage: 0.0 Area Preserved: Required Plantings: 0.0

Project Cost Estimate:	Building	Electrical	Mechanical	Plumbing	Gas	Other	Total
	\$70,000.00	\$1,200.00	\$0.00	\$0.00	\$0.00	\$0.00	\$71,200.00

**Permit Conditions:**

- Any change or changes in the plans for development, construction or land use activities will require a re-evaluation and modification of this permit.
- The erection (including excavation), demolition, alteration or repair of any building in a residential or business district other than between the hours of 7 am and 6 pm, Monday through Saturday is prohibited.
- Typical trade inspections required
- Elevator mechanical equipment must be located above Regulatory Flood Protection Elevation (BFE + 1 = 9). Documentation certifying mechanical elevation will be required.
- Future development may require an updated survey.
- Call for final inspection.

This permit is issued on the expressed condition that all information is correct and all work will comply with the State Building Code and all other applicable State and Local laws, ordinances and regulations. All provisions of laws and ordinances governing this type of work will be complied with whether specified herein or not.

10-6-19

Applicant Signature

Date





Department of Community Development  
PO Box 8369  
1200 Duck Road  
Town of Duck, North Carolina 27949  
(252) 255-1234

**Date Issued:**  
10/03/2019

**Permit #:**  
TR19-000270

## Mechanical Trade Permit

**Project Address:** 130 2 JAY CREST RD

**PIN #:** 98580899788502

**Property Owner:** WEISS, MEREDITH

**Mailing Address:** 14801 DISTAFF ROAD  
MIDLOTHIAN, VA 23112

### Permit Types:

Plumbing  Electrical  Mechanical  Gas

### Contractor:

**Company Name:** R.A. Hoy Heating & A/C

**Contact Name:** Douglas Wakeley

**Phone:** (252) 261-2008

P.O. Box 179

**Address:**

**NC State License #:** 13056

Kitty Hawk, NC 27949

**Description of Work:** REPLACING ALL DUCT WORK AND RUNNING DRYER VENT OUT OF CRAWL SPACE

**Project Cost Estimate:** 4,745.00

**Permit Amount:** 100.00

I hereby certify that all the information provided by me in support of this application is true and accurate to the best of my knowledge. I certify that I will comply with all applicable state and local laws and regulations pertaining to the work for which this permit is issued, and that I possess all trade contractor licenses required by the NC General Statutes and the NC Administrative Code. If I resign or am no longer affiliated with this project, I will notify the local authority (Town of Duck Building Inspector) immediately by phone or in person and in writing within three (3) working days.

  
Applicant Signature

10-3-19  
Date



Department of Community Development  
PO Box 8369  
1200 Duck Road  
Town of Duck, North Carolina 27949  
(252) 255-1234

**Date Issued:**  
10/03/2019

**Permit #:**  
TR19-000271

## Mechanical Trade Permit

**Project Address:** 137 North SNOW GEESE DR  
**Property Owner:** MILLER, JOHN KEVIN

**PIN #:** 995016736669

**Mailing Address:** 532 N HAPPY RIDGE RD  
FLATWOODS, KY 41139

## Permit Types:

Plumbing  Electrical  Mechanical  Gas

## Contractor:

**Company Name:** American Refrigeration & Heat Pump Repair  
**Phone:** (252) 202-9302

**Contact Name:** Mark Coleman  
1101 Clamshell Drive  
**Address:**  
Kill Devil Hills, NC 27948

**NC State License #:** 29031

**Description of Work:** Replace top floor heat pump and air handler with new 4 ton American Standard HP and Tam 4 air handler 15 SEER

**Project Cost Estimate:** 7,323.00

**Permit Amount:** 160.00

I hereby certify that all the information provided by me in support of this application is true and accurate to the best of my knowledge. I certify that I will comply with all applicable state and local laws and regulations pertaining to the work for which this permit is issued, and that I possess all trade contractor licenses required by the NC General Statutes and the NC Administrative Code. If I resign or am no longer affiliated with this project, I will notify the local authority (Town of Duck Building Inspector) immediately by phone or in person and in writing within three (3) working days.

  
Applicant Signature

10/3/19  
Date



Department of Community Development  
PO Box 8369  
1200 Duck Road  
Town of Duck, North Carolina 27949  
(252) 255-1234

**Date Issued:**  
10/03/2019  
**Permit #:**  
TR19-000272

## Plumbing Trade Permit

**Project Address:** 130 South SNOW GEESE DR  
**Property Owner:** NAGEL, ALAN

**PIN #:** 995015734574  
**Mailing Address:** 14005 CROSSLAND LN  
GAITHERSBURG, MD 20878

### Permit Types:

Plumbing     Electrical     Mechanical     Gas

### Contractor:

**Company Name:** Absolute Plumbing  
**Phone:** (252) 996-0691

**Contact Name:** Ken Long, Sr.  
110 Quarter Landing Court

**Address:**

Harbinger, NC 27941

**NC State License #:** 30190

**Description of Work:** Changing the size of the home's water heaters from one 50 gallon and one 80 gallon to two 50 gallon water heaters.

**Project Cost Estimate:** 3,600.00

**Permit Amount:** 120.00

I hereby certify that all the information provided by me in support of this application is true and accurate to the best of my knowledge. I certify that I will comply with all applicable state and local laws and regulations pertaining to the work for which this permit is issued, and that I possess all trade contractor licenses required by the NC General Statutes and the NC Administrative Code. If I resign or am no longer affiliated with this project, I will notify the local authority (Town of Duck Building Inspector) immediately by phone or in person and in writing within three (3) working days.

  
Applicant Signature      10/4/19  
Date



Department of Community Development  
 PO Box 8369  
 1200 Duck Road  
 Town of Duck, North Carolina 27949  
 (252) 255-1234

Date Issued:  
**OCT 04 2019**  
 Permit #:  
 B19-000224

**Building/Floodplain Development Permit**

**Project Address:** 1230 DUCK RD  
**Property Owner:** US CELLULAR

**PIN #:** 985911762092L1  
**Mailing Address:** P O BOX 31369  
 CHICAGO, IL 60613

**Contractor:**

**Company Name:** TPG Wireless on behalf of AT&T and Jacobs  
**Phone:**  
**Email:** sunny.flores@tpgwireless.com

**Contact Name:** Sunny Flores  
**Address:**

**Classification:** Other  
**NC State License #:**  
**Expiration Date:**

**Description of Work:** AT&T Wireless to upgrade antenna equipment on Water Tower Tank by Swapping (3) Antennas; Removing (3) TMAs; Adding (3) RRUs; Adding (4) Squid/Raycaps; Add Finer & DC Cables; please refer to plans for specific details.

**Use:**  
 Commercial

**Structure/Work Type:**  
 Primary Structure:  
 Pool/Hot Tub:  
 Deck:  
 Demo:

**Accessory Building:**   
 Bukhead (L.F.):  
 Pier (L.F.):  
 House Moving:

**Permit Amount:**  
 100.00

<b>Proposed Area Schedule (Sq.Ft.):</b>	Heated:	Unheated:	Accessory Heated:	Accessory Unheated:			
<b>Proposed Finished Grade (ft.):</b>	N/A: <input checked="" type="checkbox"/>	House:	Pool:	Driveway:	Parking:	Other:	
<b>Floodplain Development:</b>	Flood Zone: AE-7	Structure Value:	Storage Below BFE: <input type="checkbox"/>				
<b>Vegetation Management (Sq.Ft.):</b>	N/A: <input checked="" type="checkbox"/>	Required Coverage: 0.0	Area Preserved:	Required Plantings: 0.0			
<b>Project Cost Estimate:</b>	<b>Building</b>	<b>Electrical</b>	<b>Mechanical</b>	<b>Plumbing</b>	<b>Gas</b>	<b>Other</b>	<b>Total</b>
	\$20,000.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$20,000.00

- Permit Conditions:**
- Any change or changes in the plans for development, construction or land use activities will require a re-evaluation and modification of this permit.
  - The erection (including excavation), demolition, alteration or repair of any building in a residential or business district other than between the hours of 7 am and 6 pm, Monday through Saturday is prohibited.
  - Electrical trade release required.
  - Engineer of record to perform final inspection and submit documentation, required by the state, indicating compliance.

This permit is issued on the expressed condition that all information is correct and all work will comply with the State Building Code and all other applicable State and Local laws, ordinances and regulations. All provisions of laws and ordinances governing this type of work will be compiled with whether specified herein or not.

10/2/19

Applicant Signature

Date





Department of Community Development  
 PO Box 8369, 1200 Duck Road  
 Town of Duck, North Carolina 27949  
 (252) 255-1234

Date Issued:  
**OCT 07 2019**  
 Permit #:  
 B19-000226

**Building Permit**

**Project Address:** 102 AMY LN  
**Property Owner:** EDGAR, TODD

**PIN #:** 985920827158  
**Mailing Address:** 2407 LONG RIDE RD  
 REISTERSTOWN, MD 21136

**Contractor/Company Name:** Griggs & Co. Homes, Inc.  
**Phone:** (252) 491-8450  
**Email:** info@griggsandco.com

**Contact Name:** Ken Griggs  
**Address:** P.O. Box 125  
 Point Harbor, NC 27964

**Classification:** General Contractor  
**NC State License #:** 48170 - U  
**Expiration Date:**

**Description of Work:** Replace all boards and railings on the existing decks

<b>Use:</b> Single Family	<b>Structure/Work Type:</b> Primary Structure: 4.Repair/Maintenance Pool/Hot Tub: Deck: Repair Demo:	<b>Accessory Building:</b> Bukhead (L.F.): Pier (L.F.): House Moving:
<b>Permit Amount:</b> \$381.00		

<b>Proposed Area Schedule (Sq.Ft.):</b>	Heated:	Unheated: 1,060	Accessory Heated:	Accessory Unheated:
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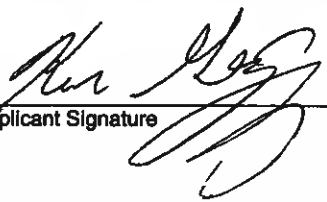
<b>Proposed Finished Grade (ft.):</b>	N/A: ✓	House:	Pool:	Driveway:	Parking:	Other:
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<b>Vegetation Management (Sq.Ft.):</b>	N/A: ✓	Area Preserved:	Required Coverage: 0.0	Required Plantings: 0.0
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<b>Project Cost Estimate:</b>	<b>Building</b> \$17,852.00	<b>Electrical</b> \$0.00	<b>Mechanical</b> \$0.00	<b>Plumbing</b> \$0.00	<b>Gas</b> \$0.00	<b>Other</b> \$0.00	<b>Total</b> \$17,852.00
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- Permit Conditions:**
- Any change or changes in the plans for development, construction or land use activities will require a re-evaluation and modification of this permit.
  - The erection (including excavation), demolition, alteration or repair of any building in a residential or business district other than between the hours of 7 am and 6 pm, Monday through Saturday is prohibited.
  - Repair & maintenance only
  - No change to coverage or footprint.
  - 2- 3/8" bolts required per post. All spacing of openings shall be constructed so that a 4" sphere cannot pass through.
  - Pursuant to G.S. 113-103(5)(B)(5) and 7K.0209, repairs to structures are exempt from requiring a CAMA Minor permits provided the structures are repaired in a similar manner, size and location as the original structure . No expansions or additions are permissible.
  - Call for final inspection.

This permit is issued on the expressed condition that all information is correct and all work will comply with the State Building Code and all other applicable State and Local laws, ordinances and regulations. All provisions of laws and ordinances governing this type of work will be complied with whether specified herein or not.

  
 Applicant Signature

10-7-19  
 Date



Department of Community Development  
PO Box 8369  
1200 Duck Road  
Town of Duck, North Carolina 27949  
(252) 255-1234

**Date Issued:**  
10/07/2019

**Permit #:**  
TR19-000252

## Electrical Trade Permit

**Project Address:** 1364 DUCK RD

**Property Owner:** CAROLINA DUNES ASSOCIATION INC

**PIN #:** 995011552065

**Mailing Address:** P O BOX 8153  
KITTY HAWK, NC 27949

### Permit Types:

Plumbing  Electrical  Mechanical  Gas

### Contractor:

**Company Name:** Precise Electrical Services, Inc.

**Phone:** (252) 207-8251

**Contact Name:** Daniel Muthler

534 Levels Rd.

**Address:**

Columbia, NC 27925

**NC State License #:**

**Description of Work:** After DNCP installs an electric meter, we want to install a 100 AMP Circuit Box using a licensed electrician.

**Project Cost Estimate:** 1,000.00

**Permit Amount:** 100.00

I hereby certify that all the information provided by me in support of this application is true and accurate to the best of my knowledge. I certify that I will comply with all applicable state and local laws and regulations pertaining to the work for which this permit is issued, and that I possess all trade contractor licenses required by the NC General Statutes and the NC Administrative Code. If I resign or am no longer affiliated with this project, I will notify the local authority (Town of Duck Building Inspector) immediately by phone or in person and in writing within three (3) working days.

Applicant Signature

Date





Department of Community Development  
PO Box 8369  
1200 Duck Road  
Town of Duck, North Carolina 27949  
(252) 255-1234

**Date Issued:**  
10/08/2019

**Permit #:**  
TR19-000273

## Mechanical Trade Permit

**Project Address:** 136 OLDE DUCK RD

**PIN #:** 985908889005

**Property Owner:** HAAS, MYRON

**Mailing Address:** 109 BAYVIEW DR  
AYDLETT, NC 27916

### Permit Types:

Plumbing     Electrical     Mechanical     Gas

### Contractor:

**Company Name:** Air Handlers

**Contact Name:** Ryan Johnston

**Phone:**

PO Box 309

**NC State License #:**

**Address:**


Harbinger, NC 27941

**Description of Work:** Remove and replace 4 ton HVAC system top level

**Project Cost Estimate:** 8,709.00

**Permit Amount:** 160.00

I hereby certify that all the information provided by me in support of this application is true and accurate to the best of my knowledge. I certify that I will comply with all applicable state and local laws and regulations pertaining to the work for which this permit is issued, and that I possess all trade contractor licenses required by the NC General Statutes and the NC Administrative Code. If I resign or am no longer affiliated with this project, I will notify the local authority (Town of Duck Building Inspector) immediately by phone or in person and in writing within three (3) working days.

  
Applicant Signature

10/8/19  
Date



Department of Community Development  
PO Box 8369  
1200 Duck Road  
Town of Duck, North Carolina 27949  
(252) 255-1234

**Date Issued:**  
10/10/2019

**Permit #:**  
TR19-000274

## Mechanical Trade Permit

**Project Address:** 117 B316 SEA COLONY DR  
**Property Owner:** TIEDEKEN, DONALD L

**PIN #:** 98590897572248  
**Mailing Address:** 14204 FLAGSTONE CT  
CHESTERFIELD, VA 23832

### Permit Types:

Plumbing  Electrical  Mechanical  Gas

### Contractor:

**Company Name:** All Seasons Heating & Cooling  
**Phone:** (252) 491-9232

**Contact Name:** Joe Simpson  
P.O. Box 244

**NC State License #:** H3Class1: 19091

**Address:**  
Point Harbor, NC 27964

**Description of Work:** Replace existing system with a 2 ton split system heat pump and air handler

**Project Cost Estimate:** 7,140.00

**Permit Amount:** 160.00

I hereby certify that all the information provided by me in support of this application is true and accurate to the best of my knowledge. I certify that I will comply with all applicable state and local laws and regulations pertaining to the work for which this permit is issued, and that I possess all trade contractor licenses required by the NC General Statutes and the NC Administrative Code. If I resign or am no longer affiliated with this project, I will notify the local authority (Town of Duck Building Inspector) immediately by phone or in person and in writing within three (3) working days.

Applicant Signature

Date



Department of Community Development  
 PO Box 8369  
 1200 Duck Road  
 Town of Duck, North Carolina 27949  
 (252) 255-1234

Date Issued:  
 10/11/2019  
 Permit #:  
 B19-000228

**Building/Floodplain Development Permit**

Project Address: 119 OCEAN BAY BLVD  
 Property Owner: PIRATO, STEPHEN

PIN #: 995007581790  
 Mailing Address: 43594 BEAVER CREEK TER  
 LEESBURG, VA 20176

**Contractor:**

Company Name: Southern Scapes Pools & Landscape  
 Phone: (252) 491-5303  
 Email: admin@southernscapesllc.com

Contact Name: Tom May  
 Address: 7441 Caratoke Highway  
 Jarvisburg, NC 27947

Classification: Pool Contractors  
 NC State License #: 64251  
 Expiration Date:

Description of Work: Fiberglass pool installation

Use: Other  
 Structure/Work Type:  
 Primary Structure:  
 Pool/Hot Tub: Pool Only  
 Deck:  
 Demo:

Accessory Building:  
 Bulkhead (L.F.):  
 Pier (L.F.):  
 House Moving:

Permit Amount:  
 300.00

Proposed Area Schedule (Sq.Ft.): Heated: Unheated: Accessory Heated: Accessory Unheated:

Proposed Finished Grade (ft.): N/A: ✓ House: Pool: Driveway: Parking: Other:

Floodplain Development: Flood Zone: AE-10 Structure Value: Storage Below BFE:

Vegetation Management (Sq.Ft.): N/A: ✓ Required Coverage: 1675.2 Area Preserved: 0 Required Plantings: 1675.2

Project Cost Estimate:	Building	Electrical	Mechanical	Plumbing	Gas	Other	Total
	\$36,864.00	\$1,600.00	\$0.00	\$0.00	\$0.00	\$0.00	\$38,464.00

**Permit Conditions:**

- Any change or changes in the plans for development, construction or land use activities will require a re-evaluation and modification of this permit.
- The erection (including excavation), demolition, alteration or repair of any building in a residential or business district other than between the hours of 7 am and 6 pm, Monday through Saturday is prohibited.
- Call for final inspection
- No areas of fill, including graded and leveled areas, may exceed 3 in depth.
- Slope of any fill areas from toes of the slope to the final ground elevations can be no greater than 3:1.
- All fill slopes must be installed so that the toe of the slope matches the existing grade no closer than five feet to any lot line.
- All principal and accessory structures must meet MBL setbacks.
- Pool fence height limited to six (6) feet above adjacent grade.
- Prior to pumping groundwater to accommodate installation of the swimming pool, the applicant must provide the Community Development Department with a pumping plan designating where the water will be pumped. SM (Initial)
- Call for final inspection.

This permit is issued on the expressed condition that all information is correct and all work will comply with the State Building Code and all other applicable State and Local laws, ordinances and regulations. All provisions of laws and ordinances governing this type of work will be complied with whether specified herein or not.

Stephen Pirato  
 Applicant Signature  
 10-11-19  
 Date



Department of Community Development  
PO Box 8369  
1200 Duck Road  
Town of Duck, North Carolina 27949  
(252) 255-1234

**Date Issued:**  
10/10/2019  
**Permit #:**  
TN19-000007

### Tent Permit

**Project Address:** 1240 DUCK RD  
**Property Owner:** ALLIS HOLDINGS LLC

**PIN #:** 985911761465  
**Mailing Address:** P O BOX 1544  
VIRGINIA BEACH, VA 23451

### Applicant:

**Company Name:** OCEAN ATLANTIC EVENT RENTALS  
**Phone:** (252) 441-7272

**Address:** 2001 SOUTH CROATAN HWY  
KILL DEVIL HILLS, NC 27948

### Contractor:

**Company Name:** OCEAN ATLANTIC EVENT RENTALS  
**Phone:** (252) 441-7272

**Contact Name:** SAMANTHA BLACKWELL  
2001 SOUTH CROATAN HWY

**Address:** KILL DEVIL HILLS, NC 27948

**Classification:**  
**NC State License #:**

**Expiration Date:**

**Email:** weddings@oarevent.com

**Description of Work:** Temporary tent- Duck Jazz Jam tent

**Tent Size:** 1200 (square feet)

**Tent Dates:** 10/10/2019 - 10/14/2019

**Estimated Project Cost:** 2484

### Permit Conditions:

1. Temporary Tent only on dates defined above;
2. No smoking signs must be posted;
3. Two portable fire extinguishers required;
4. Tent may not be used for cooking;
5. All illumination and outside outlets must be GFI protected;
6. Exits must posted & emergency exit lights in place;
7. Qualified staff on duty.

This permit is issued on the expressed condition that all information is correct and all work will comply with the State Building Code and all other applicable State and Local laws, ordinances and regulations. All provisions of laws and ordinances governing this type of work will be complied with whether specified herein or not.

Applicant Signature

Date



Department of Community Development  
 PO Box 8369  
 1200 Duck Road  
 Town of Duck, North Carolina 27949  
 (252) 255-1234

Date Issued:  
 10/11/2019

Permit #:  
 LD19-000038

## Land Disturbance/Floodplain Development Permit

Project Address: 111 VIREO WAY  
 Property Owner: BIBERAJ, ADAM

PIN #: 995114332123  
 Mailing Address: 3705 ACOSTA RD  
 FAIRFAX, VA 22031

**Contractor:**

Company Name: Silver Seas, LLC  
 Phone: (252) 489-9313  
 Email: jonyounts@gmail.com

Contact Name: Jon Younts  
 Address: 5150 The Woods Road  
 Kitty Hawk, NC 27949

Classification: Other  
 NC State License #:  
 Expiration Date:

Description of Work: Septic repair

Permit Amount: 25.00

**Land Disturbing Activity:**

<input type="checkbox"/> Parking	<input type="checkbox"/> Driveway	<input type="checkbox"/> New Septic	<input type="checkbox"/> Stormwater Conveyance	<input type="checkbox"/> Grading/Filling
<input type="checkbox"/> Landscaping/Minor Grading	<input type="checkbox"/> Irrigation	<input checked="" type="checkbox"/> Septic Repair	<input type="checkbox"/> Stormwater Retention	<input type="checkbox"/> Vegetation Removal

Proposed Finished Grade (ft.): N/A:  Driveway: Parking: Other:

Floodplain Development: Flood Zone: AE-9 BFE: 9

Vegetation Management (Sq.Ft.): N/A:  Required Coverage: 0.0 Area Preserved: Required Plantings:

Estimated Project Cost: 8000

**Permit Conditions:**

- Any change or changes in the plans for development, construction or land use activities will require a re-evaluation and modification of this permit.
- No land disturbing activity within 5 feet of property line.
- Stabilize all disturbed areas prior to CO.
- Vegetation removal not proposed or authorized by this permit.
- Call for inspection once stabilization has been completed.

All provisions of laws and ordinances governing this type of work will be complied with whether specified herein or not. All land disturbing activities in association with this permit must meet the applicable land disturbing provisions of the Town of Duck Zoning Ordinance Section 156.128. The granting of this permit does not presume to give authority to violate or cancel the provisions of any other state or local law regulation. When properly validated this is your permit.

  
 Applicant Signature

10-11-19  
 Date



Department of Community Development  
PO Box 8369  
1200 Duck Road  
Town of Duck, North Carolina 27949  
(252) 255-1234

**Date Issued:**  
10/11/2019

**Permit #:**  
TR19-000275

## Mechanical Trade Permit

**Project Address:** 125 D JAY CREST RD

**PIN #:** 986805096760D

**Property Owner:** BP HOUSE LLC

**Mailing Address:** PO BOX 8399  
DUCK, NC 27949

### Permit Types:

Plumbing  Electrical  Mechanical  Gas

### Contractor:

**Company Name:** North Beach Services Heating and Cooling

**Contact Name:** Gabby Willis

**Phone:** (252) 491-2878

PO Box 181

**Address:**

**NC State License #:**

Kitty Hawk , NC 27949

**Description of Work:** Replacement of existing HVAC system with Trane 14 Seer 2 ton heat pump and matching air handler

**Project Cost Estimate:** 5,500.00

**Permit Amount:** 160.00

I hereby certify that all the information provided by me in support of this application is true and accurate to the best of my knowledge. I certify that I will comply with all applicable state and local laws and regulations pertaining to the work for which this permit is issued, and that I possess all trade contractor licenses required by the NC General Statutes and the NC Administrative Code. If I resign or am no longer affiliated with this project, I will notify the local authority (Town of Duck Building Inspector) immediately by phone or in person and in writing within three (3) working days.

Applicant Signature

Date



Department of Community Development  
PO Box 8369  
1200 Duck Road  
Town of Duck, North Carolina 27949  
(252) 255-1234

**Date Issued:**  
10/11/2019

**Permit #:**  
TR19-000276

## Mechanical Trade Permit

**Project Address:** 104 CHRISTOPHER DR  
**Property Owner:** MUSCO, JOSEPH

**PIN #:** 985916848161  
**Mailing Address:** 25 WALNUT TRL  
SANDY HOOK, CT 06482

### Permit Types:

Plumbing  Electrical  Mechanical  Gas

### Contractor:

**Company Name:** R.A. Hoy Heating & A/C  
**Phone:** (252) 261-2008

**Contact Name:** Douglas Wakeley  
P.O. Box 179

**NC State License #:** 13056

**Address:**  
Kitty Hawk, NC 27949

**Description of Work:** C/O 2 TON 16 SEER TRANE SYSTEM TOP LEVEL WITH XL724 THERMOSTAT

**Project Cost Estimate:** 8,311.00

**Permit Amount:** 160.00

I hereby certify that all the information provided by me in support of this application is true and accurate to the best of my knowledge. I certify that I will comply with all applicable state and local laws and regulations pertaining to the work for which this permit is issued, and that I possess all trade contractor licenses required by the NC General Statutes and the NC Administrative Code. If I resign or am no longer affiliated with this project, I will notify the local authority (Town of Duck Building Inspector) immediately by phone or in person and in writing within three (3) working days.

Applicant Signature \_\_\_\_\_

Date \_\_\_\_\_





Department of Community Development  
PO Box 8369  
1200 Duck Road  
Town of Duck, North Carolina 27949  
(252) 255-1234

**Date Issued:**  
10/11/2019

**Permit #:**  
TR19-000277

## Electrical Trade Permit

**Project Address:** 106 CHRISTOPHER DR  
**Property Owner:** WARD, RICHARD NOEL

**PIN #:** 985916849131  
**Mailing Address:** 1400 WHITTLE RD  
MARTINSVILLE, VA 24112

### Permit Types:

Plumbing  Electrical  Mechanical  Gas

### Contractor:

**Company Name:** David Creecy  
**Phone:** (252) 441-6955

**Contact Name:** David Creecy  
226 Rhodoms Drive  
**Address:**  
Kill Devil Hills, NC 27948

**NC State License #:** 55113

**Description of Work:** Hot tub swap out

**Project Cost Estimate:** 750.00

**Permit Amount:** 130.00

I hereby certify that all the information provided by me in support of this application is true and accurate to the best of my knowledge. I certify that I will comply with all applicable state and local laws and regulations pertaining to the work for which this permit is issued, and that I possess all trade contractor licenses required by the NC General Statutes and the NC Administrative Code. If I resign or am no longer affiliated with this project, I will notify the local authority (Town of Duck Building Inspector) immediately by phone or in person and in writing within three (3) working days.

David Creecy      10-10-19  
Applicant Signature      Date







Department of Community Development  
 PO Box 8369  
 1200 Duck Road  
 Town of Duck, North Carolina 27949  
 (252) 255-1234

Date Issued:

OCT 15 2019

Permit #:  
 B19-000236

**Building/Floodplain Development Permit**

**Project Address:** 128 SKIMMER WAY  
**Property Owner:** STALNECKER, MARK E

**PIN #:** 995119500200  
**Mailing Address:** 55 SELBOURNE DR  
 WILMINGTON, DE 19807

**Contractor:**

**Company Name:** Real Escapes, LTD  
**Phone:** (252) 491-2670  
**Email:** ljm@realescapes.com

**Contact Name:** Lillias Morrison  
**Address:** P.O. Box 98  
 Harbinger, NC 27941

**Classification:** General Contractor  
**NC State License #:** 13735  
**Expiration Date:** 12/31/2010

**Description of Work:** Renovate master bathroom on upper level

**Use:**  
 Single Family

**Structure/Work Type:**  
 Primary Structure: 3.Remodel  
 Pool/Hot Tub:  
 Deck:  
 Demo:

**Accessory Building:**  
 Bukhead (L.F.):  
 Pier (L.F.):  
 House Moving:

**Permit Amount:**  
 110.00

**Proposed Area Schedule (Sq.Ft.):** Heated: Unheated: Remodel Heated: 104 Remodel Unheated:

**Proposed Finished Grade (ft.):** N/A:  House: Pool: Driveway: Parking: Other:

**Floodplain Development:** Flood Zone: VE-12 Structure Value: Storage Below BFE:

**Vegetation Management (Sq.Ft.):** N/A:  Required Coverage: 0.0 Area Preserved: Required Plantings: 0.0

Project Cost Estimate:	Building	Electrical	Mechanical	Plumbing	Gas	Other	Total
	\$15,000.00	\$5,000.00	\$500.00	\$5,000.00	\$0.00	\$0.00	\$25,500.00

**Permit Conditions:**

- Any change or changes in the plans for development, construction or land use activities will require a re-evaluation and modification of this permit.
- The erection (including excavation), demolition, alteration or repair of any building in a residential or business district other than between the hours of 7 am and 6 pm, Monday through Saturday is prohibited.
- No change to coverage or footprint.
- Typical trade inspections required
- Call for final inspection.

This permit is issued on the expressed condition that all information is correct and all work will comply with the State Building Code and all other applicable State and Local laws, ordinances and regulations. All provisions of laws and ordinances governing this type of work will be complied with whether specified herein or not.

*Lillias J. Morrison* 10.15.19.  
 Applicant Signature Date



Department of Community Development  
PO Box 8369  
1200 Duck Road  
Town of Duck, North Carolina 27949  
(252) 255-1234

**Date Issued:**  
10/16/2019

**Permit #:**  
TR19-000278

## Mechanical Trade Permit

**Project Address:** 127 West CHARLES JENKINS LN  
**Property Owner:** ADAM, FRANK

**PIN #:** 986917000004

**Mailing Address:** 1204 DAHLIA CIRC  
WALL TOWNSHIP, NJ 07719

### Permit Types:

Plumbing  Electrical  Mechanical  Gas

### Contractor:

**Company Name:** R.A. Hoy Heating & A/C  
**Phone:** (252) 261-2008

**Contact Name:** Douglas Wakeley  
P.O. Box 179

**NC State License #:** 13056

**Address:**  
Kitty Hawk, NC 27949

**Description of Work:** C/O 3.5 TON 14 SEER TRANE SYSTEM TOP LEVEL REUSE EXISTING THERMOSTAT

**Project Cost Estimate:** 6,395.00

**Permit Amount:** 160.00

I hereby certify that all the information provided by me in support of this application is true and accurate to the best of my knowledge. I certify that I will comply with all applicable state and local laws and regulations pertaining to the work for which this permit is issued, and that I possess all trade contractor licenses required by the NC General Statutes and the NC Administrative Code. If I resign or am no longer affiliated with this project, I will notify the local authority (Town of Duck Building Inspector) immediately by phone or in person and in writing within three (3) working days.

Paul G. [Signature]      10-16-19  
Applicant Signature      Date



Department of Community Development  
 PO Box 8369, 1200 Duck Road  
 Town of Duck, North Carolina 27949  
 (252) 255-1234

Date Issued:

Permit #:  
 B19-000231

**Building Permit**

**Project Address:** 127 North SNOW GEESE DR  
**Property Owner:** CLARKE, DONALD S TTEE

**PIN #:** 995015731653  
**Mailing Address:** PO BOX 981  
 VIRGINIA BEACH, VA 23451

**Contractor/Company Name:** Outer Banks Buildings  
**Phone:** (252) 599-2521  
**Email:** forrest@outerbanksbuildings.com

**Contact Name:** Forrest Seal  
**Address:** PO Box 2333  
 Kitty Hawk, NC 27949

**Classification:** General Contractor  
**NC State License #:** 57289  
**Expiration Date:** 03/31/2017

**Description of Work:** Construct new 4 bedroom home with hot tub.

**Use:**  
 Single Family

**Structure/Work Type:**  
 Primary Structure: 1.New Construction  
 Pool/Hot Tub: Hot Tub - Portable  
 Deck: New  
 Demo:

**Accessory Building:**   
**Bukhead (L.F.):**  
**Pier (L.F.):**  
**House Moving:**

**Permit Amount:**  
 \$2,889.25

**Proposed Area Schedule (Sq.Ft.):** Heated: 2,422 Unheated: 1,657 Accessory Heated: Accessory Unheated:

**Proposed Finished Grade (ft.):** N/A:  House: 26.5 Pool: Driveway: 21 Parking: 21 Other:

**Vegetation Management (Sq.Ft.):** N/A:  Area Preserved: 1040 Required Coverage: 1256.55 Required Plantings: 216.5499999999995

Project Cost Estimate:	Building	Electrical	Mechanical	Plumbing	Gas	Other	Total
	\$426,110.00	\$20,330.00	\$20,100.00	\$22,060.00	\$1,400.00	\$0.00	\$490,000.00

**Permit Conditions:**

- Any change or changes in the plans for development, construction or land use activities will require a re-evaluation and modification of this permit.
- The erection (including excavation), demolition, alteration or repair of any building in a residential or business district other than between the hours of 7 am and 6 pm, Monday through Saturday is prohibited.
- No land disturbing activity within 5 feet of property line.
- Stabilize all disturbed areas prior to CO.
- Vegetation canopy at completion of development and prior to CO must be greater than or equal to 15% coverage of Net Lot Area. or 216.55 sf.
- Concrete driveway limited to 20 in width.
- Driveways and associated parking areas shall be located no closer than 5 feet to a side or rear lot line.
- All parking outside of 20 feet wide drive aisle to be gravel or semi-permeable material shall be bordered in a manner which retains the stone in the driveway area.
- Height certificate required prior to CO.
- Provide Final As-Built Survey with Updated Coverage Breakdown.
- Final, graded slopes must be no greater than 3:1 slope.

This permit is issued on the expressed condition that all information is correct and all work will comply with the State Building Code and all other applicable State and Local laws, ordinances and regulations. All provisions of laws and ordinances governing this type of work will be complied with whether specified herein or not.

Applicant Signature

Date



Department of Community Development  
 PO Box 8369  
 1200 Duck Road  
 Town of Duck, North Carolina 27949  
 (252) 255-1234

Date Issued:  
**OCT 18 2019**  
 Permit #:  
 B19-000229

**Building/Floodplain Development Permit**

Project Address: 126 East SEA HAWK DR  
 Property Owner: BLYNT, WILLIAM C

PIN #: 986917117489  
 Mailing Address: 9519 SUNRISE DR  
 SAUQUOIT, NY 13456

**Contractor:**

Company Name: Sandmark Custom Homes, Inc.  
 Phone: (252) 261-1123  
 Email: mark@outerbanksbuilders.com

Contact Name: Mark Martin  
 Address: P.O. Box 3219  
 Kitty Hawk, NC 27949

Classification: General Contractor  
 NC State License #: 75383  
 Expiration Date: 12/31/2017

**Description of Work:** Build dining room addition, rebuild roof, install new doors and windows, front bedroom extension, add additional driveway, reconfigure kitchen and bathrooms, add elevator

**Use:**  
 Single Family

**Structure/Work Type:**  
 Primary Structure: 3.Remodel  
 Pool/Hot Tub:  
 Deck:  
 Demo:

**Accessory Building:**  
 Bukhead (L.F.):  
 Pler (L.F.):  
 House Moving:

**Permit Amount:**  
 1,629.85

**Proposed Area Schedule (Sq.Ft.):**

Heated: 296	Unheated: 319	Renovation Heated: 1,970	Renovation Unheated: 872
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**Proposed Finished Grade (ft.):**

N/A: <input checked="" type="checkbox"/>	House:	Pool:	Driveway:	Parking:	Other:
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**Floodplain Development:**

Flood Zone: AE-9	Structure Value: \$150,900.00	Storage Below BFE:
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**Vegetation Management (Sq.Ft.):**

N/A: <input checked="" type="checkbox"/>	Required Coverage: 2019.6	Area Preserved: not provided	Required Plantings: 2019.6
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**Project Cost Estimate:**

Building	Electrical	Mechanical	Plumbing	Gas	Other	Total
\$385,700.00	\$16,000.00	\$17,500.00	\$20,050.00	\$750.00	\$0.00	\$440,000.00

**Permit Conditions:**

- Any change or changes in the plans for development, construction or land use activities will require a re-evaluation and modification of this permit.
- The erection (including excavation), demolition, alteration or repair of any building in a residential or business district other than between the hours of 7 am and 6 pm, Monday through Saturday is prohibited.
- Concrete driveway limited to 20 in width.
- Driveways and associated parking areas shall be located no closer than 5 feet to a side or rear lot line.
- All parking outside of 20 feet wide drive aisle to be gravel or semi-permeable material shall be bordered in a manner which retains the stone in the driveway area.
- Vegetation canopy at completion of development and prior to CO must be greater than or equal to 15% coverage of Net Lot Area. or 2,020 s.f.
- Height certificate required prior to CO.
- Projected project costs exceed 50% of the tax assessed value of the existing structure which will require the structure comply with current flood zone standards; applicant may supply independent appraisal for further consideration of flood determination requirements.
- Elevation Certificate Required prior to rough in and prior to CO. The regulatory flood protection elevation required for the reference level and all attendant utilities is BFE + 1 = 10.4.
- As-built Survey required prior to CO.

This permit is issued on the expressed condition that all information is correct and all work will comply with the State Building Code and all other applicable State and Local laws, ordinances and regulations. All provisions of laws and ordinances governing this type of work will be complied with whether specified herein or not.

*Amara E. Martin*  
 Applicant Signature

10/18/2019  
 Date



Department of Community Development  
PO Box 8369  
1200 Duck Road  
Town of Duck, North Carolina 27949  
(252) 255-1234

**Date Issued:**  
10/18/2019

**Permit #:**  
TR19-000279

## Electrical Trade Permit

**Project Address:** 133 MARLIN DR  
**Property Owner:** CONSTANTINO, VINCENT C

**PIN #:** 985912965131

**Mailing Address:** 6720 PASSAGEWAY PL  
BURKE, VA 22015

### Permit Types:

Plumbing  Electrical  Mechanical  Gas

### Contractor:

**Company Name:** LoWire LLC  
**Phone:** (252) 449-4690

**Contact Name:** Daniel Parsons  
P.O. Box 2751

**NC State License #:** 19043-L

**Address:**  
Kill Devil Hills, NC 27948

**Description of Work:** Install pool bond on existing pool

**Project Cost Estimate:** 600.00

**Permit Amount:** 100.00

I hereby certify that all the information provided by me in support of this application is true and accurate to the best of my knowledge. I certify that I will comply with all applicable state and local laws and regulations pertaining to the work for which this permit is issued, and that I possess all trade contractor licenses required by the NC General Statutes and the NC Administrative Code. If I resign or am no longer affiliated with this project, I will notify the local authority (Town of Duck Building Inspector) immediately by phone or in person and in writing within three (3) working days.

Daniel Parsons 10-18-19  
Applicant Signature Date





Department of Community Development  
PO Box 8369  
1200 Duck Road  
Town of Duck, North Carolina 27949  
(252) 255-1234

**Date Issued:**  
10/18/2019

**Permit #:**  
TR19-000280

## Mechanical Trade Permit

**Project Address:** 103 40 GEORGETOWN SANDS RD

**Property Owner:** LABAR, GEORGE H TRUSTEE

**PIN #:** 986917013857

**Mailing Address:** 4205 WINTERBERRY CT  
MIDLOTHIAN, VA 23112

### Permit Types:

Plumbing    Electrical    Mechanical    Gas

### Contractor:

**Company Name:** Norris Mechanical

**Phone:** (252) 491-2673

**NC State License #:** 11100

**Contact Name:** Hersey Norris

P.O. Box 217

**Address:**

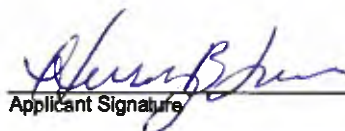
Harbinger, NC 27941

**Description of Work:** HVAC change out 2.5 ton heat pump and air handler 14 SEER

**Project Cost Estimate:** 5,000.00

**Permit Amount:** 160.00

I hereby certify that all the information provided by me in support of this application is true and accurate to the best of my knowledge. I certify that I will comply with all applicable state and local laws and regulations pertaining to the work for which this permit is issued, and that I possess all trade contractor licenses required by the NC General Statutes and the NC Administrative Code. If I resign or am no longer affiliated with this project, I will notify the local authority (Town of Duck Building Inspector) immediately by phone or in person and in writing within three (3) working days.

 Hersey Norris  
Applicant Signature

10-18-19  
Date



Department of Community Development  
 PO Box 8369, 1200 Duck Road  
 Town of Duck, North Carolina 27949  
 (252) 255-1234

Date Issued: **OCT 21 2019**

Permit #: B19-000235

**Building Permit**

**Project Address:** 108 SAILFISH CT  
**Property Owner:** VICKI ANN MORTON TTEE

**PIN #:** 995015628700  
**Mailing Address:** 108 SAIL FISH CT  
 KITTY HAWK, NC 27949

**Contractor/Company Name:** KJ Construction & Remodeling  
**Phone:** (252) 207-6589  
**Email:** kjconstructionco@yahoo.com

**Contact Name:** Keith Dobie  
**Address:** P.O. Box 242  
 Kitty Hawk, NC 27949

**Classification:** General Contractor  
**NC State License #:** 59936  
**Expiration Date:** 01/01/2012

**Description of Work:** Resurface existing cabinets, new counter tops, new faucet, new gas fireplace installed in place of existing wood fireplace, wood planking on ceiling

**Use:**  
 Single Family

**Structure/Work Type:**  
 Primary Structure: 3.Remodel  
 Pool/Hot Tub:  
 Deck:  
 Demo:

**Accessory Building:**  
 Bulkhead (L.F.):  
 Pier (L.F.):  
 House Moving:


**Permit Amount:**  
 \$135.00

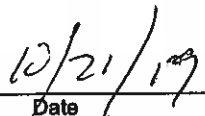
<b>Proposed Area Schedule (Sq.Ft.):</b>	<b>Heated:</b>	<b>Unheated:</b>	<b>Accessory Heated:</b>	<b>Accessory Unheated:</b>			
<b>Proposed Finished Grade (ft.):</b>	N/A: <input checked="" type="checkbox"/>	House:	Pool:	Driveway:	Parking:	Other:	
<b>Vegetation Management (Sq.Ft.):</b>	N/A: <input checked="" type="checkbox"/>	Area Preserved:	Required Coverage: 0.0	Required Plantings: 0.0			
<b>Project Cost Estimate:</b>	<b>Building</b> \$33,000.00	<b>Electrical</b> \$1,500.00	<b>Mechanical</b> \$0.00	<b>Plumbing</b> \$500.00	<b>Gas</b> \$0.00	<b>Other</b> \$0.00	<b>Total</b> \$35,000.00

**Permit Conditions:**

- Any change or changes in the plans for development, construction or land use activities will require a re-evaluation and modification of this permit.
- The erection (including excavation), demolition, alteration or repair of any building in a residential or business district other than between the hours of 7 am and 6 pm, Monday through Saturday is prohibited.
- No change to coverage or footprint.
- Typical trade inspections required
- Provide c/o2 detectors on each floor.
- Call for final inspection.

This permit is issued on the expressed condition that all information is correct and all work will comply with the State Building Code and all other applicable State and Local laws, ordinances and regulations. All provisions of laws and ordinances governing this type of work will be complied with whether specified herein or not.

  
 Applicant Signature

  
 Date





Department of Community Development  
 PO Box 8369  
 1200 Duck Road  
 Town of Duck, North Carolina 27949  
 (252) 255-1234

Date Issued:  
 OCT 22 2019

Permit #:  
 B19-000232

**Building/Floodplain Development Permit**

Project Address: 113 ACORN OAK AVE  
 Property Owner: SMITH, DANIEL

PIN #: 995006487414  
 Mailing Address: 3178 DARDEN DR  
 LAKERIDGE, VA 22192

Contractor:  
 Company Name: SAGA Construction  
 Phone: (252) 441-9003  
 Email: agupta@icrsaga.com

Contact Name: Amit Gupta  
 Address: PO Box 90  
 Kill Devil Hills, NC 27948

Classification: General Contractor  
 NC State License #: 62306U  
 Expiration Date: 12/31/2019

Description of Work: New construction of 4 BR, 4.5 bath SFD with pool, concrete pool deck; elevator to go all the way to carport with elevator pit below BFE

Use: Single Family  
 Structure/Work Type:  
 Primary Structure: 1.New Construction  
 Pool/Hot Tub: Pool Only  
 Deck: New  
 Demo:

Accessory Building:  
 Bukhead (L.F.):  
 Pier (L.F.):  
 House Moving:

Permit Amount:  
 2,801.40

Proposed Area Schedule (Sq.Ft.): Heated: 2,479 Unheated: 1,443 Accessory Heated: Accessory Unheated:

Proposed Finished Grade (ft.): N/A: House: 8.3 Pool: 8.3 Driveway: 8.3 Parking: 8.3 Other:

Floodplain Development: Flood Zone: AE-9 Structure Value: Storage Below BFE:

Vegetation Management (Sq.Ft.): N/A: Required Coverage: 1058.25 Area Preserved: not provided Required Plantings: 1058.25

Project Cost Estimate:	Building	Electrical	Mechanical	Plumbing	Gas	Other	Total
	\$329,050.00	\$13,800.00	\$12,000.00	\$12,000.00	\$5,000.00	\$0.00	\$371,850.00

**Permit Conditions:**

- Any change or changes in the plans for development, construction or land use activities will require a re-evaluation and modification of this permit.
- The erection (including excavation), demolition, alteration or repair of any building in a residential or business district other than between the hours of 7 am and 6 pm, Monday through Saturday is prohibited.
- No land disturbing activity within 5 feet of property line.
- Fill material cannot exceed 3 feet in depth.
- All fill slopes must be installed so that the toe of the slope matches the existing grade no closer than five feet to any lot line.
- Slope of any fill areas from toes of the slope to the final ground elevations can be no greater than 3:1.
- Stabilize all disturbed areas prior to CO.
- Vegetation canopy at completion of development and prior to CO must be greater than or equal to 15% coverage of Net Lot Area. or 1,058 s.f.
- Pool fence height limited to six (6) feet above adjacent grade.
- Height certificate required prior to CO.
- Elevation Certificate Required prior to rough in and prior to CO. The regulatory flood protection elevation required for the reference level and all attendant utilities is BFE + 1 = 10.4.
- Provide Final As-Built Survey with Updated Coverage Breakdown.

This permit is issued on the expressed condition that all information is correct and all work will comply with the State Building Code and all other applicable State and Local laws, ordinances and regulations. All provisions of laws and ordinances governing this type of work will be complied with whether specified herein or not.

*Tom Bennett for SAGA Construction*  
 Applicant Signature Date



Department of Community Development  
 PO Box 8369  
 1200 Duck Road  
 Town of Duck, North Carolina 27949  
 (252) 255-1234

Date Issued:  
 10/22/2019  
 Permit #:  
 B19-000239

**Building/Floodplain Development Permit**

Project Address: 140 WAMPUM DR PIN #: 986909055908  
 Property Owner: IMPLANT HAVEN, LLC by Poteskeet Village Homeowners Association Mailing Address: 30 FERGUSON CV  
 NEWPORT NEWS, VA 23606

Contractor: Company Name: ADP CONSTRUCTION Contact Name: ADRIAN PITTS Classification: General Contractor  
 Phone: (252) 305-8088 Address: 801 INDIAN TRAIL DRIVE NC State License #: 0196-33629-0  
 Email: adp8088@gmail.com KILL DEVIL HILLS, NC 27948 Expiration Date: 07/07/2013

Description of Work: Repair/replace oceanfront community beach access from dune deck east, keeping walkway and stairs at 4' wide.  
 Replace benches on dune deck.

Use: Beach Stair/Access Structure/Work Type: Primary Structure:  Accessory Building:   
 Pool/Hot Tub: Deck: Bukhead (L.F.):  
 Demo: Pler (L.F.):  
 House Moving:  
 Permit Amount: 25.00

Proposed Area Schedule (Sq.Ft.): Heated: Unheated: Accessory Heated: Accessory Unheated:

Proposed Finished Grade (ft.): N/A:  House: Pool: Driveway: Parking: Other:

Floodplain Development: Flood Zone: VE-12 Structure Value: Storage Below BFE:

Vegetation Management (Sq.Ft.): N/A:  Required Coverage: n/a Area Preserved: n/a Required Plantings: n/a

Project Cost Estimate:	Building	Electrical	Mechanical	Plumbing	Gas	Other	Total
	\$16,000.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$16,000.00

- Permit Conditions:
- Any change or changes in the plans for development, construction or land use activities will require a re-evaluation and modification of this permit.
  - The erection (including excavation), demolition, alteration or repair of any building in a residential or business district other than between the hours of 7 am and 6 pm, Monday through Saturday is prohibited.
  - Stairs and/or walkway can be no wider than four feet measured at the widest outside dimension unless an engineered design is provided that meets the V-Zone provisions of the building code.
  - The underside of the dune walkover structure across the frontal or primary dune shall be a minimum of 18 inches and a maximum of 30 inches above grade.
  - Dune walkover structures shall be constructed so that the staircase turns parallel to the dune if there is more than a 12-foot-vertical rise in the staircase required to provide access to the surface of the beach. The requirement to turn the stairs shall not apply in instances where it would preclude the placement of the stairs entirely within the subject property.
  - Dune walkover structures shall be located such that the first step down to the beach is placed no farther seaward than the beginning of the downward slope of the dune.
  - Pursuant to CAMA 15A NCAC 7K.0207 structural accessways are exempt from needing a CAMA minor development permit provided the accessway does not exceed six feet in width and shall provide only pedestrian access to the ocean beach. The accessway must be constructed so as to make negligible alterations to the frontal dunes. This means that the accessway must be constructed on raised posts or pilings of five feet or less in depth, so that wherever possible only the posts or pilings touch the frontal dunes without any alteration to the dunes. In no case shall the frontal dune be altered so as to significantly diminish its capacity as a protective barrier against flooding and erosion.
  - Call for an on-site meeting prior to the start of construction and for a final inspection. \_\_\_\_\_ initial

This permit is issued on the expressed condition that all information is correct and all work will comply with the State Building Code and all other applicable State and Local laws, ordinances and regulations. All provisions of laws and ordinances governing this type of work will be complied with whether specified herein or not.

Applicant Signature \_\_\_\_\_ Date \_\_\_\_\_



Department of Community Development  
PO Box 8369  
1200 Duck Road  
Town of Duck, North Carolina 27949  
(252) 255-1234

**Date Issued:**  
10/23/2019

**Permit #:**  
TR19-000281

## Mechanical Trade Permit

**Project Address:** 106 SAILFISH CT  
**Property Owner:** DELFING, WILLIAM

**PIN #:** 995015627710

**Mailing Address:** 8 HIGH ST  
ANDOVER, NJ 07821

### Permit Types:

Plumbing  Electrical  Mechanical  Gas

### Contractor:

**Company Name:** Air Handlers

**Phone:**

**NC State License #:**

**Contact Name:** Ryan Johnston

PO Box 309

**Address:**

Harbinger, NC 27941

**Description of Work:** Remove and replace 2 ton HVAC system

**Project Cost Estimate:** 6,358.00

**Permit Amount:** 160.00

I hereby certify that all the information provided by me in support of this application is true and accurate to the best of my knowledge. I certify that I will comply with all applicable state and local laws and regulations pertaining to the work for which this permit is issued, and that I possess all trade contractor licenses required by the NC General Statutes and the NC Administrative Code. If I resign or am no longer affiliated with this project, I will notify the local authority (Town of Duck Building Inspector) immediately by phone or in person and in writing within three (3) working days.

Applicant Signature

Date



Department of Community Development  
PO Box 8369  
1200 Duck Road  
Town of Duck, North Carolina 27949  
(252) 255-1234

**Date Issued:**  
10/23/2019

**Permit #:**  
TR19-000282

## Gas Trade Permit

**Project Address:** 103 DUCK RIDGE VILLAGE CT

**Property Owner:** MASSIE, JAMES

**PIN #:** 985912758484

**Mailing Address:** 103 DUCK RIDGE VILLAGE CT  
DUCK, NC 27949

## Permit Types:

Plumbing  Electrical  Mechanical  Gas

## Contractor:

**Company Name:** Outer Banks LP Gas & Appliances

**Phone:** (252) 473-3200

**NC State License #:** 21896 - unlimited

**Contact Name:** Ted Mosely

538 Parkwood Drive

**Address:**

Kill Devil Hills, NC 27948

**Description of Work:** Running gas line for generator

**Project Cost Estimate:** 2,500.00

**Permit Amount:** 120.00

I hereby certify that all the information provided by me in support of this application is true and accurate to the best of my knowledge. I certify that I will comply with all applicable state and local laws and regulations pertaining to the work for which this permit is issued, and that I possess all trade contractor licenses required by the NC General Statutes and the NC Administrative Code. If I resign or am no longer affiliated with this project, I will notify the local authority (Town of Duck Building Inspector) immediately by phone or in person and in writing within three (3) working days.

  
Applicant Signature

10-29-19  
Date



Department of Community Development  
 PO Box 8369, 1200 Duck Road  
 Town of Duck, North Carolina 27949  
 (252) 255-1234

Date Issued:  
**OCT 24 2019**  
 Permit #:  
 B19-000240

**Building Permit**

**Project Address:** 116 North SNOW GEESE DR  
**Property Owner:** COBB, DEBRA D

**PIN #:** 995015638749  
**Mailing Address:** 1233 KITTELY DR  
 VIRGINIA BEACH, VA 23464

**Contractor/Company Name:** First Flight Home Services  
**Phone:**  
**Email:** firstflightobx@gmail.com

**Contact Name:** Steve House  
**Address:** 934 W Kitty Hawk Rd  
 Kitty Hawk, NC 27949

**Classification:** Citizen  
**NC State License #:**  
**Expiration Date:**

**Description of Work:** Demolition and dry out water damage

**Use:**  
 Single Family

**Structure/Work Type:**  
 Primary Structure: 4.Repair/Maintenance  
 Pool/Hot Tub:  
 Deck:  
 Demo:

**Accessory Building:**  
 Bukhead (L.F.):  
 Pier (L.F.):  
 House Moving:

**Permit Amount:**  
 \$100.00

<b>Proposed Area Schedule (Sq.Ft.):</b>	Heated:	Unheated:	Accessory Heated:	Accessory Unheated:			
<b>Proposed Finished Grade (ft.):</b>	N/A: ✓	House:	Pool:	Driveway:	Parking:	Other:	
<b>Vegetation Management (Sq.Ft.):</b>	N/A: ✓	Area Preserved:	Required Coverage: 0.0	Required Plantings: 0.0			
<b>Project Cost Estimate:</b>	<b>Building</b> \$0.00	<b>Electrical</b> \$0.00	<b>Mechanical</b> \$0.00	<b>Plumbing</b> \$0.00	<b>Gas</b> \$0.00	<b>Other</b> \$30,000.00	<b>Total</b> \$30,000.00

**Permit Conditions:**

- Any change or changes in the plans for development, construction or land use activities will require a re-evaluation and modification of this permit.
- The erection (including excavation), demolition, alteration or repair of any building in a residential or business district other than between the hours of 7 am and 6 pm, Monday through Saturday is prohibited.
- This permit is for demolition and mitigation work only. Reconstruction will require a separate permit and review. SH (Initial).
- Call for final inspection.

This permit is issued on the expressed condition that all information is correct and all work will comply with the State Building Code and all other applicable State and Local laws, ordinances and regulations. All provisions of laws and ordinances governing this type of work will be complied with whether specified herein or not.

[Signature]                      10-24-19  
 Applicant Signature                      Date



Department of Community Development  
 PO Box 8369, 1200 Duck Road  
 Town of Duck, North Carolina 27949  
 (252) 255-1234

Date Issued:  
**OCT 24 2019**

Permit #:  
 B19-000242

**Building Permit**

**Project Address:** 113 TOPSAIL CT  
**Property Owner:** SHIPS WATCH ASSOCIATION

**PIN #:** 985908789654  
**Mailing Address:** 1251 DUCK RD  
 KITTY HAWK, NC 27949

**Contractor/Company Name:** Sea Thru Construction, Inc.  
**Phone:** (252) 491-6964  
**Email:** vickie@seathruconstruction.com

**Contact Name:** Scott Woolard  
**Address:** P.O. Box 2471  
 Kitty Hawk, NC 27949

**Classification:** General Contractor  
**NC State License #:** 57130  
**Expiration Date:**


**Description of Work:** Remove existing rails, pickets, and posts on top level decks and steps leading to top level deck and replace with new.

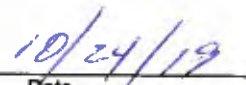
<b>Use:</b> Other	<b>Structure/Work Type:</b> Primary Structure: Pool/Hot Tub: Deck: <b>Repair</b> Demo:						<b>Accessory Building:</b> Bukhead (L.F.): Pier (L.F.): House Moving:	
<b>Permit Amount:</b> \$110.00								
<b>Proposed Area Schedule (Sq.Ft.):</b>	Heated:	Unheated:	Accessory Heated:		Accessory Unheated:			
<b>Proposed Finished Grade (ft.):</b>	N/A: ✓	House:	Pool:	Driveway:	Parking:	Other:		
<b>Vegetation Management (Sq.Ft.):</b>	N/A: ✓	Area Preserved:	Required Coverage: 0.0		Required Plantings: 0.0			
<b>Project Cost Estimate:</b>	<b>Building</b> \$9,230.00	<b>Electrical</b> \$0.00	<b>Mechanical</b> \$0.00	<b>Plumbing</b> \$0.00	<b>Gas</b> \$0.00	<b>Other</b> \$0.00	<b>Total</b> \$9,230.00	

**Permit Conditions:**

- Any change or changes in the plans for development, construction or land use activities will require a re-evaluation and modification of this permit.
- The erection (including excavation), demolition, alteration or repair of any building in a residential or business district other than between the hours of 7 am and 6 pm, Monday through Saturday is prohibited.
- Repair & maintenance only
- No change to coverage or footprint.
- 2- 3/8" bolts required per post. All spacing of openings shall be constructed so that a 4" sphere cannot pass through.
- Call for final inspection.

This permit is issued on the expressed condition that all information is correct and all work will comply with the State Building Code and all other applicable State and Local laws, ordinances and regulations. All provisions of laws and ordinances governing this type of work will be complied with whether specified herein or not.

  
 Applicant Signature

  
 Date





Department of Community Development  
PO Box 8369  
1200 Duck Road  
Town of Duck, North Carolina 27949  
(252) 255-1234

**Date Issued:**  
10/25/2019

**Permit #:**  
TR19-000283

## Mechanical Trade Permit

**Project Address:** 102 West BIAS DR  
**Property Owner:** DUKOWSKI, DARRYL J

**PIN #:** 986917102488  
**Mailing Address:** PO BOX 8102  
KITTY HAWK, NC 27949

### Permit Types:

Plumbing    Electrical    Mechanical    Gas

### Contractor:

**Company Name:** All-In-One Mechanical  
**Phone:** (252) 491-5334

**Contact Name:** Ray Etheridge  
114-A Ballast Rock Road

**NC State License #:** 27675

**Address:**  
Powells Point, NC 27966

**Description of Work:** Remove and install new 2.5 ton R-410a 14 SEER American Standard heat pump system with 10 kw aux. heat

**Project Cost Estimate:** 5,800.00

**Permit Amount:** 160.00

I hereby certify that all the information provided by me in support of this application is true and accurate to the best of my knowledge. I certify that I will comply with all applicable state and local laws and regulations pertaining to the work for which this permit is issued, and that I possess all trade contractor licenses required by the NC General Statutes and the NC Administrative Code. If I resign or am no longer affiliated with this project, I will notify the local authority (Town of Duck Building Inspector) immediately by phone or in person and in writing within three (3) working days.

Applicant Signature \_\_\_\_\_

Date \_\_\_\_\_



Department of Community Development  
PO Box 8369  
1200 Duck Road  
Town of Duck, North Carolina 27949  
(252) 255-1234

**Date Issued:**  
10/25/2019  
**Permit #:**  
TR19-000284

## Mechanical Trade Permit

**Project Address:** 102 DUCK LANDING LN  
**Property Owner:** KONCIR, ROBERT J

**PIN #:** 985916847845  
**Mailing Address:** 562 WHISPERING TRL  
MIDDLETOWN, DE 19709

### Permit Types:

Plumbing    Electrical     Mechanical    Gas

### Contractor:

**Company Name:** Atlantic Heating & Cooling, LTD  
**Phone:** (252) 441-7642

**Contact Name:** Henry Liverman  
P.O. Box 132

**NC State License #:** 9865, H2, H3, Class 1


**Address:**  
Kill Devil Hills, NC 27948

**Description of Work:** Remove & replace indoor & outdoor sections of all three HVAC systems using 14 SEER Goodman heat pumps & matching Goodman air handlers. 1.5 ton downstairs, 2 ton mid level, 3 ton upstairs.

**Project Cost Estimate:** 14,840.00

**Permit Amount:** 280.00

I hereby certify that all the information provided by me in support of this application is true and accurate to the best of my knowledge. I certify that I will comply with all applicable state and local laws and regulations pertaining to the work for which this permit is issued, and that I possess all trade contractor licenses required by the NC General Statutes and the NC Administrative Code. If I resign or am no longer affiliated with this project, I will notify the local authority (Town of Duck Building Inspector) immediately by phone or in person and in writing within three (3) working days.

 10-29-19  
Applicant Signature                      Date





Department of Community Development  
 PO Box 8369, 1200 Duck Road  
 Town of Duck, North Carolina 27949  
 (252) 255-1234

Date Issued:  
**OCT 25 2019**  
 Permit #:  
 B19-000238

**Building Permit**

**Project Address:** 100 PINTAIL DR  
**Property Owner:** BARTLETT, JAMES

**PIN #:** 995015546510  
**Mailing Address:** 6011 RICKETTS WALK  
 ALEXANDRIA, VA 22312

**Contractor/Company Name:** Piddington Construction  
**Phone:** 252-207-1122  
**Email:** mikelmia@gmail.com

**Contact Name:** Mike Piddington  
**Address:** 2 Ginguite Trail  
 Kitty Hawk, NC 27949  
**Classification:** General Contractor  
**NC State License #:** 52198  
**Expiration Date:**

**Description of Work:** MASTER BATHROOM REMODEL: REMOVE SOAKING TUB AND MAKING A WALK-IN SHOWER, RELOCATE PARTITION WALL  
 RELOCATE TOILET

**Use:** Single Family  
**Permit Amount:** \$135.00  
**Structure/Work Type:** Primary Structure: 3.Remodel  
 Pool/Hot Tub:  
 Deck:  
 Demo:  
**Accessory Building:**  
 Bukhead (L.F.):  
 Pier (L.F.):  
 House Moving:

<b>Proposed Area Schedule (Sq.Ft.):</b>	Heated: 100	Unheated:	Accessory Heated:	Accessory Unheated:			
<b>Proposed Finished Grade (ft.):</b>	N/A: <input checked="" type="checkbox"/>	House:	Pool:	Driveway:	Parking:	Other:	
<b>Vegetation Management (Sq.Ft.):</b>	N/A: <input checked="" type="checkbox"/>	Area Preserved:	Required Coverage: 0.0	Required Plantings: 0.0			
<b>Project Cost Estimate:</b>	<b>Building</b> \$10,000.00	<b>Electrical</b> \$2,500.00	<b>Mechanical</b> \$0.00	<b>Plumbing</b> \$2,500.00	<b>Gas</b> \$0.00	<b>Other</b> \$0.00	<b>Total</b> \$15,000.00

**Permit Conditions:**

- The erection (including excavation), demolition, alteration or repair of any building in a residential or business district other than between the hours of 7 am and 6 pm, Monday through Saturday is prohibited.
- Any change or changes in the plans for development, construction or land use activities will require a re-evaluation and modification of this permit.
- No change to coverage or footprint.
- Typical trade inspections required
- Call for final inspection.

This permit is issued on the expressed condition that all information is correct and all work will comply with the State Building Code and all other applicable State and Local laws, ordinances and regulations. All provisions of laws and ordinances governing this type of work will be complied with whether specified herein or not.

10/25/19  
 Date

Applicant Signature





Department of Community Development  
 PO Box 3369, 1200 Duck Road  
 Town of Duck, North Carolina 27949  
 (252) 255-1234

Date Issued:  
10/29/2019

Permit #:  
B19-000241

**Building Permit**

**Save**

Project Address: 121 DUNE RD  
 Property Owner: TRUSS, ANN

PIN #: 985912873005  
 Mailing Address: 4405 BRADLEY LN  
 CHEVY CHASE, MD 20815

Contractor/Company Name: RGR Corp dba So Nice Again  
 Phone: (252) 261-8448  
 Email: thomas@soniceagain.com

Contact Name: Thomas Snyder  
 Address: PO Box 253  
 Kitty Hawk, NC 27949

Classification: General Contractor  
 NC State License #: 79762  
 Expiration Date:

Description of Work: Water damage due to pipe leak ground level ceiling; remove and replace wet building products on the lower level—drywall, insulation, wood panelling, vinyl flooring; remove 4 ft from floor

<b>Use:</b> Single Family	<b>Structure/Work Type:</b> Primary Structure: 4.Repair/Maintenance Pool/Hot Tub:	<b>Accessory Building:</b>
<b>Permit Amount:</b> \$100.00	<b>Deck:</b> <b>Demo:</b>	<b>Bukhead (L.F.):</b> <b>Pier (L.F.):</b> <b>House Moving:</b>

<b>Proposed Area Schedule (Sq.Ft.):</b>	<b>Heated:</b>	<b>Unheated:</b>	<b>Accessory Heated:</b>	<b>Accessory Unheated:</b>
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<b>Proposed Finished Grade (ft.):</b>	<b>N/A:</b> <input checked="" type="checkbox"/>	<b>House:</b>	<b>Pool:</b>	<b>Driveway:</b>	<b>Parking:</b>	<b>Other:</b>
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<b>Vegetation Management (Sq.Ft.):</b>	<b>N/A:</b> <input checked="" type="checkbox"/>	<b>Area Preserved:</b>	<b>Required Coverage:</b> 0.0	<b>Required Plantings:</b> 0.0
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<b>Project Cost Estimate:</b>	<b>Building</b> \$10,000.00	<b>Electrical</b> \$0.00	<b>Mechanical</b> \$0.00	<b>Plumbing</b> \$0.00	<b>Gas</b> \$0.00	<b>Other</b> \$0.00	<b>Total</b> \$10,000.00
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**Permit Conditions:**

- Any change or changes in the plans for development, construction or land use activities will require a re-evaluation and modification of this permit.
- The erection (including excavation), demolition, alteration or repair of any building in a residential or business district other than between the hours of 7 am and 6 pm, Monday through Saturday is prohibited.
- Call for inspection if rot is found; if no rot is found provide letter stating same for CO.
- Repair & maintenance only
- No change to coverage or footprint.
- Typical trade inspections required
- Call for final inspection/

This permit is issued on the expressed condition that all information is correct and all work will comply with the State Building Code and all other applicable State and Local laws, ordinances and regulations. All provisions of laws and ordinances governing this type of work will be complied with whether specified herein or not.

*Paul Snyder / So Nice Again* 10/29/19  
 Applicant Signature Date



Department of Community Development  
PO Box 8369  
1200 Duck Road  
Town of Duck, North Carolina 27949  
(252) 255-1234

**Date Issued:**  
10/29/2019

**Permit #:**  
TR19-000285

## Mechanical Trade Permit

**Project Address:** 116 North SNOW GEESE DR

**Property Owner:** COBB, DEBRA D

**PIN #:** 995015638749

**Mailing Address:** 1233 KITTEERY DR  
VIRGINIA BEACH, VA 23464

## Permit Types:

Plumbing  Electrical  Mechanical  Gas

## Contractor:

**Company Name:** Dusty Rhoads HVAC, Inc.

**Phone:** (252) 261-5892

**NC State License #:** 21691

**Contact Name:** Clarence A. Dusty Rhoads, II

P.O. Box 444

**Address:**

Kitty Hawk, NC 27949

**Description of Work:** Replace lower level 2 ton HVAC system using 14 SEER r410A ICP coastal system

**Project Cost Estimate:** 6,500.00

**Permit Amount:** 160.00

I hereby certify that all the information provided by me in support of this application is true and accurate to the best of my knowledge. I certify that I will comply with all applicable state and local laws and regulations pertaining to the work for which this permit is issued, and that I possess all trade contractor licenses required by the NC General Statutes and the NC Administrative Code. If I resign or am no longer affiliated with this project, I will notify the local authority (Town of Duck Building Inspector) immediately by phone or in person and in writing within three (3) working days.

  
Applicant Signature

10/29/19  
Date



Department of Community Development  
 PO Box 8369, 1200 Duck Road  
 Town of Duck, North Carolina 27949  
 (252) 255-1234

Date issued: **OCT 30 2019**  
 Permit #: B19-000220

**Building Permit**

**Project Address:** 118 SPRIGTAIL DR  
**Property Owner:** HILL, CHARLES PAUL

**PIN #:** 995011651746  
**Mailing Address:** P O BOX 162  
 PORT TOBACCO, MD 20677

<b>Contractor/Company Name:</b>	<b>Contact Name:</b>	HILL, CHARLES PAUL	<b>Classification:</b>
<b>Phone:</b>	<b>Address:</b>	P O BOX 162	<b>NC State License #:</b>
<b>Email:</b>		PORT TOBACCO, MD 20677	<b>Expiration Date:</b>

**Description of Work:** Replace pool fence damaged by Hurricane Dorian

<b>Use:</b> Other	<b>Structure/Work Type:</b> Primary Structure: Pool/Hot Tub: Deck: Repair Demo:	<b>Accessory Building:</b> Bulkhead (L.F.): Pier (L.F.): House Moving:
<b>Permit Amount:</b> \$100.00		

<b>Proposed Area Schedule (Sq.Ft.):</b>	<b>Heated:</b>	<b>Unheated:</b>	<b>Accessory Heated:</b>	<b>Accessory Unheated:</b>
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<b>Proposed Finished Grade (ft.):</b>	N/A: <input checked="" type="checkbox"/>	House:	Pool:	Driveway:	Parking:	Other:
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<b>Vegetation Management (Sq.Ft.):</b>	N/A: <input checked="" type="checkbox"/>	Area Preserved:	Required Coverage: 0.0	Required Plantings: 0.0
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<b>Project Cost Estimate:</b>	<b>Building</b>	<b>Electrical</b>	<b>Mechanical</b>	<b>Plumbing</b>	<b>Gas</b>	<b>Other</b>	<b>Total</b>
	\$1,396.93	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$1,396.93

**Permit Conditions:**

- Any change or changes in the plans for development, construction or land use activities will require a re-evaluation and modification of this permit.
- The erection (including excavation), demolition, alteration or repair of any building in a residential or business district other than between the hours of 7 am and 6 pm, Monday through Saturday is prohibited.
- Pool fence height limited to six (6) feet above adjacent grade.
- Typical trade inspections required
- Call for final inspection.

This permit is issued on the expressed condition that all information is correct and all work will comply with the State Building Code and all other applicable State and Local laws, ordinances and regulations. All provisions of laws and ordinances governing this type of work will be complied with whether specified herein or not.

Charles Hill      10/30/2019  
 Applicant Signature      Date



Department of Community Development  
 PO Box 8369  
 1200 Duck Road  
 Town of Duck, North Carolina 27949  
 (252) 255-1234

Date Issued:

OCT 30 2019  
 Permit #:  
 B19-000233

**Building/Floodplain Development Permit**

**Project Address:** 135 COOK DR  
**Property Owner:** BERRY, DOUGLAS

**PIN #:** 985912965881  
**Mailing Address:** 3216 ROCKHILL RD  
 PERKIOMENVILLE, PA 18074

**Contractor:**

**Company Name:** Stan White Realty and Construction  
**Phone:** (252) 261-4614  
**Email:** cmfunk@outerbanksrentals.com

**Contact Name:** CM Funk  
**Address:** P.O. Drawer 1447  
 Nage Head, NC 27959

**Classification:** General Contractor  
**NC State License #:**  
**Expiration Date:**

**Description of Work:** Build addition to existing house, enlarging existing bedroom, adding a full bath, adding elevator, storage room and tower room

**Use:** Single Family  
**Structure/Work Type:** Primary Structure: 2.Addition  
 Pool/Hot Tub:  
**Permit Amount:** 692.45  
 Deck:  
 Demo:

**Accessory Building:**  
 Bukhead (L.F.):  
 Pier (L.F.):  
 House Moving:

**Proposed Area Schedule (Sq.Ft.):** Heated: 737 Unheated: 224 Accessory Heated: Accessory Unheated:

**Proposed Finished Grade (ft.):** N/A:  House: Pool: Driveway: Parking: Other:

**Floodplain Development:** Flood Zone: AE-9 Structure Value: \$323,631.00 Storage Below BFE:

**Vegetation Management (Sq.Ft.):** N/A:  Required Coverage: 1500.1499999999999 Area Preserved: 0 Required Plantings: 1500.1499999999999

Project Cost Estimate:	Building	Electrical	Mechanical	Plumbing	Gas	Other	Total
	\$145,774.85	\$6,000.00	\$4,000.00	\$4,200.00	\$0.00	\$0.00	\$159,974.85

**Permit Conditions:**

- Any change or changes in the plans for development, construction or land use activities will require a re-evaluation and modification of this permit.
- The erection (including excavation), demolition, alteration or repair of any building in a residential or business district other than between the hours of 7 am and 6 pm, Monday through Saturday is prohibited.
- Stabilize all disturbed areas prior to CO.
- Height certificate required prior to CO.
- As-built Survey required prior to CO;
- Elevation Certificate required prior to CO.
- Addition and all associated utilities must meet regulatory flood protection elevation requirements. *CMF* (initial)
- Structure completed and grandfathered under "X" flood zone. This project has been deemed to be less than a substantial improvement.
- Final project cost sheet to be provided prior to CO.

This permit is issued on the expressed condition that all information is correct and all work will comply with the State Building Code and all other applicable State and Local laws, ordinances and regulations. All provisions of laws and ordinances governing this type of work will be complied with whether specified herein or not.

*CMF*  
 Applicant Signature 10-31-19 Date



Department of Community Development  
PO Box 8369  
1200 Duck Road  
Town of Duck, North Carolina 27949  
(252) 255-1234

**Date Issued:**  
10/31/2019  
**Permit #:**  
TR19-000286

## Plumbing Trade Permit

**Project Address:** 138 MARLIN DR  
**Property Owner:** PANEK, MARY G

**PIN #:** 985912982303  
**Mailing Address:** 3425 DOVER RD  
DURHAM, NC 27707

### Permit Types:

Plumbing     Electrical     Mechanical     Gas

### Contractor:

**Company Name:** Absolute Plumbing  
**Phone:** (252) 996-0891

**Contact Name:** Ken Long, Sr.  
110 Quarter Landing Court

**Address:**

**NC State License #:** 30190

Harbinger, NC 27941

**Description of Work:** 138 Marlin Dr: Replacement of a 65 gallon water heater with an 80 gallon water heater.

**Project Cost Estimate:** 2,800.00

**Permit Amount:** 110.00

I hereby certify that all the information provided by me in support of this application is true and accurate to the best of my knowledge. I certify that I will comply with all applicable state and local laws and regulations pertaining to the work for which this permit is issued, and that I possess all trade contractor licenses required by the NC General Statutes and the NC Administrative Code. If I resign or am no longer affiliated with this project, I will notify the local authority (Town of Duck Building Inspector) immediately by phone or in person and in writing within three (3) working days.

  
Applicant Signature      Date 11/1/19





Department of Community Development  
 PO Box 8369  
 1200 Duck Road  
 Town of Duck, North Carolina 27949  
 (252) 255-1234

Date Issued:

OCT 31 2019

Permit #:  
 LD19-000037

### Land Disturbance/Floodplain Development Permit

Project Address: 145 SCARBOROUGH LN  
 Property Owner: SCATTON, BARRY

PIN #: 986913036463

Mailing Address: 2315 BRIAR RIDGE LN  
 HARLEYSVILLE, PA 19438

**Contractor:**

Company Name:  
 Phone:  
 Email:

Contact Name: SCATTON, BARRY  
 Address: 2315 BRIAR RIDGE LN  
 HARLEYSVILLE, PA 19438

Classification:  
 NC State License #:  
 Expiration Date:

Description of Work: Add fill to the rear yard  
 Permit Amount: 25.00  
 Land Disturbing Activity:

Parking	Driveway	New Septic	Stormwater Conveyance	<input checked="" type="checkbox"/> Grading/Filling
Landscaping/Minor Grading	Irrigation	Septic Repair	Stormwater Retention	Vegetation Removal

Proposed Finished Grade (ft.):  
 N/A:  Driveway: Parking: Other:

Floodplain Development: Flood Zone: AE-9 BFE: 9

Vegetation Management (Sq.Ft.):  
 N/A:  Required Coverage: 0.0 Area Preserved: Required Plantings:

Estimated Project Cost: 5000

**Permit Conditions:**

- The erection (including excavation), demolition, alteration or repair of any building in a residential or business district other than between the hours of 7 am and 6 pm, Monday through Saturday is prohibited.
- Any change or changes in the plans for development, construction or land use activities will require a re-evaluation and modification of this permit.
- No areas of fill, including graded and leveled areas, may exceed 3 feet in depth.
- Slope of any fill areas from toes of the slope to the final ground elevations can be no greater than 3:1.
- All fill slopes must be installed so that the toe of the slope matches the existing grade no closer than five feet to any lot line.
- Call for inspection once fill has been placed, and also once stabilization has been completed.
- Stabilize all disturbed areas prior to CO.

All provisions of laws and ordinances governing this type of work will be complied with whether specified herein or not. All land disturbing activities in association with this permit must meet the applicable land disturbing provisions of the Town of Duck Zoning Ordinance Section 156.128. The granting of this permit does not presume to give authority to violate or cancel the provisions of any other state or local law regulation. When properly validated this is your permit.

Applicant Signature  Date OCT 31 2019





**Town of Kitty Hawk, NC**  
 101 Veterans Memorial Drive  
 Kitty Hawk, NC 27949  
 Phone: (252) 261-3552

**PERMIT**

Permit NO. **19368**  
 Permit Type: Residential  
 Work Classification: [Permit Type]  
 Permit Status: Pending

Issue Date: 10/1/2019

Expires: 3/29/2020

Main Permit: Main Permit

**Project Address**

4905 The Woods Road

**Lot**

9

**Flood Zone**

AE

**Owner Information**

Jeffrey D Ballard

**Applicant Information**

B & B Contractors - Jeffrey Ballard

**Zoning**

KHW

**Block**

**Constuction Type**

Accessory Structure

**Address**

P O Box 2998

Kitty Hawk NC 27949

**Address**

P O Box 2998

Kitty Hawk, NC 27949

**Subdivision**

SOUTHERN WOODS PH 1

**PIN**

986611750794

**Building Code**

BLDG2018

**Phone**

252-489-9551

**Phone**

252-489-9551

<b>Contractor(s)</b>	<b>Phone</b>	<b>Contractor Type</b>	<b>License Number</b>	<b>Construction Cost:</b>	<b>30000.00</b>
				<b>Unheated Sq. Feet</b>	<b>0.00</b>
				<b>Total Sq. Feet:</b>	<b>0.00</b>
B & B Contractors	(252)489-9551	General	60944		
TBD	000-000-0000	Mechanical	00000		
TBD	000-000-0000	Plumbing	00000		
TBD	000-000-0000	Electrical	00000		

**Description of Work: Add 30 x 36 2 story detached garage/storage with bathroom**

**Building Comments:**

Permit Cost - \$539.00 The following items are required: Termite Affidavit required prior to Rough-In Inspection; Duct Test required prior to Rough-In Inspection; Energy Certificate required prior to Pre-Final Inspection; Completed Septic Permit required prior to Final Inspection;

**Planning Conditions:**

Flood Zone-AE; Elevation-8.3'+1'=9.3'; Map#-3720986600J; Effective-09/20/2006; Height Certificate required prior to Rough-In Inspection; Original Finished Construction Elevation Certificate required prior to Pre-Final Inspection; As-Built Survey required prior to Final Inspection; First floor elevation (FFE)(bathroom floor) & all attendant utilities must be at or above 9.3';

The work authorized by this permit is to be performed in accordance with the applicable Kitty Hawk Zoning Restrictions and with the Laws Governing Building Construction in the State of North Carolina and ordinances adopted by the Town of Kitty Hawk.

Any change in the work as specified is subject to prior approval of the Building Inspector.

**Owner / Applicant / Contractor / Agent** \_\_\_\_\_ **Date** \_\_\_\_\_

**Building Official** \_\_\_\_\_ **Date** \_\_\_\_\_



**Town of Kitty Hawk, NC**  
 101 Veterans Memorial Drive  
 Kitty Hawk, NC 27949  
 Phone: (252) 261-3552

**PERMIT**

Permit NO. **19371**  
 Permit Type: Residential  
 Work Classification: [Permit Type]  
 Permit Status: Pending

Issue Date: 9/30/2019

Expires: 3/28/2020

Main Permit: Main Permit

**Project Address**

4221 Ivy Lane

**Lot**

**Zoning**

VR-1

**Block**

**Subdivision**

SUBDIVISION - NONE

**PIN**

986507594003

**Flood Zone**

AE

**Constuction Type**

Addition

**Building Code**

BLDG2018

**Owner Information**

Jeremy D & Christine R Schleiden

**Address**

4221 Ivy Lane  
 Kitty Hawk NC 27949

**Phone**

**Applicant Information**

Croatan Custom Homes

**Address**

112 Mariners View  
 Kitty Hawk, NC 27949

**Phone**

619-886-6107

**Construction Cost:** 100000.00

**Unheated Sq. Feet** 0.00

**Total Sq. Feet:** 1196.00

<b>Contractor(s)</b>	<b>Phone</b>	<b>Contractor Type</b>	<b>License Number</b>
Croatan Custom Homes LLC	252-715-2731	General	76893
TBD	000-000-0000	Mechanical	00000
TBD	000-000-0000	Plumbing	00000
TBD	000-000-0000	Electrical	00000

**Description of Work: Addition to existing house to add 1 bedroom, office/study, rec room, library and bathroom - 1196 heated sq ft;**

**Building Comments:**

Permit Cost - \$950.00 The following items are required: Termite Affidavit prior to Rough-In Inspection; Duct Test prior to Rought-In Inspection; Energy Certificate prior to Pre-Final Inspection; Completed septic permit prior to Final Inspection;

**Planning Conditions:**

Flood Zone-AE; Elevation-8.3'+1'=9.3'; Map# - 3720986500J; Effective-09/20/2006; The following items are required: Height Certificate prior to Rough-In Inspection; Original Finished Elevation Certificate required prior to Pre-Final Inspection; As-Built Survey required prior to Final Inspection; First floor elevation of addition and all attendant utilities must be at or above 9.3' NAVD; Below BFE enclosures are to be used for parking vehicles, building access or storage only.

The work authorized by this permit is to be performed in accordance with the applicable Kitty Hawk Zoning Restrictions and with the Laws Governing Building Construction in the State of North Carolina and ordinances adopted by the Town of Kitty Hawk.

Any change in the work as specified is subject to prior approval of the Building Inspector.

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**Owner / Applicant / Contractor / Agent** \_\_\_\_\_ **Date** \_\_\_\_\_

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**Town of Kitty Hawk, NC**  
 101 Veterans Memorial Drive  
 Kitty Hawk, NC 27949  
 Phone: (252) 261-3552

**PERMIT**

Permit NO. **19377**  
 Permit Type: Residential  
 Work Classification: [Permit Type]  
 Permit Status: Pending

Issue Date: 10/4/2019

Expires: 4/1/2020  
 Main Permit: Main Permit

**Project Address**

5124 Birch Lane

**Lot**

112

**Flood Zone**

AE

**Owner Information**

George Coulbourn & Kara Alane Consolvo

**Applicant Information**

Northeastern Marine

**Zoning**

BR-1

**Block**

**Constuction Type**

Pier/Dock

**Address**

5124 Birch Lane  
 Kitty Hawk NC 27949

**Address**

P O Box 42  
 Kitty Hawk, NC 27949

**Subdivision**

SEA SCAPE SEC 3

**PIN**

986607780598

**Building Code**

BLDG2018

**Phone**

**Phone**

252-261-3682

<b>Construction Cost:</b>	1100.00
<b>Unheated Sq. Feet</b>	0.00
<b>Total Sq. Feet:</b>	0.00

<b>Contractor(s)</b>	<b>Phone</b>	<b>Contractor Type</b>	<b>License Number</b>
Northeastern Marine, Inc.	(252)261-3682	General	30026

**Description of Work: Add a 6 x 8 L-shaped platform over pond with a 3'x4' walkway. - Remove old pier**

**Building Comments:**

Permit Cost - \$65.00

**Planning Conditions:**

Flood Zone-AE; Elevation-8.3'+1'=9.3'; Map#-3720986600J; Effective-09/20/2006

The work authorized by this permit is to be performed in accordance with the applicable Kitty Hawk Zoning Restrictions and with the Laws Governing Building Construction in the State of North Carolina and ordinances adopted by the Town of Kitty Hawk. Any change in the work as specified is subject to prior approval of the Building Inspector.

**Owner / Applicant / Contractor / Agent** \_\_\_\_\_ **Date** \_\_\_\_\_

**Building Official** \_\_\_\_\_ **Date** \_\_\_\_\_



**Town of Kitty Hawk, NC**  
 101 Veterans Memorial Drive  
 Kitty Hawk, NC 27949  
 Phone: (252) 261-3552

**PERMIT**

Permit NO. **19378**  
 Permit Type: Residential  
 Work Classification: [Permit Type]  
 Permit Status: Pending

Issue Date: 10/4/2019

Expires: 4/1/2020

Main Permit: Main Permit

**Project Address**

4137 N Virginia Dare Trail

**Lot**

5 S PT 6

**Flood Zone**

VE

**Owner Information**

Mark C Cochran

**Applicant Information**

Mark Cochran

**Zoning**

BR-1

**Block**

A

**Constuction Type**

Repair/Replace

**Address**

P O Box 462  
 Kitty Hawk NC 27949

**Address**

P O Box 462  
 Kitty Hawk, NC 27949

**Subdivision**

SANDERLIN SHORES

**PIN**

987615623565

**Building Code**

BLDG2018

**Phone**

603-858-0753

**Phone**

603-858-0753

<b>Construction Cost:</b>	<u>10000.00</u>
<b>Unheated Sq. Feet</b>	<u>0.00</u>
<b>Total Sq. Feet:</b>	<u>0.00</u>

<b>Contractor(s)</b>	<b>Phone</b>	<b>Contractor Type</b>	<b>License Number</b>
Owner	000-000-0000	General	00000

**Building Comments:**

**Description of Work: Remove & replace deck and deck joist - NO CHANGE IN FOOTPRINT**

Permit Cost - \$95.00

**Planning Conditions:**

Flood Zone-VE; Elevation-12'+1'=13'; Map#-3720987600J; Effective-09/20/2006

The work authorized by this permit is to be performed in accordance with the applicable Kitty Hawk Zoning Restrictions and with the Laws Governing Building Construction in the State of North Carolina and ordinances adopted by the Town of Kitty Hawk. Any change in the work as specified is subject to prior approval of the Building Inspector.

\_\_\_\_\_  
**Owner / Applicant / Contractor / Agent** **Date**

\_\_\_\_\_  
**Building Official** **Date**



**Town of Kitty Hawk, NC**  
 101 Veterans Memorial Drive  
 Kitty Hawk, NC 27949  
 Phone: (252) 261-3552

**PERMIT**

Permit NO. **19380**  
 Permit Type: Commercial  
 Work Classification: [Permit Type]  
 Permit Status: Open

Issue Date: 10/9/2019

Expires: 4/6/2020  
 Main Permit: Main Permit

**Project Address**  
 3708 N Croatan Highway

**Lot**  
 C2

**Flood Zone**  
 X

**Owner Information**  
 Harbour Bay LLC

**Applicant Information**  
 Harbour Bay LLC - Ralph Calfee

**Zoning**  
 BC-1  
**Block**

**Constuction Type**  
 Repair/Replace

**Address**  
 3048 Martins Point  
 Kitty Hawk NC 27949

**Address**  
 3048 Martins Point Road  
 Kitty Hawk, NC 27949

**Subdivision**  
 HARBOUR BAY  
**PIN**  
 987512862851

**Building Code**  
 BLD2018

**Phone**

**Phone**  
 252-202-4825

<b>Construction Cost:</b>	<u>75000.00</u>
<b>Unheated Sq. Feet</b>	<u>0.00</u>
<b>Total Sq. Feet:</b>	<u>0.00</u>

<b>Contractor(s)</b>	<b>Phone</b>	<b>Contractor Type</b>	<b>License Number</b>
H & W Services Group, LLC	(252)423-0744	General	81536

**Building Comments:**

Permit Cost - \$420.00

**Planning Conditions:**

Flood Zone-Shaded X; Map#-3720987500J; Effective-09/20/2006

**Description of Work: Remove and replace shingles**

The work authorized by this permit is to be performed in accordance with the applicable Kitty Hawk Zoning Restrictions and with the Laws Governing Building Construction in the State of North Carolina and ordinances adopted by the Town of Kitty Hawk. Any change in the work as specified is subject to prior approval of the Building Inspector.

**Owner / Applicant / Contractor / Agent** \_\_\_\_\_ **Date** \_\_\_\_\_

**Building Official** \_\_\_\_\_ **Date** \_\_\_\_\_





**Town of Kitty Hawk, NC**  
 101 Veterans Memorial Drive  
 Kitty Hawk, NC 27949  
 Phone: (252) 261-3552

**PERMIT**

Permit NO. **19382**  
 Permit Type: Commercial  
 Work Classification: [Permit Type]  
 Permit Status: Open

Issue Date: 10/10/2019

Expires: 4/7/2020

Main Permit: Main Permit

**Project Address**

3512 N Virginia Dare Trail

**Lot**

3 & Unnumbered lot

**Flood Zone**

VE

**Owner Information**

Sea Rover Inc.

**Applicant Information**

Landmark Custom Home Design

**Zoning**

BH-1

**Block**

2

**Constuction Type**

Repair/Replace

**Address**

2011 Harbour View Drive  
 Kill Devil Hills NC 27948

**Address**

112 Bunch Road  
 Aydlett, NC 27916

**Subdivision**

W J TATE - DB 78 PG 0394

**PIN**

987512959768

**Building Code**

BLDG2018

**Phone**

252-715-0410

**Phone**

757-286-9990

<b>Construction Cost:</b>	59420.00
<b>Unheated Sq. Feet</b>	0.00
<b>Total Sq. Feet:</b>	0.00

<b>Contractor(s)</b>	<b>Phone</b>	<b>Contractor Type</b>	<b>License Number</b>
Landmark Custom Homes & Design, Inc.	757-286-9990	General	72603

**Building Comments:**

Permit Cost - \$345.00

**Planning Conditions:**

Flood Zone-VE; Elevation-12'+1'=13'; Map#-3720987500J/3720988500J; Effective-09/20/2006

**Description of Work: Remove and replace roof**

The work authorized by this permit is to be performed in accordance with the applicable Kitty Hawk Zoning Restrictions and with the Laws Governing Building Construction in the State of North Carolina and ordinances adopted by the Town of Kitty Hawk.

Any change in the work as specified is subject to prior approval of the Building Inspector.

\_\_\_\_\_  
**Owner / Applicant / Contractor / Agent** **Date**

\_\_\_\_\_  
**Building Official** **Date**



**Town of Kitty Hawk, NC**  
 101 Veterans Memorial Drive  
 Kitty Hawk, NC 27949  
 Phone: (252) 261-3552

**PERMIT**

Permit NO. **19384**  
 Permit Type: Commercial  
 Work Classification: [Permit Type]  
 Permit Status: Open

Issue Date: 10/18/2019

Expires: 4/15/2020

Main Permit: Main Permit

**Project Address**

4417 N Croatan Highway

**Lot**

44 & 45

**Flood Zone**

X

**Owner Information**

Linkside View Properties, Inc.

**Applicant Information**

RGR JD Corp dba So Nice Again

**Zoning**

BR-1

**Block**

38

**Constuction Type**

Repair/Replace

**Address**

P O Box 1027  
 Kitty Hawk NC 27949

**Address**

P O Box 253  
 Kitty Hawk, NC 27949

**Subdivision**

KITTY HAWK BEACH REV SEC A

**PIN**

987614442745

**Building Code**

BLDG2018

**Phone**

**Phone**

252-261-8448

**Construction Cost:** 35000.00

**Unheated Sq. Feet** 0.00

**Total Sq. Feet:** 0.00

Contractor(s)	Phone	Contractor Type	License Number
RGR JD Corp dba So Nice Again	(252)261-8448	General	79762
TBD	000-000-0000	Plumbing	00000
TBD	000-000-0000	Electrical	00000

**Description of Work: Demo affected areas due to water damage. Replace drywall, & insulation; Replace electrical & plumbing, trim & flooring; Paint affected areas - 2 bathrooms, hallway & conference room**

**Building Comments:**

Permit Cost \$448.00

**Planning Conditions:**

The work authorized by this permit is to be performed in accordance with the applicable Kitty Hawk Zoning Restrictions and with the Laws Governing Building Construction in the State of North Carolina and ordinances adopted by the Town of Kitty Hawk. Any change in the work as specified is subject to prior approval of the Building Inspector.

\_\_\_\_\_  
**Owner / Applicant / Contractor / Agent** **Date**

\_\_\_\_\_  
**Building Official** **Date**



**Town of Kitty Hawk, NC**  
 101 Veterans Memorial Drive  
 Kitty Hawk, NC 27949  
 Phone: (252) 261-3552

**PERMIT**

Permit NO. **19388**  
 Permit Type: Residential  
 Work Classification: [Permit Type]  
 Permit Status: Open

Issue Date: 10/23/2019

Expires: 4/20/2020

Main Permit: Main Permit

**Project Address**

308 W Lillian Street

**Lot**

11

**Flood Zone**

X

**Owner Information**

Todd R Smrdel

**Applicant Information**

Todd Smrdel

**Zoning**

BR-1

**Block**

F

**Constuction Type**

Remodeling

**Address**

308 W Lillian Street  
 Kitty Hawk NC 27949

**Address**

308 W Lillian Street  
 Kitty Hawk, NC 27949

**Subdivision**

TED WOOD KITTY HAWK TERR  
 ADD

**PIN**

987619504213

**Building Code**

BLDG2018

**Phone**

**Phone**

252-261-6201

<u>Contractor(s)</u>	<u>Phone</u>	<u>Contractor Type</u>	<u>License Number</u>	<u>Construction Cost:</u>	<u>19500.00</u>
Owner	000-000-0000	General	00000	<u>Unheated Sq. Feet</u>	<u>0.00</u>
TBD	000-000-0000	Electrical	00000	<u>Total Sq. Feet:</u>	<u>128.00</u>
TBD	000-000-0000	Mechanical	00000		

**Building Comments:**

**Description of Work: Enclose existing 1st floor open deck for a dining room - No change in footprint**

Permit Cost - \$305.00

**Planning Conditions:**

Flood Zone-Shaded X; Map#-3720987600J; Effective-09/20/2006

The work authorized by this permit is to be performed in accordance with the applicable Kitty Hawk Zoning Restrictions and with the Laws Governing Building Construction in the State of North Carolina and ordinances adopted by the Town of Kitty Hawk.

Any change in the work as specified is subject to prior approval of the Building Inspector.

**Owner / Applicant / Contractor / Agent** \_\_\_\_\_ **Date** \_\_\_\_\_

**Building Official** \_\_\_\_\_ **Date** \_\_\_\_\_





**Town of Kitty Hawk, NC**  
 101 Veterans Memorial Drive  
 Kitty Hawk, NC 27949  
 Phone: (252) 261-3552

**PERMIT**

Permit NO. **19395**  
 Permit Type: Residential  
 Work Classification: [Permit Type]  
 Permit Status: Pending

Issue Date: 10/29/2019

Expires: 4/26/2020

Main Permit: Main Permit

**Project Address**

4104 Pineway Drive

**Lot**

5

**Flood Zone**

AE

**Owner Information**

Leslie Ray & Kathleen Hatton Turner

**Applicant Information**

Piddington Construction

**Zoning**

VR-1

**Block**

**Constuction Type**

Remodeling

**Address**

7 High Street  
 West Harrison NY 10604

**Address**

2 Ginguite Trail  
 Southern Shores, NC 27949

**Subdivision**

KITTY HAWK LANDING SEC 3

**PIN**

986510466840

**Building Code**

BLDG2018

**Phone**

252-715-3562

**Phone**

252-207-1122

<b>Construction Cost:</b>	5000.00
<b>Unheated Sq. Feet</b>	0.00
<b>Total Sq. Feet:</b>	0.00

<b>Contractor(s)</b>	<b>Phone</b>	<b>Contractor Type</b>	<b>License Number</b>
Piddington Construction dba Intrepid Construction, Inc.	252-207-1122	General	52198
TBD	000-000-0000	Plumbing	00000

**Building Comments:**

**Description of Work: Remove existing tub and add walk-in shower**

Permit Cost - \$140.00

**Planning Conditions:**

Flood Zone-AE; Elevation-8.3'+1'=9.3'; Map#-3720986500J; Effective-09/20/2006

The work authorized by this permit is to be performed in accordance with the applicable Kitty Hawk Zoning Restrictions and with the Laws Governing Building Construction in the State of North Carolina and ordinances adopted by the Town of Kitty Hawk. Any change in the work as specified is subject to prior approval of the Building Inspector.

**Owner / Applicant / Contractor / Agent** \_\_\_\_\_ **Date** \_\_\_\_\_

**Building Official** \_\_\_\_\_ **Date** \_\_\_\_\_



**Town of Kitty Hawk, NC**  
 101 Veterans Memorial Drive  
 Kitty Hawk, NC 27949  
 Phone: (252) 261-3552

**PERMIT**

Permit NO. **19396**  
 Permit Type: Commercial  
 Work Classification: [Permit Type]  
 Permit Status: Pending

Issue Date: 10/29/2019

Expires: 4/26/2020

Main Permit: Main Permit

**Project Address**

3730 N Croatan Highway  
 Lot

**Zoning**

BC-1

**Block**

**Subdivision**

N E HURDLE ESTATE

**PIN**

987508778602

**Flood Zone**

X

**Constuction Type**

Addition

**Building Code**

BLDG2018

**Owner Information**

Hristos Dimitrios Vlahos

**Address**

P O Box 1427  
 Kitty Hawk NC 27949

**Phone**

**Applicant Information**

H & W Services Group LLC

**Address**

1053 Martins Point Road  
 Kitty Hawk, NC 27949

**Phone**

252-423-0744

<b>Construction Cost:</b>	<u>22500.00</u>
<b>Unheated Sq. Feet</b>	<u>150.00</u>
<b>Total Sq. Feet:</b>	<u>0.00</u>

<b>Contractor(s)</b>	<b>Phone</b>	<b>Contractor Type</b>	<b>License Number</b>
H & W Services Group, LLC	(252)423-0744	General	81536

**Building Comments:**

**Description of Work: Add onto existing deck. Install shed roof over deck**

Permit Cost - \$310.00

NOTE: NO SCREENING OF SIDES; NO ROLLUP SCREENS; NO DOORS TO REAR - MUST BE OPEN FOR EXIT; IF CLOSED IN WITH DOOR OR SCREENING NEW OCCUPANCY CALUATIONS MUST BE DONE AND EXITS MAY HAVE TO BE UPGRADED FOR LARGER OCCUPANCY LOAD.

**Planning Conditions:**

Flood Zone-X; Map#-3720987500J; Effective-09/20/2006

The work authorized by this permit is to be performed in accordance with the applicable Kitty Hawk Zoning Restrictions and with the Laws Governing Building Construction in the State of North Carolina and ordinances adopted by the Town of Kitty Hawk. Any change in the work as specified is subject to prior approval of the Building Inspector.

\_\_\_\_\_  
**Owner / Applicant / Contractor / Agent** **Date**

\_\_\_\_\_  
**Building Official** **Date**



**Town of Kitty Hawk, NC**  
 101 Veterans Memorial Drive  
 Kitty Hawk, NC 27949  
 Phone: (252) 261-3552

**PERMIT**

Permit NO. **19401**  
 Permit Type: Commercial  
 Work Classification: [Permit Type]  
 Permit Status: Pending

Issue Date: 10/31/2019

Expires: 4/28/2020

Main Permit: Main Permit

**Project Address**

500 Sand Dune Drive, Unit E

**Lot**

**Zoning**

BC-2

**Block**

**Subdivision**

FOYVEST SUBDIVISION

**PIN**

987618429220

**Flood Zone**

X

**Constuction Type**

Remodeling

**Building Code**

BLDG2018

**Owner Information**

QUAIL RUN BUSINESS CENTER LLC null

**Address**

406 W LAKE DR  
 KILL DEVIL HILLS NC 27948

**Phone**

**Applicant Information**

KW OBX Distributors, Inc.

**Address**

226 Orchard Drive  
 Elizabeth City, NC 27909

**Phone**

252-331-5463

<b>Construction Cost:</b>	2500.00
<b>Unheated Sq. Feet</b>	0.00
<b>Total Sq. Feet:</b>	288.00

<b>Contractor(s)</b>	<b>Phone</b>	<b>Contractor Type</b>	<b>License Number</b>
Joe Suich	252-619-2922	General	00000
Davco Electric Inc.	(252)441-4106	Electrical	04354-U

**Building Comments:**

**Description of Work: Add 12 x 24 office space with lights and ceiling fans in an existing unit space**

Permit Cost - \$125.00

**Planning Conditions:**

Flood Zone-Shaded X; Map#-3720987600J; Effective-09/20/2006

The work authorized by this permit is to be performed in accordance with the applicable Kitty Hawk Zoning Restrictions and with the Laws Governing Building Construction in the State of North Carolina and ordinances adopted by the Town of Kitty Hawk. Any change in the work as specified is subject to prior approval of the Building Inspector.

\_\_\_\_\_  
**Owner / Applicant / Contractor / Agent** **Date**

\_\_\_\_\_  
**Building Official** **Date**





**Town of Kitty Hawk, NC**  
 101 Veterans Memorial Drive  
 Kitty Hawk, NC 27949  
 Phone: (252) 261-3552

**PERMIT**

Permit NO. **19387**  
 Permit Type: Residential  
 Work Classification: [Permit Type]  
 Permit Status: Open

Issue Date: 10/22/2019

Expires: 4/19/2020

Main Permit: Main Permit

**Project Address**

3705 N. Virginia Dare Trail

**Zoning**

VR-1

**Subdivision**

HURDLE, PERRY, JOHNSON & WHITE

**Lot**

PT 17 & 18

**Block**

**PIN**

0

**Flood Zone**

VE

**Constuction Type**

Repair/Replace

**Building Code**

NEC2017

**Owner Information**

Eileen V O'Keefe & Harry J Meraklis

**Address**

3801 Moor Shore Road  
 Kitty Hawk NC 27949

**Phone**

**Applicant Information**

Outer Banks Electric, Inc.

**Address**

714 N .Hwy 64/264  
 Manteo, NC, 27954

**Phone**

252-473-7343

**Construction Cost:** 1900.00

**Unheated Sq. Feet** 0.00

**Total Sq. Feet:** 0.00

<b>Contractor(s)</b>	<b>Phone</b>	<b>Contractor Type</b>	<b>License Number</b>
Outer Banks Electric Inc	252-473-3033	Electrical	24451-U

**Description of Work: Replace & lower meter base per Dominion's request. Add disconnect & separate grounds/ neutrals in panel. Replace service grounding**

**Building Comments:**

Permit Cost - \$115.00

**Planning Conditions:**

Flood Zone-VE; Elevation-12'+1'=13'; Map#-3720987500J; Effective-09/20/2006

The work authorized by this permit is to be performed in accordance with the applicable Kitty Hawk Zoning Restrictions and with the Laws Governing Building Construction in the State of North Carolina and ordinances adopted by the Town of Kitty Hawk. Any change in the work as specified is subject to prior approval of the Building Inspector.

\_\_\_\_\_  
**Owner / Applicant / Contractor / Agent**

\_\_\_\_\_  
**Date**

\_\_\_\_\_  
**Building Official**

\_\_\_\_\_  
**Date**



**Town of Kitty Hawk, NC**  
 101 Veterans Memorial Drive  
 Kitty Hawk, NC 27949  
 Phone: (252) 261-3552

**PERMIT**

Permit NO. **19397**  
 Permit Type: Residential  
 Work Classification: [Permit Type]  
 Permit Status: Open

Issue Date: 10/30/2019

Expires: 4/27/2020

Main Permit: Main Permit

**Project Address**

4809 Lindbergh Avenue

**Lot**

28 Spt 27

**Flood Zone**

AE

**Owner Information**

Kenneth C & Barbara A Kuehn

**Applicant Information**

BRS Electrical Service

**Zoning**

BR-1

**Block**

24

**Constuction Type**

Repair/Replace

**Address**

6500 Kenhowe Drive  
 Bethesda MD 20817

**Address**

P O Box 2108  
 Kill Devil Hills, NC 27948

**Subdivision**

KITTY HAWK BEACH REV SEC A

**PIN**

987606370768

**Building Code**

**Phone**

**Phone**

252-441-5334

<b>Construction Cost:</b>	650.00
<b>Unheated Sq. Feet</b>	0.00
<b>Total Sq. Feet:</b>	0.00

<b>Contractor(s)</b>	<b>Phone</b>	<b>Contractor Type</b>	<b>License Number</b>
BRS Electrical Services Inc.	(252)441-5334	Electrical	23077-U

**Building Comments:**

Permit Cost - \$75.00

**Planning Conditions:**

Flood Zone-AE; Elevation-9'+1=10'; Map#-3720987600J; Effective-09/20/2006

**Description of Work: Replace  
 200 amp meter base**

The work authorized by this permit is to be performed in accordance with the applicable Kitty Hawk Zoning Restrictions and with the Laws Governing Building Construction in the State of North Carolina and ordinances adopted by the Town of Kitty Hawk. Any change in the work as specified is subject to prior approval of the Building Inspector.

**Owner / Applicant / Contractor / Agent** \_\_\_\_\_ **Date** \_\_\_\_\_

**Building Official** \_\_\_\_\_ **Date** \_\_\_\_\_



**Town of Kitty Hawk, NC**  
 101 Veterans Memorial Drive  
 Kitty Hawk, NC 27949  
 Phone: (252) 261-3552

**PERMIT**

Permit NO. **19389**  
 Permit Type: Residential  
 Work Classification: [Permit Type]  
 Permit Status: Pending

Issue Date: 10/24/2019

Expires: 4/21/2020

Main Permit: Main Permit

**Project Address**

107 Lillian Street

**Lot**

81

**Flood Zone**

VE

**Owner Information**

James H & Karen L Schrader

**Applicant Information**

Grayhound Electric - Kevin Fretwell

**Zoning**

BR-1

**Block**

**Constuction Type**

Repair/Replace

**Address**

104 Golden Maple Drive  
 Chesapeake VA 23322

**Address**

310 Shiloh Street  
 Kill Devil Hills, NC 27948

**Subdivision**

KITTY HAWK BEACH TERR AMD

**PIN**

987619608887

**Building Code**

NEC2017

**Phone**

**Phone**

252-202-1211

<b>Construction Cost:</b>	1200.00
<b>Unheated Sq. Feet</b>	0.00
<b>Total Sq. Feet:</b>	0.00

<b>Contractor(s)</b>	<b>Phone</b>	<b>Contractor Type</b>	<b>License Number</b>
Grayhound Electric LLC	252-202-1211	Electrical	25915-L

**Building Comments:**

**Description of Work: Replacing existing two 200 amp service disconnects**

Permit Cost - \$80.00

**Planning Conditions:**

Flood Zone-VE; Elevation-12'+1=13'; Map#-3720987600J; Effective-09/20/2006

The work authorized by this permit is to be performed in accordance with the applicable Kitty Hawk Zoning Restrictions and with the Laws Governing Building Construction in the State of North Carolina and ordinances adopted by the Town of Kitty Hawk.

Any change in the work as specified is subject to prior approval of the Building Inspector.

\_\_\_\_\_  
**Owner / Applicant / Contractor / Agent** **Date**

\_\_\_\_\_  
**Building Official** **Date**





**Town of Kitty Hawk, NC**  
 101 Veterans Memorial Drive  
 Kitty Hawk, NC 27949  
 Phone: (252) 261-3552

**PERMIT**

Permit NO. **19385**  
 Permit Type: Residential  
 Work Classification: [Permit Type]  
 Permit Status: Open

Issue Date: 10/21/2019

Expires: 4/18/2020

Main Permit: Main Permit

**Project Address**

4221 Ivy Lane

**Lot**

**Zoning**

VR-1

**Block**

**Subdivision**

SUBDIVISION - NONE

**PIN**

986507594003

**Building Code**

NEC2017

**Phone**

**Flood Zone**

AE

**Constuction Type**

Repair/Replace

**Address**

4221 Ivy Lane  
 Kitty Hawk NC 27949

**Owner Information**

Jeremy D & Christine R Schleiden

**Address**

3847 Ivy Lane  
 Kitty Hawk, NC 27949

**Phone**

252-564-2367

**Applicant Information**

Christopher Kreiser

<b>Construction Cost:</b>	300.00
<b>Unheated Sq. Feet</b>	0.00
<b>Total Sq. Feet:</b>	0.00

<b>Contractor(s)</b>	<b>Phone</b>	<b>Contractor Type</b>	<b>License Number</b>
Kreiser Electric, Inc.	717-619-0021	Electrical	31684

**Building Comments:**

Permit Cost - \$75.00

**Planning Conditions:**

Flood Zone-AE; Elevation-8.3'+1'=9.3'; Map#-3720986500J; Effective-09/20/2006

**Description of Work: Replace  
 200 amp meter base**

The work authorized by this permit is to be performed in accordance with the applicable Kitty Hawk Zoning Restrictions and with the Laws Governing Building Construction in the State of North Carolina and ordinances adopted by the Town of Kitty Hawk.

Any change in the work as specified is subject to prior approval of the Building Inspector.

**Owner / Applicant / Contractor / Agent** \_\_\_\_\_ **Date** \_\_\_\_\_

**Building Official** \_\_\_\_\_ **Date** \_\_\_\_\_



**Town of Kitty Hawk, NC**  
 101 Veterans Memorial Drive  
 Kitty Hawk, NC 27949  
 Phone: (252) 261-3552

**PERMIT**

Permit NO. **19391**  
 Permit Type: Commercial  
 Work Classification: [Permit Type]  
 Permit Status: Open

Issue Date: 10/25/2019

Expires: 4/22/2020

Main Permit: Main Permit

**Project Address**

3608 N. Croatan Hwy.

**Lot**

2 & 3

**Flood Zone**

AE

**Owner Information**

Phantom Enterprises, LP

**Applicant Information**

Infrastructure Technology Services - Eddie Ray

**Zoning**

BC-1

**Block**

**Constuction Type**

Electrical

**Address**

P O Box 388  
 Youngstown PA 15696

**Address**

360 Wolfpack Lane  
 Youngsville, NC 27596

**Subdivision**

KITTY DUNES COMMERCIAL

**PIN**

987512866154

**Building Code**

2017 NEC

**Phone**

**Phone**

919-224-9886

<u>Contractor(s)</u>	<u>Phone</u>	<u>Contractor Type</u>	<u>License Number</u>	<u>Construction Cost:</u>	<u>600.00</u>
Infrastructure Technology Services	919-529-0637	Electrical	22648	<u>Unheated Sq. Feet</u>	<u>0.00</u>
				<u>Total Sq. Feet:</u>	<u>0.00</u>

**Description of Work: Replace wiring to the triplex cable providing power to a Charter/Spectrum power supply that was damaged.**

**Building Comments:**

Permit Cost - \$75.00

**Planning Conditions:**

The work authorized by this permit is to be performed in accordance with the applicable Kitty Hawk Zoning Restrictions and with the Laws Governing Building Construction in the State of North Carolina and ordinances adopted by the Town of Kitty Hawk. Any change in the work as specified is subject to prior approval of the Building Inspector.

\_\_\_\_\_  
**Owner / Applicant / Contractor / Agent** **Date**

\_\_\_\_\_  
**Building Official** **Date**





**Town of Kitty Hawk, NC**  
 101 Veterans Memorial Drive  
 Kitty Hawk, NC 27949  
 Phone: (252) 261-3552

**PERMIT**

Permit NO. **19379**  
 Permit Type: Commercial  
 Work Classification: [Permit Type]  
 Permit Status: Open

Issue Date: 10/7/2019

Expires: 4/4/2020

Main Permit: Main Permit

**Project Address**

1098 W Kitty Hawk Road  
 Lot

**Zoning**

VR-1

**Block**

**Subdivision**

SUBDIVISION - NONE

**PIN**

986619619249

**Flood Zone**

AE

**Constuction Type**

Electrical

**Building Code**

ELEC2017

**Owner Information**

Creative Ministries, Inc.

**Address**

P O Box 1603  
 Kill Devil Hills NC 27948

**Phone**

**Applicant Information**

T A Loving Company - Jamie Allen

**Address**

400 Pate Town Road  
 Goldsboro, NC

**Phone**

910-340-3667

<b>Construction Cost:</b>	1000.00
<b>Unheated Sq. Feet</b>	0.00
<b>Total Sq. Feet:</b>	0.00

<b>Contractor(s)</b>	<b>Phone</b>	<b>Contractor Type</b>	<b>License Number</b>
T A Loving Company	910-734-8400	General	325

**Building Comments:**

**Description of Work: Install temp pole for contractor working on bridge replacement**

Permit Cost - \$40.00

**Planning Conditions:**

Flood Zone-AE; Elevation-8.3'+1'=9.3'; Map#-3720986600J; Effective-09/20/2006

The work authorized by this permit is to be performed in accordance with the applicable Kitty Hawk Zoning Restrictions and with the Laws Governing Building Construction in the State of North Carolina and ordinances adopted by the Town of Kitty Hawk.

Any change in the work as specified is subject to prior approval of the Building Inspector.

**Owner / Applicant / Contractor / Agent** \_\_\_\_\_ **Date** \_\_\_\_\_

**Building Official** \_\_\_\_\_ **Date** \_\_\_\_\_



**Town of Kitty Hawk, NC**  
 101 Veterans Memorial Drive  
 Kitty Hawk, NC 27949  
 Phone: (252) 261-3552

**PERMIT**

Permit NO. **19372**  
 Permit Type: Residential  
 Work Classification: [Permit Type]  
 Permit Status: Pending

Issue Date: 10/1/2019

Expires: 3/29/2020

Main Permit: Main Permit

**Project Address**

4514 N Virginia Dare Trail

**Lot**

**Zoning**

BR-1

**Block**

**Subdivision**

KITTY HAWK BEACH REV SEC A

**PIN**

987610453751

**Flood Zone**

AE

**Constuction Type**

Repair/Replace

**Building Code**

ELEC2017

**Owner Information**

CHRISTOPHER L BAILEY

**Address**

31285 COUNTRY CLUB RD  
 FRANKLIN VA 23851

**Phone**

**Applicant Information**

Christopher Bailey

**Address**

31285 Country Club Road  
 Franklin, VA 23851

**Phone**

757-556-4787

<b>Construction Cost:</b>	500.00
<b>Unheated Sq. Feet</b>	0.00
<b>Total Sq. Feet:</b>	0.00

<b>Contractor(s)</b>	<b>Phone</b>	<b>Contractor Type</b>	<b>License Number</b>
Owner	000-000-0000	Electrical	00000

**Building Comments:**

**Description of Work: Change out existing 200 amp meter base with a new 200 amp meter base**

Permit Cost - \$75.00

**Planning Conditions:**

Flood Zone-AE; Elevation-10'+1'=11'; Map#-3720987600J; Effective-09/20/2006

The work authorized by this permit is to be performed in accordance with the applicable Kitty Hawk Zoning Restrictions and with the Laws Governing Building Construction in the State of North Carolina and ordinances adopted by the Town of Kitty Hawk. Any change in the work as specified is subject to prior approval of the Building Inspector.

\_\_\_\_\_  
**Owner / Applicant / Contractor / Agent** **Date**

\_\_\_\_\_  
**Building Official** **Date**



**Town of Kitty Hawk, NC**  
 101 Veterans Memorial Drive  
 Kitty Hawk, NC 27949  
 Phone: (252) 261-3552

**PERMIT**

Permit NO. **19373**  
 Permit Type: Residential  
 Work Classification: [Permit Type]  
 Permit Status: Pending

Issue Date: 10/1/2019

Expires: 3/29/2020

Main Permit: Main Permit

**Project Address**

3505 Bay Drive

**Lot**

7

**Flood Zone**

X

**Owner Information**

Ryan Frederick Diegelmann

**Applicant Information**

Power Home Solar

**Zoning**

BR-1

**Block**

**Constuction Type**

Electrical

**Address**

P O Box 2315  
 Kitty Hawk NC 27949

**Address**

919 W Main Street  
 Mooresville, NC 28115

**Subdivision**

KITTY DUNES II

**PIN**

987516747681

**Building Code**

BLDG2018

**Phone**

804-363-0811

**Phone**

704-288-0141

<b>Construction Cost:</b>	23850.00
<b>Unheated Sq. Feet</b>	0.00
<b>Total Sq. Feet:</b>	0.00

<b>Contractor(s)</b>	<b>Phone</b>	<b>Contractor Type</b>	<b>License Number</b>
Power Home Solar/ResComm Development LLC	704-635-2144	General	60946
Power Home Solar, LLC	704-800-6780	Electrical	26074-U

**Description of Work: Install 16 roof mounted modules grid tied 4.80 kw solar system on existing residence**

**Building Comments:**

Permit Cost - \$292.00

**Planning Conditions:**

Flood Zone-Shaded X; Map#-3720987500J; Effective-09/20/2006

The work authorized by this permit is to be performed in accordance with the applicable Kitty Hawk Zoning Restrictions and with the Laws Governing Building Construction in the State of North Carolina and ordinances adopted by the Town of Kitty Hawk. Any change in the work as specified is subject to prior approval of the Building Inspector.

**Owner / Applicant / Contractor / Agent** \_\_\_\_\_ **Date** \_\_\_\_\_

**Building Official** \_\_\_\_\_ **Date** \_\_\_\_\_





**Town of Kitty Hawk, NC**  
 101 Veterans Memorial Drive  
 Kitty Hawk, NC 27949  
 Phone: (252) 261-3552

**PERMIT**

Permit NO. **19374**  
 Permit Type: Residential  
 Work Classification: [Permit Type]  
 Permit Status: Open

Issue Date: 10/2/2019

Expires: 3/30/2020  
 Main Permit: Main Permit

**Project Address**

3700 N Virginia Dare Trail

**Zoning**

BR-1

**Subdivision**

HURDLE, PERRY, JOHNSON & WHITE

**Lot**

**Block**

**PIN**

987512970428

**Flood Zone**

VE

**Constuction Type**

Repair/Replace

**Building Code**

ELEC2017

**Owner Information**

GEORGE W O'NEAL

**Address**

BOX 55  
 ENGELHARD NC 27824

**Phone**

**Applicant Information**

Electric-AI

**Address**

P O Box 2114  
 Kitty Hawk, NC 27949

**Phone**

252-202-5713

Contractor(s)	Phone	Contractor Type	License Number	Construction Cost:	Unheated Sq. Feet	Total Sq. Feet:
Electric-AI, Inc.	252-261-4500	Electrical	12292	600.00	0.00	0.00

**Building Comments:**

**Description of Work: Replace meter base**

Permit Cost - \$75.00

**Planning Conditions:**

Flood Zone-VE; Elevation-12'+1'=13'; Map#-3720987500J; Effective-09/20/2006

The work authorized by this permit is to be performed in accordance with the applicable Kitty Hawk Zoning Restrictions and with the Laws Governing Building Construction in the State of North Carolina and ordinances adopted by the Town of Kitty Hawk.

Any change in the work as specified is subject to prior approval of the Building Inspector.

\_\_\_\_\_  
**Owner / Applicant / Contractor / Agent** **Date**

\_\_\_\_\_  
**Building Official** **Date**



**Town of Kitty Hawk, NC**  
 101 Veterans Memorial Drive  
 Kitty Hawk, NC 27949  
 Phone: (252) 261-3552

**PERMIT**

Permit NO. **19386**  
 Permit Type: Commercial  
 Work Classification: [Permit Type]  
 Permit Status: Pending

Issue Date: 10/21/2019

Expires: 4/18/2020

Main Permit: Main Permit

**Project Address**

5353 N Virginia Dare Trail  
 Lot

**Zoning**

BC-2

**Block**

**Subdivision**

SUBDIVISION - NONE

**PIN**

987717112528

**Flood Zone**

VE

**Constuction Type**

Fuel Piping

**Building Code**

FUEL2018

**Owner Information**

LLC OBX RESORT

**Address**

PO BOX 1069  
 KITTY HAWK NC 27949

**Phone**

**Applicant Information**

Absolute Plumbing

**Address**

110 Quarter Landing Court  
 Harbinger, NC 27941

**Phone**

252-489-1439

<b>Construction Cost:</b>	800.00
<b>Unheated Sq. Feet</b>	0.00
<b>Total Sq. Feet:</b>	0.00

<b>Contractor(s)</b>	<b>Phone</b>	<b>Contractor Type</b>	<b>License Number</b>
Absolute Plumbing, Inc.	(252)996-0691	Plumbing	30190

**Building Comments:**

Permit Cost - \$50.00

**Description of Work: Connect gas to pool spa heaters**

**Planning Conditions:**

Flood Zone: VE; Elevation-14'+1'=15'; Map#-3720987700J; Effective:09/20/2006

The work authorized by this permit is to be performed in accordance with the applicable Kitty Hawk Zoning Restrictions and with the Laws Governing Building Construction in the State of North Carolina and ordinances adopted by the Town of Kitty Hawk. Any change in the work as specified is subject to prior approval of the Building Inspector.

**Owner / Applicant / Contractor / Agent** \_\_\_\_\_ **Date** \_\_\_\_\_

**Building Official** \_\_\_\_\_ **Date** \_\_\_\_\_



**Town of Kitty Hawk, NC**  
 101 Veterans Memorial Drive  
 Kitty Hawk, NC 27949  
 Phone: (252) 261-3552

**PERMIT**

Permit NO. **19383**  
 Permit Type: Residential  
 Work Classification: [Permit Type]  
 Permit Status: Pending

Issue Date: 10/15/2019

Expires: 4/12/2020

Main Permit: Main Permit

**Project Address**

126 Harbour Bay Drive

**Lot**

13

**Flood Zone**

X

**Owner Information**

Douglas A & Tammie L Phillips & Murray A Phillips

**Applicant Information**

George & Company

**Zoning**

BR-1

**Block**

**Constuction Type**

Repair/Replace

**Address**

1168 West Road  
 Chesapeake VA 23323

**Address**

105 Beau Parkway  
 Elizabeth City, NC 27909

**Subdivision**

HARBOUR BAY

**PIN**

987511761194

**Building Code**

BLDG2018

**Phone**

**Phone**

252-335-2596

<u>Contractor(s)</u>	<u>Phone</u>	<u>Contractor Type</u>	<u>License Number</u>	<u>Construction Cost:</u>	<u>7895.00</u>
G-Max, Inc. dba George & Company	252-335-2596	Mechanical	31510	<u>Unheated Sq. Feet</u>	<u>0.00</u>
G-Max, Inc. dba George & Company	252-335-2596	Electrical	30050	<u>Total Sq. Feet:</u>	<u>0.00</u>

**Building Comments:**

**Description of Work: HVAC change out of a 2.5 & 3 ton heat pump and one air handler**

Permit Cost - \$100.00

**Planning Conditions:**

Flood Zone-Shaded X; Map#-3720987500J; Effective-09/20/2006

The work authorized by this permit is to be performed in accordance with the applicable Kitty Hawk Zoning Restrictions and with the Laws Governing Building Construction in the State of North Carolina and ordinances adopted by the Town of Kitty Hawk.

Any change in the work as specified is subject to prior approval of the Building Inspector.

**Owner / Applicant / Contractor / Agent** \_\_\_\_\_ **Date** \_\_\_\_\_

**Building Official** \_\_\_\_\_ **Date** \_\_\_\_\_





**Town of Kitty Hawk, NC**  
 101 Veterans Memorial Drive  
 Kitty Hawk, NC 27949  
 Phone: (252) 261-3552

**PERMIT**

Permit NO. **19392**  
 Permit Type: Residential  
 Work Classification: [Permit Type]  
 Permit Status: Pending

Issue Date: 10/28/2019

Expires: 4/25/2020

Main Permit: Main Permit

**Project Address**

1352 Sound Landing Road

**Lot**

1

**Flood Zone**

AE

**Owner Information**

Clark S & Anna M Twiddy

**Applicant Information**

All Seasons Heating & Cooling

**Zoning**

VR-1

**Block**

**Constuction Type**

Repair/Replace

**Address**

1352 Sound Landing Road  
 Kitty Hawk NC 27949

**Address**

P O Box 244  
 Point Harbor, NC 27964

**Subdivision**

DENNIS A PERRY ESTATE

**PIN**

986506395850

**Building Code**

MECH2018

**Phone**

**Phone**

252-491-9232

<b>Construction Cost:</b>	7720.00
<b>Unheated Sq. Feet</b>	0.00
<b>Total Sq. Feet:</b>	0.00

<b>Contractor(s)</b>	<b>Phone</b>	<b>Contractor Type</b>	<b>License Number</b>
All Seasons Heating & Cooling, Inc.	(252)491-9232	Mechanical	19091
Jesse N. Owens Electric Corporation	(252)491-8265	Electrical	03360-L

**Building Comments:**

**Description of Work: HVAC change out of a 3.5 ton split system for downstairs**

Permit Cost - \$50.00

**Planning Conditions:**

Flood Zone-AE; Elevation-8.3'+1'=9.3'; Map#-3720986500J; Effective-09/20/2006

The work authorized by this permit is to be performed in accordance with the applicable Kitty Hawk Zoning Restrictions and with the Laws Governing Building Construction in the State of North Carolina and ordinances adopted by the Town of Kitty Hawk.

Any change in the work as specified is subject to prior approval of the Building Inspector.

**Owner / Applicant / Contractor / Agent** \_\_\_\_\_ **Date** \_\_\_\_\_

**Building Official** \_\_\_\_\_ **Date** \_\_\_\_\_



**Town of Kitty Hawk, NC**  
 101 Veterans Memorial Drive  
 Kitty Hawk, NC 27949  
 Phone: (252) 261-3552

**PERMIT**

Permit NO. **19393**  
 Permit Type: Residential  
 Work Classification: [Permit Type]  
 Permit Status: Pending

Issue Date: 10/28/2019

Expires: 4/25/2020

Main Permit: Main Permit

**Project Address**

4164 Dowdy Lane

**Lot**

1

**Flood Zone**

AE

**Owner Information**

Francis L & Camille E Lambe

**Applicant Information**

All Seasons Heating & Cooling

**Zoning**

VR-1

**Block**

**Constuction Type**

Repair/Replace

**Address**

206 Torry Pines Drive  
 Cary NC 27513

**Address**

P O Box 244  
 Point Harbor, NC 27964

**Subdivision**

AVERY ISLE

**PIN**

986506483194

**Building Code**

MECH2018

**Phone**

**Phone**

252-491-9232

<b>Construction Cost:</b>	6520.00
<b>Unheated Sq. Feet</b>	0.00
<b>Total Sq. Feet:</b>	0.00

<b>Contractor(s)</b>	<b>Phone</b>	<b>Contractor Type</b>	<b>License Number</b>
All Seasons Heating & Cooling, Inc.	(252)491-9232	Mechanical	19091
TBD	000-000-0000	Electrical	00000

**Description of Work: HVAC change out of a 1.5 ton split system for first floor**

**Building Comments:**

Permit Cost - \$50.00

**Planning Conditions:**

Flood Zone-AE; Elevation 8.3'+1'=9.3'; Map#-3720986500J; Effective-09/20/2006

The work authorized by this permit is to be performed in accordance with the applicable Kitty Hawk Zoning Restrictions and with the Laws Governing Building Construction in the State of North Carolina and ordinances adopted by the Town of Kitty Hawk. Any change in the work as specified is subject to prior approval of the Building Inspector.

**Owner / Applicant / Contractor / Agent** \_\_\_\_\_ **Date** \_\_\_\_\_

**Building Official** \_\_\_\_\_ **Date** \_\_\_\_\_





**Town of Kitty Hawk, NC**  
 101 Veterans Memorial Drive  
 Kitty Hawk, NC 27949  
 Phone: (252) 261-3552

**PERMIT**

Permit NO. **19394**  
 Permit Type: Residential  
 Work Classification: [Permit Type]  
 Permit Status: Pending

Issue Date: 10/28/2019

Expires: 4/25/2020

Main Permit: Main Permit

**Project Address**

4130 N Virginia Dare Trail

**Lot**

**Zoning**

BR-1

**Block**

**Subdivision**

SANDERLIN SHORES

**PIN**

987619623106

**Flood Zone**

VE

**Constuction Type**

Repair/Replace

**Building Code**

MECH2018

**Owner Information**

LLC LUCKIE LADY

**Address**

1531 MARSHA TER  
 MORRISVILLE PA 19067

**Phone**

**Applicant Information**

Atlantic Heating & Cooling

**Address**

P O Box 132  
 Kill Devil Hills, NC 27948

**Phone**

252-441-7642

<b>Construction Cost:</b>	5300.00
<b>Unheated Sq. Feet</b>	0.00
<b>Total Sq. Feet:</b>	0.00

<b>Contractor(s)</b>	<b>Phone</b>	<b>Contractor Type</b>	<b>License Number</b>
Atlantic Heating & Cooling Ltd	(252)441-7642	Mechanical	11618
Winston Peoples King	252-473-7745	Electrical	07274-L

**Building Comments:**

Permit Cost - \$50.00

**Description of Work: HVAC change out of a 2 ton system**

**Planning Conditions:**

Flood Zone-VE; Elevation-12'+1'=13'; Map#-3720987600J; Effective-09/20/2006

The work authorized by this permit is to be performed in accordance with the applicable Kitty Hawk Zoning Restrictions and with the Laws Governing Building Construction in the State of North Carolina and ordinances adopted by the Town of Kitty Hawk. Any change in the work as specified is subject to prior approval of the Building Inspector.

**Owner / Applicant / Contractor / Agent** \_\_\_\_\_ **Date** \_\_\_\_\_

**Building Official** \_\_\_\_\_ **Date** \_\_\_\_\_



**Town of Kitty Hawk, NC**  
 101 Veterans Memorial Drive  
 Kitty Hawk, NC 27949  
 Phone: (252) 261-3552

**PERMIT**

Permit NO. **19375**  
 Permit Type: Residential  
 Work Classification: [Permit Type]  
 Permit Status: Open

Issue Date: 10/2/2019

Expires: 3/30/2020  
 Main Permit: Main Permit

**Project Address**

4210 N Virginia Dare Trail  
 Lot

**Zoning**

BR-1

**Block**

**Subdivision**

T N SANDERLIN DIVISION

**PIN**

987615528922

**Flood Zone**

VE

**Constuction Type**

Repair/Replace

**Building Code**

MECH2012

**Owner Information**

BERNARD DANILOWICZ

**Address**

1408 OLD RELIANCE RD  
 MIDDLETOWN PA 17057

**Phone**

**Applicant Information**

Dusty Rhoads HVAC

**Address**

3822 Elijah Baum Road  
 Kitty Hawk, NC 27949

**Phone**

252-261-5892

<b>Construction Cost:</b>	9000.00
<b>Unheated Sq. Feet</b>	0.00
<b>Total Sq. Feet:</b>	0.00

<b>Contractor(s)</b>	<b>Phone</b>	<b>Contractor Type</b>	<b>License Number</b>
Dusty Rhoads HVAC, Inc.	(252)261-5892	Mechanical	21691

**Description of Work: Remove & Replace damaged ductwork on lower level**

**Building Comments:**

Permit Cost - \$40.00

**Planning Conditions:**

Flood Zone-VE; Elevation-12'+1'=13'; Map#-3720987600J; Effective-09/20/2006

The work authorized by this permit is to be performed in accordance with the applicable Kitty Hawk Zoning Restrictions and with the Laws Governing Building Construction in the State of North Carolina and ordinances adopted by the Town of Kitty Hawk. Any change in the work as specified is subject to prior approval of the Building Inspector.

\_\_\_\_\_  
**Owner / Applicant / Contractor / Agent** **Date**

\_\_\_\_\_  
**Building Official** **Date**



**Town of Kitty Hawk, NC**  
 101 Veterans Memorial Drive  
 Kitty Hawk, NC 27949  
 Phone: (252) 261-3552

**PERMIT**

Permit NO. **19376**  
 Permit Type: Commercial  
 Work Classification: [Permit Type]  
 Permit Status: Closed

Issue Date: 10/3/2019

Expires: 3/31/2020

Main Permit: Main Permit

**Project Address**

4417 N Croatan Highway

**Lot**

44 & 45

**Flood Zone**

X

**Owner Information**

Linkside View Properties, Inc.

**Applicant Information**

All-In-One Mechanical

**Zoning**

BR-1

**Block**

38

**Constuction Type**

Repair/Replace

**Address**

P O Box 1027  
 Kitty Hawk NC 27949

**Address**

P O Box 3992  
 Kitty Hawk, NC 27949

**Subdivision**

KITTY HAWK BEACH REV SEC A

**PIN**

987614442745

**Building Code**

MECH2018

**Phone**

**Phone**

252-202-5350

<b>Construction Cost:</b>	4500.00
<b>Unheated Sq. Feet</b>	0.00
<b>Total Sq. Feet:</b>	0.00

<b>Contractor(s)</b>	<b>Phone</b>	<b>Contractor Type</b>	<b>License Number</b>
All-In-One Mechanical, L.L.C.	(252)491-5334	Mechanical	27675
Herbert Wallace Francis Jr.	(252)202-5350	Electrical	07784-L

**Building Comments:**

Permit Cost - \$50..00

**Planning Conditions:**

Flood Zone-Shaded X; Map#-3720987600J; Effective-09/20/2006

**Description of Work: HVAC change out of a 3 ton system**

The work authorized by this permit is to be performed in accordance with the applicable Kitty Hawk Zoning Restrictions and with the Laws Governing Building Construction in the State of North Carolina and ordinances adopted by the Town of Kitty Hawk. Any change in the work as specified is subject to prior approval of the Building Inspector.

**Owner / Applicant / Contractor / Agent** \_\_\_\_\_ **Date** \_\_\_\_\_

**Building Official** \_\_\_\_\_ **Date** \_\_\_\_\_





**Town of Kitty Hawk, NC**  
 101 Veterans Memorial Drive  
 Kitty Hawk, NC 27949  
 Phone: (252) 261-3552

**PERMIT**

Permit NO. **19381**  
 Permit Type: Commercial  
 Work Classification: [Permit Type]  
 Permit Status: Open

Issue Date: 10/9/2019

Expires: 4/6/2020

Main Permit: Main Permit

**Project Address**  
 3722 N Croatan Highway, Ste B, C & D  
**Lot**

**Zoning**  
 BC-1  
**Block**

**Subdivision**  
**PIN**  
 987512778299

**Flood Zone**  
 X

**Constuction Type**  
 Repair/Replace

**Building Code**  
 MECH2018

**Owner Information**  
 Saint Clare Limited Partnership

**Address**  
 98 Small Drive  
 Elizabeth City NC 27909

**Phone**

**Applicant Information**  
 R A Hoy Heating & Air

**Address**  
 3908 N Croatan Highway  
 Kitty Hawk, NC 27949

**Phone**  
 252-261-2008

<b>Construction Cost:</b>	8897.00
<b>Unheated Sq. Feet</b>	0.00
<b>Total Sq. Feet:</b>	0.00

<b>Contractor(s)</b>	<b>Phone</b>	<b>Contractor Type</b>	<b>License Number</b>
R. A. Hoy Heating & Air Conditioning, Inc.	(252)261-2008	Mechanical	13056
R A Hoy Heating & Air Conditioning, Inc.	(252)261-2008	Electrical	22222-L

**Building Comments:**

**Description of Work: HVAC change out of a 5 ton system**

Permit Cost - \$50.00

**Planning Conditions:**

Flood Zone-Shaded X; Map#-3720987500J; Effective-09/20/2006

The work authorized by this permit is to be performed in accordance with the applicable Kitty Hawk Zoning Restrictions and with the Laws Governing Building Construction in the State of North Carolina and ordinances adopted by the Town of Kitty Hawk. Any change in the work as specified is subject to prior approval of the Building Inspector.

**Owner / Applicant / Contractor / Agent** \_\_\_\_\_ **Date** \_\_\_\_\_

**Building Official** \_\_\_\_\_ **Date** \_\_\_\_\_



**Town of Kitty Hawk, NC**  
 101 Veterans Memorial Drive  
 Kitty Hawk, NC 27949  
 Phone: (252) 261-3552

**PERMIT**

Permit NO. **19390**  
 Permit Type: Residential  
 Work Classification: [Permit Type]  
 Permit Status: Open

Issue Date: 10/25/2019

Expires: 4/22/2020

Main Permit: Main Permit

**Project Address**

5040 The Woods Rd.

**Zoning**

VR-1

**Subdivision**

SOUTHERN WOODS COTTAGES  
 PH 3&4

**Lot**

13

**Block**

**PIN**

986611567893

**Flood Zone**

AE

**Constuction Type**

Repair/Replace

**Building Code**

2018 Mech.

**Owner Information**

Robert Bennie Seal

**Address**

9168 Wigneil Street  
 Suffolk VA 23433

**Phone**

**Applicant Information**

American Refrigeration

**Address**

PO Box 835  
 Nags Head, NC 27959

**Phone**

252-305-5320

**Construction Cost:** 5000.00

**Unheated Sq. Feet** 0.00

**Total Sq. Feet:** 0.00

<b>Contractor(s)</b>	<b>Phone</b>	<b>Contractor Type</b>	<b>License Number</b>
American Refrigeration & Heat Pump Repair L.L.C.	(252)305-4423	Mechanical	29031

**Building Comments:**

**Description of Work: HVAC change out of a 2 ton system**

**Planning Conditions:**

The work authorized by this permit is to be performed in accordance with the applicable Kitty Hawk Zoning Restrictions and with the Laws Governing Building Construction in the State of North Carolina and ordinances adopted by the Town of Kitty Hawk.  
 Any change in the work as specified is subject to prior approval of the Building Inspector.

\_\_\_\_\_  
**Owner / Applicant / Contractor / Agent** **Date**

\_\_\_\_\_  
**Building Official** **Date**

**TOWN OF NAGS HEAD**  
PO Box 99 Nags Head, NC 27959  
Phone (252) 441-7016 Fax (252) 4414290



**Residential Project Approval**  
**Application # 201900780**

**Property Address:** 109 WEST SEAWATCH CT **PIN #:** 080118205061 **Parcel:** 024961589

**Lot/Block/Sec:** LOT: 9 BLK: SEC: **Subdivision:** SEAWATCH

**Zoning:** VILLAGE DET RES SF 2 **Land Use:** VACANT

**Flood Zone:** X

**Owner Name:** DUGGINS, CHARLES T - DUGGINS, CHRISTINE  
**Owner Address:** 4317 JOSEPH DR GLEN ALLEN, VA 23060

**Contractor Name:** Haddon Homes, Inc. **Contractor Phone:** 252-267-2287  
**Contractor Address:** PO Box 1868 NAGS HEAD, NC 27959

**Description:** Construct new single family dwelling, 5 bedrooms, 4.1 baths, on piling foundation  
**Construction Value:** \$882561 **Classification of Work:** NEW RESIDENTIAL

**BUILDING INFORMATION**

Permit #	Permit Description	Total Fees Paid/Due	Approved By:	Approved Date:
BR201902150	B-RESIDENTIAL NEW CONST SFD	\$4550.53	SS	10/03/2019

**Conditions of Approval:**

- Address #s on home per the TONH ordinance. All subs shall pull permits prior to starting work. Call for all required inspection. Air barriers in all the right places. We need to talk about stairs to attic (may be considered an attic story). We need to talk about all cable rail systems prior to installation(may require engineering). Review all zoning and storm water permit conditions

**PUBLIC WORKS INFORMATION**

Permit #	Permit Description	Total Fees Paid/Due	Approved By:	Approved Date:
PW201902149	PW APPROVAL RES NEW/ADDITION	\$415.06	RB	10/03/2019

**Conditions of Approval:**

- All driveways constructed within the Town of Nags Head must be sloped away from the street 1/4-inch per foot for the first six (6) feet off the edge of the street. Contractor MUST call for an inspection AFTER driveway is formed-up and PRIOR to pouring concrete or laying asphalt.
- 36-4(f):max. driveway width is restricted to 26' w/a max. of 15R, min. driveway width is 12'
- 36-4(f):max. driveway apron shall be a min. of 10' in length, 4" thick, 3,000 psi conc. and designed for access purposes only. The driveway apron shall be sloped a min. of 1/4" per foot from the eop to a point 6' offset from the eop, creating a valley section within the driveway, (2" min.drop)
- See Public Works Approval handout for detailed project information
- For Public Works related inspections please call the Public Works Department at 252-441-1122. Please call 24 hours in advance. CALL FOR PW FINAL INSPECTION.

**ZONING INFORMATION**

Permit #	Permit Description	Total Fees Paid/Due	Approved By:	Approved Date:
ZN201902148	ZONING PERMIT - RES	\$0.00	MK	10/03/2019

**Conditions of Approval:**

- Silt fencing required as well as a construction entrance to be maintained throughout project until stabilized
- Balancing lot shall meet 5 ft no fill setback as well as the 3:1 slope meeting the 5 ft no fill.
- Foundation survey required after piling installation with post piling install elevations to ensure slab and finished floor elevation is compliant with plans
- Height cert required
- As-built survey required
- Final zoning required once stabilized 252-449-6045

**Additional Conditions:**  
CALL FOR ALL REQUIRED INSPECTIONS; All new work to meet current code; FINAL INSPECTION REQUIRED PRIOR TO ISSUANCE OF CERTIFICATION OF COMPLIANCE



**TOWN OF NAGS HEAD**

PO Box 99 Nags Head, NC 27959  
Phone (252) 441-7016 Fax (252) 441-4290



**Residential Project Approval  
Application # 201900796**

**Property Address:** 9639 EAST NANSEMOND ST **PIN #:** 071806478944 **Parcel:** 007340000

**Lot/Block/Sec:** LOT: 3 BLK: SEC: **Subdivision:** NANSEMOND COLONY

**Zoning:** MEDIUM DENSITY RES DISTRICT **Land Use:** SINGLE FAMILY DWELLING

**Flood Zone:** VE **Base Flood Elevation:** 11.0 **Regulatory Flood Elevation:** 12

**Map Panel No:** 0718 **Map Panel Date:** 09/20/2006 **Suffix:** J **Datum Used:** NAVD 1988

**Owner Name:** JONES, ARCHER L II

**Owner Address:** 215 WEST RD PORTSMOUTH, VA 23707

**Contractor Name:** Emanuelson & Dad, Inc **Contractor Phone:** 252-261-2212

**Contractor Address:** 6705 S Croatan Hwy Nags Head, NC 27959

**Description:** Install 32 sister piles

**Construction Value:** \$25600 **Classification of Work:** RESIDENTIAL REPAIR

**BUILDING INFORMATION**

Permit #	Permit Description	Total Fees Paid/Due	Approved By:	Approved Date:
RE201902153	RES ADD-REM-REP-ACC	\$220.00	SS	10/04/2019

**Conditions of Approval:**

- Address #s on home if none are present. Call for pile inspection. Post V zone cert required. Call for final inspection

**FLOOD INFORMATION**

Permit #	Permit Description	Total Fees Paid/Due	Approved By:	Approved Date:
FL201902152	FLOOD PERMIT	\$0.00	SS	10/04/2019

**Conditions of Approval:**

**ZONING INFORMATION**

Permit #	Permit Description	Total Fees Paid/Due	Approved By:	Approved Date:
ZN201902151	ZONING PERMIT - RES	0.00	MK	10/04/2019

**Conditions of Approval:**

Pillings shall stay within the existing footprint - no additional lot coverage  
Land disturbance shall be stabilized prior to final zoning inspection 252-449-6045

**Additional Conditions:**

CALL FOR ALL REQUIRED INSPECTIONS; All new work to meet current code; FINAL INSPECTION REQUIRED PRIOR TO ISSUANCE OF CERTIFICATION OF COMPLIANCE

**PLEASE NOTE:**

All work shall conform to all applicable North Carolina State Building codes and Ordinances of the Town of Nags Head and shall be the responsibility of the undersigned applicant.

**In accordance with GS160A-418, a permit expires 6 months after the date of issuance if the work authorized by the permit has not been commenced. If, after commencement, the work is discontinued for a period of 12 months (no inspections have taken place) the permit immediately expires. No work authorized by a permit that has expired may be performed until a new permit has been issued.**

**(ZONING) RIGHT OF APPEAL**

Pursuant to Section 48-594(b)(1) of the Nags Head Zoning Ordinance, you have the right to appeal this decision to the Nags Head Board of Adjustment within thirty (30) days of the date of this notice. This decision shall become final and unappealable if not appealed during this thirty (30) day period.

TOWN OF NAGS HEAD  
PO Box 99 Nags Head, NC 27959  
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**Residential Project Approval**  
**Application # 201900792**

---

**Property Address:** 3510 SOUTH LINDA LN      **PIN #:** 989215549550      **Parcel:** 016551055  
**Lot/Block/Sec:** LOT: 52 BLK: SEC:      **Subdivision:** OLD NAGS HEAD PLACE  
**Zoning:** HIGH DENSITY RES DISTRICT      **Land Use:** VACANT  
**Flood Zone:** AE      **Base Flood Elevation:** 10.0      **Regulatory Flood Elevation:** 11  
**Map Panel No:** 9893      **Map Panel Date:** 09/20/2006      **Suffix:** J      **Datum Used:** NAVD 1988

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**Owner Name:** ONCU, BAKI - POPKOVA, TATIANA  
**Owner Address:** 107 ASTRID LN      WILLIAMSBURG, VA 23188

---

**Contractor Name:** CROATAN CUSTOM HOMES LLC      **Contractor Phone:** 252-715-2731  
**Contractor Address:** 112 MARINERS VIEW      KITTY HAWK, NC 27949

---

**Description:** Construct new Single Family Dwelling, 6 bedrooms, 5 baths on pilings, w/ pool & elevator  
**Construction Value:** \$750000      **Classification of Work:** NEW RESIDENTIAL

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**BUILDING INFORMATION**

Permit #	Permit Description	Total Fees Paid/Due	Approved By:	Approved Date:
BR201902197	B-RESIDENTIAL NEW CONST SFD	\$4575.93	CT	10/08/2019

**Conditions of Approval:**

- All material below RFE of 11 feet shall be pressure treated lumber. Flood vents to code. Building under construction an final flood elevation certificate are required. Review all zoning permit conditions. All subs shall pull permit before starting work. Call for all required inspections
- 

**FLOOD INFORMATION**

Permit #	Permit Description	Total Fees Paid/Due	Approved By:	Approved Date:
FL201902195	FLOOD PERMIT	\$0.00	CT	10/08/2019

**Conditions of Approval:**

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**PUBLIC WORKS INFORMATION**

Permit #	Permit Description	Total Fees Paid/Due	Approved By:	Approved Date:
PW201902196	PW APPROVAL RES NEW/ADDITION	\$1954.63	RB	10/08/2019

**Conditions of Approval:**

- Culvert is Required, Culvert size - 15, Flared end section required
  - All driveways constructed within the Town of Nags Head must be sloped away from the street 1/4-inch per foot for the first six (6) feet off the edge of the street. Contractor MUST call for an inspection AFTER driveway is formed-up and PRIOR to pouring concrete or laying asphalt.
  - 36-4(f):max. driveway width is restricted to 26' w/a max. of 15R, min. driveway width is 12'
  - 36-4(f):max. driveway apron shall be a min. of 10' in length, 4" thick, 3,000 psi conc. and designed for access purposes only. The driveway apron shall be sloped a min. of 1/4" per foot from the eop to a point 6' offset from the eop, creating a valley section within the driveway. (2 "min. drop)  
See Public Works Approval handout for detailed project information
  - For Public Works related inspections please call the Public Works Department at 252-441-1122.
  - Please call 24 hours in advance. CALL FOR FINAL INSPECTION.
- 

**ZONING INFORMATION**

Permit #	Permit Description	Total Fees Paid/Due	Approved By:	Approved Date:
ZN201902194	ZONING PERMIT - RES	\$0.00	MK	10/08/2019

**Conditions of Approval:**

- Silt fencing and construction entrance in conjunction with Land disturbance permit.
-



**TOWN OF NAGS HEAD**  
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**Residential Project Approval**  
**Application # 201900802**

**Property Address:** 4716 SOUTH COBIA WAY **PIN #:** 080113044703 **Parcel:** 006166000

**Lot/Block/Sec:** LOT: 37 BLK: SEC: A **Subdivision:** OLD NAGS HEAD COVE SEC A

**Zoning:** MEDIUM DENSITY RES DISTRICT **Land Use:** SINGLE FAMILY DWELLING

**Flood Zone:** AE **Base Flood Elevation:** 9.0 **Regulatory Flood Elevation:** 10

**Map Panel No:** 0801 **Map Panel Date:** 09/20/2006 **Suffix:** J **Datum Used:** NAVD 1988

**Owner Name:** NEWMAN, MARY ANN

**Owner Address:** 4716 S Cobia Way

**Contractor Name:** PROPERTY OWNER

**Contractor Phone:**

**Contractor Address:** See Above

**Description:** Interior remodel; reduce upper level bedrooms from 3 to 2; remodel/enlarge bathroom, kitchen

**Construction Value:** \$30000

**Classification of Work:** RESIDENTIAL REMODEL

**BUILDING INFORMATION**

Permit #	Permit Description	Total Fees Paid/Due	Approved By:	Approved Date:
RE201902191	RES ADD-REM-REP-ACC	\$220.00	CT	10/08/2019

**Conditions of Approval:**

- All subs shall pull permits prior to starting work. Smokes and Co2 detectors to code throughout home. New wiring shall comply with 2017 NEC. Call for all required inspections. Engineering may be requested. All plumbing clearances shall be met in new bathrooms. Call for final inspections

**FLOOD INFORMATION**

Permit #	Permit Description	Total Fees Paid/Due	Approved By:	Approved Date:
FL201902190	FLOOD PERMIT	\$0.00	SS	10/08/2019

**Conditions of Approval:**

**ZONING INFORMATION**

Permit #	Permit Description	Total Fees Paid/Due	Approved By:	Approved Date:
ZN201902189	ZONING PERMIT - RES	0.00	MK	10/08/2019

**Conditions of Approval:**

no additional lot coverage, no increase in square footage is proposed reducing 3 bedrooms to 2 bedrooms. making two larger bedrooms.  
call for final zoning 252-449-6045

**Additional Conditions:**

CALL FOR ALL REQUIRED INSPECTIONS; All new work to meet current code; FINAL INSPECTION REQUIRED PRIOR TO ISSUANCE OF CERTIFICATION OF COMPLIANCE

**PLEASE NOTE:**

All work shall conform to all applicable North Carolina State Building codes and Ordinances of the Town of Nags Head and shall be the responsibility of the undersigned applicant.

In accordance with GS160A-418, a permit expires 6 months after the date of issuance if the work authorized by the permit has not been commenced. If, after commencement, the work is discontinued for a period of 12 months (no inspections have taken place) the permit immediately expires. No work authorized by a permit that has expired may be performed until a new permit has been issued.

**(ZONING) RIGHT OF APPEAL**

Pursuant to Section 48-594(b)(1) of the Nags Head Zoning Ordinance, you have the right to appeal this decision to the Nags Head Board of Adjustment within thirty (30) days of the date of this notice. This decision shall become final and unappealable if not appealed during this thirty (30) day period.

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**Residential Project Approval**  
**Application # 201900806**

**Property Address:** 2428 SOUTH MEMORIAL AVE **PIN #:** 989318300910 **Parcel:** 005669000  
**Lot/Block/Sec:** LOT: 10 BLK: SEC: 1 **Subdivision:** CONCH SHELL ESTATES  
**Zoning:** HIGH DENSITY RES DISTRICT **Land Use:** SINGLE FAMILY DWELLING  
**Flood Zone:** AE **Base Flood Elevation:** 10.0 **Regulatory Flood Elevation:** 11  
**Map Panel No:** 9893 **Map Panel Date:** 09/20/2006 **Suffix:** J **Datum Used:** NAVD 1988

**Owner Name:** GARCIA, CHRISTOPHER - GARCIA, LINDA  
**Owner Address:** 217 Natural Ter SW

**Contractor Name:** Andrus Construction Co., LLC **Contractor Phone:** 252-261-7903  
**Contractor Address:** 4140 Thick Ridge Dr Kitty Hawk, NC 27949

**Description:** Install new deck and exterior stair case; install new rear door  
**Construction Value:** \$11500 **Classification of Work:** RESIDENTIAL REMODEL

**BUILDING INFORMATION**

Permit #	Permit Description	Total Fees Paid/Due	Approved By:	Approved Date:
RE201902182	RES ADD-REM-REP-ACC	\$200.00	CT	10/08/2019

**Conditions of Approval:**

- Address #s on home if none are present/ New deck shall have a GFCI WR type outlet. Pull electrical permit. Call for piling inspection. Call for final inspection

**FLOOD INFORMATION**

Permit #	Permit Description	Total Fees Paid/Due	Approved By:	Approved Date:
FL201902181	FLOOD PERMIT	\$0.00	CT	10/08/2019

**Conditions of Approval:**

**ZONING INFORMATION**

Permit #	Permit Description	Total Fees Paid/Due	Approved By:	Approved Date:
ZN201902183	ZONING PERMIT - RES	\$0.00	MK	10/08/2019

**Conditions of Approval:**

- Proposed work shall maintain 8 ft side setback
- Must maintain 30% + 300 lot coverage
- Any land disturbance shall install silt fencing and stabilize once complete
- Final Zoning required 252-449-6045

**Additional Conditions:**

CALL FOR ALL REQUIRED INSPECTIONS; All new work to meet current code; FINAL INSPECTION REQUIRED PRIOR TO ISSUANCE OF CERTIFICATION OF COMPLIANCE

**PLEASE NOTE:**

All work shall conform to all applicable North Carolina State Building codes and Ordinances of the Town of Nags Head and shall be the responsibility of the undersigned applicant.

In accordance with GS160A-418, a permit expires 6 months after the date of issuance if the work authorized by the permit has not been commenced. If, after commencement, the work is discontinued for a period of 12 months (no inspections have taken place) the permit immediately expires. No work authorized by a permit that has expired may be performed until a new permit has been issued.

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---

**Residential Project Approval**  
**Application # 201900818**

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**Property Address:** 8416 SOUTH OLD OREGON INLET RD      **PIN #:** 070908981688      **Parcel:** 007037000

**Lot/Block/Sec:** LOT: 107 BLK: 6 SEC:      **Subdivision:** BODIE ISLAND BEACH

**Zoning:** MEDIUM DENSITY RES DISTRICT      **Land Use:** SINGLE FAMILY DWELLING

**Flood Zone:** AE      **Base Flood Elevation:** 11.0      **Regulatory Flood Elevation:** 12

**Map Panel No:** 0709      **Map Panel Date:** 09/20/2006      **Suffix:** J      **Datum Used:** NAVD 1988

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**Owner Name:** ROBINSON, WILLIAM L - ROBINSON, JAMA G  
**Owner Address:** 1139 KEMPSVILLE RD      NORFOLK, VA 23502

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**Contractor Name:** PROPERTY OWNER      **Contractor Phone:**  
**Contractor Address:** See Above      000, 00 00000

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**Description:** Add sand 8" & cement to storage area & under house, replace deck tread railing stairs windows ext doors siding driveway

**Construction Value:** \$55000      **Classification of Work:** RESIDENTIAL REMODEL

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**BUILDING INFORMATION**

Permit #	Permit Description	Total Fees Paid/Due	Approved By:	Approved Date:
RE201902187	RES ADD-REM-REP-ACC	\$310.00	CT	10/08/2019

**Conditions of Approval:**

- Address #s on home if none are present. Review window, decking and stairs info we have provided. Call us for more info about inspection requirements for this job. Call Steve at 252 449 2005. Thanks

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**FLOOD INFORMATION**

Permit #	Permit Description	Total Fees Paid/Due	Approved By:	Approved Date:
FL201902185	FLOOD PERMIT	\$0.00	SS	10/08/2019

**Conditions of Approval:**

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**PUBLIC WORKS INFORMATION**

Permit #	Permit Description	Total Fees Paid/Due	Approved By:	Approved Date:
PW201902186	PUBLIC WORKS DRIVEWAY APPROVAL	\$0.00		10/08/2019

**Conditions of Approval:**

- All driveways constructed within the Town of Nags Head must be sloped away from the street 1/4-inch per foot for the first six (6) feet off the edge of the street. Contractor MUST call for an inspection AFTER driveway is formed-up and PRIOR to pouring concrete or laying asphalt.
- For Public Works related inspections please call the Public Works Department at 252-441-1122. Please call 24 hours in advance. CALL FOR PW FINAL INSPECTION.
- 36-4(f):max. driveway width is restricted to 26' w/a max. of 15R, min. driveway width is 12'

---

**ZONING INFORMATION**

Permit #	Permit Description	Total Fees Paid/Due	Approved By:	Approved Date:
ZN201902184	ZONING PERMIT - RES	\$0.00		10/08/2019

**Conditions of Approval:**

- 8" of sand for cement proposed - must maintain 5 ft no fill setbacks with a 3:1 slope
- Silt fencing shall be installed and maintained prior to filling
- Driveway replacement within the existing footprint- no additional lot coverage approved
- Stabilize any additional land disturbance
- Call for final zoning 252-449-6045

**TOWN OF NAGS HEAD**  
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**Residential Project Approval**  
**Application # 201900821**

**Property Address:** 2809 SOUTH MEMORIAL AVE **PIN #:** 989206397976 **Parcel:** 028000017

**Lot/Block/Sec:** LOT: 17 BLK: 5 SEC: 2 **Subdivision:** NAGS HEAD SHORES AMENDED SEC 2

**Zoning:** GENERAL COMMERCIAL DISTRICT **Land Use:** SINGLE FAMILY DWELLING

**Flood Zone:** AE **Base Flood Elevation:** 10.0 **Regulatory Flood Elevation:** 11

**Map Panel No:** 9892 **Map Panel Date:** 09/20/2006 **Suffix:** J **Datum Used:** NAVD 1988

**Owner Name:** SHIN, WON - SHIN, DANA

**Owner Address:** 19 ROBERTS RD NEWTOWN SQUARE, PA 19073

**Contractor Name:** Suburban Electrical Services Inc.

**Contractor Phone:** 252-473-7984

**Contractor Address:** 1078 US HWY 64

**Description:** Install 22KW Generator and platform

**Construction Value:** \$8000

**Classification of Work:** RESIDENTIAL ACC STRUCTURE

**BUILDING INFORMATION**

Permit #	Permit Description	Total Fees Paid/Due	Approved By:	Approved Date:
RE201902246	RES ADD-REM-REP-ACC	\$160.00	SS	10/14/2019

**Conditions of Approval:**

- Address #s on home if none are present. Pull electrical permit. All wiring shall comply with 2017 NEC. Call for trench inspections if trenches are dug. Generator shall be elevated to RFE of 11 feet. New elevation certificate may be required. Call for final inspection

**FLOOD INFORMATION**

Permit #	Permit Description	Total Fees Paid/Due	Approved By:	Approved Date:
FL201902245	FLOOD PERMIT	\$0.00	SS	10/14/2019

**Conditions of Approval:**

**ZONING INFORMATION**

Permit #	Permit Description	Total Fees Paid/Due	Approved By:	Approved Date:
ZN201902244	ZONING PERMIT - RES	0.00	MK	10/14/2019

**Conditions of Approval:**

- Lot coverage increased 3.5x 5.5 =19.25 sqft total
- Accessory Structure 5 ft setback must be maintained
- Call for final zoning inspection 252-449-6045

**Additional Conditions:**

CALL FOR ALL REQUIRED INSPECTIONS; All new work to meet current code; FINAL INSPECTION REQUIRED PRIOR TO ISSUANCE OF CERTIFICATION OF COMPLIANCE

**PLEASE NOTE:**

All work shall conform to all applicable North Carolina State Building codes and Ordinances of the Town of Nags Head and shall be the responsibility of the undersigned applicant.

In accordance with GS160A-418, a permit expires 6 months after the date of issuance if the work authorized by the permit has not been commenced. If, after commencement, the work is discontinued for a period of 12 months (no inspections have taken place) the permit immediately expires. No work authorized by a permit that has expired may be performed until a new permit has been issued.

**(ZONING) RIGHT OF APPEAL**

Pursuant to Section 48-594(b)(1) of the Nags Head Zoning Ordinance, you have the right to appeal this decision to the Nags Head Board of Adjustment within thirty (30) days of the date of this notice. This decision shall become final and unappealable if not appealed during this thirty (30) day period.



TOWN OF NAGS HEAD  
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**Residential Project Approval**  
**Application # 201900799**

**Property Address:** 104 HILLSIDE CT **PIN #:** 080117212424 **Parcel:** 024961474

**Lot/Block/Sec:** LOT: 46 BLK: SEC: 3 **Subdivision:** RIDGES SEC 3, THE

**Zoning:** VILLAGE DET RES SF 2 **Land Use:** SINGLE FAMILY DWELLING

**Flood Zone:** X

**Owner Name:** COLBERT, CHRISTIAN J

**Owner Address:** 1505 BATEAU LANDING CHESAPEAKE, VA 23321

**Contractor Name:** PROPERTY OWNER

**Contractor Phone:**

**Contractor Address:** See Above

**Description:** Enclose back porch (rear stairwell) for a total of 120 unheated SF

**Construction Value:** \$2800

**Classification of Work:** RESIDENTIAL REMODEL

**BUILDING INFORMATION**

Permit #	Permit Description	Total Fees Paid/Due	Approved By:	Approved Date:
RE201902221	RES ADD-REM-REP-ACC	\$130.00	SS	10/14/2019

**Conditions of Approval:**

- Address #s on home if none are present. Need more plans. Don't know what you are doing

**ZONING INFORMATION**

Permit #	Permit Description	Total Fees Paid/Due	Approved By:	Approved Date:
ZN201902220	ZONING PERMIT - RES	\$0.00	MK	10/14/2019

**Conditions of Approval:**

- No additional lot coverage proposed
- must maintain setbacks
- Call for final zoning 252-449-6045

**Additional Conditions:**

CALL FOR ALL REQUIRED INSPECTIONS; All new work to meet current code; FINAL INSPECTION REQUIRED PRIOR TO ISSUANCE OF CERTIFICATION OF COMPLIANCE

**PLEASE NOTE:**

All work shall conform to all applicable North Carolina State Building codes and Ordinances of the Town of Nags Head and shall be the responsibility of the undersigned applicant.

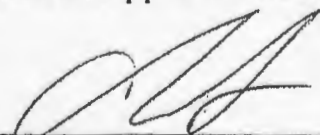
In accordance with GS160A-418, a permit expires 6 months after the date of issuance if the work authorized by the permit has not been commenced. If, after commencement, the work is discontinued for a period of 12 months (no inspections have taken place) the permit immediately expires. No work authorized by a permit that has expired may be performed until a new permit has been issued.

**(ZONING) RIGHT OF APPEAL**

Pursuant to Section 48-594(b)(1) of the Nags Head Zoning Ordinance, you have the right to appeal this decision to the Nags Head Board of Adjustment within thirty (30) days of the date of this notice. This decision shall become final and unappealable if not appealed during this thirty (30) day period.

I, the undersigned, understand that the issuance of a floodplain development permit approval is contingent upon the above information being correct and that the plans and supporting data have been or shall be provided as required, including but not limited to a proposed elevation certificate and or V-Zone certificate. Note: all elevation certificates must be signed by a professional engineer or registered land surveyor.

**DECISION: Approved with Conditions (See above)**

  
Responsible Party

11-1-2019  
Date

TOWN OF NAGS HEAD  
PO Box 99 Nags Head, NC 27959  
Phone (252) 441-7016 Fax (252) 441-4290



**Residential Project Approval**  
**Application # 201900826**

**Property Address:** 9213 SOUTH OLD OREGON INLET RD **PIN #:** 071918311838 **Parcel:** 007223000

**Lot/Block/Sec:** LOT: 10 BLK: 9 SEC: 2 **Subdivision:** HOLLYWOOD BEACH SEC 2

**Zoning:** MEDIUM DENSITY RES DISTRICT **Land Use:** SINGLE FAMILY DWELLING, LARGE

**Flood Zone:** VE **Base Flood Elevation:** 11.0 **Regulatory Flood Elevation:** 12

**Map Panel No:** 0719 **Map Panel Date:** 09/20/2006 **Suffix:** J **Datum Used:** NAVD 1988

**Owner Name:** MIKITA, RONALD

**Owner Address:** 18 WINDSONG LN

**Contractor Name:-** PROPERTY OWNER

**Contractor Phone:**

**Contractor Address:** See Above 000, 00 00000

**Description:** Replace 2 sets of twin windows & single entry door on E side 3rd flr with 1 6-0x6-0 pic window, 2 sliding patio doors

**Construction Value:** \$10000

**Classification of Work:** RESIDENTIAL REMODEL

**BUILDING INFORMATION**

Permit #	Permit Description	Total Fees Paid/Due	Approved By:	Approved Date:
RE201902229	RES ADD-REM-REP-ACC	\$160.00	SS	10/14/2019

**Conditions of Approval:**

- Address #s on home if none are present. Framing of wall is subject to engineering. Call for framing inspection. NC Licensed electrician to contend with wiring and shall pull permit. Smoke and Co2 detectors to code throughout home. Call for final inspection

**FLOOD INFORMATION**

Permit #	Permit Description	Total Fees Paid/Due	Approved By:	Approved Date:
FL201902228	FLOOD PERMIT	\$0.00	SS	10/14/2019

**Conditions of Approval:**

**Additional Conditions:**

CALL FOR ALL REQUIRED INSPECTIONS; All new work to meet current code; FINAL INSPECTION REQUIRED PRIOR TO ISSUANCE OF CERTIFICATION OF COMPLIANCE


**PLEASE NOTE:**

All work shall conform to all applicable North Carolina State Building codes and Ordinances of the Town of Nags Head and shall be the responsibility of the undersigned applicant.

In accordance with GS160A-418, a permit expires 6 months after the date of issuance if the work authorized by the permit has not been commenced. If, after commencement, the work is discontinued for a period of 12 months (no inspections have taken place) the permit immediately expires. No work authorized by a permit that has expired may be performed until a new permit has been issued.

I, the undersigned, understand that the issuance of a floodplain development permit approval is contingent upon the above information being correct and that the plans and supporting data have been or shall be provided as required, including but not limited to a proposed elevation certificate and or V-Zone certificate. Note: all elevation certificates must be signed by a professional engineer or registered land surveyor.

**DECISION: Approved with Conditions (See above)**

  
Responsible Party

10/18/19  
Date

**TOWN OF NAGS HEAD**  
PO Box 99 Nags Head, NC 27959  
Phone (252) 441-7016 Fax (252) 4414290



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**Residential Project Approval**  
**Application # 201900816**

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**Property Address:** 4504 SOUTH VA DARE TRL      **PIN #:** 080109067422 **Parcel:** 008630001  
**Lot/Block/Sec:** LOT: 5 BLK: D1 SEC: 3      **Subdivision:** ROANOKE SOUND SHORES RESUB S 3  
**Zoning:** GENERAL COMMERCIAL DISTRICT      **Land Use:** SINGLE FAMILY DWELLING  
**Flood Zone:** AE      **Base Flood Elevation:** 10.0      **Regulatory Flood Elevation:** 11  
**Map Panel No:** 0801      **Map Panel Date:** 09/20/2006      **Suffix:** J      **Datum Used:** NAVD 1988

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**Owner Name:** JENKINS, JOSEPH THOMAS  
**Owner Address:** PO BOX 6572      RALEIGH, NC 27628

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**Contractor Name:** JENNINGS CONSTRUCTION OBX, LLC      **Contractor Phone:** 252-267-6503  
**Contractor Address:** 4025 PINEWAY DR      KITTY HAWK, NC 27949

---

**Description:** Adding 14x25 (350 sq ft) 4th bdrm to rear of hse & 8x12 deck w/set of stairs on South side of home  
**Construction Value:** \$70116      **Classification of Work:** RESIDENTIAL ADDITION

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**BUILDING INFORMATION**

Permit #	Permit Description	Total Fees Paid/Due	Approved By:	Approved Date:
RE201902234	RES ADD-REM-REP-ACC	\$380.00	SS	10/14/2019

**Conditions of Approval:**

- Address #s to code on home if none are present. Review zoning permit conditions. Egress window in new bedroom. Smokes and co2 detectors to code throughout home. All subs shall pull permits prior to starting work. Call for all required inspections. Call for final inspection

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**FLOOD INFORMATION**

Permit #	Permit Description	Total Fees Paid/Due	Approved By:	Approved Date:
FL201902232	FLOOD PERMIT	\$0.00	SS	10/14/2019

**Conditions of Approval:**

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**PUBLIC WORKS INFORMATION**

Permit #	Permit Description	Total Fees Paid/Due	Approved By:	Approved Date:
PW201902233	PW APPROVAL RES NEW/ADDITION	\$25.00	RB	10/14/2019

**Conditions of Approval:**

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**ZONING INFORMATION**

Permit #	Permit Description	Total Fees Paid/Due	Approved By:	Approved Date:
ZN201902231	ZONING PERMIT - RES	\$0.00	MK	10/14/2019

**Conditions of Approval:**

- prior to work please install silt fencing for E&S control measures
- must maintain setbacks and lot coverage approved site plan
- max height 35 ft
- Parking compliant
- Stabilization required once complete
- Final As-built required
- call for final zoning inspection 252-449-6045

**Additional Conditions:**

CALL FOR ALL REQUIRED INSPECTIONS; All new work to meet current code; FINAL INSPECTION REQUIRED PRIOR TO ISSUANCE OF CERTIFICATION OF COMPLIANCE

TOWN OF NAGS HEAD  
PO Box 99 Nags Head, NC 27959  
Phone (252) 441-7016 Fax (252) 441-4290



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**Residential Project Approval**  
**Application # 201900815**

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**Property Address:** 405 WEST SALMON CT **PIN #:** 989112862298 **Parcel:** 007778000

**Lot/Block/Sec:** LOT: 18 BLK: SEC: E **Subdivision:** OLD NAGS HEAD COVE SEC E

**Zoning:** MEDIUM DENSITY RES DISTRICT  
**Zone:** X

**Land Use:** SINGLE FAMILY DWELLING

**Flood**

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**Owner Name:** TAYLOR, MICHAEL

**Owner Address:** 1328 DANIELLE CT

---

**Contractor Name:** Macko Construction, SMS Construction DBA  
202-2028

**Contractor Phone:** 252-

**Contractor Address:** PO Box 3689 KILL DEVIL HILLS, NC 27948

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**Description:** Replace siding, fascia & soffit, replace windows & doors

**Construction Value:** \$65000

**Classification of Work:** RESIDENTIAL REPAIR

---

**BUILDING INFORMATION**

Permit #	Permit Description	Total Fees Paid/Due	Approved By:	Approved Date:
RE201902224	RES ADD-REM-REP-ACC	\$340.00	SS	10/14/2019

**Conditions of Approval:**

- Address #s on home if none are present. Install siding per evaluation report. Call for air sealing of windows. Provide windborne debris for windows. Call for inspection of rot repairs. Call for final inspection

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**Additional Conditions:**

CALL FOR ALL REQUIRED INSPECTIONS; All new work to meet current code; FINAL INSPECTION REQUIRED PRIOR TO ISSUANCE OF CERTIFICATION OF COMPLIANCE

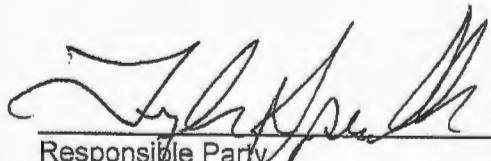
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**PLEASE NOTE:**

All work shall conform to all applicable North Carolina State Building codes and Ordinances of the Town of Nags Head and shall be the responsibility of the undersigned applicant.

In accordance with GS160A-418, a permit expires 6 months after the date of issuance if the work authorized by the permit has not been commenced. If, after commencement, the work is discontinued for a period of 12 months (no inspections have taken place) the permit immediately expires. No work authorized by a permit that has expired may be performed until a new permit has been issued.

**DECISION:** Approved with Conditions (See above)

 10/14/19  
Responsible Party Date



TOWN OF NAGS HEAD  
PO Box 99 Nags Head, NC 27959  
Phone (252) 441-7016 Fax (252) 441-4290



**Residential Project Approval**  
**Application # 201900819**

Property Address: 223 WEST BAYS EDGE PIN #: 080006373702 Parcel: 024961021

Lot/Block/Sec: LOT: 21 BLK: SEC: Subdivision: BAYMEADOW PARCEL A

Zoning: VILLAGE DET RES SF 1 Land Use: SINGLE FAMILY DWELLING

Flood Zone: AE Base Flood Elevation: 9.0 Regulatory Flood Elevation: 10

Map Panel No: 0800 Map Panel Date: 09/20/2006 Suffix: J Datum Used: NAVD 1988

Owner Name: PARSON, JULIA HAMILTON  
Owner Address: P O BOX 1561 NAGS HEAD, NC 27959

Contractor Name: Coastal Construction of North Carolina, Contractor Phone:  
Contractor Address: 7013 Martins Point Rd Kitty Hawk, NC 27949

Description: Repair fire damage, reframe sec of roof & walls, electric, hvac plumbig insulation drywall trim paint cabinets flooring

Construction Value: \$200000 Classification of Work: RESIDENTIAL REPAIR

**BUILDING INFORMATION**

Permit #	Permit Description	Total Fees Paid/Due	Approved By:	Approved Date:
RE201902215	RES ADD-REM-REP-ACC	\$685.00	SS	10/14/2019

**Conditions of Approval:**

- Address #s on home if none are present. New structural work may be subject to engineering. Home is non conforming so all non conforming aspects shall be removed and or corrected. Smokes and Co 2 detectors to code throughout home. All subs shall pull permits prior to starting work. New flood elevation certificate may be required. Call for a site visit to determine all flood non conformities. Call for all required inspections

**FLOOD INFORMATION**

Permit #	Permit Description	Total Fees Paid/Due	Approved By:	Approved Date:
FL201902214	FLOOD PERMIT	\$0.00	SS	10/14/2019

**Conditions of Approval:**

**ZONING INFORMATION**

Permit #	Permit Description	Total Fees Paid/Due	Approved By:	Approved Date:
ZN201902213	ZONING PERMIT - RES	0.00	MK	10/14/2019

**Conditions of Approval:**

Fire damage proposed to be replaced within the existing footprint- no additional lot coverage  
Call for final zoning 252-449-6045

**Additional Conditions:**

CALL FOR ALL REQUIRED INSPECTIONS; All new work to meet current code; FINAL INSPECTION REQUIRED PRIOR TO ISSUANCE OF CERTIFICATION OF COMPLIANCE

**PLEASE NOTE:**

All work shall conform to all applicable North Carolina State Building codes and Ordinances of the Town of Nags Head and shall be the responsibility of the undersigned applicant.  
In accordance with GS160A-418, a permit expires 6 months after the date of issuance if the work authorized by the permit has not been commenced. If, after commencement, the work is discontinued for a period of 12 months (no inspections have taken place) the permit immediately expires. No work authorized by a permit that has expired may be performed until a new permit has been issued.

(ZONING) RIGHT OF APPEAL

TOWN OF NAGS HEAD  
PO Box 99 Nags Head, NC 27959  
Phone (252) 441-7016 Fax (252) 441-4290



**Residential Project Approval**  
**Application # 201900822**

**Property Address:** 10013 SOUTH OLD OREGON INLET RD      **PIN #:** 071811651590 **Parcel:** 007322005  
**Lot/Block/Sec:** LOT: 5 BLK: SEC:      **Subdivision:** NORTHBANK - PHASE 1  
**Zoning:** MEDIUM DENSITY RES DISTRICT      **Land Use:** SINGLE FAMILY DWELLING  
**Flood Zone:** VE      **Base Flood Elevation:** 11.0      **Regulatory Flood Elevation:** 12  
**Map Panel No:** 0718      **Map Panel Date:** 09/20/2006      **Suffix:** J      **Datum Used:** NAVD 1988

**Owner Name:** PETERSON, TORSTEN E JR - GOOD, ELIZABETH  
**Owner Address:** PETERSON, CATHERINE S      ALEXANDRIA, VA 22305

**Contractor Name:** Macko Construction, SMS Construction DBA      **Contractor Phone:** 252-202-2028  
**Contractor Address:** PO Box 3689      KILL DEVIL HILLS, NC 27948

**Description:** Replace siding, fascia & soffit w/ LP smart siding  
**Construction Value:** \$43975      **Classification of Work:** RESIDENTIAL REPAIR

**BUILDING INFORMATION**

Permit #	Permit Description	Total Fees Paid/Due	Approved By:	Approved Date:
RE201902217	RES ADD-REM-REP-ACC	\$280.00	SS	10/14/2019

**Conditions of Approval:**

- Address #s on home if none are present. Install Smart siding per evaluation report. Licensed electrician to deal with wiring issues. Call for inspection of rot repair. Call for final inspection

**FLOOD INFORMATION**

Permit #	Permit Description	Total Fees Paid/Due	Approved By:	Approved Date:
FL201902216	FLOOD PERMIT	\$0.00	SS	10/14/2019

**Conditions of Approval:**

**Additional Conditions:**

CALL FOR ALL REQUIRED INSPECTIONS; All new work to meet current code; FINAL INSPECTION REQUIRED PRIOR TO ISSUANCE OF CERTIFICATION OF COMPLIANCE

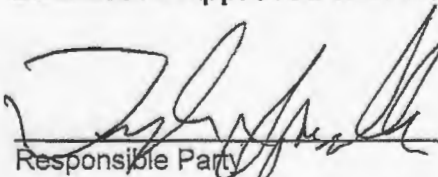
**PLEASE NOTE:**

All work shall conform to all applicable North Carolina State Building codes and Ordinances of the Town of Nags Head and shall be the responsibility of the undersigned applicant.

In accordance with GS160A-418, a permit expires 6 months after the date of issuance if the work authorized by the permit has not been commenced. If, after commencement, the work is discontinued for a period of 12 months (no inspections have taken place) the permit immediately expires. No work authorized by a permit that has expired may be performed until a new permit has been issued.

I, the undersigned, understand that the issuance of a floodplain development permit approval is contingent upon the above information being correct and that the plans and supporting data have been or shall be provided as required, including but not limited to a proposed elevation certificate and or V-Zone certificate. Note: all elevation certificates must be signed by a professional engineer or registered land surveyor.

**DECISION:** Approved with Conditions (See above)

      10/14/2019  
Responsible Party      Date

TOWN OF NAGS HEAD  
PO Box 99 Nags Head, NC 27959  
Phone (252) 441-7016 Fax (252) 441-4290



**Residential Project Approval**  
**Application # 201900834**

Property Address: 8448 SOUTH OLD OREGON INLET RD PIN #: 070908975862 Parcel: 012429002

Lot/Block/Sec: LOT: 2 BLK: SEC: Subdivision: NAGS HEAD SOUTH REV- BLKS C&D

Zoning: MEDIUM DENSITY RES DISTRICT Land Use: SINGLE FAMILY DWELLING, LARGE

Flood Zone: AE Base Flood Elevation: 11.0 Regulatory Flood Elevation: 12

Map Panel No: 0709 Map Panel Date: 09/20/2006 Suffix: J Datum Used: NAVD 1988

Owner Name: BELLEMAN, BRUCE D - BELLEMAN, PAMELA S  
Owner Address: 37 RUNSWICK DR RICHMOND, VA 23238

Contractor Name: Finch and Co., Inc. Contractor Phone: 252-261-8710  
Contractor Address: 116 Sandy Ridge Rd Duck, NC 27949

Description: Replace decking & handrails on existing East decks, vinyl handrails to be installed

Construction Value: \$28000 Classification of Work: RESIDENTIAL REPAIR

**BUILDING INFORMATION**

Permit #	Permit Description	Total Fees Paid/Due	Approved By:	Approved Date:
RE201902227	RES ADD-REM-REP-ACC	\$220.00	SS	10/14/2019

**Conditions of Approval:**

- Address #s on home if none are present. Review deck repair handout we have provided. Call for final inspection.

**FLOOD INFORMATION**

Permit #	Permit Description	Total Fees Paid/Due	Approved By:	Approved Date:
FL201902226	FLOOD PERMIT	\$0.00	SS	10/14/2019

**Conditions of Approval:**

**Additional Conditions:**

CALL FOR ALL REQUIRED INSPECTIONS; All new work to meet current code; FINAL INSPECTION REQUIRED PRIOR TO ISSUANCE OF CERTIFICATION OF COMPLIANCE

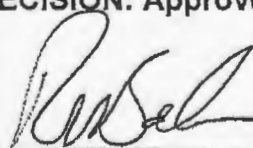
**PLEASE NOTE:**

All work shall conform to all applicable North Carolina State Building codes and Ordinances of the Town of Nags Head and shall be the responsibility of the undersigned applicant.

In accordance with GS160A-418, a permit expires 6 months after the date of issuance if the work authorized by the permit has not been commenced. If, after commencement, the work is discontinued for a period of 12 months (no inspections have taken place) the permit immediately expires. No work authorized by a permit that has expired may be performed until a new permit has been issued.

I, the undersigned, understand that the issuance of a floodplain development permit approval is contingent upon the above information being correct and that the plans and supporting data have been or shall be provided as required, including but not limited to a proposed elevation certificate and or V-Zone certificate. Note: all elevation certificates must be signed by a professional engineer or registered land surveyor.

**DECISION: Approved with Conditions (See above)**

  
Responsible Party \_\_\_\_\_ Date 10/15/19

**TOWN OF NAGS HEAD**  
PO Box 99 Nags Head, NC 27959  
Phone (252) 441-7016 Fax (252) 441-4290



**Residential Project Approval**  
**Application # 201900839**

**Property Address:** 202 EAST ARIO ST **PIN #:** 989313137006 **Parcel:** 005233000  
**Lot/Block/Sec:** LOT: 13 BLK: 10 SEC: **Subdivision:** MOSIER SHORES  
**Zoning:** HIGH DENSITY RES DISTRICT **Land Use:** SINGLE FAMILY DWELLING  
**Flood Zone:** AE **Base Flood Elevation:** 10.0 **Regulatory Flood Elevation:** 11  
**Map Panel No:** 9893 **Map Panel Date:** 09/20/2006 **Suffix:** J **Datum Used:** NAVD 1988

**Owner Name:** BUNN, JAMES C  
**Owner Address:** 12336 WILDWOOD BLVD ASHLAND, VA 23005

**Contractor Name:** 2 Guys Services **Contractor Phone:** 252-489-8753  
**Contractor Address:** 605 W Archdale St KILL DEVIL HILLS, NC 27948

**Description:** Install new vinyl siding over existing t1-11, install 7 new windows in existing openings

**Construction Value:** \$26000 **Classification of Work:** RESIDENTIAL REPAIR

**BUILDING INFORMATION**

Permit #	Permit Description	Total Fees Paid/Due	Approved By:	Approved Date:
RE201902243	RES ADD-REM-REP-ACC	\$220.00	SS	10/14/2019

**Conditions of Approval:**

- Address #s on home if none are present. Pull electrical permit to deal with lights and receptacles etc. Call for air sealing of windows. Provide for windborn debris protection. Call for final inspection

**FLOOD INFORMATION**

Permit #	Permit Description	Total Fees Paid/Due	Approved By:	Approved Date:
FL201902242	FLOOD PERMIT	\$0.00	SS	10/14/2019

**Conditions of Approval:**

**Additional Conditions:**

CALL FOR ALL REQUIRED INSPECTIONS; All new work to meet current code; FINAL INSPECTION REQUIRED PRIOR TO ISSUANCE OF CERTIFICATION OF COMPLIANCE

**PLEASE NOTE:**

All work shall conform to all applicable North Carolina State Building codes and Ordinances of the Town of Nags Head and shall be the responsibility of the undersigned applicant.

In accordance with GS160A-418, a permit expires 6 months after the date of issuance if the work authorized by the permit has not been commenced. If, after commencement, the work is discontinued for a period of 12 months (no inspections have taken place) the permit immediately expires. No work authorized by a permit that has expired may be performed until a new permit has been issued.

I, the undersigned, understand that the issuance of a floodplain development permit approval is contingent upon the above information being correct and that the plans and supporting data have been or shall be provided as required, including but not limited to a proposed elevation certificate and or V-Zone certificate. Note: all elevation certificates must be signed by a professional engineer or registered land surveyor.

**DECISION: Approved with Conditions (See above)**

  
Responsible Party   
Date



TOWN OF NAGS HEAD  
PO Box 99 Nags Head, NC 27959  
Phone (252) 441-7016 Fax (252) 441-4290



**Residential Project Approval**  
**Application # 201900843**

**Property Address:** 4937 SOUTH VA DARE TRL **PIN #:** 080113233894 **Parcel:** 000380144  
**Lot/Block/Sec:** LOT: 23 BLK: SEC: **Subdivision:** SMALL HOTEL PARCEL VLG AT N H  
**Zoning:** VILLAGE DET RES SF 1 **Land Use:** SINGLE FAMILY DWELLING, LARGE  
**Flood Zone:** VE **Base Flood Elevation:** 11.0 **Regulatory Flood Elevation:** 12  
**Map Panel No:** 0801 **Map Panel Date:** 09/20/2006 **Suffix:** J **Datum Used:** NAVD 1988

**Owner Name:** NERANTZIS, GREGORY L JR - NERANTZIS, SHA  
**Owner Address:** 12801 TAYLORS VALLEY LN LOVETTSVILLE, VA 20180

**Contractor Name:** Coastal Roofing and Siding, Inc. **Contractor Phone:** 252-256-1814  
**Contractor Address:** 2401 Colington Rd KILL DEVIL HILLS, NC 27948

**Description:** Remove & install new 3/4"x24 blue label cedar shake roofing system, copper valleys

**Construction Value:** \$29990 **Classification of Work:** RESIDENTIAL REPAIR

**BUILDING INFORMATION**

Permit #	Permit Description	Total Fees Paid/Due	Approved By:	Approved Date:
RE201902239	RES ADD-REM-REP-ACC	\$220.00	SS	10/14/2019

**Conditions of Approval:**

- Address #s on home if none are present. Call material check. Call for final inspection.

**FLOOD INFORMATION**

Permit #	Permit Description	Total Fees Paid/Due	Approved By:	Approved Date:
FL201902238	FLOOD PERMIT	\$0.00	SS	10/14/2019

**Conditions of Approval:**

**Additional Conditions:**

CALL FOR ALL REQUIRED INSPECTIONS; All new work to meet current code; FINAL INSPECTION REQUIRED PRIOR TO ISSUANCE OF CERTIFICATION OF COMPLIANCE

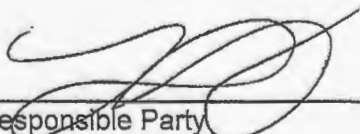
**PLEASE NOTE:**

All work shall conform to all applicable North Carolina State Building codes and Ordinances of the Town of Nags Head and shall be the responsibility of the undersigned applicant.

In accordance with GS160A-418, a permit expires 6 months after the date of issuance if the work authorized by the permit has not been commenced. If, after commencement, the work is discontinued for a period of 12 months (no inspections have taken place) the permit immediately expires. No work authorized by a permit that has expired may be performed until a new permit has been issued.

I, the undersigned, understand that the issuance of a floodplain development permit approval is contingent upon the above information being correct and that the plans and supporting data have been or shall be provided as required, including but not limited to a proposed elevation certificate and or V-Zone certificate. Note: all elevation certificates must be signed by a professional engineer or registered land surveyor.

**DECISION: Approved with Conditions (See above)**

  
Responsible Party \_\_\_\_\_ Date 10/30/19

**TOWN OF NAGS HEAD**  
PO Box 99 Nags Head, NC 27959  
Phone (252) 441-7016 Fax (252) 441-4290



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**Residential Project Approval**  
**Application # 2019451**

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**Property Address:** 2431 SOUTH VA DARE TRL      **PIN #:** 98931831628102      **Parcel:** 027441001  
**Lot/Block/Sec:** LOT: 3 UT 6 BLK: SEC: 2      **Subdivision:** FIVE SEASONS CONDOS  
**Zoning:** COMMERCIAL/RESIDENTIAL DISTRICT      **Land Use:** SINGLE FAMILY DWELLING  
**Flood Zone:** VE      **Base Flood Elevation:** 11.0      **Regulatory Flood Elevation:** 12  
**Map Panel No:** 9893      **Map Panel Date:** 09/20/2006      **Suffix:** J      **Datum Used:** NAVD 1988

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**Owner Name:** GOODWIN, DAVID E - GOODWIN, GENEVIEVE B  
**Owner Address:** 7050 OLD MILLSTONE DR      MECHANICSVILLE, VA 23111

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**Contractor Name:** So Nice Again (SNA)      **Contractor Phone:** 252-261-8488  
**Contractor Address:** PO Box 253      Kitty Hawk, NC 27949

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**Description:** Dorian Damage Drywall insulation, reset trim, lights, toilet painting, siding repair 3 squares, roof replacement

**Construction Value:** \$22000      **Classification of Work:** STORM REPAIR PERMITS

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**BUILDING INFORMATION**

Permit #	Permit Description	Total Fees Paid/Due	Approved By:	Approved Date:
RE201902223	RES ADD-REM-REP-ACC	\$0.00	SS	10/14/2019

**Conditions of Approval:**

- Address #s on home if none are present. Smokes and Co2 detectors to code throughout home. Call for final inspection.

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**FLOOD INFORMATION**

Permit #	Permit Description	Total Fees Paid/Due	Approved By:	Approved Date:
FL201902222	FLOOD PERMIT	\$0.00	SS	10/14/2019

**Conditions of Approval:**

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**Additional Conditions:**

CALL FOR ALL REQUIRED INSPECTIONS; All new work to meet current code; FINAL INSPECTION REQUIRED PRIOR TO ISSUANCE OF CERTIFICATION OF COMPLIANCE

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**PLEASE NOTE:**

All work shall conform to all applicable North Carolina State Building codes and Ordinances of the Town of Nags Head and shall be the responsibility of the undersigned applicant.

**In accordance with GS160A-418, a permit expires 6 months after the date of issuance if the work authorized by the permit has not been commenced. If, after commencement, the work is discontinued for a period of 12 months (no inspections have taken place) the permit immediately expires. No work authorized by a permit that has expired may be performed until a new permit has been issued.**

I, the undersigned, understand that the issuance of a floodplain development permit approval is contingent upon the above information being correct and that the plans and supporting data have been or shall be provided as required, including but not limited to a proposed elevation certificate and or V-Zone certificate. Note: all elevation certificates must be signed by a professional engineer or registered land surveyor.

**DECISION: Approved with Conditions (See above)**

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Responsible Party \_\_\_\_\_ Date \_\_\_\_\_

**TOWN OF NAGS HEAD**  
PO Box 99 Nags Head, NC 27959  
Phone (252) 441-7016 Fax (252) 441-4290



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**Residential Project Approval**  
**Application # 2019467**

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**Property Address:** 4900 EAST ENGAGEMENT HILL LOOP **PIN #:** 080113143467 **Parcel:** 027839026

**Lot/Block/Sec:** LOT: 10 BLK: SEC: **Subdivision:** SEVEN SISTERS

**Zoning:** VILLAGE DET RES SF 2 **Land Use:** SINGLE FAMILY DWELLING

**Flood Zone:** AE **Base Flood Elevation:** 11.0 **Regulatory Flood Elevation:**

**Map Panel No:** **Map Panel Date:** **Suffix:** **Datum Used:**

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**Owner Name:** KUPCHA, JOHN - KUPCHA, CHRISTINE T

**Owner Address:** 722 TRANQUILITY TURN MARLTON, NJ 08053

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**Contractor Name:** Coastal Roofing and Siding, Inc. **Contractor Phone:** 252-256-1814

**Contractor Address:** 2401 Colington Rd KILL DEVIL HILLS, NC 27948

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**Description:** Dorian damage remove & install 1/2"x24" Blue label cedar shake, copper valleys

**Construction Value:** \$22591 **Classification of Work:** STORM REPAIR PERMITS

---

**BUILDING INFORMATION**

Permit #	Permit Description	Total Fees Paid/Due	Approved By:	Approved Date:
RE201902241	RES ADD-REM-REP-ACC	\$0.00	SS	10/14/2019

**Conditions of Approval:**

- Address #s on home if none are present. Call for material check. Call for final inspection

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**FLOOD INFORMATION**

Permit #	Permit Description	Total Fees Paid/Due	Approved By:	Approved Date:
FL201902240	FLOOD PERMIT	\$0.00	SS	10/14/2019

**Conditions of Approval:**

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**Additional Conditions:**

CALL FOR ALL REQUIRED INSPECTIONS; All new work to meet current code; FINAL INSPECTION REQUIRED PRIOR TO ISSUANCE OF CERTIFICATION OF COMPLIANCE

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**PLEASE NOTE:**

All work shall conform to all applicable North Carolina State Building codes and Ordinances of the Town of Nags Head and shall be the responsibility of the undersigned applicant.

**In accordance with GS160A-418, a permit expires 6 months after the date of issuance if the work authorized by the permit has not been commenced. If, after commencement, the work is discontinued for a period of 12 months (no inspections have taken place) the permit immediately expires. No work authorized by a permit that has expired may be performed until a new permit has been issued.**

I, the undersigned, understand that the issuance of a floodplain development permit approval is contingent upon the above information being correct and that the plans and supporting data have been or shall be provided as required, including but not limited to a proposed elevation certificate and or V-Zone certificate. Note: all elevation certificates must be signed by a professional engineer or registered land surveyor.

**DECISION: Approved with Conditions (See above)**

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Responsible Party \_\_\_\_\_ Date \_\_\_\_\_

**TOWN OF NAGS HEAD**  
PO Box 99 Nags Head, NC 27959  
Phone (252) 441-7016 Fax (252) 441-4290



**Residential Project Approval**  
**Application # 201900825**

**Property Address:** 4047 SOUTH VA DARE TRL **PIN #:** 989108996378 **Parcel:** 008592000

**Lot/Block/Sec:** LOT: 33-33A BLK: SEC: **Subdivision:** C W HOLLOWELL DB 17-79

**Zoning:** LOW DENSITY RES DISTRICT **Land Use:** SINGLE FAMILY DWELLING

**Flood Zone:** VE **Base Flood Elevation:** 11.0 **Regulatory Flood Elevation:**

**Map Panel No:** **Map Panel Date:** **Suffix:** **Datum Used:**

**Owner Name:** WINSLOW, FRANCIS E III

**Owner Address:** 1721 CANTERBURY RD RALEIGH, NC 27608

**Contractor Name:** Coastal Cottage Contracting, LLC **Contractor Phone:**

**Contractor Address:** PO Box 433 Nags Head, NC 27959

**Description:** Replace porch roof framing and porch railings on S, E & N sides

**Construction Value:** \$28000 **Classification of Work:** RESIDENTIAL REPAIR

**BUILDING INFORMATION**

Permit #	Permit Description	Total Fees Paid/Due	Approved By:	Approved Date:
RE201902251	RES ADD-REM-REP-ACC	\$220.00	SS	10/15/2019

**Conditions of Approval:**

- Address #'s on home if none are present. Call for a site visit to determine what repair techniques are approved. Call for final inspection.

**FLOOD INFORMATION**

Permit #	Permit Description	Total Fees Paid/Due	Approved By:	Approved Date:
FL201902250	FLOOD PERMIT	\$0.00	SS	10/15/2019

**Conditions of Approval:**

**Additional Conditions:**

CALL FOR ALL REQUIRED INSPECTIONS; All new work to meet current code; FINAL INSPECTION REQUIRED PRIOR TO ISSUANCE OF CERTIFICATION OF COMPLIANCE

**PLEASE NOTE:**

All work shall conform to all applicable North Carolina State Building codes and Ordinances of the Town of Nags Head and shall be the responsibility of the undersigned applicant.

In accordance with GS160A-418, a permit expires 6 months after the date of issuance if the work authorized by the permit has not been commenced. If, after commencement, the work is discontinued for a period of 12 months (no inspections have taken place) the permit immediately expires. No work authorized by a permit that has expired may be performed until a new permit has been issued.

I, the undersigned, understand that the issuance of a floodplain development permit approval is contingent upon the above information being correct and that the plans and supporting data have been or shall be provided as required, including but not limited to a proposed elevation certificate and or V-Zone certificate. Note: all elevation certificates must be signed by a professional engineer or registered land surveyor.

**DECISION:** Approved with Conditions (See above)

*Coastal Cottage Contracting, LLC* 10/15/19  
Responsible Party (Date)

*By Vaughan Robinson managing member*



**TOWN OF NAGS HEAD**  
PO Box 99 Nags Head, NC 27959  
Phone (252) 441-7016 Fax (252) 441-4290



**Residential Project Approval**  
**Application # 201900844**

**Property Address:** 4413 SOUTH VA DARE TRL **PIN #:** 080109069854 **Parcel:** 026295000  
**Lot/Block/Sec:** LOT: UNITS 18A-B BLK: SEC: A **Subdivision:** HAWKS NEST  
**Zoning:** COMMERCIAL/RESIDENTIAL DISTRICT **Land Use:** DUPLEX  
**Flood Zone:** VE **Base Flood Elevation:** 11.0 **Regulatory Flood Elevation:** 12  
**Map Panel No:** 0801 **Map Panel Date:** 09/20/2006 **Suffix:** J **Datum Used:** NAVD 1998

**Owner Name:** HAWKS NEST COMPANY OF N.H. II - C/O VILL  
**Owner Address:** PO BOX 1807 NAGS HEAD, NC 27959

**Contractor Name:** Haddon Homes, Inc. **Contractor Phone:** 252-267-2287  
**Contractor Address:** PO Box 1868 NAGS HEAD, NC 27959

**Description:** Remove & replace red cedar shake siding, repair sheathing if needed, repair roof shingle flashing as needed

**Construction Value:** \$70380 **Classification of Work:** RESIDENTIAL REPAIR

**BUILDING INFORMATION**

Permit #	Permit Description	Total Fees Paid/Due	Approved By:	Approved Date:
RE201902249	RES ADD-REM-REP-ACC	\$370.00	SS	10/15/2019

**Conditions of Approval:**

**FLOOD INFORMATION**

Permit #	Permit Description	Total Fees Paid/Due	Approved By:	Approved Date:
FL201902248	FLOOD PERMIT	\$0.00	SS	10/15/2019

**Conditions of Approval:**

- Address #s on property if none are present. Call for material check. Pull electrical permit to deal with wiring issues as they arise. Call for inspection of rot repair. Call for final inspection

**Additional Conditions:**

CALL FOR ALL REQUIRED INSPECTIONS; All new work to meet current code; FINAL INSPECTION REQUIRED PRIOR TO ISSUANCE OF CERTIFICATION OF COMPLIANCE

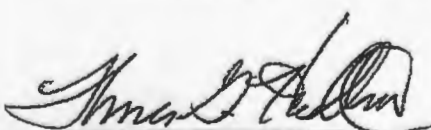
**PLEASE NOTE:**

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In accordance with GS160A-418, a permit expires 6 months after the date of issuance if the work authorized by the permit has not been commenced. If, after commencement, the work is discontinued for a period of 12 months (no inspections have taken place) the permit immediately expires. No work authorized by a permit that has expired may be performed until a new permit has been issued.

I, the undersigned, understand that the issuance of a floodplain development permit approval is contingent upon the above information being correct and that the plans and supporting data have been or shall be provided as required, including but not limited to a proposed elevation certificate and or V-Zone certificate. Note: all elevation certificates must be signed by a professional engineer or registered land surveyor.

**DECISION:** Approved with Conditions (See above)

  
Responsible Party

10/25/2019  
Date



**Residential Project Approval  
Application # 201900831**

**Property Address:** 322 WEST BRIDGE LN **PIN #:** 989205190622 **Parcel:** 026364061

**Lot/Block/Sec:** LOT: 61 BLK: SEC: 7 **Subdivision:** NAGS HEAD ACRES SECTION 7

**Zoning:** MEDIUM DENSITY RES DISTRICT **Land Use:** SINGLE FAMILY DWELLING

**Flood Zone:** X

**Owner Name:** BUFFA, MARIO C.

**Owner Address:** P O BOX 309

**Contractor Name:** PROPERTY OWNER

**Contractor Phone:**

**Contractor Address:** See Above

**Description:** Replace all exterior decking boards, handrails & stairs, canterlever small section up to 39" out

**Construction Value:** \$9500

**Classification of Work:** RESIDENTIAL REMODEL

**BUILDING INFORMATION**

Permit #	Permit Description	Total Fees Paid/Due	Approved By:	Approved Date:
RE201902262	RES ADD-REM-REP-ACC	\$160.00	SS	10/16/2019

**Conditions of Approval:**

- Address #s on home if none are present. Call for a site visit before you start to discuss the job. Review deck repair handout we have provided. Call for final inspection

**ZONING INFORMATION**

Permit #	Permit Description	Total Fees Paid/Due	Approved By:	Approved Date:
ZN201902261	ZONING PERMIT - RES	\$0.00	MK	10/16/2019

**Conditions of Approval:**

- Must maintain setbacks and lot coverage
- Final zoning inspection 252-449-6045

**Additional Conditions:**

CALL FOR ALL REQUIRED INSPECTIONS; All new work to meet current code; FINAL INSPECTION REQUIRED PRIOR TO ISSUANCE OF CERTIFICATION OF COMPLIANCE

**PLEASE NOTE:**

All work shall conform to all applicable North Carolina State Building codes and Ordinances of the Town of Nags Head and shall be the responsibility of the undersigned applicant.

In accordance with GS160A-418, a permit expires 6 months after the date of issuance if the work authorized by the permit has not been commenced. If, after commencement, the work is discontinued for a period of 12 months (no inspections have taken place) the permit immediately expires. No work authorized by a permit that has expired may be performed until a new permit has been issued.

**(ZONING) RIGHT OF APPEAL**

Pursuant to Section 48-594(b)(1) of the Nags Head Zoning Ordinance, you have the right to appeal this decision to the Nags Head Board of Adjustment within thirty (30) days of the date of this notice. This decision shall become final and unappealable if not appealed during this thirty (30) day period.

I, the undersigned, understand that the issuance of a floodplain development permit approval is contingent upon the above information being correct and that the plans and supporting data have been or shall be provided as required, including but not limited to a proposed elevation certificate and or V-Zone certificate. Note: all elevation certificates must be signed by a professional engineer or registered land surveyor.

**DECISION: Approved with Conditions (See above)**

  
Responsible Party

10/17/19  
Date

**TOWN OF NAGS HEAD**  
PO Box 99 Nags Head, NC 27959  
Phone (252) 441-7016 Fax (252) 441-4290



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**Residential Project Approval**  
**Application # 201900835**

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**Property Address:** 4719 SOUTH PAMLICO WAY      **PIN #:** 080113042660 **Parcel:** 006176000  
**Lot/Block/Sec:** LOT: 49 BLK: SEC: A **Subdivision:** OLD NAGS HEAD COVE SEC A  
**Zoning:** MEDIUM DENSITY RES DISTRICT      **Land Use:** SINGLE FAMILY DWELLING  
**Flood Zone:** AE      **Base Flood Elevation:** 9.0      **Regulatory Flood Elevation:** 10  
**Map Panel No:** 0801      **Map Panel Date:** 09/20/2006      **Suffix:** J      **Datum Used:** NAVD 1988

---

**Owner Name:** LACEY, DAVID B.  
**Owner Address:** 4303 S VIRGINIA DARE TR

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**Contractor Name:** Hunter Homes, Inc.      **Contractor Phone:** 252-207-8861  
**Contractor Address:** 121 Craigy Ct      Kill Devil Hills, NC 27948

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**Description:** New siding window & roof new cabinets & bath fixtures remove existing 4' deck in front replace N side deck existing fprn

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**Construction Value:** \$75000      **Classification of Work:** RESIDENTIAL REMODEL

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**BUILDING INFORMATION**

Permit #	Permit Description	Total Fees Paid/Due	Approved By:	Approved Date:
RE201902290	RES ADD-REM-REP-ACC	\$380.00	SS	10/17/2019

**Conditions of Approval:**

- Address #s on home if none are present. Home is flood non compliant. Home shall be brought into flood compliance per FEMA and the TONH flood ordinance. All subs shall pull permits prior to starting work. Smokes and Co2 detectors to code throughout home. Call for a site visit to determine what will need to be done to bring home into flood compliance. Call for all required inspections.

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**FLOOD INFORMATION**

Permit #	Permit Description	Total Fees Paid/Due	Approved By:	Approved Date:
FL201902289	FLOOD PERMIT	\$0.00	SS	10/17/2019

**Conditions of Approval:**

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**ZONING INFORMATION**

Permit #	Permit Description	Total Fees Paid/Due	Approved By:	Approved Date:
ZN201902288	ZONING PERMIT - RES	0.00	MK	10/17/2019

**Conditions of Approval:**

Must maintain setback, no additional lot coverage  
Call for final zoning 252-449-6045

**Additional Conditions:**

CALL FOR ALL REQUIRED INSPECTIONS; All new work to meet current code; FINAL INSPECTION REQUIRED PRIOR TO ISSUANCE OF CERTIFICATION OF COMPLIANCE

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**PLEASE NOTE:**

All work shall conform to all applicable North Carolina State Building codes and Ordinances of the Town of Nags Head and shall be the responsibility of the undersigned applicant.

In accordance with GS160A-418, a permit expires 6 months after the date of issuance if the work authorized by the permit has not been commenced. If, after commencement, the work is discontinued for a period of 12 months (no inspections have taken place) the permit immediately expires. No work authorized by a permit that has expired may be performed until a new permit has been issued.

**(ZONING) RIGHT OF APPEAL**

**TOWN OF NAGS HEAD**  
PO Box 99 Nags Head, NC 27959  
Phone (252) 441-7016 Fax (252) 441-4290



**Residential Project Approval**  
**Application # 201900845**

**Property Address:** 4415 SOUTH VA DARE TRL **PIN #:** 080109069787 **Parcel:** 008657000  
**Lot/Block/Sec:** LOT: UNITS 17A&17B BLK: SEC: A **Subdivision:** HAWKS NEST  
**Zoning:** COMMERCIAL/RESIDENTIAL DISTRICT **Land Use:** DUPLEX  
**Flood Zone:** VE **Base Flood Elevation:** 11.0 **Regulatory Flood Elevation:** 12  
**Map Panel No:** 0801 **Map Panel Date:** 09/20/2006 **Suffix:** J **Datum Used:** NAVD 1988

**Owner Name:** HAWKS NEST COMPANY OF N.H. II - C/O VILL  
**Owner Address:** PO BOX 1807 NAGS HEAD, NC 27959

**Contractor Name:** Haddon Homes, Inc. **Contractor Phone:** 252-267-2287  
**Contractor Address:** PO Box 1868 NAGS HEAD, NC 27959

**Description:** Remove & replace cedar shake siding, repair sheathing if needed, repair roof shingle flashing as needed  
**Construction Value:** \$70380 **Classification of Work:** RESIDENTIAL REPAIR

**BUILDING INFORMATION**

Permit #	Permit Description	Total Fees Paid/Due	Approved By:	Approved Date:
RE201902280	RES ADD-REM-REP-ACC	\$370.00	SS	10/17/2019

**Conditions of Approval:**

- Address #s on home if none are present. NC Licensed Electrician shall pull permit to deal with wiring issues as they arise. Call for rot repair if needed. Call for final inspection

**FLOOD INFORMATION**

Permit #	Permit Description	Total Fees Paid/Due	Approved By:	Approved Date:
FL201902279	FLOOD PERMIT	\$0.00	SS	10/17/2019

**Conditions of Approval:**

**Additional Conditions:**

CALL FOR ALL REQUIRED INSPECTIONS; All new work to meet current code; FINAL INSPECTION REQUIRED PRIOR TO ISSUANCE OF CERTIFICATION OF COMPLIANCE

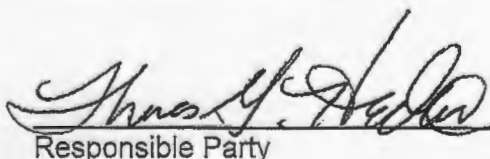
**PLEASE NOTE:**

All work shall conform to all applicable North Carolina State Building codes and Ordinances of the Town of Nags Head and shall be the responsibility of the undersigned applicant.

In accordance with GS160A-418, a permit expires 6 months after the date of issuance if the work authorized by the permit has not been commenced. If, after commencement, the work is discontinued for a period of 12 months (no inspections have taken place) the permit immediately expires. No work authorized by a permit that has expired may be performed until a new permit has been issued.

I, the undersigned, understand that the issuance of a floodplain development permit approval is contingent upon the above information being correct and that the plans and supporting data have been or shall be provided as required, including but not limited to a proposed elevation certificate and or V-Zone certificate. Note: all elevation certificates must be signed by a professional engineer or registered land surveyor.

**DECISION: Approved with Conditions (See above)**

 10/25/2019  
Responsible Party Date



TOWN OF NAGS HEAD  
PO Box 99 Nags Head, NC 27959  
Phone (252) 441-7016 Fax (252) 441-4290



**Residential Project Approval  
Application # 201900847**

**Property Address:** 4335 SOUTH VA DARE TRL **PIN #:** 080109077195 **Parcel:** 012412000  
**Lot/Block/Sec:** LOT: UNITS 20A-20B BLK: SEC: **Subdivision:** HAWKS NEST  
**Zoning:** COMMERCIAL/RESIDENTIAL DISTRICT **Land Use:** DUPLEX  
**Flood Zone:** VE **Base Flood Elevation:** 11.0 **Regulatory Flood Elevation:** 12  
**Map Panel No:** 0801 **Map Panel Date:** 09/20/2006 **Suffix:** J **Datum Used:** NAVD 1988

**Owner Name:** HAWKS NEST COMPANY OF NAGS HEAD III - C/  
**Owner Address:** PO BOX 1807 NAGS HEAD, NC 27959

**Contractor Name:** Haddon Homes, Inc. **Contractor Phone:** 252-267-2287  
**Contractor Address:** PO Box 1868 NAGS HEAD, NC 27959

**Description:** Remove & replace red cedar shake siding, repair sheathing if needed, repair roof shingles  
**Construction Value:** \$69080 **Classification of Work:** RESIDENTIAL REPAIR

**BUILDING INFORMATION**

Permit #	Permit Description	Total Fees Paid/Due	Approved By:	Approved Date:
RE201902282	RES ADD-REM-REP-ACC	\$340.00	SS	10/17/2019

**Conditions of Approval:**

- Address #s on house if none are present. NC Licensed electrician shall pull permit to contend with light and receptacles. Call for inspection of rot repair. Call for final inspection

**FLOOD INFORMATION**

Permit #	Permit Description	Total Fees Paid/Due	Approved By:	Approved Date:
FL201902281	FLOOD PERMIT	\$0.00	SS	10/17/2019

**Conditions of Approval:**

**Additional Conditions:**

CALL FOR ALL REQUIRED INSPECTIONS; All new work to meet current code; FINAL INSPECTION REQUIRED PRIOR TO ISSUANCE OF CERTIFICATION OF COMPLIANCE

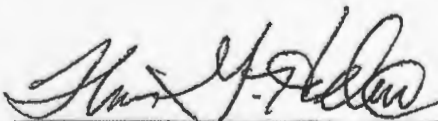
**PLEASE NOTE:**

All work shall conform to all applicable North Carolina State Building codes and Ordinances of the Town of Nags Head and shall be the responsibility of the undersigned applicant.

In accordance with GS160A-418, a permit expires 6 months after the date of issuance if the work authorized by the permit has not been commenced. If, after commencement, the work is discontinued for a period of 12 months (no inspections have taken place) the permit immediately expires. No work authorized by a permit that has expired may be performed until a new permit has been issued.

I, the undersigned, understand that the issuance of a floodplain development permit approval is contingent upon the above information being correct and that the plans and supporting data have been or shall be provided as required, including but not limited to a proposed elevation certificate and or V-Zone certificate. Note: all elevation certificates must be signed by a professional engineer or registered land surveyor.

**DECISION: Approved with Conditions (See above)**

  
Responsible Party 10/25/2019  
Date

**TOWN OF NAGS HEAD**  
PO Box 99 Nags Head, NC 27959  
Phone (252) 441-7016 Fax (252) 441-4290



**Residential Project Approval**  
**Application # 201900846**

**Property Address:** 4333 SOUTH VA DARE TRL **PIN #:** 080109077261 **Parcel:** 026279000  
**Lot/Block/Sec:** LOT: 21A-21B BLK: SEC: **Subdivision:** HAWKS NEST  
**Zoning:** COMMERCIAL/RESIDENTIAL DISTRICT **Land Use:** DUPLEX  
**Flood Zone:** VE **Base Flood Elevation:** 11.0 **Regulatory Flood Elevation:** 12  
**Map Panel No:** 0801 **Map Panel Date:** 09/20/2006 **Suffix:** J **Datum Used:** NAVD 1988

**Owner Name:** HAWKS NEST COMPANY OF NAGS HEAD III - C/  
**Owner Address:** PO BOX 1807 NAGS HEAD, NC 27959

**Contractor Name:** Haddon Homes, Inc. **Contractor Phone:** 252-267-2287  
**Contractor Address:** PO Box 1868 NAGS HEAD, NC 27959

**Description:** Remove & replace red cedar shake siding, repair sheathing as needed, repair roof shingle flashing as needed

**Construction Value:** \$69080 **Classification of Work:** RESIDENTIAL REPAIR

**BUILDING INFORMATION**

Permit #	Permit Description	Total Fees Paid/Due	Approved By:	Approved Date:
RE201902284	RES ADD-REM-REP-ACC	\$340.00	SS	10/17/2019

**Conditions of Approval:**

- Address #s on house if none are present. NC Licensed electrician shall pull permit to contend with light and receptacles. Call for inspection of rot repair. Call for final inspection

**FLOOD INFORMATION**

Permit #	Permit Description	Total Fees Paid/Due	Approved By:	Approved Date:
FL201902283	FLOOD PERMIT	\$0.00	SS	10/17/2019

**Conditions of Approval:**

**Additional Conditions:**

CALL FOR ALL REQUIRED INSPECTIONS; All new work to meet current code; FINAL INSPECTION REQUIRED PRIOR TO ISSUANCE OF CERTIFICATION OF COMPLIANCE

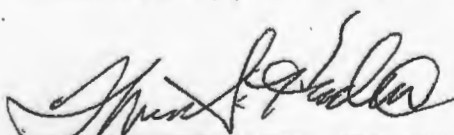
**PLEASE NOTE:**

All work shall conform to all applicable North Carolina State Building codes and Ordinances of the Town of Nags Head and shall be the responsibility of the undersigned applicant.

In accordance with GS160A-418, a permit expires 6 months after the date of issuance if the work authorized by the permit has not been commenced. If, after commencement, the work is discontinued for a period of 12 months (no inspections have taken place) the permit immediately expires. No work authorized by a permit that has expired may be performed until a new permit has been issued.

I, the undersigned, understand that the issuance of a floodplain development permit approval is contingent upon the above information being correct and that the plans and supporting data have been or shall be provided as required, including but not limited to a proposed elevation certificate and or V-Zone certificate. Note: all elevation certificates must be signed by a professional engineer or registered land surveyor.

**DECISION:** Approved with Conditions (See above)

  
Responsible Party 10/25/2019  
Date

**TOWN OF NAGS HEAD**  
PO Box 99 Nags Head, NC 27959  
Phone (252) 441-7016 Fax (252) 441-4290



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**Residential Project Approval**  
**Application # 201900848**

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**Property Address:** 5010 WEST SPOON CT      **PIN #:** 080113039217      **Parcel:** 024961495  
**Lot/Block/Sec:** LOT: 8 BLK: SEC: 4      **Subdivision:** LINKSIDE SEC 4  
**Zoning:** VILLAGE ATTACHED SF 4      **Land Use:** SINGLE FAMILY DWELLING      **Flood Zone:** X

---

**Owner Name:** HALL, JAMES L  
**Owner Address:** PO BOX 86      NAGS HEAD, NC 27959

---

**Contractor Name:** Macko Construction, SMS Construction DBA      **Contractor Phone:** 252-202-2028  
**Contractor Address:** PO Box 3689      KILL DEVIL HILLS, NC 27948

---

**Description:** Replace cedar roof  
**Construction Value:** \$15800      **Classification of Work:** RESIDENTIAL REPAIR

---

**BUILDING INFORMATION**

Permit #	Permit Description	Total Fees Paid/Due	Approved By:	Approved Date:
RE201902285	RES ADD-REM-REP-ACC	\$190.00	SS	10/17/2019

**Conditions of Approval:**

- Address #s on home if none are present. Call for material check. Call for final inspection

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**Additional Conditions:**

CALL FOR ALL REQUIRED INSPECTIONS; All new work to meet current code; FINAL INSPECTION REQUIRED PRIOR TO ISSUANCE OF CERTIFICATION OF COMPLIANCE

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**PLEASE NOTE:**

All work shall conform to all applicable North Carolina State Building codes and Ordinances of the Town of Nags Head and shall be the responsibility of the undersigned applicant.

**In accordance with GS160A-418, a permit expires 6 months after the date of issuance if the work authorized by the permit has not been commenced. If, after commencement, the work is discontinued for a period of 12 months (no inspections have taken place) the permit immediately expires. No work authorized by a permit that has expired may be performed until a new permit has been issued.**

**DECISION: Approved with Conditions (See above)**

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Responsible Party \_\_\_\_\_ Date \_\_\_\_\_

TOWN OF NAGS HEAD  
PO Box 99 Nags Head, NC 27959  
Phone (252) 441-7016 Fax (252) 441-4290



**Residential Project Approval  
Application # 201900850**

Property Address: 4610 SOUTH BLUE MARLIN WAY PIN #: 989116941892 Parcel: 006384000  
Lot/Block/Sec: LOT: 74 BLK: SEC: D Subdivision: OLD NAGS HEAD COVE SEC D  
Zoning: MEDIUM DENSITY RES DISTRICT Land Use: SINGLE FAMILY DWELLING  
Flood Zone: AE Base Flood Elevation: 9.0 Regulatory Flood Elevation: 10  
Map Panel No: 9891 Map Panel Date: 09/20/2006 Suffix: J Datum Used: NAVD 1988

Owner Name: EUX  
Owner Address: 4214 W COBBS WAY

Contractor Name: PROPERTY OWNER Contractor Phone:  
Contractor Address: See Above 000, 00 00000

Description: Repair/replace wooden boards on upper rear deck, replace rails  
Construction Value: \$1520 Classification of Work: RESIDENTIAL REPAIR

**BUILDING INFORMATION**

Permit #	Permit Description	Total Fees Paid/Due	Approved By:	Approved Date:
RE201902287	RES ADD-REM-REP-ACC	\$100.00	SS	10/17/2019

**Conditions of Approval:**

- Address #s on home if none are present. Review deck handout conditions we have provided. Call for final inspection

**FLOOD INFORMATION**

Permit #	Permit Description	Total Fees Paid/Due	Approved By:	Approved Date:
FL201902286	FLOOD PERMIT	\$0.00	SS	10/17/2019

**Conditions of Approval:**

**Additional Conditions:**

CALL FOR ALL REQUIRED INSPECTIONS; All new work to meet current code; FINAL INSPECTION REQUIRED PRIOR TO ISSUANCE OF CERTIFICATION OF COMPLIANCE

**PLEASE NOTE:**

All work shall conform to all applicable North Carolina State Building codes and Ordinances of the Town of Nags Head and shall be the responsibility of the undersigned applicant.

In accordance with GS160A-418, a permit expires 6 months after the date of issuance if the work authorized by the permit has not been commenced. If, after commencement, the work is discontinued for a period of 12 months (no inspections have taken place) the permit immediately expires. No work authorized by a permit that has expired may be performed until a new permit has been issued.

I, the undersigned, understand that the issuance of a floodplain development permit approval is contingent upon the above information being correct and that the plans and supporting data have been or shall be provided as required, including but not limited to a proposed elevation certificate and or V-Zone certificate. Note: all elevation certificates must be signed by a professional engineer or registered land surveyor.

**DECISION: Approved with Conditions (See above)**

*James Burroughs* 10/17/2019  
Responsible Party Date



**TOWN OF NAGS HEAD**  
PO Box 99 Nags Head, NC 27959  
Phone (252) 441-7016 Fax (252) 441-4290



---

**Residential Project Approval**  
**Application # 201900841**

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**Property Address:** 111 WEST SOUND BREEZE LN **PIN #:** 080006287892 **Parcel:** 024961576

**Lot/Block/Sec:** LOT: 19 BLK: SEC: **Subdivision:** WATER'S EDGE VILLAGE AT N H

**Zoning:** VILLAGE DET RES SF 1 **Land Use:** SINGLE FAMILY DWELLING

**Flood Zone:** X

---

**Owner Name:** HOLL, ROBERT A - HOLL, KATHLEEN T  
**Owner Address:** PO BOX 426 NAGS HEAD, NC 27959

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**Contractor Name:** Suburban Electrical Services Inc. **Contractor Phone:** 252-473-7984  
**Contractor Address:** 1078 US HWY 64

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**Description:** Install 22kw Generac generator & transfer switches base w/crushed stone  
**Construction Value:** \$10000 **Classification of Work:** RESIDENTIAL ACC STRUCTURE

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**BUILDING INFORMATION**

Permit #	Permit Description	Total Fees Paid/Due	Approved By:	Approved Date:
RE201902292	RES ADD-REM-REP-ACC	\$160.00	SS	10/18/2019

**Conditions of Approval:**

- Address #s on home if none are present. Pull electrical permit. Call for trench inspections if needed. Review zoning permit comments. Call for final inspection

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**ZONING INFORMATION**

Permit #	Permit Description	Total Fees Paid/Due	Approved By:	Approved Date:
ZN201902291	ZONING PERMIT - RES	\$0.00	MK	10/18/2019

**Conditions of Approval:**

- must maintain a 5 ft side setback
- Lot coverage compliant
- Call for final zoning 252-449-6045

**Additional Conditions:**

CALL FOR ALL REQUIRED INSPECTIONS; All new work to meet current code; FINAL INSPECTION REQUIRED PRIOR TO ISSUANCE OF CERTIFICATION OF COMPLIANCE

---

**PLEASE NOTE:**

All work shall conform to all applicable North Carolina State Building codes and Ordinances of the Town of Nags Head and shall be the responsibility of the undersigned applicant.

In accordance with GS160A-418, a permit expires 6 months after the date of issuance if the work authorized by the permit has not been commenced. If, after commencement, the work is discontinued for a period of 12 months (no inspections have taken place) the permit immediately expires. No work authorized by a permit that has expired may be performed until a new permit has been issued.

**(ZONING) RIGHT OF APPEAL**

Pursuant to Section 48-594(b)(1) of the Nags Head Zoning Ordinance, you have the right to appeal this decision to the Nags Head Board of Adjustment within thirty (30) days of the date of this notice. This decision shall become final and unappealable if not appealed during this thirty (30) day period.

I, the undersigned, understand that the issuance of a floodplain development permit approval is contingent upon the above information being correct and that the plans and supporting data have been or shall be provided as required, including but not limited to a proposed elevation certificate and or V-Zone certificate. Note: all elevation certificates must be signed by a professional engineer or registered land surveyor.

**DECISION: Approved with Conditions (See above)**

TOWN OF NAGS HEAD  
PO Box 99 Nags Head, NC 27959  
Phone (252) 441-7016 Fax (252) 441-4290



---

**Residential Project Approval**  
**Application # 201900836**

---

**Property Address:** 8617 EAST TIDE DR      **PIN #:** 071909078122      **Parcel:** 007139000  
**Lot/Block/Sec:** LOT: 7 BLK: SEC:      **Subdivision:** TIDES TIME  
**Zoning:** MEDIUM DENSITY RES DISTRICT      **Land Use:** SINGLE FAMILY DWELLING  
**Flood Zone:** VE      **Base Flood Elevation:** 11.0      **Regulatory Flood Elevation:** 12  
**Map Panel No:** 0719      **Map Panel Date:** 09/20/2006      **Suffix:** J      **Datum Used:** NAVD 1988

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**Owner Name:** KETCHUM, RICHARD G - KETCHUM, MARY E  
**Owner Address:** 111 DRAKE SMITH LN      RYE, NY 10580

---

**Contractor Name:** Bottom Line Construction      **Contractor Phone:**  
**Contractor Address:** PO Box 816      NAGS HEAD, NC 27959

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**Description:** Replace existing fitch plate & dbl 2x12 girder as noted Remove approx 6' 8" of existing picket rail & replac w/bench

**Construction Value:** \$3850      **Classification of Work:** RESIDENTIAL REPAIR

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**BUILDING INFORMATION**

Permit #	Permit Description	Total Fees Paid/Due	Approved By:	Approved Date:
RE201902296	RES ADD-REM-REP-ACC	\$130.00	SS	10/18/2019

**Conditions of Approval:**  
- Call for final inspection

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**FLOOD INFORMATION**

Permit #	Permit Description	Total Fees Paid/Due	Approved By:	Approved Date:
FL201902295	FLOOD PERMIT	\$0.00	SS	10/18/2019

**Conditions of Approval:**

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**ZONING INFORMATION**

Permit #	Permit Description	Total Fees Paid/Due	Approved By:	Approved Date:
ZN201902294	ZONING PERMIT - RES	0.00	MK	10/18/2019

**Conditions of Approval:**  
All work within footprint, no additional lot coverage proposed  
Call for final zoning 252-449-6045

**Additional Conditions:**

CALL FOR ALL REQUIRED INSPECTIONS; All new work to meet current code; FINAL INSPECTION REQUIRED PRIOR TO ISSUANCE OF CERTIFICATION OF COMPLIANCE

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**PLEASE NOTE:**

All work shall conform to all applicable North Carolina State Building codes and Ordinances of the Town of Nags Head and shall be the responsibility of the undersigned applicant.

In accordance with GS160A-418, a permit expires 6 months after the date of issuance if the work authorized by the permit has not been commenced. If, after commencement, the work is discontinued for a period of 12 months (no inspections have taken place) the permit immediately expires. No work authorized by a permit that has expired may be performed until a new permit has been issued.

**(ZONING) RIGHT OF APPEAL**

Pursuant to Section 48-594(b)(1) of the Nags Head Zoning Ordinance, you have the right to appeal this decision to the Nags Head Board of Adjustment within thirty (30) days of the date of this notice. This decision shall become final and unappealable if not appealed during this thirty (30) day period.

**TOWN OF NAGS HEAD**  
PO Box 99 Nags Head, NC 27959  
Phone (252) 441-7016 Fax (252) 441-4290



**Residential Project Approval**  
**Application # 201900849**

**Property Address:** 231 WEST LOOKOUT RD **PIN #:** 989215546133 **Parcel:** 006078000  
**Lot/Block/Sec:** LOT: 62 BLK: SEC: 1 **Subdivision:** NORTH RIDGE ESTATES SEC 1  
**Zoning:** SPECIAL PLANNED DEV DISTRICT **Land Use:** SINGLE FAMILY DWELLING  
**Flood Zone:** AE **Base Flood Elevation:** 10.0 **Regulatory Flood Elevation:** 11  
**Map Panel No:** 9892 **Map Panel Date:** 09/20/2006 **Suffix:** J **Datum Used:** NAVD 1988

**Owner Name:** HOLLomon, SHAENA M  
**Owner Address:** 231 W LOOKOUT RD NAGS HEAD, NC 27959

**Contractor Name:** PROPERTY OWNER **Contractor Phone:**  
**Contractor Address:** See Above 000, 00 00000

**Description:** Deck repair, deck boards, rails keeping in same footprint for Southside deck

**Construction Value:** \$1000 **Classification of Work:** RESIDENTIAL REPAIR

**BUILDING INFORMATION**

Permit #	Permit Description	Total Fees Paid/Due	Approved By:	Approved Date:
RE201902303	RES ADD-REM-REP-ACC	\$100.00	SS	10/18/2019

**Conditions of Approval:**

- Address #s on home if none are present. Call us to discuss construction methods for deck. Review deck repair handout we have provided. Call for final inspection

**FLOOD INFORMATION**

Permit #	Permit Description	Total Fees Paid/Due	Approved By:	Approved Date:
FL201902302	FLOOD PERMIT	\$0.00	SS	10/18/2019

**Conditions of Approval:**

**Additional Conditions:**

CALL FOR ALL REQUIRED INSPECTIONS; All new work to meet current code; FINAL INSPECTION REQUIRED PRIOR TO ISSUANCE OF CERTIFICATION OF COMPLIANCE

**PLEASE NOTE:**

All work shall conform to all applicable North Carolina State Building codes and Ordinances of the Town of Nags Head and shall be the responsibility of the undersigned applicant.

In accordance with GS160A-418, a permit expires 6 months after the date of issuance if the work authorized by the permit has not been commenced. If, after commencement, the work is discontinued for a period of 12 months (no inspections have taken place) the permit immediately expires. No work authorized by a permit that has expired may be performed until a new permit has been issued.

I, the undersigned, understand that the issuance of a floodplain development permit approval is contingent upon the above information being correct and that the plans and supporting data have been or shall be provided as required, including but not limited to a proposed elevation certificate and or V-Zone certificate. Note: all elevation certificates must be signed by a professional engineer or registered land surveyor.

**DECISION:** Approved with Conditions (See above)

Responsible Party

Date

10-23-19

**TOWN OF NAGS HEAD**

PO Box 99 Nags Head, NC 27959

Phone (252) 441-7016 Fax (252) 441-4290



**Residential Project Approval  
Application # 201900853**

**Property Address:** 125 WEST WINDJAMMER RD **PIN #:** 989214448338 **Parcel:** 006068000

**Lot/Block/Sec:** LOT: 36 BLK: SEC: 1 **Subdivision:** NORTH RIDGE ESTATES SEC 1

**Zoning:** SPECIAL PLANNED DEV DISTRICT **Land Use:** SINGLE FAMILY DWELLING **Flood Zone:** X

**Owner Name:** DUNAWAY, JUDITH PAXTON - DUNAWAY, WILLAR  
**Owner Address:** 4000 PENNY LN CHESAPEAKE, VA 23322

**Contractor Name:** **Contractor Phone:**

**Contractor Address:**

**Description:** Replace siding, decking & handrails, replace stairs, gutters & #4 windows

**Construction Value:** \$8000 **Classification of Work:** RESIDENTIAL REPAIR

**BUILDING INFORMATION**

Permit #	Permit Description	Total Fees Paid/Due	Approved By:	Approved Date:
RE201902300	RES ADD-REM-REP-ACC	\$160.00	SS	10/18/2019

**Conditions of Approval:**

- Address #s on home if none are present. All work shall meet current code. Review deck and stair handout we have provided. call for final inspection

**Additional Conditions:**

CALL FOR ALL REQUIRED INSPECTIONS; All new work to meet current code; FINAL INSPECTION REQUIRED PRIOR TO ISSUANCE OF CERTIFICATION OF COMPLIANCE

**PLEASE NOTE:**

All work shall conform to all applicable North Carolina State Building codes and Ordinances of the Town of Nags Head and shall be the responsibility of the undersigned applicant.  
In accordance with GS160A-418, a permit expires 6 months after the date of issuance if the work authorized by the permit has not been commenced. If, after commencement, the work is discontinued for a period of 12 months (no inspections have taken place) the permit immediately expires. No work authorized by a permit that has expired may be performed until a new permit has been issued.

**DECISION: Approved with Conditions (See above)**

*Ray Morn* Oct 22, 2019  
Responsible Party Date





**Residential Project Approval**  
**Application # 201900852**

**Property Address:** 305 EAST DRIFTWOOD ST **PIN #:** 989318217952 **Parcel:** 006690000  
**Lot/Block/Sec:** LOT: 10 BLK: D SEC: **Subdivision:** NAGS HEAD SHORES REVISED BLK D  
**Zoning:** GENERAL COMMERCIAL DISTRICT **Land Use:** SINGLE FAMILY DWELLING  
**Flood Zone:** AE **Base Flood Elevation:** 10.0 **Regulatory Flood Elevation:** 11  
**Map Panel No:** 9893 **Map Panel Date:** 09/20/2006 **Suffix:** J **Datum Used:** NAVD 1988

**Owner Name:** RILEY, PATRICK E - RILEY LISA M  
**Owner Address:** 65 Haggis Rd

**Contractor Name:** PROPERTY OWNER **Contractor Phone:**  
**Contractor Address:** See Above

**Description:** Move pool fence back 6' for hot tub & picnic table add 180 sq ft of turfstone for htpad replace decking & railing all

**Construction Value:** \$5500 **Classification of Work:** RESIDENTIAL ACC STRUCTURE

**BUILDING INFORMATION**

Permit #	Permit Description	Total Fees Paid/Due	Approved By:	Approved Date:
RE201902315	RES ADD-REM-REP-ACC	\$160.00	SS	10/22/2019

**Conditions of Approval:**

- Address #s on home if none are present. New guardrails shall comply with 2018 NC RES Code. Pool barrier shall comply with 2018 NC Res Code Appendix V. Hot tub wiring shall comply with Art. 680 of the 2017 NEC. Call for electrical trench inspections if any digging occurs. Call for final inspection. Any questions call Steve Szymanski 252 449 2005

**FLOOD INFORMATION**

Permit #	Permit Description	Total Fees Paid/Due	Approved By:	Approved Date:
FL201902314	FLOOD PERMIT	\$0.00	SS	10/22/2019

**Conditions of Approval:**

- Address #s on home if none are present. New guardrails shall comply with 2018 NC RES Code. Pool barrier shall comply with 2018 NC Res Code Appendix V. Hot tub wiring shall comply with Art.680 of the 2017 NEC. Call for electrical trench inspections if any digging occurs. Call for final inspection.

**ZONING INFORMATION**

Permit #	Permit Description	Total Fees Paid/Due	Approved By:	Approved Date:
ZN201902313	ZONING PERMIT - RES	0.00	MK	10/22/2019

**Conditions of Approval:**

Moving of rear yard fence shall maintain a max height of 6 ft , construction side of the fence shall face inward,  
New lot coverage to maintain a 5 ft side and rear setback  
Call for final zoning 252-449-6045

**Additional Conditions:**

CALL FOR ALL REQUIRED INSPECTIONS; All new work to meet current code; FINAL INSPECTION REQUIRED PRIOR TO ISSUANCE OF CERTIFICATION OF COMPLIANCE

**PLEASE NOTE:**

All work shall conform to all applicable North Carolina State Building codes and Ordinances of the Town of Nags Head and shall be the responsibility of the undersigned applicant.  
In accordance with GS160A-418, a permit expires 6 months after the date of issuance if the work authorized by the permit has not been commenced. If, after commencement, the work is discontinued for a period of 12 months (no inspections have taken place) the permit immediately expires. No work authorized by a permit that has expired may be performed until a new permit has been issued.

TOWN OF NAGS HEAD  
PO Box 99 Nags Head, NC 27959  
Phone (252) 441-7016 Fax (252) 441-4290



**Residential Project Approval  
Application # 201900871**

Property Address: 10019 SOUTH OLD OREGON INLET RD PIN #: 071811652392 Parcel:  
007322008

Lot/Block/Sec: LOT: 8 BLK: SEC: Subdivision: NORTHBANK - PHASE 1

Zoning: MEDIUM DENSITY RES DISTRICT Land Use: SINGLE FAMILY DWELLING

Flood Zone: VE Base Flood Elevation: 11.0 Regulatory Flood Elevation: 12

Map Panel No: 0718 Map Panel Date: 09/20/2006 Suffix: J Datum Used: NAVD 1988

Owner Name: GASPAR, MARK A - GASPAR, DIANE A  
Owner Address: 2697 THORN BROOK RD ELLICOTT CITY, MD 21042

Contractor Name: Contractor Phone:

Contractor Address:

Description: Remodel three bathrooms, replae two exterior windows

Construction Value: \$75500 Classification of Work: RESIDENTIAL REMODEL

**BUILDING INFORMATION**

Permit #	Permit Description	Total Fees Paid/Due	Approved By:	Approved Date:
RE201902318	RES ADD-REM-REP-ACC	\$370.00	SS	10/22/2019

**Conditions of Approval:**

- Address #s on home if none are present. All subs shall pull permits before starting work. Call for all required inspections. Smokes and Co2 detectors to code throughout home. Call for final inspection

**FLOOD INFORMATION**

Permit #	Permit Description	Total Fees Paid/Due	Approved By:	Approved Date:
FL201902317	FLOOD PERMIT	\$0.00	SS	10/22/2019

**Conditions of Approval:**

**Additional Conditions:**

CALL FOR ALL REQUIRED INSPECTIONS; All new work to meet current code; FINAL INSPECTION REQUIRED PRIOR TO ISSUANCE OF CERTIFICATION OF COMPLIANCE

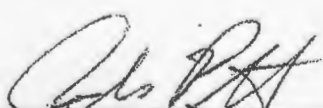
**PLEASE NOTE:**

All work shall conform to all applicable North Carolina State Building codes and Ordinances of the Town of Nags Head and shall be the responsibility of the undersigned applicant.

In accordance with GS160A-418, a permit expires 6 months after the date of issuance if the work authorized by the permit has not been commenced. If, after commencement, the work is discontinued for a period of 12 months (no inspections have taken place) the permit immediately expires. No work authorized by a permit that has expired may be performed until a new permit has been issued.

I, the undersigned, understand that the issuance of a floodplain development permit approval is contingent upon the above information being correct and that the plans and supporting data have been or shall be provided as required, including but not limited to a proposed elevation certificate and or V-Zone certificate. Note: all elevation certificates must be signed by a professional engineer or registered land surveyor.

**DECISION: Approved with Conditions (See above)**

  
Responsible Party

10-23-19  
Date

TOWN OF NAGS HEAD  
PO Box 99 Nags Head, NC 27959  
Phone (252) 441-7016 Fax (252) 441-4290



**Residential Project Approval**  
**Application # 201900866**

**Property Address:** 3114 SOUTH MEMORIAL AVE **PIN #:** 989211570053 **Parcel:** 005349000

**Lot/Block/Sec:** LOT: 5 BLK: 9 SEC: 1 **Subdivision:** NAGS HEAD SHORES AMENDED SEC 1

**Zoning:** HIGH DENSITY RES DISTRICT **Land Use:** SINGLE FAMILY DWELLING

**Flood Zone:** AE **Base Flood Elevation:** 10.0 **Regulatory Flood Elevation:** 11

**Map Panel No:** 9892 **Map Panel Date:** 09/20/2006 **Suffix:** J **Datum Used:** NAVD 1988

**Owner Name:** WHITT, LEE B TTEE - WHITT, PATRICIA B TT  
**Owner Address:** 13982 MANGO DR DEL MAR, CA 92014

**Contractor Name:** **Contractor Phone:**

**Contractor Address:**

**Description:** Rebuild steps from existing platform to existing deck, no handrails touched

**Construction Value:** \$500 **Classification of Work:** RESIDENTIAL REPAIR

**BUILDING INFORMATION**

Permit #	Permit Description	Total Fees Paid/Due	Approved By:	Approved Date:
RE201902320	RES ADD-REM-REP-ACC	\$100.00	SS	10/22/2019

**Conditions of Approval:**

- Address #s on home . Stairs shall meet code. Call for final inspection

**FLOOD INFORMATION**

Permit #	Permit Description	Total Fees Paid/Due	Approved By:	Approved Date:
FL201902319	FLOOD PERMIT	\$0.00	SS	10/22/2019

**Conditions of Approval:**

**Additional Conditions:**

CALL FOR ALL REQUIRED INSPECTIONS; All new work to meet current code; FINAL INSPECTION REQUIRED PRIOR TO ISSUANCE OF CERTIFICATION OF COMPLIANCE

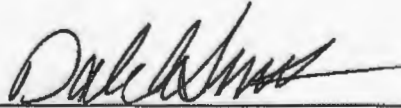
**PLEASE NOTE:**

All work shall conform to all applicable North Carolina State Building codes and Ordinances of the Town of Nags Head and shall be the responsibility of the undersigned applicant.

In accordance with GS160A-418, a permit expires 6 months after the date of issuance if the work authorized by the permit has not been commenced. If, after commencement, the work is discontinued for a period of 12 months (no inspections have taken place) the permit immediately expires. No work authorized by a permit that has expired may be performed until a new permit has been issued.

I, the undersigned, understand that the issuance of a floodplain development permit approval is contingent upon the above information being correct and that the plans and supporting data have been or shall be provided as required, including but not limited to a proposed elevation certificate and or V-Zone certificate. Note: all elevation certificates must be signed by a professional engineer or registered land surveyor.

**DECISION:** Approved with Conditions (See above)

  
Responsible Party

10/23/2019  
Date

**TOWN OF NAGS HEAD**

PO Box 99 Nags Head, NC 27959  
Phone (252) 441-7016 Fax (252) 4414290



**Residential Project Approval  
Application # 201900842**

**Property Address:** 4129 WEST DUPPIES CT **PIN #:** 989112776423 **Parcel:** 030443000

**Lot/Block/Sec:** LOT: 5 BLK: SEC: 3 **Subdivision:** SOUTHRIDGE SEC 3

**Zoning:** MEDIUM DENSITY RES DISTRICT **Land Use:** SINGLE FAMILY DWELLING

**Flood Zone:** AE **Base Flood Elevation:** 9.0 **Regulatory Flood Elevation:** 10

**Map Panel No:** 9891 **Map Panel Date:** 09/20/2006 **Suffix:** J **Datum Used:** NAVD 1988

**Owner Name:** WINES, MICHAEL D - WINES, ROBIN R

**Owner Address:** 209 LINDSAY LANDING LN YORKTOWN, VA 23692

**Contractor Name:** SOUTHERN SCAPES POOL & LANDSCAPE DESIGN **Contractor Phone:**  
252-202-1654

**Contractor Address:** 7441 CARATOKE HWY, BOX 359

**Description:** Pool installation, pool fence, move septic

**Construction Value:** \$42556 **Classification of Work:** RESIDENTIAL ACC STRUCTURE

**BUILDING INFORMATION**

Permit #	Permit Description	Total Fees Paid/Due	Approved By:	Approved Date:
RE201902361	RES ADD-REM-REP-ACC	\$0.00	SS	10/28/2019

**Conditions of Approval:**  
- Address #s on home if none are present. Provide final health department approval. Pool barrier shall comply with Appendix V. All wiring shall be per NEC Art 680. Elevate pool equipment at 10 RFE or greater. Call for all bonding inspections. Review all zoning permit comments and conditions. Call for final inspections.

**POOL INFORMATION**

Permit #	Permit Description	Total Fees Paid/Due	Approved By:	Approved Date:
SP201902360	SWIMMING POOL	\$250.00	SS	10/28/2019

**FLOOD INFORMATION**

Permit #	Permit Description	Total Fees Paid/Due	Approved By:	Approved Date:
FL201902359	FLOOD PERMIT	\$0.00	SS	10/28/2019

**Conditions of Approval:**

**ZONING INFORMATION**

Permit #	Permit Description	Total Fees Paid/Due	Approved By:	Approved Date:
ZN201902358	ZONING PERMIT - RES	\$0.00	MK	10/28/2019

**Conditions of Approval:**  
- Installation of silt fencing shall be maintained throughout project  
- pool located in the rear yard shall maintain 5 ft side and rear setback  
- Septic repair and replacement shall be maintained and stabilized  
- Max height of fence from grade is 6 ft in the rear yard. Construction side of the fence shall face inward  
- final as-built required

**Additional Conditions:**  
CALL FOR ALL REQUIRED INSPECTIONS; All new work to meet current code; FINAL INSPECTION REQUIRED PRIOR TO ISSUANCE OF CERTIFICATION OF COMPLIANCE

**PLEASE NOTE:**  
All work shall conform to all applicable North Carolina State Building codes and Ordinances of the Town of Nags Head





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**Residential Project Approval**  
**Application # 201900876**

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**Property Address:** 3409 SOUTH BUCCANEER DR      **PIN #:** 989215542747      **Parcel:** 006054000

**Lot/Block/Sec:** LOT: 15 BLK: SEC: 1      **Subdivision:** NORTH RIDGE ESTATES SEC 1

**Zoning:** SPECIAL PLANNED DEV DISTRICT      **Land Use:** SINGLE FAMILY DWELLING

**Flood Zone:** AE      **Base Flood Elevation:** 10.0      **Regulatory Flood Elevation:** 11

**Map Panel No:** 9892      **Map Panel Date:** 09/20/2006      **Suffix:** J      **Datum Used:** NAVD 1988

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**Owner Name:** TOOMEY, EDWARD G - TOOMEY, LAURIE G

**Owner Address:** 2 SOUTHERLAND DR      HAMPTON, VA 23669

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**Contractor Name:** PROPERTY OWNER      **Contractor Phone:**

**Contractor Address:** See Above

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**Description:** Install 7'x11' lean to behind home, install 4'x6.5' outside shower

**Construction Value:** \$1000      **Classification of Work:** RESIDENTIAL ACC STRUCTURE

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**BUILDING INFORMATION**

Permit #	Permit Description	Total Fees Paid/Due	Approved By:	Approved Date:
RE201902354	RES ADD-REM-REP-ACC	\$100.00	SS	10/28/2019

**Conditions of Approval:**

- Address #s on home if none are present. Call for inspection of all work. Pull plumbing permit for shower
- 

**FLOOD INFORMATION**

Permit #	Permit Description	Total Fees Paid/Due	Approved By:	Approved Date:
FL201902353	FLOOD PERMIT	\$0.00	SS	10/28/2019

**Conditions of Approval:**

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**ZONING INFORMATION**

Permit #	Permit Description	Total Fees Paid/Due	Approved By:	Approved Date:
ZN201902352	ZONING PERMIT - RES	0.00	MK	10/28/2019

**Conditions of Approval:**

Shed that was existing 8x8 on site was removed and replaced as a lean -to behind house 7x11 77 sqft, offset lot coverage out door shower must meet principle setbacks due to front of midpoint of house  
Call for final zoning 252-449-6045

**Additional Conditions:**

CALL FOR ALL REQUIRED INSPECTIONS; All new work to meet current code; FINAL INSPECTION REQUIRED PRIOR TO ISSUANCE OF CERTIFICATION OF COMPLIANCE

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**PLEASE NOTE:**

All work shall conform to all applicable North Carolina State Building codes and Ordinances of the Town of Nags Head and shall be the responsibility of the undersigned applicant.

In accordance with GS160A-418, a permit expires 6 months after the date of issuance if the work authorized by the permit has not been commenced. If, after commencement, the work is discontinued for a period of 12 months (no inspections have taken place) the permit immediately expires. No work authorized by a permit that has expired may be performed until a new permit has been issued.

**(ZONING) RIGHT OF APPEAL**

Pursuant to Section 48-594(b)(1) of the Nags Head Zoning Ordinance, you have the right to appeal this decision to the Nags Head Board of Adjustment within thirty (30) days of the date of this notice. This decision shall become final and unappealable if not appealed during this thirty (30) day period.

**TOWN OF NAGS HEAD**  
PO Box 99 Nags Head, NC 27959  
Phone (252) 441-7016 Fax (252) 441-4290



**Residential Project Approval**  
**Application # 201900865**

**Property Address:** 8507 SOUTH OLD OREGON INLET RD **PIN #:** 071905072848 **Parcel:** 007938000  
**Lot/Block/Sec:** LOT: 4 BLK: A SEC: **Subdivision:** J H DEIBERT  
**Zoning:** MEDIUM DENSITY RES DISTRICT **Land Use:** SINGLE FAMILY DWELLING, LARGE  
**Flood Zone:** VE **Base Flood Elevation:** 11.0 **Regulatory Flood Elevation:** 12  
**Map Panel No:** 0719 **Map Panel Date:** 09/20/2006 **Suffix:** J **Datum Used:** NAVD 1988

**Owner Name:** PIRATES LAIR, LLC  
**Owner Address:** PO BOX 1238

**Contractor Name:** Catherine Gutbirth (Applicant)  
**Contractor Address:** PO BOX 1238 Avon, NC 27915

**Description:** Repair all decks on house, walkway to beach as necessary, repair pool fence boards  
**Construction Value:** \$15000 **Classification of Work:** RESIDENTIAL REPAIR

**BUILDING INFORMATION**

Permit #	Permit Description	Total Fees Paid/Due	Approved By:	Approved Date:
RE201902357	RES.ADD-REM-REP-ACC	\$190.00	SS	10/28/2019

**Conditions of Approval:**

- Address #s on home if none are present. Review deck handout we have provided. Call for final inspection

**FLOOD INFORMATION**

Permit #	Permit Description	Total Fees Paid/Due	Approved By:	Approved Date:
FE201902356	FLOOD PERMIT	\$0.00	SS	10/28/2019

**Conditions of Approval:**

**ZONING INFORMATION**

Permit #	Permit Description	Total Fees Paid/Due	Approved By:	Approved Date:
ZN201902355	ZONING PERMIT - RES	\$0.00	MK	10/28/2019

**Conditions of Approval:**

- All work proposed within footprint
- Max height of pool fence in rear yard 6ft from grade
- CAMA Exemption Issued
- Call for final zoning 252-449-6045

**Additional Conditions:**

CALL FOR ALL REQUIRED INSPECTIONS; All new work to meet current code; FINAL INSPECTION REQUIRED PRIOR TO ISSUANCE OF CERTIFICATION OF COMPLIANCE

**PLEASE NOTE:**

All work shall conform to all applicable North Carolina State Building codes and Ordinances of the Town of Nags Head and shall be the responsibility of the undersigned applicant.  
In accordance with GS160A-418, a permit expires 6 months after the date of issuance if the work authorized by the permit has not been commenced. If, after commencement, the work is discontinued for a period of 12 months (no inspections have taken place) the permit immediately expires. No work authorized by a permit that has expired may be performed until a new permit has been issued.

**(ZONING) RIGHT OF APPEAL**

Pursuant to Section 48-594(b)(1) of the Nags Head Zoning Ordinance, you have the right to appeal this decision to the Nags Head Board of Adjustment within thirty (30) days of the date of this notice. This decision shall become final and unappealable if not appealed during this thirty (30) day period.

TOWN OF NAGS HEAD  
PO Box 99 Nags Head, NC 27959  
Phone (252) 441-7016 Fax (252) 441-4290



**Residential Project Approval  
Application # 201900870**

Property Address: 7724 SOUTH EAST SHORE RD PIN #: 070905099495 Parcel: 029092005  
Lot/Block/Sec: LOT: 5 BLK: SEC: 3 Subdivision: POND ISLAND  
Zoning: LOW DENSITY RES DISTRICT Land Use:  
Flood Zone: AE Base Flood Elevation: 10.0 Regulatory Flood Elevation: 11  
Map Panel No: 0709 Map Panel Date: 09/20/2006 Suffix: J Datum Used: NAVD1988

Owner Name: KLEINE, PETER  
Owner Address: 261 BROOK FARMS RD LANCASTER, PA 17601

Contractor Name: Macko Construction, SMS Construction DBA Contractor Phone: 252-202-2028  
Contractor Address: PO Box 3689 KILL DEVIL HILLS, NC 27948

Description: Replace east & west wall siding w/cedar bevel lap siding Replace decking & stairs  
Construction Value: \$23925 Classification of Work: RESIDENTIAL REPAIR

**BUILDING INFORMATION**

Permit #	Permit Description	Total Fees Paid/Due	Approved By:	Approved Date:
RE201902349	RES ADD-REM-REP-ACC	\$220.00	SS	10/28/2019

**Conditions of Approval:**

- Address #s on home if none are present. Call for inspection of any framing / rot repairs. NC Licensed electrician shall contend with wiring issues. Call for final inspection

**FLOOD INFORMATION**

Permit #	Permit Description	Total Fees Paid/Due	Approved By:	Approved Date:
FL201902348	FLOOD PERMIT	\$0.00	SS	10/28/2019

**Conditions of Approval:**

**Additional Conditions:**

CALL FOR ALL REQUIRED INSPECTIONS; All new work to meet current code; FINAL INSPECTION REQUIRED PRIOR TO ISSUANCE OF CERTIFICATION OF COMPLIANCE

**PLEASE NOTE:**

All work shall conform to all applicable North Carolina State Building codes and Ordinances of the Town of Nags Head and shall be the responsibility of the undersigned applicant.

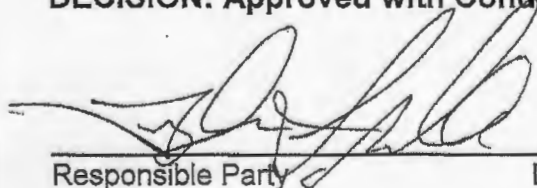
In accordance with GS160A-418, a permit expires 6 months after the date of issuance if the work authorized by the permit has not been commenced. If, after commencement, the work is discontinued for a period of 12 months (no inspections have taken place) the permit immediately expires. No work authorized by a permit that has expired may be performed until a new permit has been issued.

I, the undersigned, understand that the issuance of a floodplain development permit approval is contingent upon the above information being correct and that the plans and supporting data have been or shall be provided as required, including but not limited to a proposed elevation certificate and or V-Zone certificate. Note: all elevation certificates must be signed by a professional engineer or registered land surveyor.

**DECISION: Approved with Conditions (See above)**

Responsible Party

Date

 10/29/2019



**Residential Project Approval**  
**Application # 201900875**

**Property Address:** 8425 SOUTH OLD OREGON INLET RD **PIN #:** 070908988781 **Parcel:** 007025000  
**Lot/Block/Sec:** LOT: 89 BLK: 5 SEC: **Subdivision:** BODIE ISLAND BEACH  
**Zoning:** MEDIUM DENSITY RES DISTRICT **Land Use:** SINGLE FAMILY DWELLING  
**Flood Zone:** VE **Base Flood Elevation:** 11.0 **Regulatory Flood Elevation:** 12  
**Map Panel No:** 0709 **Map Panel Date:** 09/20/2006 **Suffix:** J **Datum Used:** NAVD 1988

**Owner Name:** CAM REALTY, LLC  
**Owner Address:** 42 SOUTH ST PLYMOUTH, CT 06782

**Contractor Name:** M13, LLC **Contractor Phone:** 919-291-4717  
**Contractor Address:** 604 E SOUTH ST RALEIGH, NC 27601

**Description:** Remove existing deck except pilings repair band board @ hse install new deck footprint remains the same

**Construction Value:** \$3360 **Classification of Work:** RESIDENTIAL REPAIR

**BUILDING INFORMATION**

Permit #	Permit Description	Total Fees Paid/Due	Approved By:	Approved Date:
RE201902365	RES ADD-REM-REP-ACC	\$130.00	SS	10/28/2019

**Conditions of Approval:**

- Address #s to TONH ordinance if not currently there. Deck repair work could require engineering. Recommend inspecting existing pilings. Review deck condition handout and comments on plans you have provided. Call for final inspection

**FLOOD INFORMATION**

Permit #	Permit Description	Total Fees Paid/Due	Approved By:	Approved Date:
FL201902364	FLOOD PERMIT	\$0.00	SS	10/28/2019

**Conditions of Approval:**

**Additional Conditions:**

CALL FOR ALL REQUIRED INSPECTIONS; All new work to meet current code; FINAL INSPECTION REQUIRED PRIOR TO ISSUANCE OF CERTIFICATION OF COMPLIANCE

**PLEASE NOTE:**

All work shall conform to all applicable North Carolina State Building codes and Ordinances of the Town of Nags Head and shall be the responsibility of the undersigned applicant.

In accordance with GS160A-418, a permit expires 6 months after the date of issuance if the work authorized by the permit has not been commenced. If, after commencement, the work is discontinued for a period of 12 months (no inspections have taken place) the permit immediately expires. No work authorized by a permit that has expired may be performed until a new permit has been issued.

I, the undersigned, understand that the issuance of a floodplain development permit approval is contingent upon the above information being correct and that the plans and supporting data have been or shall be provided as required, including but not limited to a proposed elevation certificate and or V-Zone certificate. Note: all elevation certificates must be signed by a professional engineer or registered land surveyor.

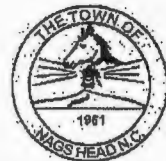
**DECISION:** Approved with Conditions (See above)

Responsible Party

Date

10/30/19





**Residential Project Approval**  
**Application # 201900878**

**Property Address:** 2900 SOUTH PAMLICO AVE **PIN #:** 989206276703 **Parcel:** 028684000

**Lot/Block/Sec:** LOT: 9 BLK: H SEC: **Subdivision:** VISTA COLONY PLACE

**Zoning:** MEDIUM DENSITY RES DISTRICT **Land Use:** SINGLE FAMILY DWELLING

**Flood Zone:** X

**Owner Name:** CARAWAN, WILBUR E

**Owner Address:** 1148 TREEFERN DR VIRGINIA BEACH, VA 23451

**Contractor Name:** Lightning Marine Construction, Inc.

**Contractor Phone:** 252-202-7713

**Contractor Address:** PO Box 1649 KITTY HAWK, NC 27949

**Description:** Remove & replace 3 8x8x16' pilings & sister 1 8x8x16' piling

**Construction Value:** \$4390

**Classification of Work:** RESIDENTIAL REPAIR

**BUILDING INFORMATION**

Permit #	Permit Description	Total Fees Paid/Due	Approved By:	Approved Date:
RE201902351	RES ADD-REM-REP-ACC	\$130.00	SS	10/28/2019

**Conditions of Approval:**

- Address #s on home if none are present. Call for piling inspection. Pilings shall stay within footprint of building. Call for final inspection

**ZONING INFORMATION**

Permit #	Permit Description	Total Fees Paid/Due	Approved By:	Approved Date:
ZN201902350	ZONING PERMIT - RES	\$0.00	MK	10/28/2019

**Conditions of Approval:**

- Pilings shall remain within the existing footprint, no additional lot coverage approved
- Call for final zoning 252-449-6045

**Additional Conditions:**

CALL FOR ALL REQUIRED INSPECTIONS; All new work to meet current code; FINAL INSPECTION REQUIRED PRIOR TO ISSUANCE OF CERTIFICATION OF COMPLIANCE

**PLEASE NOTE:**

All work shall conform to all applicable North Carolina State Building codes and Ordinances of the Town of Nags Head and shall be the responsibility of the undersigned applicant.

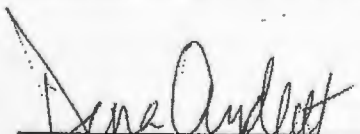
In accordance with GS160A-418, a permit expires 6 months after the date of issuance if the work authorized by the permit has not been commenced. If, after commencement, the work is discontinued for a period of 12 months (no inspections have taken place) the permit immediately expires. No work authorized by a permit that has expired may be performed until a new permit has been issued.

**(ZONING) RIGHT OF APPEAL**

Pursuant to Section 48-594(b)(1) of the Nags Head Zoning Ordinance, you have the right to appeal this decision to the Nags Head Board of Adjustment within thirty (30) days of the date of this notice. This decision shall become final and unappealable if not appealed during this thirty (30) day period.

I, the undersigned, understand that the issuance of a floodplain development permit approval is contingent upon the above information being correct and that the plans and supporting data have been or shall be provided as required, including but not limited to a proposed elevation certificate and or V-Zone certificate. Note: all elevation certificates must be signed by a professional engineer or registered land surveyor.

**DECISION: Approved with Conditions (See above)**

  
Responsible Party 10/28/19  
Date

**TOWN OF NAGS HEAD**

PO Box 99 Nags Head, NC 27959

Phone (252) 441-7016 Fax (252) 441-4290

**Residential Project Approval****Application # 201900803****Property Address:** 2123 SOUTH VA DARE TRL **PIN #:** 989314236115 **Parcel:** 005573001**Lot/Block/Sec:** LOT: 12 BLK: 2 SEC: 4 **Subdivision:** NAGS HEAD SHORES AMENDED SEC 4**Zoning:** COMMERCIAL/RESIDENTIAL DISTRICT**Land Use:** SINGLE FAMILY DWELLING**Flood Zone:** VE **Base Flood Elevation:** 11.0 **Regulatory Flood Elevation:** 12**Map Panel No:** 9893**Map Panel Date:** 09/20/2006**Suffix:** J**Datum Used:** NAVD 1998**Owner Name:** RUTLEY, BRENT L - RUTLEY, AMY E**Owner Address:** 15240 Frederick Rd**Contractor Name:** PROPERTY OWNER**Contractor Phone:****Contractor Address:** See Above**Description:** Remove existing pool fence and replace/expand out near property line; redistribute sand away from fence & pool**Construction Value:** \$7500**Classification of Work:** RESIDENTIAL REMODEL**BUILDING INFORMATION**

Permit #	Permit Description	Total Fees Paid/Due	Approved By:	Approved Date:
RE201902380	RES ADD-REM-REP-ACC	\$160.00	SS	10/29/2019

**Conditions of Approval:**

- Address #s on home if none are present. Pool barrier shall be compliant with Appendix V. Pool barrier shall be break away construction. Any questions please call Steve 252 449 2005

**FLOOD INFORMATION**

Permit #	Permit Description	Total Fees Paid/Due	Approved By:	Approved Date:
FL201902379	FLOOD PERMIT	\$0.00	SS	10/29/2019

**Conditions of Approval:****ZONING INFORMATION**

Permit #	Permit Description	Total Fees Paid/Due	Approved By:	Approved Date:
ZN201902378	ZONING PERMIT - RES	0.00	MK	10/29/2019

**Conditions of Approval:**

- Must comply with CAMA Minor Permit
- No additional lot coverage proposed
- Move sand only within boundary of fence to regrade area, all material shall stay within the CAMA AEC, west of static line-call zoning prior to commencing work. Silt fencing required prior to any land disturbance. Dune shall not be compromised.
- Must maintain a 5 ft no fill/grading setback from property line
- Rear yard fence 6 ft in height from grade, construction side of the fence shall face inward
- Stabilization required prior to final inspection
- Call for final zoning & CAMA inspection 252-449-6045

**Additional Conditions:**

CALL FOR ALL REQUIRED INSPECTIONS; All new work to meet current code; FINAL INSPECTION REQUIRED PRIOR TO ISSUANCE OF CERTIFICATION OF COMPLIANCE

**PLEASE NOTE:**

All work shall conform to all applicable North Carolina State Building codes and Ordinances of the Town of Nags Head and shall be the responsibility of the undersigned applicant.

**In accordance with GS160A-418, a permit expires 6 months after the date of issuance if the work authorized by the permit has not been commenced. If, after commencement, the work is discontinued for a period of 12 months**

TOWN OF NAGS HEAD  
PO Box 99 Nags Head, NC 27959  
Phone (252) 441-7016 Fax (252) 441-4290



**Residential Project Approval  
Application # 201900889**

Property Address: 7200 SOUTH VA DARE TRL PIN #: 080015731625 Parcel: 006640001  
Lot/Block/Sec: LOT: 1A BLK: 10 SEC: A Subdivision: WHALEBONE BEACHES SEC A  
Zoning: GENERAL COMMERCIAL DISTRICT Land Use:  
Flood Zone: AE Base Flood Elevation: 10.0 Regulatory Flood Elevation: 11  
Map Panel No: 0800 Map Panel Date: 09/20/2006 Suffix: J Datum Used: NAVD 1988

Owner Name: CHUBB, JENNIFER L  
Owner Address: 178 ALTADORE CRES MONCURE, NC 27559

919-545-1428

Contractor Name: CAROLINA BEACH BUILDERS, INC. Contractor Phone: 252-256-1521  
Contractor Address: 252 WOODLAND DR SOUTHERN SHORES, NC 27949

Description: Exterior siding, deck boards, railings & roof shingle replacement

Construction Value: \$124175 Classification of Work: RESIDENTIAL REPAIR

**BUILDING INFORMATION**

Permit #	Permit Description	Total Fees Paid/Due	Approved By:	Approved Date:
RE201902393	RES ADD-REM-REP-ACC	\$520.00	SS	10/30/2019

**Conditions of Approval:**

- Address #s on home if none are present. Review deck condition handout we have provided. Call for inspection of rot repair. Call for final inspection

**FLOOD INFORMATION**

Permit #	Permit Description	Total Fees Paid/Due	Approved By:	Approved Date:
FL201902392	FLOOD PERMIT	\$0.00	SS	10/30/2019

**Conditions of Approval:**

**Additional Conditions:**

CALL FOR ALL REQUIRED INSPECTIONS; All new work to meet current code; FINAL INSPECTION REQUIRED PRIOR TO ISSUANCE OF CERTIFICATION OF COMPLIANCE


**PLEASE NOTE:**

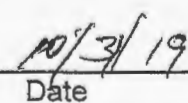
All work shall conform to all applicable North Carolina State Building codes and Ordinances of the Town of Nags Head and shall be the responsibility of the undersigned applicant.

In accordance with GS160A-418, a permit expires 6 months after the date of issuance if the work authorized by the permit has not been commenced. If, after commencement, the work is discontinued for a period of 12 months (no inspections have taken place) the permit immediately expires. No work authorized by a permit that has expired may be performed until a new permit has been issued.

I, the undersigned, understand that the issuance of a floodplain development permit approval is contingent upon the above information being correct and that the plans and supporting data have been or shall be provided as required, including but not limited to a proposed elevation certificate and or V-Zone certificate. Note: all elevation certificates must be signed by a professional engineer or registered land surveyor.

**DECISION: Approved with Conditions (See above)**

  
Responsible Party

  
Date



**TOWN OF NAGS HEAD**  
PO Box 99 Nags Head, NC 27959  
Phone (252) 441-7016 Fax (252) 441-4290



**Commercial Project Approval**  
**Application # 201900766**

**Property Address:** 6933 SOUTH CROATAN HWY **PIN #:** 080011650233 **Parcel:** 008859021  
**Lot/Block/Sec:** LOT: 21-26 BLK: 3 SEC: **Subdivision:** WHALEBONE BEACHES REVISED  
**Zoning:** GENERAL COMMERCIAL DISTRICT **Land Use:** OFFICE/RETAIL  
**Flood Zone:** AE **Base Flood Elevation:** 9.0 **Regulatory Flood Elevation:**  
**Map Panel No:** **Map Panel Date:** **Suffix:** **Datum Used:**

**Owner Name:** MELVIN L DAVIS OIL COMPANY, INC  
**Owner Address:** 11042 BLUE STAR HWY STONY CREEK, VA 23882

**Contractor Name:** **Contractor Phone:**  
**Contractor Address:**

**Description:** Repair roof with new design roof, sheetrock, replace rotten studs, broken windows, emergency lighting, safe egress, buff

**Construction Value:** \$15000 **Classification of Work:** COMMERCIAL REPAIR

**BUILDING INFORMATION**

Permit #	Permit Description	Total Fees Paid/Due	Approved By:	Approved Date:
CA201902193	COMM ADD-REM-REP-ACC	\$190.00	CT	10/08/2019

**Conditions of Approval:**

**FLOOD INFORMATION**

Permit #	Permit Description	Total Fees Paid/Due	Approved By:	Approved Date:
FL201902192	FLOOD PERMIT	\$0.00	CT	10/08/2019

**Conditions of Approval:**

**Additional Conditions:**

CALL FOR ALL REQUIRED INSPECTIONS; All new work to meet current code; FINAL INSPECTION REQUIRED PRIOR TO ISSUANCE OF CERTIFICATION OF COMPLIANCE

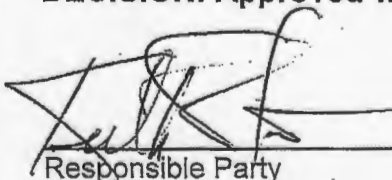
**PLEASE NOTE:**

All work shall conform to all applicable North Carolina State Building codes and Ordinances of the Town of Nags Head and shall be the responsibility of the undersigned applicant.

In accordance with GS160A-418, a permit expires 6 months after the date of issuance if the work authorized by the permit has not been commenced. If, after commencement, the work is discontinued for a period of 12 months (no inspections have taken place) the permit immediately expires. No work authorized by a permit that has expired may be performed until a new permit has been issued.

I, the undersigned, understand that the issuance of a floodplain development permit approval is contingent upon the above information being correct and that the plans and supporting data have been or shall be provided as required, including but not limited to a proposed elevation certificate and or V-Zone certificate. Note: all elevation certificates must be signed by a professional engineer or registered land surveyor.

**DECISION: Approved with Conditions (See above)**

  
Responsible Party 10-11-19  
Date

**TOWN OF NAGS HEAD**  
PO Box 99 Nags Head, NC 27959  
Phone (252) 441-7016 Fax (252) 441-4290



**Commercial Project Approval**  
**Application # 201900784**

**Property Address:** 500 WEST VILLA DUNES DR      **PIN #:** 98921832637500      **Parcel:** 011314999  
**Lot/Block/Sec:** LOT: COMMON PROPERTY BLK: SEC:      **Subdivision:** VILLAS CONDO, THE  
**Zoning:** SPECIAL PLANNED DEV DISTRICT      **Land Use:** MULTI-FAMILY DWELLING      **Flood Zone:** X

**Owner Name:** VILLAS PROPERTY OWNERS  
**Owner Address:** P O BOX 806      NAGS HEAD, NC 27959

**Contractor Name:** Gallop Roofing & Remodeling, Inc.      **Contractor Phone:** 252-473-2888  
**Contractor Address:** PO Box 157      WANCHESE, NC 27981

**Description:** Remove loose gravel, fasten new 1/4" tapered polyisocyanurate insulation Adhere 50 mill PVC roof, gutters, 4800 sf roof

**Construction Value:** \$42947      **Classification of Work:** COMMERCIAL REPAIR

**BUILDING INFORMATION**

Permit #	Permit Description	Total Fees Paid/Due	Approved By:	Approved Date:
CA201902176	COMM ADD-REM-REP-ACC	\$280.00	SS	10/08/2019

**Conditions of Approval:**

- Address #s on building. Call for material inspection. Call for final inspection

**Additional Conditions:**

CALL FOR ALL REQUIRED INSPECTIONS; All new work to meet current code; FINAL INSPECTION REQUIRED PRIOR TO ISSUANCE OF CERTIFICATION OF COMPLIANCE

**PLEASE NOTE:**

All work shall conform to all applicable North Carolina State Building codes and Ordinances of the Town of Nags Head and shall be the responsibility of the undersigned applicant.  
In accordance with GS160A-418, a permit expires 6 months after the date of issuance if the work authorized by the permit has not been commenced. If, after commencement, the work is discontinued for a period of 12 months (no inspections have taken place) the permit immediately expires. No work authorized by a permit that has expired may be performed until a new permit has been issued.

**DECISION:** Approved with Conditions (See above)

John Bulow      10/8/19  
Responsible Party      Date



**TOWN OF NAGS HEAD**  
PO Box 99 Nags Head, NC 27959  
Phone (252) 441-7016 Fax (252) 441-4290



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**Commercial Project Approval**  
**Application # 201900814**

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**Property Address:** 103 EAST MALL DR **PIN #:** 080113139364 **Parcel:** 027839001  
**Lot/Block/Sec:** LOT: 1 BLK: SEC: **Subdivision:** VILLAGE COMMERCIAL LOTS S/D  
**Zoning:** VILLAGE COMMERCIAL 2 **Land Use:** OFFICE/RETAIL  
**Flood Zone:** AE

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**Owner Name:** TURNPIKE PROPERTIES LLC  
**Owner Address:** 4400 SILAS CREEK PKWY SUITE 302

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**Contractor Name:** Ad Light Signs **Contractor Phone:** 252-202-4625  
**Contractor Address:** 600 W Boundary St Kill Devil Hills, NC 27948

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**Description:** Install lighted cabinet wall sign 2'x8'  
**Construction Value:** \$3250 **Classification of Work:** COMMERCIAL SIGN

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**BUILDING INFORMATION**

Permit #	Permit Description	Total Fees Paid/Due	Approved By:	Approved Date:
SG201902278	BUILDING SIGN PERMIT	\$75.00	SS	10/17/2019

**Conditions of Approval:**  
- Pull electrical permit. Call for final inspection

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**ZONING INFORMATION**

Permit #	Permit Description	Total Fees Paid/Due	Approved By:	Approved Date:
ZS201902277	ZONING - COMMERCIAL SIGN	\$75.00	KW	10/17/2019

**Conditions of Approval:**

- Electrical Permit required; Must comply with all conditions of Electrical Permit
- Building Permit required; Must comply with all conditions of Building Permit
- Zoning approved for the installation of 16 sf. internally illuminated wall sign for new tenant "Edward Jones"
- Final zoning inspection required upon completion.

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**Additional Conditions:**

CALL FOR ALL REQUIRED INSPECTIONS; All new work to meet current code; FINAL INSPECTION REQUIRED PRIOR TO ISSUANCE OF CERTIFICATION OF COMPLIANCE

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**PLEASE NOTE:**

All work shall conform to all applicable North Carolina State Building codes and Ordinances of the Town of Nags Head and shall be the responsibility of the undersigned applicant.

**In accordance with GS160A-418, a permit expires 6 months after the date of issuance if the work authorized by the permit has not been commenced. If, after commencement, the work is discontinued for a period of 12 months (no inspections have taken place) the permit immediately expires. No work authorized by a permit that has expired may be performed until a new permit has been issued.**

I, the undersigned, understand that the issuance of a floodplain development permit approval is contingent upon the above information being correct and that the plans and supporting data have been or shall be provided as required, including but not limited to a proposed elevation certificate and or V-Zone certificate. Note: all elevation certificates must be signed by a professional engineer or registered land surveyor.

**DECISION: Approved with Conditions (See above)**

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Responsible Party \_\_\_\_\_ Date \_\_\_\_\_

**TOWN OF NAGS HEAD**

PO Box 99 Nags Head, NC 27959

Phone (252) 441-7016 Fax (252) 441-4290


**Commercial Project Approval  
Application # 201900804**
**Property Address:** 7531 SOUTH VA DARE TRL **PIN #:** 08001840741206 **Parcel:** 007101008

**Lot/Block/Sec:** LOT: UNIT 2A BLK: SEC: **Subdivision:** CARIBBEAN CORNERS CENTER CONDO

**Zoning:** GENERAL COMMERCIAL DISTRICT **Land Use:** SHOPPING CENTER

**Flood Zone:** VE **Base Flood Elevation:** 11.0 **Regulatory Flood Elevation:**
**Map Panel No:** **Map Panel Date:** **Suffix:** **Datum Used:**
**Owner Name:** SELCKMAN, STEPHANIE TTEE TRE.

**Owner Address:** 7808 S NORTH SHORE RD

**Contractor Name:** PROPERTY OWNER **Contractor Phone:**
**Contractor Address:** See Above

**Description:** Remodel existing small office (425 SF) into a retail shop/bakery; work to incl. electrical (outlets, fixtures), see text

**Construction Value:** \$3800 **Classification of Work:** COMMERCIAL REMODEL

**BUILDING INFORMATION**

Permit #	Permit Description	Total Fees Paid/Due	Approved By:	Approved Date:
CA201902274	COMM ADD-REM-REP-ACC	\$130.00	CT	10/17/2019

**Conditions of Approval:**

- Gwatkin cannot serve as plumbing contractor on this project. His license only covers single-family detached.
- Provide specifications of all appliances before purchasing to verify use and application.

**FLOOD INFORMATION**

Permit #	Permit Description	Total Fees Paid/Due	Approved By:	Approved Date:
FL201902275	FLOOD PERMIT	\$0.00	CT	10/17/2019

**Conditions of Approval:**
**ZONING INFORMATION**

Permit #	Permit Description	Total Fees Paid/Due	Approved By:	Approved Date:
ZN201902276	ZONING PERMIT - COMM	\$0.00	KW	10/17/2019

**Conditions of Approval:**

Zoning is approved for use of unit as a bakery.  
 All work shall occur within the existing footprint, no increase in footprint or lot coverage permitted.  
 The parking standard for retail is the same as the standard for bakery, one parking space per 250 square feet of gross floor area. Existing parking allocated to this unit remains compliant.  
 Additional signage will require separate review and approval.  
 Final Zoning Inspection required prior to issuance of Certificate of Occupancy.

**Additional Conditions:**

CALL FOR ALL REQUIRED INSPECTIONS; All new work to meet current code; FINAL INSPECTION REQUIRED PRIOR TO ISSUANCE OF CERTIFICATION OF COMPLIANCE

**PLEASE NOTE:**

All work shall conform to all applicable North Carolina State Building codes and Ordinances of the Town of Nags Head and shall be the responsibility of the undersigned applicant.  
 In accordance with GS160A-418, a permit expires 6 months after the date of issuance if the work authorized by the permit has not been commenced. If, after commencement, the work is discontinued for a period of 12 months (no inspections have taken place) the permit immediately expires. No work authorized by a permit that has expired may be performed until a new permit has been issued.



TOWN OF NAGS HEAD  
PO Box 99 Nags Head, NC 27959  
Phone (252) 441-7016 Fax (252) 441-4290



**Commercial Project Approval  
Application # 201900873**

**Property Address:** 4900 SOUTH CROATAN HWY **PIN #:** 080113132845 **Parcel:** 028843000  
**Lot/Block/Sec:** LOT: 1 BLK: SEC: **Subdivision:** OUTER BANKS MALL  
**Zoning:** VILLAGE COMMERCIAL 1 **Land Use:** RESTAURANT  
**Flood Zone:** X

**Owner Name:** NAGS HEAD COMPANY LLC  
**Owner Address:** PO BOX 108 HENDERSON, NC 27536

**Contractor Name:** Granplan Restorations, LLC **Contractor Phone:** 252-305-6881  
**Contractor Address:** PO BOX 1411 Manteo, NC 27954

**Description:** Remove 1 bathroom remodel remaining bath to be ADA compliant install suspended drop ceiling w/led lites VCT floor See tex

**Construction Value:** \$28258 **Classification of Work:** COMMERCIAL REMODEL

**BUILDING INFORMATION**

Permit #	Permit Description	Total Fees Paid/Due	Approved By:	Approved Date:
CA201902347	COMM ADD-REM-REP-ACC	\$220.00	CT	10/25/2019

**Conditions of Approval:**

**ZONING INFORMATION**

Permit #	Permit Description	Total Fees Paid/Due	Approved By:	Approved Date:
ZN201902346	ZONING PERMIT - COMM	\$0.00	KW	10/25/2019

**Conditions of Approval:**

- Zoning Approved for interior remodel of commercial suites - restrooms, flooring, ceiling, etc.
- All work shall occur within the existing footprint - no increase in footprint or lot coverage is permitted.
- No tenant or use specified with this application. Additional approval will be required once tenant/use is determined.

**Additional Conditions:**

CALL FOR ALL REQUIRED INSPECTIONS; All new work to meet current code; FINAL INSPECTION REQUIRED PRIOR TO ISSUANCE OF CERTIFICATION OF COMPLIANCE

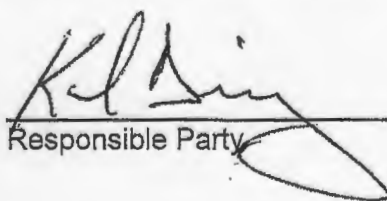
**PLEASE NOTE:**

All work shall conform to all applicable North Carolina State Building codes and Ordinances of the Town of Nags Head and shall be the responsibility of the undersigned applicant.

In accordance with GS160A-418, a permit expires 6 months after the date of issuance if the work authorized by the permit has not been commenced. If, after commencement, the work is discontinued for a period of 12 months (no inspections have taken place) the permit immediately expires. No work authorized by a permit that has expired may be performed until a new permit has been issued.

I, the undersigned, understand that the issuance of a floodplain development permit approval is contingent upon the above information being correct and that the plans and supporting data have been or shall be provided as required, including but not limited to a proposed elevation certificate and or V-Zone certificate. Note: all elevation certificates must be signed by a professional engineer or registered land surveyor.

**DECISION: Approved with Conditions (See above)**

  
Responsible Party 10/28/2019  
Date

**TOWN OF NAGS HEAD**  
PO Box 99 Nags Head, NC 27959  
Phone (252) 441-7016 Fax (252) 441-4290



**Commercial Project Approval**  
**Application # 201900879**

**Property Address:** 500 WEST VILLA DUNES DR **PIN #:** 98921832637500 **Parcel:** 011314999  
**Lot/Block/Sec:** LOT: COMMON PROPERTY BLK: SEC: **Subdivision:** VILLAS CONDO, THE  
**Zoning:** SPECIAL PLANNED DEV DISTRICT **Land Use:** MULTI-FAMILY DWELLING **Flood Zone:** X

**Owner Name:** VILLAS PROPERTY OWNERS  
**Owner Address:** P O BOX 806 NAGS HEAD, NC 27959

**Contractor Name:** Gallop Roofing & Remodeling, Inc. **Contractor Phone:** 252-473-2888  
**Contractor Address:** PO Box 157 WANCHESE, NC 27981

**Description:** Replace roof, remove loose aggregate, fasten 1/4" tapered insulation Building A Pinhill Ct  
**Construction Value:** \$44000 **Classification of Work:** COMMERCIAL REPAIR

**BUILDING INFORMATION**

Permit #	Permit Description	Total Fees Paid/Due	Approved By:	Approved Date:
CA201902342	COMM ADD-REM-REP-ACC	\$280.00	CT	10/25/2019

**Conditions of Approval:**

**Additional Conditions:**

CALL FOR ALL REQUIRED INSPECTIONS; All new work to meet current code; FINAL INSPECTION REQUIRED PRIOR TO ISSUANCE OF CERTIFICATION OF COMPLIANCE

**PLEASE NOTE:**

All work shall conform to all applicable North Carolina State Building codes and Ordinances of the Town of Nags Head and shall be the responsibility of the undersigned applicant.  
In accordance with GS160A-418, a permit expires 6 months after the date of issuance if the work authorized by the permit has not been commenced. If, after commencement, the work is discontinued for a period of 12 months (no inspections have taken place) the permit immediately expires. No work authorized by a permit that has expired may be performed until a new permit has been issued.

**DECISION: Approved with Conditions (See above)**

John Barlow 10/25/19  
Responsible Party Date



TOWN OF NAGS HEAD  
PO Box 99 Nags Head, NC 27959  
Phone (252) 441-7016 Fax (252) 441-4290



**Commercial Project Approval**  
**Application # 201900880**

Property Address: 8111 SOUTH OLD OREGON INLET RD PIN #: 08002081467400 Parcel:  
006959999

Lot/Block/Sec: LOT: COMMON PROP. BLK: 2 SEC: Subdivision: DIAMOND SHOALS CONDOS

Zoning: COMMERCIAL/RESIDENTIAL DISTRICT Land Use: MULTI-FAMILY DWELLING

Flood Zone: VE Base Flood Elevation: 11.0 Regulatory Flood Elevation: 12

Map Panel No: 0800 Map Panel Date: 09/20/2006 Suffix: J Datum Used: NAVD88

Owner Name: DIAMOND SHOALS UNIT OWNERS - C/O DIAMOND  
Owner Address: 2600 N CROATAN HWY KILL DEVIL HILLS, NC 27948

Contractor Name: Premiere Contracting, Inc. Contractor Phone: 252-207-9935  
Contractor Address: PO Box 269 Kitty Hawk, NC 27949

Description: Removing & replacing siding on the West elevation of buildings A & B Diamond Shoals  
Construction Value: \$28925 Classification of Work: COMMERCIAL REPAIR

**BUILDING INFORMATION**

Permit #	Permit Description	Total Fees Paid/Due	Approved By:	Approved Date:
CA201902344	COMM ADD-REM-REP-ACC	\$220.00	CT	10/25/2019

**Conditions of Approval:**

**FLOOD INFORMATION**

Permit #	Permit Description	Total Fees Paid/Due	Approved By:	Approved Date:
FL201902343	FLOOD PERMIT	\$0.00	CT	10/25/2019

**Conditions of Approval:**

**Additional Conditions:**

CALL FOR ALL REQUIRED INSPECTIONS; All new work to meet current code; FINAL INSPECTION REQUIRED PRIOR TO ISSUANCE OF CERTIFICATION OF COMPLIANCE

**PLEASE NOTE:**

All work shall conform to all applicable North Carolina State Building codes and Ordinances of the Town of Nags Head and shall be the responsibility of the undersigned applicant.

In accordance with GS160A-418, a permit expires 6 months after the date of issuance if the work authorized by the permit has not been commenced. If, after commencement, the work is discontinued for a period of 12 months (no inspections have taken place) the permit immediately expires. No work authorized by a permit that has expired may be performed until a new permit has been issued.

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**DECISION: Approved with Conditions (See above)**

Melana Devereux 11-12-19  
Responsible Party Date



**Residential Project Approval  
Application # 201900869**

**Property Address:** 3007 SOUTH VA DARE TRL **PIN #:** 989207582190 **Parcel:** 005255000

**Lot/Block/Sec:** LOT: 9 BLK: 2 SEC: 1 **Subdivision:** NAGS HEAD SHORES AMENDED SEC 1

**Zoning:** COMMERCIAL/RESIDENTIAL DISTRICT **Land Use:** SINGLE FAMILY DWELLING

**Flood Zone:** VE **Base Flood Elevation:** 11.0 **Regulatory Flood Elevation:** 12

**Map Panel No:** 9892 **Map Panel Date:** 09/20/2006 **Suffix:** J **Datum Used:** NAVD 1988

**Owner Name:** DAVOUD, CYNTHIA C

**Owner Address:** 901 HUGENOT TRL MIDLOTHIAN, VA 23113

**Contractor Name:** Evans Homes, LLC **Contractor Phone:**

**Contractor Address:** 5121 Winsor Pl KITTY HAWK, NC 27949

**Description:** Removal of div 2 deck roof construct a 3rd fl deck 10x10 to mirror 2nd fl deck, construct/install of Elevator rem concre

**Construction Value:** \$105000 **Classification of Work:** RESIDENTIAL REMODEL

**BUILDING INFORMATION**

Permit #	Permit Description	Total Fees Paid/Due	Approved By:	Approved Date:
RE201902398	RES ADD-REM-REP-ACC	\$470.00	SS	10/31/2019

**Conditions of Approval:**

- Address #s on home if none are present. Pre and post v zone cert required. New decks are / may be subject to engineering. Provide elevator footing and framing detail. All subs shall pull permits prior to starting work. Call for all required inspections. Call for final inspection

**FLOOD INFORMATION**

Permit #	Permit Description	Total Fees Paid/Due	Approved By:	Approved Date:
FL201902397	FLOOD PERMIT	\$0.00	SS	10/31/2019

**Conditions of Approval:**

**ZONING INFORMATION**

Permit #	Permit Description	Total Fees Paid/Due	Approved By:	Approved Date:
ZN201902396	ZONING PERMIT - RES	0.00	MK	10/31/2019

**Conditions of Approval:**

- Offset lot coverage by removing 10x10 trash can pad
- Must maintain setbacks and existing lot coverage
- As-built survey required
- Final Zoning inspection 252-449-6045

**Additional Conditions:**

CALL FOR ALL REQUIRED INSPECTIONS; All new work to meet current code; FINAL INSPECTION REQUIRED PRIOR TO ISSUANCE OF CERTIFICATION OF COMPLIANCE

**PLEASE NOTE:**

All work shall conform to all applicable North Carolina State Building codes and Ordinances of the Town of Nags Head and shall be the responsibility of the undersigned applicant.  
In accordance with GS160A-418, a permit expires 6 months after the date of issuance if the work authorized by the permit has not been commenced. If, after commencement, the work is discontinued for a period of 12 months (no inspections have taken place) the permit immediately expires. No work authorized by a permit that has expired may be performed until a new permit has been issued.

**(ZONING) RIGHT OF APPEAL**

**TOWN OF NAGS HEAD**  
PO Box 99 Nags Head, NC 27959  
Phone (252) 441-7016 Fax (252) 441-4290



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**Commercial Project Approval**  
**Application # 201900787**

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**Property Address:** 2910 SOUTH CROATAN HWY      **PIN #:** 989206373951      **Parcel:** 005696000

**Lot/Block/Sec:** LOT: BLK: SEC:      **Subdivision:** SUBDIVISION - NONE

**Zoning:** GENERAL COMMERCIAL DISTRICT      **Land Use:** OFFICE/RETAIL      **Flood Zone:** X

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**Owner Name:** PIRATES QUAY, LLC

**Owner Address:** PO BOX 120      KITTY HAWK, NC 27949

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**Contractor Name:** MK CONTRACTORS LLC

**Contractor Phone:** 252-489-9051

**Contractor Address:** P O Box 3014

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**Description:** Central Square Unit 21 Flip Your Closet Remove existing door and add door

**Construction Value:** \$3000

**Classification of Work:** COMMERCIAL REMODEL

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**BUILDING INFORMATION**

Permit #	Permit Description	Total Fees Paid/Due	Approved By:	Approved Date:
CA201902136	COMM ADD-REM-REP-ACC	\$130.00	SS	10/02/2019

**Conditions of Approval:**

- Address #s on unit. New door shall meet 2018 NC Building Code. Air seal around door and call for inspection. If door has glass provide impact protection. Call for final inspection

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**Additional Conditions:**

CALL FOR ALL REQUIRED INSPECTIONS; All new work to meet current code; FINAL INSPECTION REQUIRED PRIOR TO ISSUANCE OF CERTIFICATION OF COMPLIANCE

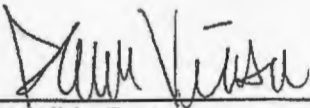
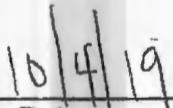
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**PLEASE NOTE:**

All work shall conform to all applicable North Carolina State Building codes and Ordinances of the Town of Nags Head and shall be the responsibility of the undersigned applicant.

**In accordance with GS160A-418, a permit expires 6 months after the date of issuance if the work authorized by the permit has not been commenced. If, after commencement, the work is discontinued for a period of 12 months (no inspections have taken place) the permit immediately expires. No work authorized by a permit that has expired may be performed until a new permit has been issued.**

**DECISION: Approved with Conditions (See above)**

  
Responsible Party        
Date

**TOWN OF NAGS HEAD**  
PO Box 99 Nags Head, NC 27959  
Phone (252) 441-7016 Fax (252) 441-4290



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**Commercial Project Approval**  
**Application # 201900807**

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**Property Address:** 500 WEST VILLA DUNES DR      **PIN #:** 98921832637506      **Parcel:** 011403000

**Lot/Block/Sec:** LOT: BLDG O UNIT 6 BLK: SEC:      **Subdivision:** VILLAS CONDO,THE

**Zoning:** SPECIAL PLANNED DEV DISTRICT      **Land Use:** MULTI-FAMILY DWELLING      **Flood Zone:** X

---

**Owner Name:** FARY, WILLIAM DANIEL SR TTEE  
**Owner Address:** PO BOX 826      GLOUCESTER, VA 23061

---

**Contractor Name:** Altered Estates, Billy Copanezos dba      **Contractor Phone:**  
**Contractor Address:** PO Box 1568 427 Villa Dunes Drive      Nags Head, NC 27959

---

**Description:** Replace 2 windows same size as existing, 1-2-8x4-6 twin 1-2-8x3-2 units  
**Construction Value:** \$3000      **Classification of Work:** COMMERCIAL REPAIR

---

**BUILDING INFORMATION**

Permit #	Permit Description	Total Fees Paid/Due	Approved By:	Approved Date:
CA201902140	COMM ADD-REM-REP-ACC	\$130.00	SS	10/02/2019

**Conditions of Approval:**

- Address #s on unit. Windows shall meet the NC Building Code. Call for air seal inspection. Provide protection from impact. Call for final inspection

---

**Additional Conditions:**

CALL FOR ALL REQUIRED INSPECTIONS; All new work to meet current code; FINAL INSPECTION REQUIRED PRIOR TO ISSUANCE OF CERTIFICATION OF COMPLIANCE

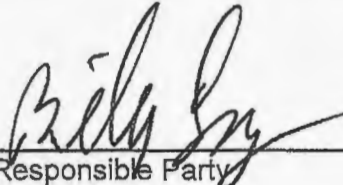
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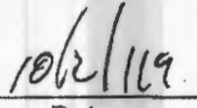
**PLEASE NOTE:**

All work shall conform to all applicable North Carolina State Building codes and Ordinances of the Town of Nags Head and shall be the responsibility of the undersigned applicant.

**In accordance with GS160A-418, a permit expires 6 months after the date of issuance if the work authorized by the permit has not been commenced. If, after commencement, the work is discontinued for a period of 12 months (no inspections have taken place) the permit immediately expires. No work authorized by a permit that has expired may be performed until a new permit has been issued.**

**DECISION: Approved with Conditions (See above)**

  
Responsible Party

  
Date

TOWN OF NAGS HEAD  
PO Box 99 Nags Head, NC 27959  
Phone (252) 441-7016 Fax (252) 441-4290



---

**Commercial Project Approval**  
**Application # 201900808**

---

**Property Address:** 500 WEST VILLA DUNES DR . **PIN #:** 989218326375S4 **Parcel:** 011425000

**Lot/Block/Sec:** LOT: BLDG S UNIT 4 BLK: SEC: **Subdivision:** VILLAS CONDO,THE

**Zoning:** SPECIAL PLANNED DEV DISTRICT **Land Use:** MULTI-FAMILY DWELLING **Flood Zone:** X

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**Owner Name:** LOWE, RICHARD W

**Owner Address:** 907 LAKEVIEW DR CLINTON, NC 28328

---

**Contractor Name:** Altered Estates, Billy Copanezos dba

**Contractor Phone:**

**Contractor Address:** PO Box 1568 427 Villa Dunes Drive

Nags Head, NC 27959

---

**Description:** Replace 2 windows same size as existing, 2-8x4-6 twin units

**Construction Value:** \$6000

**Classification of Work:** COMMERCIAL REPAIR

---

**BUILDING INFORMATION**

Permit #	Permit Description	Total Fees Paid/Due	Approved By:	Approved Date:
CA201902139	COMM ADD-REM-REP-ACC	\$160.00	SS	10/02/2019

**Conditions of Approval:**

- Address #s on unit. Windows shall meet the NC Building Code. Call for air seal inspection. Provide protection from impact. Call for final inspection.

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**Additional Conditions:**

CALL FOR ALL REQUIRED INSPECTIONS; All new work to meet current code; FINAL INSPECTION REQUIRED PRIOR TO ISSUANCE OF CERTIFICATION OF COMPLIANCE

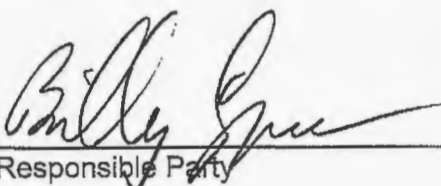
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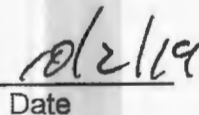
**PLEASE NOTE:**

All work shall conform to all applicable North Carolina State Building codes and Ordinances of the Town of Nags Head and shall be the responsibility of the undersigned applicant.

**In accordance with GS160A-418, a permit expires 6 months after the date of issuance if the work authorized by the permit has not been commenced. If, after commencement, the work is discontinued for a period of 12 months (no inspections have taken place) the permit immediately expires. No work authorized by a permit that has expired may be performed until a new permit has been issued.**

**DECISION: Approved with Conditions (See above)**

  
Responsible Party

  
Date





**Commercial Project Approval**  
**Application # 201900811**

**Property Address:** 8111 SOUTH OLD OREGON INLET RD      **PIN #:** 08002081467407      **Parcel:** 006959007

**Lot/Block/Sec:** LOT: 24-30 BLD A UT 203 BLK: 2 SEC: **Subdivision:** DIAMOND SHOALS CONDOS

**Zoning:** COMMERCIAL/RESIDENTIAL DISTRICT      **Land Use:** MULTI-FAMILY DWELLING

**Flood Zone:** VE      **Base Flood Elevation:** 11.0      **Regulatory Flood Elevation:** 12

**Map Panel No:** 0800      **Map Panel Date:** 09/20/2006      **Suffix:** J      **Datum Used:** NAVD 1988

**Owner Name:** PREVETTE, DANIELLE LEIGH - PREVETTE, RUT  
**Owner Address:** 10127 WOODTHORNE CT      RICHMOND, VA 23238

**Contractor Name:** JETTY CONSTRUCTION, LLC      **Contractor Phone:** 252-715-1452  
**Contractor Address:** 1002 W DEAN ST      KILL DEVIL HILLS, NC 27948

**Description:** Remove & replace 1 picture window & 2 fixed casement windows  
**Construction Value:** \$6700      **Classification of Work:** RESIDENTIAL REPAIR

**BUILDING INFORMATION**

Permit #	Permit Description	Total Fees Paid/Due	Approved By:	Approved Date:
RE201902138	RES ADD-REM-REP-ACC	\$160.00	SS	10/02/2019

**Conditions of Approval:**

- Address #s on unit. Windows shall meet NC Building Code. Call for air sealing inspection. Provide for impact protection. Call for final inspection.

**FLOOD INFORMATION**

Permit #	Permit Description	Total Fees Paid/Due	Approved By:	Approved Date:
FL201902137	FLOOD PERMIT	\$0.00	SS	10/02/2019

**Conditions of Approval:**

**Additional Conditions:**

CALL FOR ALL REQUIRED INSPECTIONS; All new work to meet current code; FINAL INSPECTION REQUIRED PRIOR TO ISSUANCE OF CERTIFICATION OF COMPLIANCE

**PLEASE NOTE:**

All work shall conform to all applicable North Carolina State Building codes and Ordinances of the Town of Nags Head and shall be the responsibility of the undersigned applicant.

In accordance with GS160A-418, a permit expires 6 months after the date of issuance if the work authorized by the permit has not been commenced. If, after commencement, the work is discontinued for a period of 12 months (no inspections have taken place) the permit immediately expires. No work authorized by a permit that has expired may be performed until a new permit has been issued.

I, the undersigned, understand that the issuance of a floodplain development permit approval is contingent upon the above information being correct and that the plans and supporting data have been or shall be provided as required, including but not limited to a proposed elevation certificate and or V-Zone certificate. Note: all elevation certificates must be signed by a professional engineer or registered land surveyor.

**DECISION:** Approved with Conditions (See above)

  
Responsible Party \_\_\_\_\_ Date 10/16/19

**TOWN OF NAGS HEAD**  
PO Box 99 Nags Head, NC 27959  
Phone (252) 441-7016 Fax (252) 441-4290



**Commercial Project Approval**  
**Application # 201900867**

**Property Address:** 8119 SOUTH OLD OREGON INLET RD      **PIN #:** 08002081547400      **Parcel:**  
006968999

**Lot/Block/Sec:** LOT: 31-32&PT33 COM.PROP. BLK: 2 SEC:      **Subdivision:** YACHTSMAN CONDOS

**Zoning:** COMMERCIAL/RESIDENTIAL DISTRIC      **Land Use:** MULTI-FAMILY DWELLING

**Flood Zone:** VE      **Base Flood Elevation:** 11.0      **Regulatory Flood Elevation:** 12

**Map Panel No:** 0800      **Map Panel Date:** 09/20/2006      **Suffix:** J      **Datum Used:** NAVD88

**Owner Name:** YACHTSMAN PROPERTY OWNERS - C/O ADLAM VE  
**Owner Address:** PO BOX 2391      KITTY HAWK, NC 27949

**Contractor Name:** COASTAL ENGINEERING & SURVEYING, INC.      **Contractor Phone:** 252-  
261-4151

**Contractor Address:** P O BOX 1129      KITTY HAWK, NC 27949

**Description:** Install new roof trusses & roof framing per engineered plans Install IB membrane & shingles Dorian damage

**Construction Value:** \$350000      **Classification of Work:** STORM REPAIR PERMITS

**BUILDING INFORMATION**

Permit #	Permit Description	Total Fees Paid/Due	Approved By:	Approved Date:
CA201902341	COMM ADD-REM-REP-ACC	\$0.00	CT	10/25/2019

**Conditions of Approval:**

**FLOOD INFORMATION**

Permit #	Permit Description	Total Fees Paid/Due	Approved By:	Approved Date:
FL201902340	FLOOD PERMIT	\$0.00	CT	10/25/2019

**Conditions of Approval:**

**Additional Conditions:**

CALL FOR ALL REQUIRED INSPECTIONS; All new work to meet current code; FINAL INSPECTION REQUIRED PRIOR TO ISSUANCE OF CERTIFICATION OF COMPLIANCE

**PLEASE NOTE:**

All work shall conform to all applicable North Carolina State Building codes and Ordinances of the Town of Nags Head and shall be the responsibility of the undersigned applicant.

In accordance with GS160A-418, a permit expires 6 months after the date of issuance if the work authorized by the permit has not been commenced. If, after commencement, the work is discontinued for a period of 12 months (no inspections have taken place) the permit immediately expires. No work authorized by a permit that has expired may be performed until a new permit has been issued.

I, the undersigned, understand that the issuance of a floodplain development permit approval is contingent upon the above information being correct and that the plans and supporting data have been or shall be provided as required, including but not limited to a proposed elevation certificate and or V-Zone certificate. Note: all elevation certificates must be signed by a professional engineer or registered land surveyor.

**DECISION: Approved with Conditions (See above)**

  
Responsible Party      Date 10/31/19



TOWN OF NAGS HEAD  
PO Box 99 Nags Head, NC 27959  
Phone (252) 441-7016 Fax (252) 441-4290



**Commercial Project Approval**  
**Application # 201900838**

**Property Address:** 7531 SOUTH VA DARE TRL **PIN #:** 08001840741201 **Parcel:** 007101003  
**Lot/Block/Sec:** LOT: UNIT 1A BLK: SEC: **Subdivision:** CARIBBEAN CORNERS CENTER CONDO  
**Zoning:** GENERAL COMMERCIAL DISTRICT **Land Use:** RESTAURANT  
**Flood Zone:** VE **Base Flood Elevation:** 11.0 **Regulatory Flood Elevation:** 11  
**Map Panel No:** 0800 **Map Panel Date:** 09/20/2006 **Suffix:** J **Datum Used:** NAVD 1988

**Owner Name:** CARIBBEAN CORNERS CAFE LLC  
**Owner Address:** 7808 S NORTH SHORE RD NAGS HEAD, NC 27959

**Contractor Name:** STEVEN GAWINSKI **Contractor Phone:** 252-216-6260  
**Contractor Address:** P O BOX 1822

**Description:** Remodel Fresh Fit Cafe (#1A-1E): remove exist. bathroom, open up room to 19.2X10.4X8; add handicap accessible bathroom

**Construction Value:** \$2000 **Classification of Work:** COMMERCIAL REMODEL

**BUILDING INFORMATION**

Permit #	Permit Description	Total Fees Paid/Due	Approved By:	Approved Date:
CA201902371	COMM ADD-REM-REP-ACC	\$100.00		10/28/2019

**Conditions of Approval:**

- Address #s on unit if not currently present. No more additional seating. ADA bath shall meet all requirements. Engineering may be requested where walls are being removed and openings are being made. All subcontractors shall pull permits before starting work. Call for all required inspections. Call for final fire, zoning and building inspections. Review fire marshal comments we have provided

**FLOOD INFORMATION**

Permit #	Permit Description	Total Fees Paid/Due	Approved By:	Approved Date:
FL201902370	FLOOD PERMIT	\$0.00		10/28/2019

**Conditions of Approval:**

**Additional Conditions:**

CALL FOR ALL REQUIRED INSPECTIONS; All new work to meet current code; FINAL INSPECTION REQUIRED PRIOR TO ISSUANCE OF CERTIFICATION OF COMPLIANCE

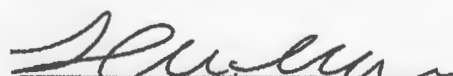
**PLEASE NOTE:**

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I, the undersigned, understand that the issuance of a floodplain development permit approval is contingent upon the above information being correct and that the plans and supporting data have been or shall be provided as required, including but not limited to a proposed elevation certificate and or V-Zone certificate. Note: all elevation certificates must be signed by a professional engineer or registered land surveyor.

**DECISION: Approved with Conditions (See above)**

  
Responsible Party 11-13-19  
Date

**TOWN OF NAGS HEAD**

PO Box 99 Nags Head, NC 27959

Phone (252) 441-7016 Fax (252) 441-4290



**Commercial Project Approval  
Application # 201900892**

**Property Address:** 2401 SOUTH CROATAN HWY **PIN #:** 989317213314 **Parcel:** 005644000

**Lot/Block/Sec:** LOT: PAR B&C BLK: SEC: **Subdivision:** SUBDIVISION - NONE

**Zoning:** GENERAL COMMERCIAL DISTRICT **Land Use:** OFFICE/RETAIL

**Flood Zone:** AE **Base Flood Elevation:** 10.0 **Regulatory Flood Elevation:** 11

**Map Panel No:** 9893 **Map Panel Date:** 09/20/2006 **Suffix:** J **Datum Used:** NAVD88

**Owner Name:** ROBECCA NAGS HEAD, LLC

**Owner Address:** 9200 COMMERCE BLVD WILLIAMSBURG, VA 23185

**Contractor Name:** EAST COAST ABATEMENT CO. INC. **Contractor Phone:** 252-232-7740

**Contractor Address:** 176 Windchaser Way

**Description:** Demolition of commercial structure (Christmas Mouse retail s hop) damaged by fire

**Construction Value:** \$28500 **Classification of Work:** COMMERCIAL DEMO

**BUILDING INFORMATION**

Permit #	Permit Description	Total Fees Paid/Due	Approved By:	Approved Date:
DC201902391	DEMO COMM OUTSIDE AEC	\$750.00	CT	10/30/2019

**Conditions of Approval:**

**FLOOD INFORMATION**

Permit #	Permit Description	Total Fees Paid/Due	Approved By:	Approved Date:
FL201902390	FLOOD PERMIT	\$0.00	CT	10/30/2019

**Conditions of Approval:**

**ZONING INFORMATION**

Permit #	Permit Description	Total Fees Paid/Due	Approved By:	Approved Date:
ZN201902389	ZONING PERMIT - COMM DEMO	0.00	KW	10/30/2019

**Conditions of Approval:**

Permit is for the demolition of fire damaged commercial structure (Christmas Mouse). Land disturbance proposed does not exceed 1-acre, if limits of disturbance increase please seek review and approval prior to commencing work.

All work must be consistent with the approved E&S Plan.

Erosion and Sediment Control Fencing must be installed the perimeter of land disturbance and must be maintained in proper working order throughout the project and shall not be removed until adequate site stabilization has occurred (assuming new construction does not begin immediately).

Permanent ground cover must be present on all disturbed areas prior to issuance of Certificate of Compliance, likely irrigation will be required to ensure seeding thrives. If new construction is to commence immediately after demo, ground cover will not be necessary.

Staff reserves the ability to require additional measures to address any deficiencies noted during the project.

No importation of fill material has been approved with this request.

Final Zoning Inspection required upon completion of demolition.

**Additional Conditions:**

CALL FOR ALL REQUIRED INSPECTIONS; All new work to meet current code; FINAL INSPECTION REQUIRED PRIOR TO ISSUANCE OF CERTIFICATION OF COMPLIANCE

**PLEASE NOTE:**

All work shall conform to all applicable North Carolina State Building codes and Ordinances of the Town of Nags Head

TOWN OF SOUTHERN SHORES  
PLANNING AND CODE  
ENFORCEMENT

5375 N Virginia Dare Trl  
Southern Shores NC 27949  
(252) 261-2394 ext 3 tel  
(252) 255-0876 fax  
[www.southernshores-nc.gov](http://www.southernshores-nc.gov)



**SUB-CONTRACTOR SIGN OFF AND/OR PERMIT**

Date 10-2-19

PROJECT ADDRESS 182 Ocean Blvd

Owner Bill Schweiner  
Mailing Address 11302 Taffrail Ct  
City, State, Zip Roxton VA 20191  
Phone 703-597-8988

Permit Number 10694  
Fee \$ 100

EXISTING Building Permit Number \_\_\_\_\_ NO FEE (if work is associated with a Building Permit) \_\_\_\_\_

**ELECTRICAL** = Licensee Name Grant Davenport NC License/Classification unlimited  
Company Name Davco Electric Inc  
Address 406 W Lake Dr Phone 441-4106  
City State & zip KDIT NC 27948 Estimated Project Cost \$800  
**Description of Work:** Replacing 200A meter base and overhead mast.

**PLUMBING** = Licensee Name \_\_\_\_\_ NC License/Classification \_\_\_\_\_  
Company Name \_\_\_\_\_  
Address \_\_\_\_\_ Phone \_\_\_\_\_  
City State & zip \_\_\_\_\_ Estimated Project Cost \_\_\_\_\_  
**Description of Work:** \_\_\_\_\_

**GAS** = Licensee Name \_\_\_\_\_ NC License/Classification \_\_\_\_\_  
Company Name \_\_\_\_\_  
Address \_\_\_\_\_ Phone \_\_\_\_\_  
City State & zip \_\_\_\_\_ Estimated Project Cost \_\_\_\_\_  
**Description of Work:** \_\_\_\_\_

**MECHANICAL** = Licensee Name \_\_\_\_\_ NC License/Classification \_\_\_\_\_  
Company Name \_\_\_\_\_  
Address \_\_\_\_\_ Phone \_\_\_\_\_  
City State & zip \_\_\_\_\_ Estimated Project Cost \_\_\_\_\_  
**Description of Work:** \_\_\_\_\_

**FIRE SPRINKLER** = Licensee Name \_\_\_\_\_ NC License/Classification \_\_\_\_\_  
Company Name \_\_\_\_\_  
Address \_\_\_\_\_ Phone \_\_\_\_\_  
City State & zip \_\_\_\_\_ Estimated Project Cost \_\_\_\_\_  
**Description of Work:** \_\_\_\_\_

I hereby certify that all information in this application is correct and all work will comply with the State Building Code and all other local laws and ordinances and regulations. The Inspection Department will be notified of any changes in the approved plans and specification for the project permitted herein.

[Signature] 10-2-19 [Signature] 10-2-19  
Signature of Licensee Date Signature of Permit Official Date  
[Signature]



**TOWN OF SOUTHERN SHORES  
PLANNING AND CODE ENFORCEMENT**  
5375 N Virginia Dare Trail, Southern Shores, NC 27949  
(252) 261-2394 Ext 3 - Office (252) 255-0876 - Fax  
[www.southernshores-nc.gov](http://www.southernshores-nc.gov)

**RESIDENTIAL  
BUILDING/FLOODPLAIN DEVELOPMENT PERMIT  
BUILDING PERMIT #10693**

**Location:** 99 S Dogwood Trail  
**Parcel:** 022296000 **PIN:** 986710266371  
**District:** 20- SOUTHERN SHORES  
**Subdivision:** SO/SH 114-117 126,127 200-202  
**LotBlkSect:** LOT: 7 BLK: 115 SEC:

**HEWITT, CARLTON D**  
120 TALL PINE LN  
SOUTHERN SHORES NC 27949

PHONE #: 757-510-0610      CELL #:

**BUSINESS NAME:** Tim Reese Construction Inc  
**CONTRACTOR'S NAME:** Tim Reese  
**ADDRESS:** 123 Holly Ridge Rd  
**CITY, STATE, ZIP:** Manteo, NC 27954  
**OFFICE#:** 252-473-1243  
**CELL#:** 252-475-0421  
**FAX#:**  
**EMAIL:**

**NC G.C. LICENSED CONTRACTOR:** \_\_\_ YES  NO  
**NC G.C. LICENSE NUMBER:**  
**LIMITATION:**  
**CLASSIFICATION:**  
**QUALIFIER:**

**LIEN AGENT:** n/a

**DESCRIPTION OF WORK – (Any deviation from the Building Plan or Site Plan requires prior approval):** Construction of a 126 lf x 6ft in height bulkhead 2ft waterward of existing bulkhead – pursuant to CAMA General Permit 75612A

**SPECIAL CONDITIONS -**

<b>TYPE OF CONSTRUCTION:</b> Bulkhead	<b>FOUNDATION:</b>	<b>ZONING DISTRICT:</b> RS-1
<b>BUILDING USE:</b> Residential	<b>HEAT:</b>	<b>ZONING PERMIT #:</b> n/a
<b>TOTAL HEATED/LIVING AREAS (SF):</b>	<b>A/C:</b>	<b>CAMA PERMIT #:</b> General #75612A
<b>TOTAL NON-HEATED AREAS (SF):</b>	<b>INTERIOR WALLS:</b>	<b>DATE ISSUED:</b> 10/1/2019
<b>NUMBER OF STORIES:</b>	<b>EXTERIOR WALLS:</b>	
<b>BEDROOMS:</b>	<b>FIREPLACE:</b>	
<b>SEPTIC CAPACITY # OF PERSONS:</b>	<b>ROOF:</b>	
<b>BATHS:</b> ½ BATHS:	<b>INSULATION:</b>	
<b>DETACHED/ATTACHED GARAGE(SF):</b>	<b>ELEVATOR (SF):</b>	
<b>STORAGE ENCLOSURE(SF): POOL(SF):</b>	<b>DECKS (SF):</b>	
<b>FLOOD ZONE:</b> AE	<b>PORCHES (SF):</b>	
<b>BASE FLOOD ELEVATION:</b> 7FT PLUS 2FT= 9FT	<b>WINDOWS MAKE:</b>	
	<b>TYPE:</b>	

**\*\*\*The owner and builder are responsible for the following: All work done shall comply with the State Building Code and all other applicable State and local laws. The applicant certifies that the information on this permit is correct; that he/she is the owner or duly authorized agent of owner; that all construction shall be as shown on the submitted plans and specifications; the he/she understands this permit is valid for 180 days to begin construction and may be revoked for failure to comply with applicable regulations and laws.**

<b>TOTAL CONSTRUCTION COST</b>	\$15,000		
<b>HEATED/LIVING AREA (sf)</b> (new square footage)		X .60/sf (single family ) = X .75/sf (all others) =	\$
<b>NON-HEATED AREA (sf)</b> (new square footage)		X .30/sf (single family) = X .35/sf (all others) =	\$
<b>REMODEL/REPAIR/ALTERATION</b> (no additional square footage)	\$	X \$10 per \$1,000 of cost =	\$
		Pool = \$125	\$
		Zoning Permit Fee = \$50	\$
		Plan Review Fee = \$150 or \$100	\$
		Minimum Permit Fee = \$100	\$100.00
		Homeowner's Recovery Fund\$10	\$
		<b>TOTAL FEE</b>	<b>\$100.00</b>

*Timothy W Reese*      *Timothy W Reese*      *10-2-19*  
Applicant - Owner/Contractor      (Please print and sign name)      Date Issued

*Buddy Spelton*      *DKS*      *10-2-19*  
Building/Code/Zoning Official      Date Approved



**TOWN OF SOUTHERN SHORES  
PLANNING AND CODE ENFORCEMENT**  
5375 N Virginia Dare Trail, Southern Shores, NC 27949  
(252) 261-2394 Ext 3 - Office (252) 255-0876 - Fax  
[www.southernshores-nc.gov](http://www.southernshores-nc.gov)

**RESIDENTIAL  
BUILDING/FLOODPLAIN DEVELOPMENT PERMIT  
BUILDING PERMIT #10696**

**Location:** 56 Fairway Drive  
**Parcel:** 022349000 PIN: 986706381363  
**District:** 20- SOUTHERN SHORES  
**Subdivision:** SO/SH COMMUNITY BLK 118  
**LotBlkSect:** LOT: 9 BLK: 118 SEC:

**GRUENBERG, HANS S EUX**  
1717 GULF SHORE BLVD N APT 304  
NAPLES FL 34102

PHONE #: 410-476-7011

CELL #:

**BUSINESS NAME:** Northeastern Marine Construction  
**CONTRACTOR'S NAME:** Bill Jones  
**ADDRESS:** PO Box 42  
**CITY, STATE, ZIP:** Kitty Hawk, NC 27949  
**OFFICE#:** 252-21613682  
**CELL#:**  
**FAX#:** 252-261-2275  
**EMAIL:** [julie@nemarineconst.com](mailto:julie@nemarineconst.com)

**NC G.C. LICENSED CONTRACTOR:**  YES  NO  
**NC G.C. LICENSE NUMBER:** 30026  
**LIMITATION:** Limited  
**CLASSIFICATION:** Marine  
**QUALIFIER:** William Jones

**LIEN AGENT:** n/a

**DESCRIPTION OF WORK – (Any deviation from the Building Plan or Site Plan requires prior approval):** Construction of a new 100 lft x less than 5 ft in height bulkhead w/ 20 ft return and landward 130 lf

**SPECIAL CONDITIONS -**

<b>TYPE OF CONSTRUCTION:</b> Other – bulkhead/	<b>FOUNDATION:</b>	<b>ZONING DISTRICT:</b> RS-1
	<b>HEAT:</b>	<b>ZONING PERMIT #:</b> n/a
<b>BUILDING USE:</b> Other	<b>A/C:</b>	<b>DATE APPROVED:</b> n/a
<b>TOTAL HEATED/LIVING AREAS (SF):</b>	<b>INTERIOR WALLS:</b>	
<b>TOTAL NON-HEATED AREAS (SF):</b>	<b>EXTERIOR WALLS:</b>	
<b>NUMBER OF STORIES:</b>	<b>FIREPLACE:</b>	
<b>BEDROOMS:</b>	<b>ROOF:</b>	
<b>SEPTIC CAPACITY # OF PERSONS:</b>	<b>INSULATION:</b>	
<b>BATHS:</b> ½ BATHS:	<b>ELEVATOR (SF):</b>	
<b>DETACHED/ATTACHED GARAGE(SF):</b>	<b>DECKS (SF):</b>	<b>CAMA PERMIT #:</b> General 73008A
<b>STORAGE ENCLOSURE(SF): POOL(SF):</b>	<b>PORCHES (SF):</b>	<b>DATE ISSUED:</b> 10/2/2019
<b>FLOOD ZONE:</b> AE	<b>WINDOWS MAKE:</b>	
<b>BASE FLOOD ELEVATION:</b> 7 FT PLUS 2FT= 9FT	<b>TYPE:</b>	

**\*\*\*The owner and builder are responsible for the following: All work done shall comply with the State Building Code and all other applicable State and local laws. The applicant certifies that the information on this permit is correct; that he/she is the owner or duly authorized agent of owner; that all construction shall be as shown on the submitted plans and specifications; the he/she understands this permit is valid for 180 days to begin construction and may be revoked for failure to comply with applicable regulations and laws.**

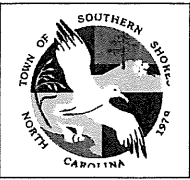
<b>TOTAL CONSTRUCTION COST</b>	<b>\$20,000</b>		
<b>HEATED/LIVING AREA (sf)</b> (new square footage)		X .60/sf (single family) = X .75/sf (all others) =	\$
<b>NON-HEATED AREA (sf)</b> (new square footage)		X .30/sf (single family) = X .35/sf (all others) =	\$
<b>REMODEL/REPAIR/ALTERATION</b> (no additional square footage)	\$	X \$10 per \$1,000 of cost =	\$
		Pool = \$125	\$
		Zoning Permit Fee = \$50	\$
		Plan Review Fee = \$150 or \$100	\$
		Minimum Permit Fee = \$100	\$100.00
		Homeowner's Recovery Fund \$10	\$
		<b>TOTAL FEE</b>	<b>\$100.00</b>

Julie E Emory Julie Emory  
Applicant - Owner/Contractor (Please print and sign name)

10-3-19  
Date Issued

Brendley She Otter  
Building/Code/Zoning Official  
DINKS

10-3-19  
Date Approved



**TOWN OF SOUTHERN SHORES  
PLANNING AND CODE ENFORCEMENT**  
5375 N Virginia Dare Trail, Southern Shores, NC 27949  
(252) 261-2394 Ext 3 - Office (252) 255-0876 - Fax  
[www.southernshores-nc.gov](http://www.southernshores-nc.gov)

**RESIDENTIAL  
BUILDING/FLOODPLAIN DEVELOPMENT PERMIT  
BUILDING PERMIT #10691**

**Location: 313 N Dogwood Trail  
Parcel: 021448000 PIN: 986809069141  
District: 20- SOUTHERN SHORES  
Subdivision: SO/SH SECTIONS A&B  
LotBlkSect: LOT: 32A BLK: D SEC: B**

**STEPHENS, JESSE GORDON JR EUX  
HIGGINS, CLAUDIA RHEA EUX  
4700 N 38TH PL  
ARLINGTON VA 22207**

PHONE #: 202-390-8157

CELL #:

**BUSINESS NAME: Northeastern Marine Construction  
CONTRACTOR'S NAME: Bill Jones  
ADDRESS: PO Box 42  
CITY, STATE, ZIP: Kitty Hawk, NC 27949  
OFFICE#: 252-21613682  
CELL#:   
FAX#: 252-261-2275  
EMAIL: [julie@nemarineconst.com](mailto:julie@nemarineconst.com)**

**NC G.C. LICENSED CONTRACTOR:  X  YES  NO  
NC G.C. LICENSE NUMBER: 30026  
LIMITATION: Limited  
CLASSIFICATION: Marine  
QUALIFIER: William Jones**

**LIEN AGENT: n/a**

**DESCRIPTION OF WORK – (Any deviation from the Building Plan or Site Plan requires prior approval): Construction of a new 130 lft x 5 ft in height bulkhead w/ 20 ft return and landward 130 lf x 5 ft in height retaining wall**

**SPECIAL CONDITIONS -**

<b>TYPE OF CONSTRUCTION: Other – bulkhead/ Retaining wall</b>	<b>FOUNDATION:</b>	<b>ZONING DISTRICT: RS-1</b>
<b>BUILDING USE: Other</b>	<b>HEAT:</b>	<b>ZONING PERMIT #: 2019-78</b>
<b>TOTAL HEATED/LIVING AREAS (SF):</b>	<b>A/C:</b>	<b>DATE APPROVED: 10/3/2019</b>
<b>TOTAL NON-HEATED AREAS (SF):</b>	<b>INTERIOR WALLS:</b>	<b>PERMITTED/CONDITIONAL USE: Single Family Dwelling</b>
<b>NUMBER OF STORIES:</b>	<b>EXTERIOR WALLS:</b>	<b>RESIDENTIAL TYPE: 2<sup>nd</sup> Home</b>
<b>BEDROOMS:</b>	<b>FIREPLACE:</b>	
<b>SEPTIC CAPACITY # OF PERSONS:</b>	<b>ROOF:</b>	
<b>BATHS: ½ BATHS:</b>	<b>INSULATION:</b>	
<b>DETACHED/ATTACHED GARAGE(SF):</b>	<b>ELEVATOR (SF):</b>	
<b>STORAGE ENCLOSURE(SF): POOL(SF):</b>	<b>DECKS (SF):</b>	<b>CAMA PERMIT #: General 75610A</b>
<b>FLOOD ZONE: AE</b>	<b>PORCHES (SF):</b>	<b>DATE ISSUED: 9/27/2019</b>
<b>BASE FLOOD ELEVATION: 7 FT PLUS 2FT= 9FT</b>	<b>WINDOWS MAKE:</b>	
	<b>TYPE:</b>	

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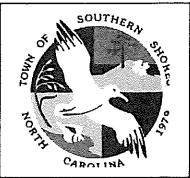
<b>TOTAL CONSTRUCTION COST</b>	<b>\$70,000</b>		
<b>HEATED/LIVING AREA (sf) (new square footage)</b>		<b>X .60/sf (single family ) =</b>	<b>\$</b>
		<b>X .75/sf (all others) =</b>	
<b>NON-HEATED AREA (sf) (new square footage)</b>		<b>X .30/sf (single family) =</b>	<b>\$</b>
		<b>X .35/sf (all others) =</b>	
<b>REMODEL/REPAIR/ALTERATION (no additional square footage)</b>	<b>\$</b>	<b>X \$10 per \$1,000 of cost =</b>	<b>\$</b>
		<b>Pool = \$125</b>	<b>\$</b>
		<b>Zoning Permit Fee = \$50</b>	<b>\$</b>
		<b>Plan Review Fee = \$150 or \$100</b>	<b>\$</b>
		<b>Minimum Permit Fee = \$100</b>	<b>\$100.00</b>
		<b>Homeowner's Recovery Fund\$10</b>	<b>\$</b>
		<b>TOTAL FEE</b>	<b>\$100.00</b>

*Julie Emory* Julie Emory  
Applicant - Owner/Contractor (Please print and sign name)

10-3-19  
Date Issued

*Bunley Shelton*  
Building/Code/Zoning Official *DLN*

10-3-19  
Date Approved



**TOWN OF SOUTHERN SHORES  
PLANNING AND CODE ENFORCEMENT**  
5375 N Virginia Dare Trail, Southern Shores, NC 27949  
(252) 261-2394 Ext 3 - Office (252) 255-0876 - Fax  
[www.southernshores-nc.gov](http://www.southernshores-nc.gov)

**COMMERCIAL  
BUILDING/FLOODPLAIN DEVELOPMENT PERMIT  
BUILDING PERMIT #10655**

Location: 148A Ocean Boulevard  
Parcel: 021906000 PIN: 986708785800  
District: 20- SOUTHERN SHORES  
Subdivision: SO/SH AMENDED PLAT B SEC 2  
LotBlkSect: LOT: A BLK: 24 SEC: 2

**SOUTHERN SHORES CIVIC ASSOC INC**  
5377 VIRGINIA DARE TRL N  
KITTY HAWK NC 27949

PHONE #: 252-261-8617      CELL #:

BUSINESS NAME: TEPDB OPCO, LLC  
CONTRACTOR'S NAME: Andrew T. Haldane  
ADDRESS: 326 Tryon Rd  
CITY, STATE, ZIP: Raleigh, NC 27603  
OFFICE#: 919-661-6351  
CELL#: 919-527-8515  
FAX#:  
EMAIL: [tsatterwhite@tepgroup.net](mailto:tsatterwhite@tepgroup.net)

NC G.C. LICENSED CONTRACTOR:  X  YES  NO  
NC G.C. LICENSE NUMBER: 75463  
LIMITATION: Unlimited  
CLASSIFICATION: Building; Highway; PU (Communications)  
QUALIFIER: Andrew Timothy Haldane

LIEN AGENT: n/a

DESCRIPTION OF WORK – (Any deviation from the Building Plan or Site Plan requires prior approval): Remodel – Tower extension and structural work – No carrier or line and antenna work

SPECIAL CONDITIONS - Third party structural testing required

TYPE OF CONSTRUCTION: Remodel	ZONING DISTRICT: rs-1
BUILDING USE: Utility (Communications)	ZONING PERMIT #: 2019-70
FLOOD ZONE: AE	DATE APPROVED: 8/29/2019
BASE FLOOD ELEVATION: 9FT PLUS 2FT= 11FT	CONDITIONAL USE: Wireless Communication Tower – Amended CUP-13-01
	COMMERCIAL USE: Wireless Communication Tower
	CAMA PERMIT #: n/a
	DATE ISSUED:
	SEPTIC PERMIT #: n/a
	DATE ISSUED:

**\*\*\*The owner and builder are responsible for the following: All work done shall comply with the State Building Code and all other applicable State and local laws. The applicant certifies that the information on this permit is correct; that he/she is the owner or duly authorized agent of owner; that all construction shall be as shown on the submitted plans and specifications; the he/she understands this permit is valid for 180 days to begin construction and may be revoked for failure to comply with applicable regulations and laws.**

TOTAL CONSTRUCTION COST	\$9,000		
HEATED/LIVING AREA (sf) (new square footage)		X .75/sf (all others) =	\$
NON-HEATED AREA (sf) (new square footage)		X .35/sf (all others) =	\$
REMODEL/REPAIR/ALTERATION (no additional square footage)	\$9,000	X \$10 per \$1,000 of cost =	\$n/a
		Pool = \$125	\$
		Zoning Permit Fee = \$50	\$50.00
		Plan Review Fee = \$150 or \$100	\$
		Minimum Permit Fee = \$100	\$100.00
		<b>TOTAL FEE</b>	<b>\$150.00</b>

*Jerry Satterwhite*      **Jerry Satterwhite**      10/3/2014  
Applicant - Owner/Contractor      (Please print and sign Name)      Date Issued

*Stacy Speltra*      **Stacy Speltra**      8-29-19  
Building/Code/Zoning Official      Date Approved



**TOWN OF SOUTHERN SHORES**  
 5375 N Virginia Dare Trl  
 Southern Shores, NC 27949  
 (252) 261-2394 tel  
 (252) 255-0876 fax  
[www.southernshores-nc.gov](http://www.southernshores-nc.gov)



**SUBCONTRACTOR SIGN OFF AND/OR PERMIT**

Date 10/04/2019  
 PROJECT ADDRESS 43 DUCK WOODS DRIVE  
 Owner JEFF LAYTON  
 Mailing Address 43 DUCK WOODS DRIVE  
 City, State, Zip KITTY HAWK, NC 27949  
 Phone 252-255-0943

Permit Number 10699

Fee \$ 100

EXISTING Building Permit Number \_\_\_\_\_ NO FEE \_\_\_\_\_

**ELECTRICAL** = Licensee Name FREDERICK MARKLIN NC License/Classification 22222-L / LTD  
 Company Name R A HOY HEATING & A/C. INC  
 Address P O BOX 179 Phone (252) 261-2008  
 City State & zip KITTY HAWK, NC 27949 Estimated Project Cost INCL in MECH  
**Description of Work:** CONNECTION OF MECH EQUIP BELOW

**PLUMBING** = Licensee Name \_\_\_\_\_ NC License/Classification \_\_\_\_\_  
 Company Name \_\_\_\_\_  
 Address \_\_\_\_\_ Phone \_\_\_\_\_  
 City State & zip \_\_\_\_\_ Estimated Project Cost \_\_\_\_\_  
**Description of Work:** \_\_\_\_\_

**GAS** = Licensee Name \_\_\_\_\_ NC License/Classification \_\_\_\_\_  
 Company Name \_\_\_\_\_  
 Address \_\_\_\_\_ Phone \_\_\_\_\_  
 City State & zip \_\_\_\_\_ Estimated Project Cost \_\_\_\_\_  
**Description of Work:** \_\_\_\_\_

**MECHANICAL** = Licensee Name DOUGLAS WAKELEY NC License/Classification 13056 / H 2 & 3 P-1  
 Company Name R A HOY HEATING & A/C. INC  
 Address P O BOX 179 Phone (252) 261-2008  
 City State & zip KITTY HAWK, NC 27949 Estimated Project Cost 5873  
**Description of Work:** COMPLETE DUCT REPLACEMENT

I hereby certify that all information in this application is correct and all work will comply with the State Building Code and all other local laws and ordinances and regulations. The Inspection Department will be notified of any changes in the approved plans and specification for the project permitted herein.

Douglas Wakeley 10/04/2019  
 Signature of Licensee Date  
Douglas Wakeley (ELEC)

[Signature] 10-7-19  
 Signature of Permit Official Date  
[Signature]



**TOWN OF SOUTHERN SHORES  
PLANNING AND CODE ENFORCEMENT**  
5375 N Virginia Dare Trail, Southern Shores, NC 27949  
(252) 261-2394 Ext 3 - Office (252) 255-0876 - Fax  
[www.southernshores-nc.gov](http://www.southernshores-nc.gov)

**RESIDENTIAL  
BUILDING/FLOODPLAIN DEVELOPMENT PERMIT  
BUILDING PERMIT #10689**

Location: 49 Spindrifft Trail  
Parcel: 022398000 PIN: 986716930942  
District: 20- SOUTHERN SHORES  
Subdivision: CHICAHOUK  
LotBikSect: LOT: 225 BLK: SEC

SULLIVAN, KATHRYN HALEY JRO  
SNAPP, JUDSON FRANKLIN JRO  
944 NC HWY 33 E  
CHOCOWINITY NC 27817

PHONE #:

CELL #: 252-227-1805

BUSINESS NAME:  
CONTRACTOR'S NAME: Property Owner  
ADDRESS:  
CITY, STATE, ZIP:  
OFFICE#:  
CELL#:  
FAX#:  
EMAIL:

NC G.C. LICENSED CONTRACTOR: \_\_\_YES \_\_\_X\_\_\_NO  
NC G.C. LICENSE NUMBER:  
LIMITATION:  
CLASSIFICATION:  
QUALIFIER:

LIEN AGENT: Fidelity National Title Company, LLC Entry #1114022  
19 W. Hargett St., Suite 507 / Raleigh, NC 27601

DESCRIPTION OF WORK – (Any deviation from the Building Plan or Site Plan requires prior approval): Construction of a new single family dwelling with an attached garage and accessory building to include a workshop and living area on 1<sup>st</sup> floor

SPECIAL CONDITIONS -

TYPE OF CONSTRUCTION: New SFD	FOUNDATION: Slab	ZONING DISTRICT: RS-1
BUILDING USE: Single Family Dwelling	HEAT: Heat Pump	ZONING PERMIT #: 2019-77
TOTAL HEATED/LIVING AREAS (SF): 2,300+613	A/C: Heat Pump	DATE APPROVED: 101/7/2019
TOTAL NON-HEATED AREAS (SF): 851+864	INTERIOR WALLS: Drywall	PERMITTED/CONDITIONAL USE: Single Family Dwelling
NUMBER OF STORIES: 2	EXTERIOR WALLS: cedar shakes/ & cement board	RESIDENTIAL TYPE: Residence
BEDROOMS: 3 and 1 in accessory building	ROOF: Asphalt	SEPTIC PERMIT #: 28813
SEPTIC CAPACITY # OF PERSONS: 8	INSULATION: Batt	DATE ISSUED: 6/14/2019
BATHS: 3 ½ BATHS: 2	FIREPLACE: Gas	
ATTACHED GARAGE(SF): 498	DECKS & PORCHES (SF): 353	
ACCESSORY BLDG(SF): 864sf un htd / 613sf htd		
FLOOD ZONE: Shaded X	WINDOWS MAKE: Pella	
BASE FLOOD ELEVATION: FT PLUS 2FT=	TYPE: Double-Hung vinyl	

\*\*\*The owner and builder are responsible for the following: All work done shall comply with the State Building Code and all other applicable State and local laws. The applicant certifies that the information on this permit is correct; that he/she is the owner or duly authorized agent of owner; that all construction shall be as shown on the submitted plans and specifications; the he/she understands this permit is valid for 180 days to begin construction and may be revoked for failure to comply with applicable regulations and laws.

TOTAL CONSTRUCTION COST	\$120,000		
HEATED/LIVING AREA (sf) (new square footage)	2,913	X .60/sf (single family) = X .75/sf (all others) =	\$1,747.80
NON-HEATED AREA (sf) (new square footage)	1,715	X .30/sf (single family) = X .35/sf (all others) =	\$514.50
REMODEL/REPAIR/ALTERATION (no additional square footage)	\$	X \$10 per \$1,000 of cost =	\$
		Pool = \$125	\$
		Zoning Permit Fee = \$50	\$50.00
		Plan Review Fee = \$150 or \$100	\$
		Minimum Permit Fee = \$100	\$
		Homeowner's Recovery Fund \$10	\$
		<b>TOTAL FEE</b>	<b>\$2,312.30</b>

Judson Franklin Snapp Judson Franklin Snapp 10/7/19  
Applicant - Owner/Contractor (Please print and sign name) Date Issued  
Bunbley the Otter 10-7-19  
Building/Code/Zoning Official DJ DVS Date Approved



**TOWN OF SOUTHERN SHORES  
PLANNING AND CODE ENFORCEMENT**  
5375 N Virginia Dare Trail, Southern Shores, NC 27949  
(252) 261-2394 Ext 3 - Office (252) 255-0876 - Fax  
[www.southernshores-nc.gov](http://www.southernshores-nc.gov)

**RESIDENTIAL  
BUILDING/FLOODPLAIN DEVELOPMENT PERMIT  
BUILDING PERMIT #10688**

**Location: 45 Eleventh Avenue  
Parcel: 026762000 PIN: 986805183169  
District: 20- SOUTHERN SHORES  
Subdivision: SO/SH BLK 60  
LotBlkSect: LOT: 20 BLK: 60 SEC:**

**ROWE, EDITH V  
45 ELEVENTH AVE  
SOUTHERN SHORES NC 27949**

PHONE #:

CELL #: 252-202-6165

**BUSINESS NAME: Southern Scapes Pool & Landscape Design  
CONTRACTOR'S NAME: Tom May, Jr  
ADDRESS: 7441 Caratoke Hwy, Box 359  
CITY, STATE, ZIP: Jarvisburg, NC 27947  
OFFICE#: 252-491-5303  
CELL#: 252-202-4301  
FAX#: 252-491-5052  
EMAIL: [admin@southernscapesllc.com](mailto:admin@southernscapesllc.com)**

**NC G.C. LICENSED CONTRACTOR:  YES  NO  
NC G.C. LICENSE NUMBER: 77270  
LIMITATION: Limited  
CLASSIFICATION: Residential  
QUALIFIER: Thomas Harry May, Jr.**

**LIEN AGENT: Stewart Title Guaranty Company Entry#1112133  
19 W Hargett St., Suite 507 / Raleigh, NC 27601**

**DESCRIPTION OF WORK – (Any deviation from the Building Plan or Site Plan requires prior approval): Construction of a new in-ground pool, pool deck and barrier fence**

**SPECIAL CONDITIONS -**

<b>TYPE OF CONSTRUCTION:</b> Accessory - Pool	<b>FOUNDATION:</b>	<b>ZONING DISTRICT:</b> RS-1
<b>BUILDING USE:</b> Single Family Dwelling	<b>HEAT:</b>	<b>ZONING PERMIT #:</b> 2019-80
<b>TOTAL HEATED/LIVING AREAS (SF):</b>	<b>A/C:</b>	<b>DATE APPROVED:</b> 10/4/2019
<b>TOTAL NON-HEATED AREAS (SF):</b>	<b>INTERIOR WALLS:</b>	<b>PERMITTED/CONDITIONAL USE:</b> Single Family Dwelling
<b>NUMBER OF STORIES:</b>	<b>EXTERIOR WALLS:</b>	<b>RESIDENTIAL TYPE:</b> Residence
<b>BEDROOMS:</b>	<b>FIREPLACE:</b>	
<b>SEPTIC CAPACITY # OF PERSONS:</b>	<b>ROOF:</b>	<b>SEPTIC PERMIT #:</b> 29023
<b>BATHS: ½ BATHS:</b>	<b>INSULATION:</b>	<b>DATE ISSUED:</b> 9/19/2019
<b>DETACHED/ATTACHED GARAGE(SF):</b>	<b>ELEVATOR (SF):</b>	
<b>STORAGE ENCLOSURE(SF): POOL(SF): 1079</b>	<b>DECKS (SF):</b>	
<b>FLOOD ZONE: Shaded X</b>	<b>PORCHES (SF):</b>	
<b>BASE FLOOD ELEVATION: FT PLUS 2FT=</b>	<b>WINDOWS MAKE:</b>	
	<b>TYPE:</b>	

**\*\*\*The owner and builder are responsible for the following: All work done shall comply with the State Building Code and all other applicable State and local laws. The applicant certifies that the information on this permit is correct; that he/she is the owner or duly authorized agent of owner; that all construction shall be as shown on the submitted plans and specifications; the he/she understands this permit is valid for 180 days to begin construction and may be revoked for failure to comply with applicable regulations and laws.**

<b>TOTAL CONSTRUCTION COST</b>	<b>\$47,062</b>		
<b>HEATED/LIVING AREA (sf)</b> (new square footage)		X .60/sf (single family) = X .75/sf (all others) =	\$
<b>NON-HEATED AREA (sf)</b> (new square footage)		X .30/sf (single family) = X .35/sf (all others) =	\$
<b>REMODEL/REPAIR/ALTERATION</b> (no additional square footage)	\$	X \$10 per \$1,000 of cost =	\$
		Pool = \$125	\$125.00
		Zoning Permit Fee = \$50	\$50.00
		Plan Review Fee = \$150 or \$100	\$
		Minimum Permit Fee = \$100	\$
		Homeowner's Recovery Fund \$10	\$10.00
		<b>TOTAL FEE</b>	<b>\$185.00</b>

Applicant - Owner/Contractor (Please print and sign name)

Date Issued

Building/Code/Zoning Official

Date Approved

10-2-19

10-4-19



**TOWN OF SOUTHERN SHORES  
PLANNING AND CODE ENFORCEMENT**  
5375 N Virginia Dare Trail, Southern Shores, NC 27949  
(252) 261-2394 Ext 3 - Office (252) 255-0876 - Fax  
[www.southernshores-nc.gov](http://www.southernshores-nc.gov)

**RESIDENTIAL  
BUILDING/FLOODPLAIN DEVELOPMENT PERMIT  
BUILDING PERMIT #10669**

Location: 21 Circle Drive  
  
Parcel: 021605000 PIN: 986814429915  
District: 20- SOUTHERN SHORES  
Subdivision: SO/SH BEACH BLK 38 AMENDED  
LotBlkSect: LOT: 38 BLK: 38 SEC:

MARTEN, THOMAS A EUX  
MARTEN, CHRISTINA E EUX  
618 S ROYAL ST  
ALEXANDRIA VA 22314

PHONE #: 703-622-5780

CELL #:

BUSINESS NAME: B & B Contractors  
CONTRACTOR'S NAME: Jeff Ballard  
ADDRESS: PO Box 2998  
CITY, STATE, ZIP: Kitty Hawk, NC 27949  
OFFICE#: 252-489-9551  
CELL#: 252-489-9551  
FAX#:   
EMAIL: [ballardnboyz@aol.com](mailto:ballardnboyz@aol.com)

NC G.C. LICENSED CONTRACTOR:  YES  NO  
NC G.C. LICENSE NUMBER: 60944  
LIMITATION: Limited  
CLASSIFICATION: Building  
QUALIFIER: Jeffrey D. Ballard

LIEN AGENT: First American Title Insurance Company Entry #1108790  
19 W. Hargett St., Suite 507 / Raleigh, NC 27601

DESCRIPTION OF WORK – (Any deviation from the Building Plan or Site Plan requires prior approval): New accessory building to include = unheated garage and 1<sup>st</sup> floor heated living space w/ 213sf porch

SPECIAL CONDITIONS -

TYPE OF CONSTRUCTION: Accessory Building	FOUNDATION: Piling	ZONING DISTRICT: RS-1
BUILDING USE: Accessory	HEAT: Heat Pump	ZONING PERMIT #: 2019-74
TOTAL HEATED/LIVING AREAS (SF): 1,227	A/C: Elec	DATE APPROVED: 10/2/2019
TOTAL NON-HEATED AREAS (SF): 1,200	INTERIOR WALLS: Drywall	PERMITTED/CONDITIONAL USE: Vacation Cottage
NUMBER OF STORIES: 2	EXTERIOR WALLS: LP Smart	RESIDENTIAL TYPE: Vacation Cottage < 30 Days
BEDROOMS: 1	FIREPLACE: n/a	SEPTIC PERMIT #: 20683
SEPTIC CAPACITY # OF PERSONS: n/a	ROOF: Asphalt	DATE ISSUED: 3/25/2013 and 9/11/2019
BATHS: 1 ½ BATHS:	INSULATION: Batt	
DETACHED/ATTACHED GARAGE(SF):	ELEVATOR (SF): n/a	
STORAGE ENCLOSURE(SF): POOL(SF):	DECKS (SF):	
FLOOD ZONE: AE	PORCHES (SF): 213	
BASE FLOOD ELEVATION: 9 FT PLUS 2FT= 11	WINDOWS MAKE: Viwinco	
	TYPE: Vinyl	

\*\*\*The owner and builder are responsible for the following: All work done shall comply with the State Building Code and all other applicable State and local laws. The applicant certifies that the information on this permit is correct; that he/she is the owner or duly authorized agent of owner; that all construction shall be as shown on the submitted plans and specifications; the he/she understands this permit is valid for 180 days to begin construction and may be revoked for failure to comply with applicable regulations and laws.

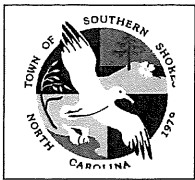
TOTAL CONSTRUCTION COST	\$150,000		
HEATED/LIVING AREA (sf) (new square footage)	1,227	X .60/sf (single family) = X .75/sf (all others) =	\$736.20
NON-HEATED AREA (sf) (new square footage)	1,200	X .30/sf (single family) = X .35/sf (all others) =	\$360.00
REMODEL/REPAIR/ALTERATION (no additional square footage)	\$	X \$10 per \$1,000 of cost =	\$
		Pool = \$125	\$
		Zoning Permit Fee = \$50	\$50.00
		Plan Review Fee = \$150 or \$100	\$
		Minimum Permit Fee = \$100	\$
		Homeowner's Recovery Fund \$10	\$10.00
		<b>TOTAL FEE</b>	<b>\$1,156.20</b>

*Jeff Ballard*  
Applicant - Owner/Contractor (Please print and sign name)

*10/7/19*  
Date Issued

*Buddy Sheehan*  
Building/Code/Zoning Official

*10-2-19*  
Date Approved



**TOWN OF SOUTHERN SHORES**  
**PLANNING AND CODE ENFORCEMENT**  
 5375 N Virginia Dare Trail, Southern Shores, NC 27949  
 (252) 261-2394 Ext 3 - Office (252) 255-0876 - Fax  
[www.southernshores-nc.gov](http://www.southernshores-nc.gov)

**RESIDENTIAL**  
**BUILDING/FLOODPLAIN DEVELOPMENT PERMIT**  
**BUILDING PERMIT #10701**

**LOCATION: 157 Bayberry Trail**  
  
 Parcel: 022032000 PIN: 986818309049  
 District: 20- SOUTHERN SHORES  
 Subdivision: SO/SH BLKS 140, 140A,150,150A  
 LotBlkSect: LOT: 7 BLK: 150A SEC:

**SALEMI, MICHAEL J EUX**  
**SALEMI, ERIN R EUX**  
 2633 LAKE ALBEMARLE RD  
 CHARLOTTESVILLE VA 22901

PHONE #: 904-608-2343      CELL #:

**BUSINESS NAME: Todd Coyle Construction, LLC**  
**CONTRACTOR'S NAME: Todd Coyle**  
**ADDRESS: PO Box 1094**  
**CITY, STATE, ZIP: Kitty Hawk, NC 27949**  
**OFFICE#: 252-261-9728**  
**CELL#: 252-473-7021 (Robert Mooty)**  
**FAX#: 252-261-3337**  
**EMAIL: [robertmootyz@yahoo.com](mailto:robertmootyz@yahoo.com)**

**NC G.C. LICENSED CONTRACTOR:  X YES  NO**  
**NC G.C. LICENSE NUMBER: 60830**  
**LIMITATION: Unlimited**  
**CLASSIFICATION: Building**  
**QUALIFIER: Todd H Coyle**

**LIEN AGENT: n/a**

**DESCRIPTION OF WORK – (Any deviation from the Building Plan or Site Plan requires prior approval): Construction of a new 12 ft x 12 ft boat lift**

**SPECIAL CONDITIONS -**

<b>TYPE OF CONSTRUCTION:</b> Accessory	<b>TYPE OF FOUNDATION:</b> Piling	<b>PERMIT TYPE:</b> Residential
	HEAT:	<b>RESIDENCE/2<sup>nd</sup> HOME/RENTAL:</b> 2 <sup>nd</sup> Home
<b>TOTAL HEATED/LIVING AREAS (SF):</b>	A/C:	<b>PROPERTY USE:</b> Single Family Dwelling
<b>TOTAL NON-HEATED AREAS (SF):</b>	INTERIOR WALLS:	<b>ZONING DISTRICT:</b> RS-1
	EXTERIOR WALLS:	<b>ZONING PERMIT #:</b> 2019-83
<b>NUMBER OF STORIES:</b>	FIREPLACE:	<b>DATE APPROVED:</b> 10/8/2019
<b>BEDROOMS:</b>	ROOF:	
<b>SEPTIC CAPACITY # OF PERSONS:</b>	INSULATION:	<b>CAMA PERMIT #:</b> General #75611A
<b>BATHS: ½ BATHS:</b>	ELEVATOR (SF):	<b>DATE ISSUED:</b> 10/2/2019
<b>STORAGE ENCLOSURE:</b>	DECKS (SF):	<b>SEPTIC PERMIT #:</b>
<b>POOL:</b>	PORCHES (SF):	<b>DATE ISSUED:</b>
<b>FLOOD ZONE:</b> AE	WINDOWS MAKE:	
<b>BASE FLOOD ELEVATION:</b> 7FT PLUS 2FT= 9FT	TYPE:	

**\*\*\*The owner and builder are responsible for the following: All work done shall comply with the State Building Code and all other applicable State and local laws. The applicant certifies that the information on this permit is correct; that he/she is the owner or duly authorized agent of owner; that all construction shall be as shown on the submitted plans and specifications; the he/she understands this permit is valid for 180 days to begin construction and may be revoked for failure to comply with applicable regulations and laws.**

<b>TOTAL CONSTRUCTION COST</b>	\$15,000		
<b>HEATED/LIVING AREA (sf)</b> (new square footage)		X .60/sf (single family) =	\$
		X .75/sf (all others) =	
<b>NON-HEATED AREA (sf)</b> (new square footage)		X .30/sf (single family) =	\$
		X .35/sf (all others) =	
<b>REMODEL/REPAIR/ALTERATION</b> (no additional square footage)	\$	X \$10 per \$1,000 of cost =	\$
		Pool = \$125	\$
		Zoning Permit Fee = \$50	\$50.00
		Plan Review Fee = \$150 or \$100	\$pd
		Minimum Permit Fee = \$100	\$100.00
		Homeowner's Recovery Fund\$10	\$
		<b>TOTAL FEE</b>	<b>\$150.00</b>

*Robert Mooty*  
 Applicant - Owner/Contractor (Please print and sign name)      10/8/19  
 Date Issued

*Burke Speltz*  
 Building/Code/Zoning Official      *W.D.S.*  
 Date Approved

**TOWN OF SOUTHERN SHORES**

5375 N Virginia Dare Trl  
Southern Shores NC  
27949

(252) 261-2394 tel  
(252) 255-0876 fax

www.southernshores-nc.gov



**SUB-CONTRACTOR SIGN OFF AND/OR PERMIT**

Date 9/30/19

PROJECT ADDRESS 320 Hillcrest Dr., Southern Shores

Owner Southern Shores Civic Association, Inc.

Mailing Address 5377 N. Virginia Dare Trl

City, State, Zip Kitty Hawk, NC 27949

Phone Rod MCAughey - 609.558.8062

Permit Number

Fee \$

10702

EXISTING Building Permit Number \_\_\_\_\_ NO FEE (if work is associated with a Building Permit) \_\_\_\_\_

**ELECTRICAL** = Licensee Name James Hazdra NC License/Classification Intermediate

Company Name His & Her Electric, LLC

Address 3227 Caratoke Hwy.

City State & zip Cumtuck, NC 27929

Phone 252.455.3027

Estimated Project Cost 850.00

**Description of Work:** Trench and install electrical comonents for outlets and ceiling fan in gazebo by tennis courts

**PLUMBING** = Licensee Name \_\_\_\_\_ NC License/Classification \_\_\_\_\_

Company Name \_\_\_\_\_

Address \_\_\_\_\_

City State & zip \_\_\_\_\_

Phone \_\_\_\_\_

Estimated Project Cost \_\_\_\_\_

**Description of Work:** \_\_\_\_\_

**GAS** = Licensee Name \_\_\_\_\_ NC License/Classification \_\_\_\_\_

Company Name \_\_\_\_\_

Address \_\_\_\_\_

City State & zip \_\_\_\_\_

Phone \_\_\_\_\_

Estimated Project Cost \_\_\_\_\_

**Description of Work:** \_\_\_\_\_

**MECHANICAL** = Licensee Name \_\_\_\_\_ NC License/Classification \_\_\_\_\_

Company Name \_\_\_\_\_

Address \_\_\_\_\_

City State & zip \_\_\_\_\_

Phone \_\_\_\_\_

Estimated Project Cost \_\_\_\_\_

**Description of Work:** \_\_\_\_\_

**FIRE SPRINKLER** = Licensee Name \_\_\_\_\_ NC License/Classification \_\_\_\_\_

Company Name \_\_\_\_\_

Address \_\_\_\_\_

City State & zip \_\_\_\_\_

Phone \_\_\_\_\_

Estimated Project Cost \_\_\_\_\_

**Description of Work:** \_\_\_\_\_

I hereby certify that all information in this application is correct and all work will comply with the State Building Code and all other local laws and ordinances and regulations. The Inspection Department will be notified of any changes in the approved plans and specification for the project permitted herein.

[Signature]  
Signature of Licensee

9/30/19

Date

[Signature] 10-9-19  
Signature of Permit Official Date

[Signature]



**TOWN OF SOUTHERN SHORES  
PLANNING AND CODE ENFORCEMENT**  
5375 N Virginia Dare Trail, Southern Shores, NC 27949  
(252) 261-2394 Ext 3 - Office (252) 255-0876 - Fax  
[www.southernshores-nc.gov](http://www.southernshores-nc.gov)

**RESIDENTIAL  
BUILDING/FLOODPLAIN DEVELOPMENT PERMIT  
BUILDING PERMIT #10697**

Location: 45 Honeysuckle Lane  
Parcel: 022228000 PIN: 986818404082  
District: 20- SOUTHERN SHORES  
Subdivision: SO/SH SOUNDSTIDE BLK 160  
LotBlkSect: LOT: 19 BLK: 160 SEC:

WEIER, WILLIAM K EUX  
WEIER, DIXIE G EUX  
45 HONEYSUCKLE LN  
SOUTHERN SHORES NC 27949

PHONE #: 810-219-5601

CELL #:

BUSINESS NAME: Daniel S. Osman  
CONTRACTOR'S NAME: Dan Osman  
ADDRESS: PO Box 7403  
CITY, STATE, ZIP: Kill Devil Hills, NC 27948  
OFFICE#:  
CELL#: 252-202-4599  
FAX#:  
EMAIL: [osmandanny@gmail.com](mailto:osmandanny@gmail.com)

NC G.C. LICENSED CONTRACTOR:  YES  NO  
NC G.C. LICENSE NUMBER: 76259  
LIMITATION: Limited  
CLASSIFICATION: Building  
QUALIFIER: Daniel Stephen Osman

LIEN AGENT: n/a

DESCRIPTION OF WORK – (Any deviation from the Building Plan or Site Plan requires prior approval): New accessory structures = Pool, pool deck & barrier fence / Garage 21 x 28 w/ 1<sup>st</sup> floor heated living space and 10 x 28 covered porch

SPECIAL CONDITIONS -

TYPE OF CONSTRUCTION: Accessory	FOUNDATION: Slab	ZONING DISTRICT: RS-1
	HEAT: Heat Pump	ZONING PERMIT #: 2019-82
BUILDING USE: Single Family Dwelling	A/C: Heat Pump	DATE APPROVED: 10/8/2019
TOTAL HEATED/LIVING AREAS (SF): 312	INTERIOR WALLS: Drywall	PERMITTED/CONDITIONAL USE: Single Family Dwelling
TOTAL NON-HEATED AREAS (SF): 809	EXTERIOR WALLS: Cedar Shake	RESIDENTIAL TYPE: Residence
NUMBER OF STORIES: garage = 2	FIREPLACE: n/a	
BEDROOMS: garage = 1	ROOF: Asphalt	SEPTIC PERMIT #: 29041
SEPTIC CAPACITY # OF PERSONS: 4	INSULATION: Batt	DATE ISSUED: 9/30/2019
BATHS: 1 ½ BATHS:	ELEVATOR (SF): n/a	
DETACHED/ATTACHED GARAGE(SF): 21 x 28	DECKS (SF): n/a	
POOL(SF): 971	PORCHES (SF): 280	
FLOOD ZONE: Shaded X	WINDOWS MAKE: Viwinco	
BASE FLOOD ELEVATION: FT PLUS 2FT=	TYPE: double hung	

**\*\*\*The owner and builder are responsible for the following: All work done shall comply with the State Building Code and all other applicable State and local laws. The applicant certifies that the information on this permit is correct; that he/she is the owner or duly authorized agent of owner; that all construction shall be as shown on the submitted plans and specifications; the he/she understands this permit is valid for 180 days to begin construction and may be revoked for failure to comply with applicable regulations and laws.**

TOTAL CONSTRUCTION COST	\$120,000		
HEATED/LIVING AREA (sf) (new square footage)	312	X .60/sf (single family) = X .75/sf (all others) =	\$187.20
NON-HEATED AREA (sf) (new square footage)	809	X .30/sf (single family) = X .35/sf (all others) =	\$242.70
REMODEL/REPAIR/ALTERATION (no additional square footage)	\$	X \$10 per \$1,000 of cost =	\$
		Pool = \$125	\$125.00
		Zoning Permit Fee = \$50	\$50.00
		Plan Review Fee = \$150 or \$100	\$
		Minimum Permit Fee = \$100	\$
		Homeowner's Recovery Fund \$10	\$10.00
		<b>TOTAL FEE</b>	<b>\$614.90</b>

Applicant - Owner/Contractor

(Please print and sign name)

Date Issued

Building/Code/Zoning Official

Date Approved

*[Signature]*

Dan Osman

10-9-19

*[Signature]*

10-8-19

*[Signature]*





**TOWN OF SOUTHERN SHORES  
PLANNING AND CODE ENFORCEMENT**  
5375 N Virginia Dare Trail, Southern Shores, NC 27949  
(252) 261-2394 Ext 3 - Office (252) 255-0876 - Fax  
[www.southernshores-nc.gov](http://www.southernshores-nc.gov)

**RESIDENTIAL  
BUILDING/FLOODPLAIN DEVELOPMENT PERMIT  
BUILDING PERMIT #10698**

Location: 217 WAX MYRTLE TRL  
Parcel: 021812000  
PIN: 986818418842  
District: [20] SOUTHERN SHORES  
Subdiv: [S521] SO/SH BEACH BLK 74  
Lot-Block-Sect: LOT: 22 BLK: 74 SEC:

Owner: PERNELL, WENDELL  
Owner: PERNELL, ELIZABETH  
Address: 1201 WILLOW CREEK CT  
CHESAPEAKE VA 23321

PHONE #: 7587-375-1590

CELL #:

BUSINESS NAME: Sandmark Custom Homes Inc  
CONTRACTOR'S NAME: Mark Martin  
ADDRESS: 191 Wax Myrtle Trl  
CITY, STATE, ZIP: Southern Shores, NC 27949  
OFFICE#: 252-261-1123  
CELL#: 252-202-3808  
FAX#: 252-261-5879  
EMAIL: mark@outherbanksbuilders.com

NC G.C. LICENSED CONTRACTOR:  YES  NO  
NC G.C. LICENSE NUMBER: 75383  
LIMITATION: Unlimited  
CLASSIFICATION: Residential  
QUALIFIER: Mark Martin

LIEN AGENT: Stewart Title Guaranty Company Entry # 1121051  
19 W Hargett St., Suite 507 / Raleigh, NC 27601

DESCRIPTION OF WORK – (Any deviation from the Building Plan or Site Plan requires prior approval): New addition to include = ground floor unheated space, 1<sup>st</sup> floor heated and install elevator within existing shaft (1 existing bedroom converting to office) and

construction of 18 lf x 4ft H retaining wall

TYPE OF CONSTRUCTION: Addition / <i>Remodel</i>	FOUNDATION: Piling	ZONING DISTRICT: RS-1
BUILDING USE: Single Family Dwelling	HEAT: electric	ZONING PERMIT #: 2019-81
TOTAL HEATED/LIVING AREAS (SF): 736 new	A/C: electric	DATE APPROVED: 10/8/2019
TOTAL NON-HEATED AREAS (SF): 506 new	INTERIOR WALLS: Drywall	PERMITTED/CONDITIONAL USE: Single Family Dwelling
NUMBER OF STORIES: 2	EXTERIOR WALLS: Cement Board	RESIDENTIAL TYPE: 2 <sup>nd</sup> Home
BEDROOMS: no increase – to remain 5	FIREPLACE: n/a	
SEPTIC CAPACITY # OF PERSONS: 10	ROOF: Asphalt	SEPTIC PERMIT #: 29036
BATHS: 1 ½ BATHS:	INSULATION: Batt	DATE ISSUED: 9/27/2019
ATTACHED GARAGE(SF): 28x14	ELEVATOR (SF): 5x5	
STORAGE ENCLOSURE(SF): POOL(SF):	DECKS (SF):	
FLOOD ZONE: Shaded X	PORCHES (SF):	
BASE FLOOD ELEVATION: FT PLUS 2FT=	WINDOWS MAKE: Viwinco	
	TYPE: Impact glass	

\*\*\*The owner and builder are responsible for the following: All work done shall comply with the State Building Code and all other applicable State and local laws. The applicant certifies that the information on this permit is correct; that he/she is the owner or duly authorized agent of owner; that all construction shall be as shown on the submitted plans and specifications; the he/she understands this permit is valid for 180 days to begin construction and may be revoked for failure to comply with applicable regulations and laws.

TOTAL CONSTRUCTION COST	\$228,500		
HEATED/LIVING AREA (sf) (new square footage)	736	X .60/sf (single family) =	\$441.60
		X .75/sf (all others) =	
NON-HEATED AREA (sf) (new square footage)	506	X .30/sf (single family) =	\$151.80
		X .35/sf (all others) =	
REMODEL/REPAIR/ALTERATION (no additional square footage)	\$25,000	X \$10 per \$1,000 of cost =	\$250.00
		Pool = \$125	\$
		Zoning Permit Fee = \$50	\$50.00
		Plan Review Fee = \$150 or \$100	\$
		Minimum Permit Fee = \$100	\$
		Homeowner's Recovery Fund \$10	\$10.00
		<b>TOTAL FEE</b>	<b>\$903.40</b>

*Sandra G Martin Sandra E. Martin 10/9/2019*

Applicant - Owner/Contractor (Please print and sign name)

Date Issued

Building/Code/Zoning Official

Date Approved

*Buddy Shelton*  
*WJAS*

*10-9-19*



**TOWN OF SOUTHERN SHORES**

5375 N Virginia Dare Trl  
Southern Shores NC  
27949

(252) 261-2394 tel  
(252) 255-0876 fax

www.southernshores-nc.gov

**SUB-CONTRACTOR SIGN OFF AND/OR PERMIT**

Date 10/1/19

PROJECT ADDRESS 120 Otter Slide Lane

Owner VanCuren

Mailing Address 120 Otter slide Ln

City, State, Zip Southern Shores NC 27949

Phone 252-261-9315

Permit Number 106095  
Fee \$ 100

EXISTING Building Permit Number \_\_\_\_\_ NO FEE (if work is associated with a Building Permit) \_\_\_\_\_

**ELECTRICAL** = Licensee Name Jimmy Weaver NC License/Classification 24744  
Company Name North Beach Services  
Address P.O. Box 181 Phone 252-491-2878  
City State & zip Kitty Hawk nc Estimated Project Cost 100  
Description of Work: All necessary electrical hookups

**PLUMBING** = Licensee Name \_\_\_\_\_ NC License/Classification \_\_\_\_\_  
Company Name \_\_\_\_\_  
Address \_\_\_\_\_ Phone \_\_\_\_\_  
City State & zip \_\_\_\_\_ Estimated Project Cost \_\_\_\_\_  
Description of Work: \_\_\_\_\_

**GAS** = Licensee Name \_\_\_\_\_ NC License/Classification \_\_\_\_\_  
Company Name \_\_\_\_\_  
Address \_\_\_\_\_ Phone \_\_\_\_\_  
City State & zip \_\_\_\_\_ Estimated Project Cost \_\_\_\_\_  
Description of Work: \_\_\_\_\_

**MECHANICAL** = Licensee Name Suzanne Rich NC License/Classification 33023  
Company Name North Beach Services  
Address P.O. Box 181 Phone 252-491-2878  
City State & zip Kitty Hawk nc Estimated Project Cost 7000.00  
Description of Work: Replace existing heat pump and air handler with matching 3 ton heat pump

**FIRE SPRINKLER** = Licensee Name \_\_\_\_\_ NC License/Classification \_\_\_\_\_  
Company Name \_\_\_\_\_  
Address \_\_\_\_\_ Phone \_\_\_\_\_  
City State & zip \_\_\_\_\_ Estimated Project Cost \_\_\_\_\_  
Description of Work: \_\_\_\_\_

I hereby certify that all information in this application is correct and all work will comply with the State Building Code and all other local laws and ordinances and regulations. The Inspection Department will be notified of any changes in the approved plans and specification for the project permitted herein.

Jimmy Weaver  
Signature of Licensee

10/1/19  
Date

Brenda Skelton  
Signature of Permit Official

10-9-19  
Date

JLS

**TOWN OF SOUTHERN SHORES**  
 5375 N Virginia Dare Trl  
 Southern Shores, NC 27949  
 (252) 261-2394 tel  
 (252) 255-0876 fax  
 www.southernshores-nc.gov



**SUBCONTRACTOR SIGN OFF AND/OR PERMIT**

Date 10/09/2019  
 PROJECT ADDRESS 200 WAX MYRTLE TRAIL  
 Owner ZACH STROUD  
 Mailing Address 200 WAX MYRTLE TRAIL  
 City, State, Zip SOUTHERN SHORES, NC 27949  
 Phone \_\_\_\_\_

Permit Number 10704  
 Fee \$ 100

EXISTING Building Permit Number \_\_\_\_\_ NO FEE \_\_\_\_\_

**ELECTRICAL** = Licensee Name FREDERICK MARKLIN NC License/Classification 22222-L / LTD  
 Company Name R A HOY HEATING & A/C. INC  
 Address P O BOX 179 Phone (252) 261-2008  
 City State & zip KITTY HAWK, NC 27949 Estimated Project Cost INCL in MECH  
**Description of Work:** CONNECTION OF MECH EQUIP BELOW

**PLUMBING** = Licensee Name \_\_\_\_\_ NC License/Classification \_\_\_\_\_  
 Company Name \_\_\_\_\_  
 Address \_\_\_\_\_ Phone \_\_\_\_\_  
 City State & zip \_\_\_\_\_ Estimated Project Cost \_\_\_\_\_  
**Description of Work:** \_\_\_\_\_

**GAS** = Licensee Name \_\_\_\_\_ NC License/Classification \_\_\_\_\_  
 Company Name \_\_\_\_\_  
 Address \_\_\_\_\_ Phone \_\_\_\_\_  
 City State & zip \_\_\_\_\_ Estimated Project Cost \_\_\_\_\_  
**Description of Work:** \_\_\_\_\_

**MECHANICAL** = Licensee Name DOUGLAS WAKELEY NC License/Classification 13056 / H 2 & 3 P-1  
 Company Name R A HOY HEATING & A/C. INC  
 Address P O BOX 179 Phone (252) 261-2008  
 City State & zip KITTY HAWK, NC 27949 Estimated Project Cost 7083  
**Description of Work:** C/O 3.5 TON 16 SEER TRANE SYSTEM GROUND LEVEL WITH T6 THERMOSTAT

I hereby certify that all information in this application is correct and all work will comply with the State Building Code and all other local laws and ordinances and regulations. The Inspection Department will be notified of any changes in the approved plans and specification for the project permitted herein.

Douglas Wakeley 10/09/2019  
 Signature of Licensee Date  
Frederick Marklin (ELEC)

Brian S. Otonari 10-10-19  
 Signature of Permit Official Date  
WJNS



**TOWN OF SOUTHERN SHORES  
PLANNING AND CODE ENFORCEMENT**  
5375 N Virginia Dare Trail, Southern Shores, NC 27949  
(252) 261-2394 Ext 3 - Office (252) 255-0876 - Fax  
[www.southernshores-nc.gov](http://www.southernshores-nc.gov)

**RESIDENTIAL  
BUILDING/FLOODPLAIN DEVELOPMENT PERMIT  
BUILDING PERMIT #10692**

**Location: 284 N Dogwood Trail  
Parcel: 013338000 PIN: 986813145617  
District: 20- SOUTHERN SHORES  
Subdivision: SO/SH SOUND SIDE BLK 109  
LotBlkSect: LOT: 3 BLK: 109 SEC:**

**KOCH, RICHARD C TTEE TRE  
KOCH, JANE C TTEE TRE  
284 N DOGWOOD TRL  
SOUTHERN SHORES NC 27949**

PHONE #: 252-261-1416

CELL #:

**BUSINESS NAME: Millstone Marine Construction, Inc  
CONTRACTOR'S NAME: Kevin Linebarger  
ADDRESS: 7000 Maritime Woods Dr  
CITY, STATE, ZIP: Manteo, NC 27954  
OFFICE#: 252-305-8842  
CELL#: 252-202-2678  
FAX#:  
EMAIL: [millstonemarine@gmail.com](mailto:millstonemarine@gmail.com)**

NC G.C. LICENSED CONTRACTOR:  YES  NO  
NC G.C. LICENSE NUMBER: 78077  
LIMITATION: Limited  
CLASSIFICATION: Building  
QUALIFIER: Kevin Linebarger

LIEN AGENT: n/a

**DESCRIPTION OF WORK – (Any deviation from the Building Plan or Site Plan requires prior approval): New 6ft x 50lf dock, 8ft x 10ft platform, 4ft x 16ft platform and 100lf bulkhead**

SPECIAL CONDITIONS -

TYPE OF CONSTRUCTION: dock, platform and bulkhead	FOUNDATION: HEAT: A/C:	ZONING DISTRICT: RS-1 ZONING PERMIT #: 2019-79 DATE APPROVED: 10/3/2019
BUILDING USE: other	INTERIOR WALLS:	PERMITTED/CONDITIONAL USE: Single Family Dwelling
TOTAL HEATED/LIVING AREAS (SF):	EXTERIOR WALLS:	RESIDENTIAL TYPE: Residence
TOTAL NON-HEATED AREAS (SF):	FIREPLACE:	
NUMBER OF STORIES:	ROOF:	CAMA PERMIT #: General 73845A
BEDROOMS:	INSULATION:	DATE ISSUED: 9/26/2019
SEPTIC CAPACITY # OF PERSONS:	ELEVATOR (SF):	
BATHS: ½ BATHS:	DECKS (SF):	
DETACHED/ATTACHED GARAGE(SF):	PORCHES (SF):	
STORAGE ENCLOSURE(SF): POOL(SF):	WINDOWS MAKE:	
FLOOD ZONE: AE	TYPE:	
BASE FLOOD ELEVATION: 7FT PLUS 2FT= 9FT		

**\*\*\*The owner and builder are responsible for the following: All work done shall comply with the State Building Code and all other applicable State and local laws. The applicant certifies that the information on this permit is correct; that he/she is the owner or duly authorized agent of owner; that all construction shall be as shown on the submitted plans and specifications; the he/she understands this permit is valid for 180 days to begin construction and may be revoked for failure to comply with applicable regulations and laws.**

TOTAL CONSTRUCTION COST	\$33,100		
HEATED/LIVING AREA (sf)		X .60/sf (single family) =	\$
(new square footage)		X .75/sf (all others) =	
NON-HEATED AREA (sf)		X .30/sf (single family) =	\$
(new square footage)		X .35/sf (all others) =	
REMODEL/REPAIR/ALTERATION (no additional square footage)	\$	X \$10 per \$1,000 of cost =	\$
		Pool = \$125	\$
		Zoning Permit Fee = \$50	\$50.00
		Plan Review Fee = \$150 or \$100	\$
		Minimum Permit Fee = \$100	\$100.00
		Homeowner's Recovery Fund \$10	\$
		<b>TOTAL FEE</b>	<b>\$150.00</b>

Applicant - Owner/Contractor

(Please print and sign name)

Date Issued

Building/Code/Zoning Official

Date Approved

*[Handwritten signatures and dates]*  
 Applicant: *[Signature]* Date Issued: *10-10-19*  
 Building/Code/Zoning Official: *[Signature]* Date Approved: *10-3-19*



TOWN OF SOUTHERN SHORES  
PLANNING AND CODE  
ENFORCEMENT  
5375 N Virginia Dare Trl  
Southern Shores NC 27949  
(252) 261-2394 ext 4 tel  
(252) 255-0876 fax  
[www.southernshores-nc.gov](http://www.southernshores-nc.gov)



**SUB-CONTRACTOR SIGN OFF AND/OR PERMIT**

Date 10-10-19

PROJECT ADDRESS 179 Clam Shell Tr.

Owner William Hoffert  
Mailing Address 179 Clam Shell Tr.  
City, State, Zip Southern Shores NC  
Phone \_\_\_\_\_

Permit Number 10705  
Fee \$ 100

EXISTING Building Permit Number \_\_\_\_\_ NO FEE (if work is associated with a Building Permit) \_\_\_\_\_

**ELECTRICAL** = Licensee Name Nathan Owens NC License/Classification 33602  
Company Name Jesse N. Owens Electric Corp  
Address 123 Jesse Owens Dr Phone 473-8923  
City State & zip Harbinger, NC 27941 Estimated Project Cost \_\_\_\_\_  
Description of Work: electrical associated w/ replacement

**PLUMBING** = Licensee Name \_\_\_\_\_ NC License/Classification \_\_\_\_\_  
Company Name \_\_\_\_\_  
Address \_\_\_\_\_ Phone \_\_\_\_\_  
City State & zip \_\_\_\_\_ Estimated Project Cost \_\_\_\_\_  
Description of Work: \_\_\_\_\_

**GAS** = Licensee Name \_\_\_\_\_ NC License/Classification \_\_\_\_\_  
Company Name \_\_\_\_\_  
Address \_\_\_\_\_ Phone \_\_\_\_\_  
City State & zip \_\_\_\_\_ Estimated Project Cost \_\_\_\_\_  
Description of Work: \_\_\_\_\_

**MECHANICAL** = Licensee Name Joseph Simpson NC License/Classification 19091 Group 2 & 3  
Company Name All Seasons Heating & Cooling  
Address 200 Fox Knoll Dr Phone 491-9232  
City State & zip Point Harbor, NC Estimated Project Cost 3530.00  
Description of Work: Replace west bedroom system w/ a 9,000 BTU mini split heat pump & ductless air handler

**FIRE SPRINKLER** = Licensee Name \_\_\_\_\_ NC License/Classification \_\_\_\_\_  
Company Name \_\_\_\_\_  
Address \_\_\_\_\_ Phone \_\_\_\_\_  
City State & zip \_\_\_\_\_ Estimated Project Cost \_\_\_\_\_  
Description of Work: \_\_\_\_\_

I hereby certify that all information in this application is correct and all work will comply with the State Building Code and all other local laws and ordinances and regulations. The Inspection Department will be notified of any changes in the approved plans and specification for the project permitted herein.

Joe Simpson 10-10-19  
Signature of Licensee Date

Buddy Sheffer 10-10-19  
Signature of Permit Official Date  
DUINS



**TOWN OF SOUTHERN SHORES**  
 5375 N Virginia Dare Trl  
 Southern Shores, NC 27949  
 (252) 261-2394 tel  
 (252) 255-0876 fax  
[www.southernshores-nc.gov](http://www.southernshores-nc.gov)

**SUBCONTRACTOR SIGN OFF AND/OR PERMIT**

Date 10/11/2019  
 PROJECT ADDRESS 111 POTESKEET TRAIL  
 Owner TONI BLANCHARD  
 Mailing Address 111 POTESKEET TRAIL  
 City, State, Zip SOUTHERN SHORES, NC 27949  
 Phone 252-261-2755

Permit Number 10707  
 Fee \$ 100

EXISTING Building Permit Number \_\_\_\_\_ NO FEE \_\_\_\_\_

**ELECTRICAL** = Licensee Name FREDERICK MARKLIN NC License/Classification 22222-L / LTD  
 Company Name R A HOY HEATING & A/C, INC  
 Address P O BOX 179 Phone (252) 261-2008  
 City State & zip KITTY HAWK, NC 27949 Estimated Project Cost INCL in MECH  
**Description of Work:** CONNECTION OF MECH EQUIP BELOW

**PLUMBING** = Licensee Name \_\_\_\_\_ NC License/Classification \_\_\_\_\_  
 Company Name \_\_\_\_\_  
 Address \_\_\_\_\_ Phone \_\_\_\_\_  
 City State & zip \_\_\_\_\_ Estimated Project Cost \_\_\_\_\_  
**Description of Work:** \_\_\_\_\_

**GAS** = Licensee Name \_\_\_\_\_ NC License/Classification \_\_\_\_\_  
 Company Name \_\_\_\_\_  
 Address \_\_\_\_\_ Phone \_\_\_\_\_  
 City State & zip \_\_\_\_\_ Estimated Project Cost \_\_\_\_\_  
**Description of Work:** \_\_\_\_\_

**MECHANICAL** = Licensee Name DOUGLAS WAKELEY NC License/Classification 13056 / H 2 & 3 P-1  
 Company Name R A HOY HEATING & A/C, INC  
 Address P O BOX 179 Phone (252) 261-2008  
 City State & zip KITTY HAWK, NC 27949 Estimated Project Cost 4500  
**Description of Work:** REPLACE ALL DUCT WORK UNDER HOUSE AND REINSTALL AIR HANDLER

I hereby certify that all information in this application is correct and all work will comply with the State Building Code and all other local laws and ordinances and regulations. The Inspection Department will be notified of any changes in the approved plans and specification for the project permitted herein.

Douglas Wakeley 10/11/2019  
 Signature of Licensee Date  
Douglas Wakeley (ELEC)

Bonny Stewart 10-11-19  
 Signature of Permit Official Date  
CHYNS



TOWN OF SOUTHERN SHORES  
PLANNING AND CODE  
ENFORCEMENT

5375 N Virginia Dare Trl  
Southern Shores NC 27949  
(252) 261-2394 ext 4 tel  
(252) 255-0876 fax  
www.southernshores-nc.gov



**SUB-CONTRACTOR SIGN OFF AND/OR PERMIT**

Date 10/15/2019

PROJECT ADDRESS 71 Ocean Blvd

Owner Anna Aldridge  
Mailing Address PO Box 75  
City, State, Zip Bridgeport, WV 26330  
Phone 304-842-1046

Permit Number 10708  
Fee \$ 100

EXISTING Building Permit Number \_\_\_\_\_ NO FEE (if work is associated with a Building Permit) \_\_\_\_\_

**ELECTRICAL** = Licensee Name Gilbert Anderson, Jr. NC License/Classification 31438

Company Name \_\_\_\_\_

Address PO Box 396, Kitty Hawk, NC 27949 Phone 252-619-3105

City State & zip Kitty Hawk, NC 27949 Estimated Project Cost \_\_\_\_\_

**Description of Work:** Replacing existing HVAC system w/ 2.0 Ton Bryant Coastal Heat Pump w/ matching Air Handler

**PLUMBING** = Licensee Name \_\_\_\_\_ NC License/Classification \_\_\_\_\_

Company Name \_\_\_\_\_

Address \_\_\_\_\_ Phone \_\_\_\_\_

City State & zip \_\_\_\_\_ Estimated Project Cost \_\_\_\_\_

**Description of Work:** \_\_\_\_\_

**GAS** = Licensee Name \_\_\_\_\_ NC License/Classification \_\_\_\_\_

Company Name \_\_\_\_\_

Address \_\_\_\_\_ Phone \_\_\_\_\_

City State & zip \_\_\_\_\_ Estimated Project Cost \_\_\_\_\_

**Description of Work:** \_\_\_\_\_

**MECHANICAL** = Licensee Name Gilbert Anderson, Jr. NC License/Classification 30003 / H-3

Company Name Anderson Heating & Cooling, LLC

Address PO Box 396 Phone 252-619-3105

City State & zip Kitty Hawk, NC 27949 Estimated Project Cost \$5,865.00

**Description of Work:** Replacing existing HVAC system w/ 2.0 Ton Bryant Coastal Heat Pump w/ matching Air Handler

**FIRE SPRINKLER** = Licensee Name \_\_\_\_\_ NC License/Classification \_\_\_\_\_

Company Name \_\_\_\_\_

Address \_\_\_\_\_ Phone \_\_\_\_\_

City State & zip \_\_\_\_\_ Estimated Project Cost \_\_\_\_\_

**Description of Work:** \_\_\_\_\_

I hereby certify that all information in this application is correct and all work will comply with the State Building Code and all other local laws and ordinances and regulations. The Inspection Department will be notified of any changes in the approved plans and specification for the project permitted herein.

Buddy Shelton 10-16-19  
10/15/2019  
Signature of Licensee Date

[Signature] 10/15/19  
Signature of Permit Official Date

INS Permit Official

Licensee



**TOWN OF SOUTHERN SHORES**  
 5375 N Virginia Dare Trl  
 Southern Shores, NC 27949  
 (252) 261-2394 tel  
 (252) 255-0876 fax  
 www.southernshores-nc.gov



**SUBCONTRACTOR SIGN OFF AND/OR PERMIT**

Date 10/15/2019  
 PROJECT ADDRESS 37 DUCK WOODS DRIVE  
 Owner JAMES MEHFOUND  
 Mailing Address 37 DUCK WOODS DRIVE  
 City, State, Zip KITTY HAWK, NC 27949  
 Phone \_\_\_\_\_

Permit Number 10709  
 Fee \$ 100

EXISTING Building Permit Number \_\_\_\_\_ NO FEE \_\_\_\_\_

**ELECTRICAL** = Licensee Name FREDERICK MARKLIN NC License/Classification 22222-L / LTD  
 Company Name R A HOY HEATING & A/C, INC  
 Address P O BOX 179 Phone (252) 261-2008  
 City State & zip KITTY HAWK, NC 27949 Estimated Project Cost INCL in MECH  
 Description of Work: CONNECTION OF MECH EQUIP BELOW

**PLUMBING** = Licensee Name \_\_\_\_\_ NC License/Classification \_\_\_\_\_  
 Company Name \_\_\_\_\_  
 Address \_\_\_\_\_ Phone \_\_\_\_\_  
 City State & zip \_\_\_\_\_ Estimated Project Cost \_\_\_\_\_  
 Description of Work: \_\_\_\_\_

**GAS** = Licensee Name \_\_\_\_\_ NC License/Classification \_\_\_\_\_  
 Company Name \_\_\_\_\_  
 Address \_\_\_\_\_ Phone \_\_\_\_\_  
 City State & zip \_\_\_\_\_ Estimated Project Cost \_\_\_\_\_  
 Description of Work: \_\_\_\_\_

**MECHANICAL** = Licensee Name DOUGLAS WAKELEY NC License/Classification 13056 / H 2 & 3 P-1  
 Company Name R A HOY HEATING & A/C, INC  
 Address P O BOX 179 Phone (252) 261-2008  
 City State & zip KITTY HAWK, NC 27949 Estimated Project Cost 4632  
 Description of Work: C/O ALL THE DUCT WORK UNDER THE HOUSE

I hereby certify that all information in this application is correct and all work will comply with the State Building Code and all other local laws and ordinances and regulations. The Inspection Department will be notified of any changes in the approved plans and specification for the project permitted herein.

Douglas Wakeley 10/15/2019  
 Signature of Licensee Date  
Frederick Marklin (ELEC)

Buddy Shepton 10-16-19  
 Signature of Permit Official Date  
JUDIS



**TOWN OF SOUTHERN SHORES  
PLANNING AND CODE ENFORCEMENT**  
5375 N Virginia Dare Trail, Southern Shores, NC 27949  
(252) 261-2394 Ext 3 - Office (252) 255-0876 - Fax  
www.southernshores-nc.gov

**RESIDENTIAL  
BUILDING/FLOODPLAIN DEVELOPMENT PERMIT  
BUILDING PERMIT #10415**

**Location:** 11 Soundview Trail

**Parcel:** 022523027 PIN: 986805084107

**District:** 20- SOUTHERN SHORES

**Subdivision:** SO/SH BLK 61-A LOTS 26-44 PH 2

**LotBlkSect:** LOT: 26R BLK: 61-A SEC:

**BUTTERY, CHRISTOPHER N EUX**

**BUTTERY, ANNETTE Z EUX**

**102 WATERVIEW RD**

**SUFFOLK VA 23435**

**PHONE #:**

**CELL #:**

**BUSINESS NAME:** Mancuso Development

**CONTRACTOR'S NAME:** Bernard Mancuso

**ADDRESS:** 610 Currituck Clubhouse Dr Ste 7

**CITY, STATE, ZIP:** Corolla, NC 27927

**OFFICE#:** 252-453-8921

**CELL#:** 252-305-4663 (Jay)

**FAX#:**

**EMAIL:** jay@mancusodevelopment.com

**NC G.C. LICENSED CONTRACTOR:**  YES  NO

**NC G.C. LICENSE NUMBER:** 26166

**LIMITATION:** Unlimited

**CLASSIFICATION:** Building

**QUALIFIER:** Bernard Mancuso

**LIEN AGENT:** Chicago Title Company, LLC Entry# 995302

19 W Hargett St., Suite 507 / Raleigh, NC 27601

**DESCRIPTION OF WORK – (Any deviation from the Building Plan or Site Plan requires prior approval):** Addition = 3,185sf new heated living areas (5,953 sf combined total), 5,630 sf non heated areas (decks, storage,enclosures) and new pool-deck-fence and retaining walls - Amended 8-15-19 - add 358 sf enclosed finished storage on ground floor gl 8-19-19

**SPECIAL CONDITIONS –** Prior to start of construction on retaining walls – plans/details must be submitted to staff for review and approval

<b>TYPE OF CONSTRUCTION:</b> Addition / Accessory Pool	<b>TYPE OF FOUNDATION:</b> Piling	<b>PERMIT TYPE:</b> Residential
<b>TOTAL HEATED/LIVING AREAS (SF):</b> 3,185 prop	<b>HEAT:</b> Heat Pump	<b>RESIDENCE/2<sup>nd</sup> HOME/RENTAL:</b> Residence
<b>TOTAL NON-HEATED AREAS (SF):</b> 5630 prop	<b>A/C:</b> Heat Pump	<b>PROPERTY USE:</b> Single Family Dwelling
	<b>INTERIOR WALLS:</b> Drywall	<b>ZONING DISTRICT:</b> RS-1
	<b>EXTERIOR WALLS:</b> Cedar Shakes	<b>ZONING PERMIT #:</b> 2019-16
<b>NUMBER OF STORIES:</b> 3	<b>FIREPLACE:</b> Gas	<b>DATE APPROVED:</b> 2/28/2019
<b>BEDROOMS:</b> 4 existing / 4 proposed	<b>ROOF:</b> Asphalt	
<b>SEPTIC CAPACITY # OF PERSONS:</b> 16	<b>INSULATION:</b> Batt	<b>CAMA PERMIT #:</b> 2019-01 / General 75006A
<b>BATHS:</b> 3 ex / 5 prop ½ BATHS: 1 ex / 1 prop	<b>ELEVATOR (SF):</b> 25	<b>DATE ISSUED:</b> 2/13/2019 / 9/24/19
<b>POOL(SF):</b> 1,002 total area	<b>DECKS (SF):</b> 3,517	<b>SEPTIC PERMIT #:</b> 28469
<b>STORAGE ENCLOSURE(SF):</b> 2,113	<b>PORCHES (SF):</b> n/a	<b>DATE ISSUED:</b> 2/12/2019
<b>FLOOD ZONE:</b> Shaded X	<b>WINDOWS MAKE:</b> Pella	
<b>BASE FLOOD ELEVATION:</b> PLUS 2FT=	<b>TYPE:</b> Single Hung	

\*\*\*The owner and builder are responsible for the following: All work done shall comply with the State Building Code and all other applicable State and local laws. The applicant certifies that the information on this permit is correct; that he/she is the owner or duly authorized agent of owner; that all construction shall be as shown on the submitted plans and specifications; the he/she understands this permit is valid for 180 days to begin construction and may be revoked for failure to comply with applicable regulations and laws.

<b>TOTAL CONSTRUCTION COST</b>	\$750,000	+ \$23,000 = \$773,000	
<b>HEATED/LIVING AREA (sf)</b> (new square footage)	3,185	X .60/sf (single family) =	\$1,911.00
<b>NON-HEATED AREA (sf)</b> (new square footage)	5,630	X .75/sf (all others) =	
<b>REMODEL/REPAIR/ALTERATION</b> (no additional square footage)	\$	X \$10 per \$1,000 of cost =	\$
<b>Pool</b>		= \$125	\$125.00
<b>Zoning Permit Fee</b>		= \$50	\$50.00
<b>Plan Review Fee</b>		= \$150 or \$100	\$100.00
<b>Minimum Permit Fee</b>		= \$100	\$
<b>Homeowner's Recovery Fund</b>		\$10	\$10.00
<b>TOTAL FEE</b>			<b>\$3,885.00</b>

**James Mehford** (Please print and sign name) **3-1-19** (Date Issued)

**Bunby Shepton** (Building/Code/Zoning Official) **2-28-19** (Date Approved)



**TOWN OF SOUTHERN SHORES**  
 5375 N Virginia Dare Trl  
 Southern Shores, NC 27949  
 (252) 261-2394 tel  
 (252) 255-0876 fax  
[www.southernshores-nc.gov](http://www.southernshores-nc.gov)



**SUB-CONTRACTOR SIGN OFF AND/OR PERMIT**

Date 10.17.19  
**PROJECT ADDRESS** 22 Juniper Trail  
 Owner Melody Barrett  
 Mailing Address 22 Juniper Trail  
 City, State, Zip Southern Shores, NC 27949  
 Phone \_\_\_\_\_

Permit Number 10712  
 Fee \$ 100

EXISTING Building Permit Number \_\_\_\_\_ NO FEE (if work is associated with a Building Permit) \_\_\_\_\_

**ELECTRICAL** = Licensee Name Matius Florez NC License/Classification 30701-I / Intermediate  
 Company Name Angel Advanced Technologies, LLC  
 Address 9138 Caratoke Hwy Phone 252.256.2773  
 City State & zip Point Harbor, NC 27964 Estimated Project Cost \$1,140.00  
**Description of Work:** Wire hot tub

**PLUMBING** = Licensee Name \_\_\_\_\_ NC License/Classification \_\_\_\_\_  
 Company Name \_\_\_\_\_  
 Address \_\_\_\_\_ Phone \_\_\_\_\_  
 City State & zip \_\_\_\_\_ Estimated Project Cost \_\_\_\_\_  
**Description of Work:** \_\_\_\_\_

**GAS** = Licensee Name \_\_\_\_\_ NC License/Classification \_\_\_\_\_  
 Company Name \_\_\_\_\_  
 Address \_\_\_\_\_ Phone \_\_\_\_\_  
 City State & zip \_\_\_\_\_ Estimated Project Cost \_\_\_\_\_  
**Description of Work:** \_\_\_\_\_

**MECHANICAL** = Licensee Name \_\_\_\_\_ NC License/Classification \_\_\_\_\_  
 Company Name \_\_\_\_\_  
 Address \_\_\_\_\_ Phone \_\_\_\_\_  
 City State & zip \_\_\_\_\_ Estimated Project Cost \_\_\_\_\_  
**Description of Work:** \_\_\_\_\_

I hereby certify that all information in this application is correct and all work will comply with the State Building Code and all other local laws and ordinances and regulations. The Inspection Department will be notified of any changes in the approved plans and specification for the project permitted herein.

[Signature] 10.17.19  
 Signature of Licensee Date

[Signature] 10-17-19  
 Signature of Permit Official Date

TOWN OF SOUTHERN SHORES  
 PLANNING AND CODE  
 ENFORCEMENT  
 5375 N Virginia Dare Trl  
 Southern Shores NC 27949  
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 (252) 255-0876 fax  
 www.southernshores-nc.gov



**SUB-CONTRACTOR SIGN OFF AND/OR PERMIT**

Date 10/16/19  
 PROJECT ADDRESS 41 Porpoise Pointe <sup>Run</sup>  
 Owner Frank Shesser  
 Mailing Address 1441 Goldenborough Dr  
 City, State, Zip Wilmington NC 28113  
 Phone 804-350-7887

Permit Number 10713  
 Fee \$ 100

EXISTING Building Permit Number \_\_\_\_\_ NO FEE (if work is associated with a Building Permit) \_\_\_\_\_

**ELECTRICAL** = Licensee Name \_\_\_\_\_ NC License/Classification \_\_\_\_\_  
 Company Name \_\_\_\_\_  
 Address \_\_\_\_\_ Phone \_\_\_\_\_  
 City State & zip \_\_\_\_\_ Estimated Project Cost \_\_\_\_\_  
**Description of Work:** \_\_\_\_\_

**PLUMBING** = Licensee Name Kenneth Long NC License/Classification P1 #30190  
 Company Name Absolute Plumbing  
 Address 110 Quarter Landing Ct Phone 252-489-1439  
 City State & zip Harbinger NC 27941 Estimated Project Cost \$3,200  
**Description of Work:** Run water lines to outdoor rinse area

**GAS** = Licensee Name \_\_\_\_\_ NC License/Classification \_\_\_\_\_  
 Company Name \_\_\_\_\_  
 Address \_\_\_\_\_ Phone \_\_\_\_\_  
 City State & zip \_\_\_\_\_ Estimated Project Cost \_\_\_\_\_  
**Description of Work:** \_\_\_\_\_

**MECHANICAL** = Licensee Name \_\_\_\_\_ NC License/Classification \_\_\_\_\_  
 Company Name \_\_\_\_\_  
 Address \_\_\_\_\_ Phone \_\_\_\_\_  
 City State & zip \_\_\_\_\_ Estimated Project Cost \_\_\_\_\_  
**Description of Work:** \_\_\_\_\_

**FIRE SPRINKLER** = Licensee Name \_\_\_\_\_ NC License/Classification \_\_\_\_\_  
 Company Name \_\_\_\_\_  
 Address \_\_\_\_\_ Phone \_\_\_\_\_  
 City State & zip \_\_\_\_\_ Estimated Project Cost \_\_\_\_\_  
**Description of Work:** \_\_\_\_\_

I hereby certify that all information in this application is correct and all work will comply with the State Building Code and all other local laws and ordinances and regulations. The Inspection Department will be notified of any changes in the approved plans and specification for the project permitted herein.

[Signature]  
 Signature of Licensee  
10/16/19  
 Date

[Signature]  
 Signature of Permit Official  
10-18-19  
 Date



**TOWN OF SOUTHERN SHORES  
PLANNING AND CODE ENFORCEMENT**  
5375 N Virginia Dare Trail, Southern Shores, NC 27949  
(252) 261-2394 Ext 3 - Office (252) 255-0876 - Fax  
[www.southernshores-nc.gov](http://www.southernshores-nc.gov)

**RESIDENTIAL  
BUILDING/FLOODPLAIN DEVELOPMENT PERMIT  
BUILDING PERMIT #10610**

**Location:** 238 N Dogwood Trail  
  
**Parcel:** 021399000 PIN: 986817127299  
**District:** 20- SOUTHERN SHORES  
**Subdivision:** SO/SH SOUND SIDE BLK 109  
**LotBlkSect:** LOT: 25 BLK: 109 SEC:

**PEED, GARY EUX**  
**PEED, CYNTHIA SEEGREN EUX**  
**238 N DOGWOOD TRL**  
**KITTY HAWK NC 27949**

PHONE #: 703-517-8469

CELL #:

**BUSINESS NAME:**  
**CONTRACTOR'S NAME:** Property Owner  
**ADDRESS:**  
**CITY, STATE, ZIP:**  
**OFFICE#:**  
**CELL#:**  
**FAX#:**  
**EMAIL:**

**NC G.C. LICENSED CONTRACTOR:** \_\_\_YES \_\_\_X\_\_\_NO  
**NC G.C. LICENSE NUMBER:**  
**LIMITATION:**  
**CLASSIFICATION:**  
**QUALIFIER:**

**LIEN AGENT:** n/a

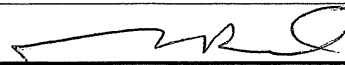
**DESCRIPTION OF WORK – (Any deviation from the Building Plan or Site Plan requires prior approval):** Remodel entry, garage expansion, new deck and porch, new 2<sup>nd</sup> floor heated living area over garage – new 4<sup>th</sup> bedroom

**SPECIAL CONDITIONS - FEMA nonconforming = \$401,195 ÷ 2 = \$200,597=50% - proposed \$192,950 const cost = \$7,647 (cost expenditures required prior to final insp)**

<b>TYPE OF CONSTRUCTION:</b> Addition/Remodel	<b>TYPE OF FOUNDATION:</b> Block	<b>PERMIT TYPE:</b> Residential
	<b>HEAT:</b> Heat Pump	<b>PROPERTY USE:</b> Single Family Dwelling
<b>TOTAL HEATED/LIVING AREAS (SF):</b> 923 new	<b>A/C:</b> Electric	<b>RESIDENTIAL TYPE:</b> Residence
<b>TOTAL NON-HEATED AREAS (SF):</b> 597 new	<b>INTERIOR WALLS:</b> Drywall	
	<b>EXTERIOR WALLS:</b> LP smart siding	<b>ZONING DISTRICT:</b> RS-1
<b>NUMBER OF STORIES:</b> 2	<b>FIREPLACE:</b>	<b>ZONING PERMIT #:</b> 2019-61
<b>BEDROOMS:</b> 1 new – to become 4 total	<b>ROOF:</b> Asphalt/Metal	<b>DATE APPROVED:</b> 8/2/2019
<b>SEPTIC CAPACITY # OF PERSONS:</b> 8	<b>INSULATION:</b> Batt & Blown	
<b>BATHS:</b> 1 new ½ BATHS:	<b>ELEVATOR (SF):</b>	
<b>ATTACHED GARAGE:</b> 406 expansion	<b>DECKS (SF):</b> 111	<b>CAMA PERMIT #:</b> n/a
<b>STORAGE ENCLOSURE:</b> POOL:	<b>PORCHES (SF):</b> 80	<b>DATE ISSUED:</b>
<b>FLOOD ZONE:</b> AE	<b>WINDOWS MAKE:</b> Anderson	<b>SEPTIC PERMIT #:</b> 28576
<b>BASE FLOOD ELEVATION:</b> 7FT PLUS 2FT= 9FT	<b>TYPE:</b> Casement/Fixed	<b>DATE ISSUED:</b> 3/21/2019


**\*\*\*The owner and builder are responsible for the following: All work done shall comply with the State Building Code and all other applicable State and local laws. The applicant certifies that the information on this permit is correct; that he/she is the owner or duly authorized agent of owner; that all construction shall be as shown on the submitted plans and specifications; the he/she understands this permit is valid for 180 days to begin construction and may be revoked for failure to comply with applicable regulations and laws.**

<b>TOTAL CONSTRUCTION COST</b>	\$192,950		
<b>HEATED/LIVING AREA (sf)</b> (new square footage)	923	X .60/sf (single family) =	\$553.80
		X .75/sf (all others) =	
<b>NON-HEATED AREA (sf)</b> (new square footage)	597	X .30/sf (single family) =	\$179.10
		X .35/sf (all others) =	
<b>REMODEL/REPAIR/ALTERATION</b> (no additional square footage)	\$28,000	X \$10 per \$1,000 of cost =	\$280.00
		Pool = \$125	\$
		Zoning Permit Fee = \$50	\$50.00
		Plan Review Fee = \$150 or \$100	\$
		Minimum Permit Fee = \$100	\$
		Homeowner's Recovery Fund \$10	\$
		<b>TOTAL FEE</b>	<b>\$1,062.90</b>

  
Applicant - Owner/Contractor (Please print and sign name)  
**GARY PEED**

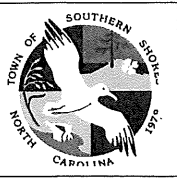
107879

Date Issued

  
Building/Code/Zoning Official

8-2-19

Date Approved



**TOWN OF SOUTHERN SHORES  
PLANNING AND CODE ENFORCEMENT**  
5375 N Virginia Dare Trail, Southern Shores, NC 27949  
(252) 261-2394 Ext 3 - Office (252) 255-0876 - Fax  
[www.southernshores-nc.gov](http://www.southernshores-nc.gov)

**RESIDENTIAL  
BUILDING/FLOODPLAIN DEVELOPMENT PERMIT  
BUILDING PERMIT #10703**

**Location: 157 B Wax Myrtle Trail  
Parcel: 021990001 PIN: 986707692212  
District: 20- SOUTHERN SHORES  
Subdivision: SO/SH AMD PLAT B SEC 3 RECOM  
LotBlkSect: LOT: B BLK: 42 SEC: 3**

**SEWARD, CHRISTOPHER G EUX  
SEWARD, PAMELA S EUX  
318 DUCK RD  
SOUTHERN SHORES NC 27949**

PHONE #:

CELL #: 252

**BUSINESS NAME: Seward Construction, LLC  
CONTRACTOR'S NAME: Chris Seward  
ADDRESS: 318 Duck Rd  
CITY, STATE, ZIP: Southern Shores, NC 27949  
OFFICE#:  
CELL#: 252-207-8990  
FAX#:  
EMAIL: [cgs111@aol.com](mailto:cgs111@aol.com)**

**NC G.C. LICENSED CONTRACTOR: X YES \_\_\_ NO  
NC G.C. LICENSE NUMBER: 67921  
LIMITATION: Unlimited  
CLASSIFICATION: Residential  
QUALIFIER: Christopher G. Seward, III**

**LIEN AGENT: Investors Title Insurance Company Entry#1119846  
19 W. Hargett St., Suite 507 / Raleigh, NC 27601**

**DESCRIPTION OF WORK – (Any deviation from the Building Plan or Site Plan requires prior approval): Construction of a new single family dwelling with attached garage**

**SPECIAL CONDITIONS -**

<b>TYPE OF CONSTRUCTION: New</b>	<b>FOUNDATION: Piling</b>	<b>ZONING DISTRICT: RS-1</b>
	<b>HEAT: Heat Pump</b>	<b>ZONING PERMIT #: 2019-84</b>
<b>BUILDING USE: Single Family Dwelling</b>	<b>A/C: Heat Pump</b>	<b>DATE APPROVED: 10/16/2019</b>
<b>TOTAL HEATED/LIVING AREAS (SF): 2,483</b>	<b>INTERIOR WALLS: Drywall</b>	<b>PERMITTED/CONDITIONAL USE: Single Family Dwelling</b>
<b>TOTAL NON-HEATED AREAS (SF): 1,009</b>	<b>EXTERIOR WALLS: Hardi Plank</b>	<b>RESIDENTIAL TYPE: Residence</b>
<b>NUMBER OF STORIES: 2</b>	<b>FIREPLACE: Gas</b>	
<b>BEDROOMS: 4</b>	<b>ROOF: Asphalt</b>	<b>SEPTIC PERMIT #: 29032</b>
<b>SEPTIC CAPACITY # OF PERSONS: 8</b>	<b>INSULATION: Batt</b>	<b>DATE ISSUED: 9/26/2019</b>
<b>BATHS: 3 ½ BATHS: 2</b>	<b>ELEVATOR (SF):</b>	
<b>ATTACHED GARAGE(SF): 707</b>	<b>DECKS (SF):</b>	
<b>STORAGE ENCLOSURE(SF): POOL(SF):</b>	<b>PORCHES (SF): 302</b>	
<b>FLOOD ZONE: Shaded X</b>	<b>WINDOWS MAKE: Jeld-Wen</b>	
<b>BASE FLOOD ELEVATION: FT PLUS 2FT=</b>	<b>TYPE: Dourble Hung – Impact glass</b>	

**\*\*\*The owner and builder are responsible for the following: All work done shall comply with the State Building Code and all other applicable State and local laws. The applicant certifies that the information on this permit is correct; that he/she is the owner or duly authorized agent of owner; that all construction shall be as shown on the submitted plans and specifications; the he/she understands this permit is valid for 180 days to begin construction and may be revoked for failure to comply with applicable regulations and laws.**

<b>TOTAL CONSTRUCTION COST</b>	<b>\$227,920</b>		
<b>HEATED/LIVING AREA (sf)</b> (new square footage)	<b>2,483</b>	<b>X .60/sf (single family) =</b>	<b>\$1,489.80</b>
		<b>X .75/sf (all others) =</b>	
<b>NON-HEATED AREA (sf)</b> (new square footage)	<b>1,009</b>	<b>X .30/sf (single family) =</b>	<b>\$302.70</b>
		<b>X .35/sf (all others) =</b>	
<b>REMODEL/REPAIR/ALTERATION</b> (no additional square footage)	<b>\$</b>	<b>X \$10 per \$1,000 of cost =</b>	<b>\$</b>
		<b>Pool = \$125</b>	<b>\$</b>
		<b>Zoning Permit Fee = \$50</b>	<b>\$50.00</b>
		<b>Plan Review Fee = \$150 or \$100</b>	<b>\$pd</b>
		<b>Minimum Permit Fee = \$100</b>	<b>\$</b>
		<b>Homeowner's Recovery Fund \$10</b>	<b>\$10.00</b>
		<b>TOTAL FEE</b>	<b>\$1,852.50</b>

**Applicant - Owner/Contractor** *Chris G. Seward III* **(Please print and sign name)** **Date Issued** 10/18/19  
**Building/Code/Zoning Official** *[Signature]* **Date Approved** 10-17-19



TOWN OF SOUTHERN SHORES  
PLANNING AND CODE  
ENFORCEMENT

5375 N Virginia Dare Trl  
Southern Shores NC 27949  
(252) 261-2394 ext 3 tel  
(252) 255-0876 fax  
www.southernshores-nc.gov



SUB-CONTRACTOR SIGN OFF AND/OR PERMIT

Date 10-21-19

PROJECT ADDRESS 133 Dog Wood  
Carolyn Carroll LLC  
Owner Carolyn Mevdat  
Mailing Address 3109 RAVEN CROFT TERRACE  
City, State, Zip Villages, FL 32163  
Phone 252-441-8551

Permit Number 10715  
Fee \$ 100

EXISTING Building Permit Number \_\_\_\_\_ NO FEE (if work is associated with a Building Permit) \_\_\_\_\_

**ELECTRICAL** = Licensee Name Steve Gordon NC License/Classification 14104-2  
Company Name Hasket Electric  
Address 1812 Tails Creek Phone 252 267 4767  
City State & zip Currituck NC Estimated Project Cost Included  
Description of Work: up grade Electrical

**PLUMBING** = Licensee Name \_\_\_\_\_ NC License/Classification \_\_\_\_\_  
Company Name \_\_\_\_\_  
Address \_\_\_\_\_ Phone \_\_\_\_\_  
City State & zip \_\_\_\_\_ Estimated Project Cost \_\_\_\_\_  
Description of Work: \_\_\_\_\_

**GAS** = Licensee Name \_\_\_\_\_ NC License/Classification \_\_\_\_\_  
Company Name \_\_\_\_\_  
Address \_\_\_\_\_ Phone \_\_\_\_\_  
City State & zip \_\_\_\_\_ Estimated Project Cost \_\_\_\_\_  
Description of Work: \_\_\_\_\_

**MECHANICAL** = Licensee Name Will Creech NC License/Classification HJ-1 29031  
Company Name American Refrigeration Heat Pump Repair  
Address PO Box 835 Phone 252 715 3335  
City State & zip Nags Head Estimated Project Cost 6400  
Description of Work: Replacing 4 Ton Heat Pump & Air Handler  
Air Temp.

**FIRE SPRINKLER** = Licensee Name \_\_\_\_\_ NC License/Classification \_\_\_\_\_  
Company Name \_\_\_\_\_  
Address \_\_\_\_\_ Phone \_\_\_\_\_  
City State & zip \_\_\_\_\_ Estimated Project Cost \_\_\_\_\_  
Description of Work: \_\_\_\_\_

I hereby certify that all information in this application is correct and all work will comply with the State Building Code and all other local laws and ordinances and regulations. The Inspection Department will be notified of any changes in the approved plans and specification for the project permitted herein.

Will Creech 10-21-19 Benny Shelton 10-21-19  
Signature of Licensee Date Signature of Permit Official Date  
WMS





**TOWN OF SOUTHERN SHORES  
PLANNING AND CODE ENFORCEMENT**  
5375 N Virginia Dare Trail, Southern Shores, NC 27949  
(252) 261-2394 Ext 3 - Office (252) 255-0876 --Fax  
[www.southernshores-nc.gov](http://www.southernshores-nc.gov)

**RESIDENTIAL  
BUILDING/FLOODPLAIN DEVELOPMENT PERMIT  
BUILDING PERMIT #10714**

Location: 70 E Dogwood Trail

Parcel: 022193000 PIN: 986818219688

District: 20- SOUTHERN SHORES

Subdivision: SO/SH SOUNDSIDE BLK 95

LotBlkSect: LOT: 35 BLK: 95 SEC:

HAMLEY, JONATHON C TTEE TRE

HAMLEY, PAULA J TTEE TRE

1228 RELLEN ST

CHESAPEAKE VA 23320

PHONE #:

CELL #:

BUSINESS NAME: DeBoy Construction & Remodeling, Inc

CONTRACTOR'S NAME: John DeBoy

ADDRESS: 303 Eagle Dr

CITY, STATE, ZIP: Kill Devil Hills, NC 27948

OFFICE#: 252-480-9921

CELL#: 252-207-8912

FAX#:

EMAIL: [outerbankscontractor@gmail.com](mailto:outerbankscontractor@gmail.com)

NC G.C. LICENSED CONTRACTOR:  YES  NO

NC G.C. LICENSE NUMBER: 61498

LIMITATION: Intermediate

CLASSIFICATION: Building

QUALIFIER: John Richard DeBoy

LIEN AGENT: North American Title Insurance Company Entry# 1129808

19 W. Hargett St., Suite 507 / Raleigh, NC 27601

DESCRIPTION OF WORK – (Any deviation from the Building Plan or Site Plan requires prior approval): Remodel kitchen – no increase in footprint or square footage of living space

SPECIAL CONDITIONS -

TYPE OF CONSTRUCTION: Remodel	FOUNDATION:	ZONING DISTRICT: RS-1
	HEAT:	ZONING PERMIT #: n/a
BUILDING USE: Single Family Dwelling	A/C:	
TOTAL HEATED/LIVING AREAS (SF):	INTERIOR WALLS:	
TOTAL NON-HEATED AREAS (SF):	EXTERIOR WALLS:	
NUMBER OF STORIES:	FIREPLACE:	
BEDROOMS:	ROOF:	
SEPTIC CAPACITY # OF PERSONS:	INSULATION:	
BATHS: ½ BATHS:	ELEVATOR (SF):	
DETACHED/ATTACHED GARAGE(SF):	DECKS (SF):	CAMA PERMIT #: n/a
STORAGE ENCLOSURE(SF): POOL(SF):	PORCHES (SF):	DATE ISSUED:
FLOOD ZONE: Shaded X	WINDOWS MAKE:	SEPTIC PERMIT #: n/a
BASE FLOOD ELEVATION: FT PLUS 2FT=	TYPE:	DATE ISSUED:

\*\*\*The owner and builder are responsible for the following: All work done shall comply with the State Building Code and all other applicable State and local laws. The applicant certifies that the information on this permit is correct; that he/she is the owner or duly authorized agent of owner; that all construction shall be as shown on the submitted plans and specifications; the he/she understands this permit is valid for 180 days to begin construction and may be revoked for failure to comply with applicable regulations and laws.

TOTAL CONSTRUCTION COST	\$35,500		
HEATED/LIVING AREA (sf) (new square footage)		X .60/sf (single family) = X .75/sf (all others) =	\$
NON-HEATED AREA (sf) (new square footage)		X .30/sf (single family) = X .35/sf (all others) =	\$
REMODEL/REPAIR/ALTERATION (no additional square footage)	\$35,500	X \$10 per \$1,000 of cost =	\$355.00
		Pool = \$125	\$
		Zoning Permit Fee = \$50	\$
		Plan Review Fee = \$150 or \$100	\$
		Minimum Permit Fee = \$100	\$
		Homeowner's Recovery Fund \$10	\$10.00
		<b>TOTAL FEE</b>	<b>\$365.00</b>

Applicant - Owner/Contractor

(Please print and sign name)

Date Issued

Building/Code/Zoning Official

Date Approved

*[Signature]* CHARLES SLOWIKOWSKI 10-21-19  
*[Signature]* Building/Code/Zoning Official 10-21-19  
 DTMS



**TOWN OF SOUTHERN SHORES  
PLANNING AND CODE ENFORCEMENT**  
5375 N Virginia Dare Trail, Southern Shores, NC 27949  
(252) 261-2394 Ext 3 - Office (252) 255-0876 - Fax  
[www.southernshores-nc.gov](http://www.southernshores-nc.gov)

**RESIDENTIAL  
BUILDING/FLOODPLAIN DEVELOPMENT PERMIT  
BUILDING PERMIT #10706**

Location: 45 Cypress Lane

Parcel: 022730000 PIN: 986719625373

District: 20- SOUTHERN SHORES

Subdivision: SO/SH SOUNDSIDE BLKS 170-175

LotBlkSect: LOT: 6 BLK: 173 SEC:

WILLIAMS, RANDY EUX  
WILLIAMS, DARLENE EUX  
45 CYPRESS LN  
KITTY HAWK NC 27949

PHONE #:

CELL #: 252-202-4365

BUSINESS NAME: JES Construction, LLC  
CONTRACTOR'S NAME: William Scott Davis  
ADDRESS: 1741 Corporate Landing Pkwy Ste 101  
CITY, STATE, ZIP: Virginia Beach, VA 23454  
OFFICE#: 757-558-9909  
CELL#: \_\_\_\_\_  
FAX#: 757-486-2602  
EMAIL: [jmitchell@jeswork.com](mailto:jmitchell@jeswork.com)

NC G.C. LICENSED CONTRACTOR:  YES  NO  
NC G.C. LICENSE NUMBER: 69678  
LIMITATION: Limited  
CLASSIFICATION: Building  
QUALIFIER: William Scott Davis

LIEN AGENT: n/a


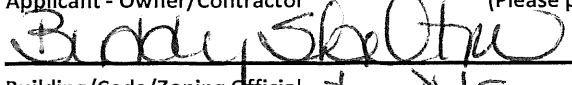
DESCRIPTION OF WORK – (Any deviation from the Building Plan or Site Plan requires prior approval): Repair foundation by using engineered push piers

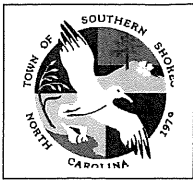
SPECIAL CONDITIONS -

TYPE OF CONSTRUCTION: Repair	FOUNDATION: Push Piers	ZONING DISTRICT: RS-1
	HEAT:	ZONING PERMIT #: n/a
BUILDING USE: Single Family Dwelling	A/C:	
TOTAL HEATED/LIVING AREAS (SF):	INTERIOR WALLS:	
TOTAL NON-HEATED AREAS (SF):	EXTERIOR WALLS:	
NUMBER OF STORIES:	FIREPLACE:	
BEDROOMS:	ROOF:	
SEPTIC CAPACITY # OF PERSONS:	INSULATION:	
BATHS:            ½ BATHS:	ELEVATOR (SF):	
DETACHED/ATTACHED GARAGE(SF):	DECKS (SF):	
STORAGE ENCLOSURE(SF):    POOL(SF):	PORCHES (SF):	
FLOOD ZONE: AE	WINDOWS MAKE:	
BASE FLOOD ELEVATION: 7FT PLUS 2FT= 9FT	TYPE:	

**\*\*\*The owner and builder are responsible for the following: All work done shall comply with the State Building Code and all other applicable State and local laws. The applicant certifies that the information on this permit is correct; that he/she is the owner or duly authorized agent of owner; that all construction shall be as shown on the submitted plans and specifications; the he/she understands this permit is valid for 180 days to begin construction and may be revoked for failure to comply with applicable regulations and laws.**

TOTAL CONSTRUCTION COST	\$8,000		
HEATED/LIVING AREA (sf) (new square footage)		X .60/sf (single family) = X .75/sf (all others) =	\$
NON-HEATED AREA (sf) (new square footage)		X .30/sf (single family) = X .35/sf (all others) =	\$
REMODEL/REPAIR/ALTERATION (no additional square footage)	\$8,000	X \$10 per \$1,000 of cost =	\$
		Pool = \$125	\$
		Zoning Permit Fee = \$50	\$
		Plan Review Fee = \$150 or \$100	\$
		Minimum Permit Fee = \$100	\$100.00
		Homeowner's Recovery Fund \$10	\$10.00
		<b>TOTAL FEE</b>	<b>\$110.00</b>

 Mitch Steinberg 10/22/19  
 Applicant - Owner/Contractor (Please print and sign name) Date Issued  
 10-11-19  
 Building/Code/Zoning Official Date Approved



**TOWN OF SOUTHERN SHORES  
PLANNING AND CODE ENFORCEMENT**  
5375 N Virginia Dare Trail, Southern Shores, NC 27949  
(252) 261-2394 Ext 3 - Office (252) 255-0876 - Fax  
[www.southernshores-nc.gov](http://www.southernshores-nc.gov)

**RESIDENTIAL  
BUILDING/FLOODPLAIN DEVELOPMENT PERMIT  
BUILDING PERMIT #10716**

Location: 177 Wax Myrtle Trail  
Parcel: 021999000 PIN: 986819507089  
District: 20- SOUTHERN SHORES  
Subdivision: SO/SH AMENDED PLAT B SEC 3  
LotBlkSect: LOT: 22 23 BLK: 42 SEC: 3

POOLE, SANDI C TRUSTEE OR HER SUCCESSORS TRS  
UNDER THE SANDI C POOLE REVOCABLE TRUST TRS  
3 DEER GRASS CT  
ARDEN NC 28704

PHONE #: 703-625-0557

CELL #:

BUSINESS NAME: Shorefire, Inc  
CONTRACTOR'S NAME: Andy Douds  
ADDRESS: 2705 B N Croatan Hwy  
CITY, STATE, ZIP: Kill Devil Hills, NC 27948  
OFFICE#:  
CELL#: 252-202-5591  
FAX#:  
EMAIL: [andy@shorefire.biz](mailto:andy@shorefire.biz)

NC G.C. LICENSED CONTRACTOR:  YES  NO  
NC G.C. LICENSE NUMBER:  
LIMITATION:  
CLASSIFICATION:  
QUALIFIER:

LIEN AGENT:

DESCRIPTION OF WORK – (Any deviation from the Building Plan or Site Plan requires prior approval): Replace pre-fab wood burning fireplace with wood/gas log fireplace

SPECIAL CONDITIONS -

TYPE OF CONSTRUCTION: Remodel	FOUNDATION:	ZONING DISTRICT: RS-1
BUILDING USE: Single Family Dwelling	HEAT:	ZONING PERMIT #: n/a
TOTAL HEATED/LIVING AREAS (SF):	A/C:	
TOTAL NON-HEATED AREAS (SF):	INTERIOR WALLS:	
NUMBER OF STORIES:	EXTERIOR WALLS:	
BEDROOMS:	FIREPLACE:	
SEPTIC CAPACITY # OF PERSONS:	ROOF:	
BATHS: ½ BATHS:	INSULATION:	
DETACHED/ATTACHED GARAGE(SF):	ELEVATOR (SF):	
STORAGE ENCLOSURE(SF): POOL(SF):	DECKS (SF):	CAMA PERMIT #: n/a
FLOOD ZONE: Shaded X	PORCHES (SF):	DATE ISSUED:
BASE FLOOD ELEVATION: FT PLUS 2FT=	WINDOWS MAKE:	SEPTIC PERMIT #: n/a
	TYPE:	DATE ISSUED:

**\*\*\*The owner and builder are responsible for the following: All work done shall comply with the State Building Code and all other applicable State and local laws. The applicant certifies that the information on this permit is correct; that he/she is the owner or duly authorized agent of owner; that all construction shall be as shown on the submitted plans and specifications; the he/she understands this permit is valid for 180 days to begin construction and may be revoked for failure to comply with applicable regulations and laws.**

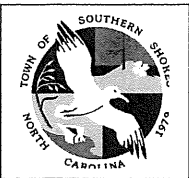
TOTAL CONSTRUCTION COST	\$6,163.83		
HEATED/LIVING AREA (sf) (new square footage)		X .60/sf (single family ) = X .75/sf (all others) =	\$
NON-HEATED AREA (sf) (new square footage)		X .30/sf (single family) = X .35/sf (all others) =	\$
REMODEL/REPAIR/ALTERATION (no additional square footage)	\$6,163.83	X \$10 per \$1,000 of cost =	\$
		Pool = \$125	\$
		Zoning Permit Fee = \$50	\$
		Plan Review Fee = \$150 or \$100	\$
		Minimum Permit Fee = \$100	\$100.00
		Homeowner's Recovery Fund \$10	\$
		<b>TOTAL FEE</b>	<b>\$100.00</b>

*Andy Douds* *Andy Douds*  
Applicant - Owner/Contractor (Please print and sign name)

*10/23/19*  
Date Issued

*Burke Shelton*  
Building/Code/Zoning Official *DJ DWS*

*10-22-19*  
Date Approved



**TOWN OF SOUTHERN SHORES  
PLANNING AND CODE ENFORCEMENT**  
5375 N Virginia Dare Trail, Southern Shores, NC 27949  
(252) 261-2394 Ext 3 - Office (252) 255-0876 - Fax  
[www.southernshores-nc.gov](http://www.southernshores-nc.gov)

**RESIDENTIAL  
BUILDING/FLOODPLAIN DEVELOPMENT PERMIT  
BUILDING PERMIT #10710**

Location: 93 Poteskeet Trail  
  
Parcel: 022383434 PIN: 986711562020  
District: 20- SOUTHERN SHORES  
Subdivision: CHICHAUK  
LotBlkSect: LOT: 434 BLK: SEC:

LANCSEK, MICHAEL TIC  
KLEMENTOWICH, DIANE TIC  
183 HAPPY INDIAN CT  
KITTY HAWK NC 27949

PHONE #:

CELL #: 252-207-0305

BUSINESS NAME:  
CONTRACTOR'S NAME: Property Owner  
ADDRESS:  
CITY, STATE, ZIP:  
OFFICE#:  
CELL#:  
FAX#:  
EMAIL:

NC G.C. LICENSED CONTRACTOR:  YES  NO  
NC G.C. LICENSE NUMBER:  
LIMITATION:  
CLASSIFICATION:  
QUALIFIER:

LIEN AGENT: Chicago Title Company, LLC Entry # 1128622  
19 W Hargett St., Suite 507 / Raleigh, NC 27601

DESCRIPTION OF WORK – (Any deviation from the Building Plan or Site Plan requires prior approval): Construction of a new single family dwelling with an attached garage

SPECIAL CONDITIONS -

TYPE OF CONSTRUCTION: New	FOUNDATION: Piling	ZONING DISTRICT: RS-1
BUILDING USE: Single Family Dwelling	HEAT: geo thermal	ZONING PERMIT #: 2019-86
TOTAL HEATED/LIVING AREAS (SF): 2,489	A/C: geo thermal	DATE APPROVED: 10/23/2019
TOTAL NON-HEATED AREAS (SF): 1,163	INTERIOR WALLS:	PERMITTED/CONDITIONAL USE: Single Family Dwelling
NUMBER OF STORIES: 1 1/2	EXTERIOR WALLS: Wood	RESIDENTIAL TYPE: Residence
BEDROOMS: 3	FIREPLACE: Gas	
SEPTIC CAPACITY # OF PERSONS: 6	ROOF: Asphalt	
BATHS: 3 1/2 BATHS: 1	INSULATION: Batt/CCF	
ATTACHED GARAGE(SF): 636	ELEVATOR (SF): n/a	
FLOOD ZONE: AE	DECKS (SF): n/a	CAMA PERMIT #: 2019-11
BASE FLOOD ELEVATION: 7FT PLUS 2FT= 9FT	PORCHES (SF): 527	DATE ISSUED: 9/13/2019
	WINDOWS MAKE: Andersen	SEPTIC PERMIT #: 29060
	TYPE: 100 Series	DATE ISSUED: 10/8/2019

\*\*\*The owner and builder are responsible for the following: All work done shall comply with the State Building Code and all other applicable State and local laws. The applicant certifies that the information on this permit is correct; that he/she is the owner or duly authorized agent of owner; that all construction shall be as shown on the submitted plans and specifications; the he/she understands this permit is valid for 180 days to begin construction and may be revoked for failure to comply with applicable regulations and laws.

TOTAL CONSTRUCTION COST	\$375,000		
HEATED/LIVING AREA (sf) (new square footage)	2,489	X .60/sf (single family ) =	\$1,493.40
		X .75/sf (all others) =	
NON-HEATED AREA (sf) (new square footage)	1,163	X .30/sf (single family) =	\$348.90
		X .35/sf (all others) =	
REMODEL/REPAIR/ALTERATION (no additional square footage)	\$	X \$10 per \$1,000 of cost =	\$
		Pool = \$125	\$
		Zoning Permit Fee = \$50	\$50.00
		Plan Review Fee = \$150 or \$100	\$pd
		Minimum Permit Fee = \$100	\$
		Homeowner's Recovery Fund \$10	\$
		<b>TOTAL FEE</b>	<b>\$1,892.30</b>

*Michael P. [Signature]*  
Applicant - Owner/Contractor (Please print and sign name)

*10-23-2019*

*Bundy [Signature]*  
Building/Code/Zoning Official *DJ DS*

*10-23-19*  
Date Approved

**TOWN OF SOUTHERN SHORES**  
 5375 N Virginia Dare Trl  
 Southern Shores, NC 27949  
 (252) 261-2394 tel  
 (252) 255-0876 fax  
 www.southernshores-nc.gov



**SUBCONTRACTOR SIGN OFF AND/OR PERMIT**

Date 10/24/2019  
 PROJECT ADDRESS 181 CLAM SHELL TRAIL  
 Owner EDWARD HUMPHREY  
 Mailing Address 181 CLAM SHELL TRAIL  
 City, State, Zip SOUTHERN SHORES, NC 27949  
 Phone 252-255-2362

Permit Number 10719  
 Fee \$ 100

EXISTING Building Permit Number \_\_\_\_\_ NO FEE \_\_\_\_\_

**ELECTRICAL** = Licensee Name FREDERICK MARKLIN NC License/Classification 22222-L / LTD  
 Company Name R A HOY HEATING & A/C, INC  
 Address P O BOX 179 Phone (252) 261-2008  
 City State & zip KITTY HAWK, NC 27949 Estimated Project Cost INCL in MECH  
 Description of Work: CONNECTION OF MECH EQUIP BELOW

**PLUMBING** = Licensee Name \_\_\_\_\_ NC License/Classification \_\_\_\_\_  
 Company Name \_\_\_\_\_  
 Address \_\_\_\_\_ Phone \_\_\_\_\_  
 City State & zip \_\_\_\_\_ Estimated Project Cost \_\_\_\_\_  
 Description of Work: \_\_\_\_\_

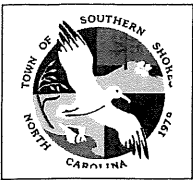
**GAS** = Licensee Name \_\_\_\_\_ NC License/Classification \_\_\_\_\_  
 Company Name \_\_\_\_\_  
 Address \_\_\_\_\_ Phone \_\_\_\_\_  
 City State & zip \_\_\_\_\_ Estimated Project Cost \_\_\_\_\_  
 Description of Work: \_\_\_\_\_

**MECHANICAL** = Licensee Name DOUGLAS WAKELEY NC License/Classification 13056 / H 2 & 3 P-1  
 Company Name R A HOY HEATING & A/C, INC  
 Address P O BOX 179 Phone (252) 261-2008  
 City State & zip KITTY HAWK, NC 27949 Estimated Project Cost 6486  
 Description of Work: C/O 2 TON 16 SEER TRANE SYSTEM TOP LEVEL WITH XI 824 THERMOSTAT

I hereby certify that all information in this application is correct and all work will comply with the State Building Code and all other local laws and ordinances and regulations. The Inspection Department will be notified of any changes in the approved plans and specification for the project permitted herein.

Douglas Wakeley 10/24/2019  
 Signature of Licensee Date  
Douglas Wakeley (ELEC)

Burley Shotton 10-25-19  
 Signature of Permit Official Date  
DUHS



**TOWN OF SOUTHERN SHORES**  
**PLANNING AND CODE ENFORCEMENT**  
 5375 N Virginia Dare Trail, Southern Shores, NC 27949  
 (252) 261-2394 Ext 3 - Office (252) 255-0876 - Fax  
[www.southernshores-nc.gov](http://www.southernshores-nc.gov)

**RESIDENTIAL**  
**BUILDING/FLOODPLAIN DEVELOPMENT PERMIT**  
**BUILDING PERMIT 10711**

**Location: 64 Ocean Boulevard**  
**Parcel: 022627001 PIN: 986712956130**  
**District: 20- SOUTHERN SHORES**  
**Subdivision: SO/SH AMENDED SECTION 1**  
**LotBlkSect: LOT: 3 BLK: 6 SEC: 1**

**FOR THE LOVE OF PETE LLC**  
**10324 GRENDEL CT**  
**MECHANICSVILLE VA 23116**

PHONE #: 804-263-4840      CELL #:

**BUSINESS NAME:** Hutton & Company, Inc  
**CONTRACTOR'S NAME:** Allan Hutton  
**ADDRESS:** 1045 Creek Rd  
**CITY, STATE, ZIP:** Kitty Hawk, NC 27949  
**OFFICE#:**  
**CELL#:** 252-207-5010  
**FAX#:**  
**EMAIL:** [huttonal@charter.net](mailto:huttonal@charter.net)

**NC G.C. LICENSED CONTRACTOR:**  YES  NO  
**NC G.C. LICENSE NUMBER:** 49078  
**LIMITATION:** Unlimited  
**CLASSIFICATION:** Building  
**QUALIFIER:** Allan Hodgart Hutton, Jr

**LIEN AGENT:** North American Title Insurance Company Entry# 1127797  
 19 W. Hargett St., Suite 507 / Raleigh, NC 27601

**DESCRIPTION OF WORK – (Any deviation from the Building Plan or Site Plan requires prior approval):** Construction of a new single family dwelling with a pool-pool deck-barrier fence

**SPECIAL CONDITIONS -**

<b>TYPE OF CONSTRUCTION:</b> New	<b>FOUNDATION:</b> Piling	<b>ZONING DISTRICT:</b> RS-1
	<b>HEAT:</b> Elec	<b>ZONING PERMIT #:</b> 2019-87
<b>BUILDING USE:</b> Single Family Dwelling	<b>A/C:</b> Elec	<b>DATE APPROVED:</b> 10/25/2019
<b>TOTAL HEATED/LIVING AREAS (SF):</b> 4,596	<b>INTERIOR WALLS:</b> Drywall/wood	<b>PERMITTED/CONDITIONAL USE:</b> Single Family Dwelling
<b>TOTAL NON-HEATED AREAS (SF):</b> 851	<b>EXTERIOR WALLS:</b> Wood Shakes	<b>RESIDENTIAL TYPE:</b> 2 <sup>nd</sup> Home
<b>NUMBER OF STORIES:</b> 3	<b>FIREPLACE:</b> n/a	
<b>BEDROOMS:</b> 5	<b>ROOF:</b> Metal	
<b>SEPTIC CAPACITY # OF PERSONS:</b> 10	<b>INSULATION:</b> Batt	
<b>BATHS:</b> 5      ½ BATHS: 1	<b>ELEVATOR (SF):</b> 16	
<b>DETACHED/ATTACHED GARAGE(SF):</b> n/a	<b>DECKS (SF):</b> 510	<b>CAMA PERMIT #:</b> 2018-25
<b>STORAGE ENCLOSURE(SF):</b> 104 <b>POOL(SF):</b> 416	<b>PORCHES (SF):</b> 237	<b>DATE ISSUED:</b> 9/24/2019
<b>FLOOD ZONE:</b> VE	<b>WINDOWS MAKE:</b> Pella	<b>SEPTIC PERMIT #:</b> 28189
<b>BASE FLOOD ELEVATION:</b> 12FT PLUS 2FT= 14FT	<b>TYPE:</b> Double-hung and fixed	<b>DATE ISSUED:</b> 10/31/2018

**\*\*\*The owner and builder are responsible for the following: All work done shall comply with the State Building Code and all other applicable State and local laws. The applicant certifies that the information on this permit is correct; that he/she is the owner or duly authorized agent of owner; that all construction shall be as shown on the submitted plans and specifications; the he/she understands this permit is valid for 180 days to begin construction and may be revoked for failure to comply with applicable regulations and laws.**

<b>TOTAL CONSTRUCTION COST</b>	\$1,000,000		
<b>HEATED/LIVING AREA (sf)</b> (new square footage)	4,956	X .60/sf (single family) =	\$2,973.60
		X .75/sf (all others) =	
<b>NON-HEATED AREA (sf)</b> (new square footage)	851	X .30/sf (single family) =	\$255.30
		X .35/sf (all others) =	
<b>REMODEL/REPAIR/ALTERATION</b> (no additional square footage)	\$	X \$10 per \$1,000 of cost =	\$
		Pool = \$125	\$125.00
		Zoning Permit Fee = \$50	\$50.00
		Plan Review Fee = \$150 or \$100	\$pd
		Minimum Permit Fee = \$100	\$
		Homeowner's Recovery Fund \$10	\$10.00
		<b>TOTAL FEE</b>	<b>\$3,413.90</b>

*Allan Hutton*      *Allan Hutton*      *10/25/19*  
 Applicant - Owner/Contractor      (Please print and sign name)      Date Issued

*Brendy Shelton*      *DUDS*      *10-25-19*  
 Building/Code/Zoning Official      Date Approved



**TOWN OF SOUTHERN SHORES  
PLANNING AND CODE ENFORCEMENT**  
5375 N Virginia Dare Trail, Southern Shores, NC 27949  
(252) 261-2394 Ext 3 - Office (252) 255-0876 - Fax  
[www.southernshores-nc.gov](http://www.southernshores-nc.gov)

**RESIDENTIAL  
BUILDING/FLOODPLAIN DEVELOPMENT PERMIT  
BUILDING PERMIT #10717**

**Location: 123 Duck Woods Drive  
Parcel: 022357040 PIN: 986710456995  
District: 20- SOUTHERN SHORES  
Subdivision: SO/SH BLK 227-B  
LotBlkSect: LOT: 38 BLK: 227B SEC:**

**HARDZEI, YURY VLADIMIROVICH  
P. O. BOX 1822  
KITTY HAWK NC 27949**

PHONE #:

CELL #: 252-202-0635

**BUSINESS NAME: Fine Finish Construction & Design, LLC  
CONTRACTOR'S NAME: Yury Hardzei  
ADDRESS: 1603 Sand dollar circle  
CITY, STATE, ZIP: Kitty Hawk, NC 27949  
OFFICE#:  
CELL#: 252-202-0635  
FAX#:  
EMAIL: [finfinishobx@gmail.com](mailto:finfinishobx@gmail.com)**

**NC G.C. LICENSED CONTRACTOR:  X  YES  NO  
NC G.C. LICENSE NUMBER: 79316  
LIMITATION: Limited  
CLASSIFICATION: Building  
QUALIFIER: Yury Hardzei**

**LIEN AGENT: Chicago Title Company, LLC Entry# 1130551  
19 W Hargett St., Suite 507 / Raleigh, NC 27601**

**DESCRIPTION OF WORK – (Any deviation from the Building Plan or Site Plan requires prior approval): Construction of a new single family dwelling with attached garage and accessory pool**

**SPECIAL CONDITIONS -**

<b>TYPE OF CONSTRUCTION:</b> New	<b>FOUNDATION:</b> Piling	<b>ZONING DISTRICT:</b> RS-1
	<b>HEAT:</b> Electric	<b>ZONING PERMIT #:</b> 2019-88
<b>BUILDING USE:</b> Single Family Dwelling	<b>A/C:</b> Heat pump	<b>DATE APPROVED:</b> 10/28/2019
<b>TOTAL HEATED/LIVING AREAS (SF):</b> 2,361	<b>INTERIOR WALLS:</b> Drywall	<b>PERMITTED/CONDITIONAL USE:</b> Single Family Dwelling
<b>TOTAL NON-HEATED AREAS (SF):</b> 1,317	<b>EXTERIOR WALLS:</b> LP Smart	<b>RESIDENTIAL TYPE:</b> Residence
<b>NUMBER OF STORIES:</b> 1 1/2	<b>FIREPLACE:</b> Gas	
<b>BEDROOMS:</b> 4	<b>ROOF:</b> Asphalt/Metal	<b>SEPTIC PERMIT #:</b> 28915
<b>SEPTIC CAPACITY # OF PERSONS:</b> 8	<b>INSULATION:</b> Batt	<b>DATE ISSUED:</b> 7/29/2019
<b>BATHS:</b> 3      ½ BATHS: 1	<b>ELEVATOR (SF):</b> n/a	
<b>ATTACHED GARAGE(SF):</b> 747	<b>DECKS (SF):</b> 324	<b>CAMA PERMIT #:</b> n/a
<b>POOL(SF):</b> 1,186	<b>PORCHES (SF):</b> 246	<b>DATE ISSUED:</b>
<b>FLOOD ZONE:</b> AE	<b>WINDOWS MAKE:</b> TW	
<b>BASE FLOOD ELEVATION:</b> 7FT PLUS 2FT= 9FT	<b>TYPE:</b> Single Hung	

**\*\*\*The owner and builder are responsible for the following: All work done shall comply with the State Building Code and all other applicable State and local laws. The applicant certifies that the information on this permit is correct; that he/she is the owner or duly authorized agent of owner; that all construction shall be as shown on the submitted plans and specifications; the he/she understands this permit is valid for 180 days to begin construction and may be revoked for failure to comply with applicable regulations and laws.**

<b>TOTAL CONSTRUCTION COST</b>	<b>\$300,000</b>		
<b>HEATED/LIVING AREA (sf)</b> (new square footage)	2,361	X .60/sf (single family) = X .75/sf (all others) =	\$1,416.60
<b>NON-HEATED AREA (sf)</b> (new square footage)	1,317	X .30/sf (single family) = X .35/sf (all others) =	\$395.10
<b>REMODEL/REPAIR/ALTERATION</b> (no additional square footage)	\$	X \$10 per \$1,000 of cost =	\$
		Pool = \$125	\$125.00
		Zoning Permit Fee = \$50	\$50.00
		Plan Review Fee = \$150 or \$100	\$pd
		Minimum Permit Fee = \$100	\$
		Homeowner's Recovery Fund \$10	\$10.00
		<b>TOTAL FEE</b>	<b>\$1,996.70</b>

Applicant - Owner/Contractor  
Bunny Shelton  
Building/Code/Zoning Official

Yury Hardzei  
(Please print and sign name)

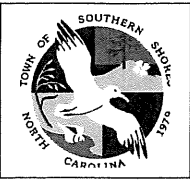
10/28/19

Date Issued

10-28-19

Date Approved





**TOWN OF SOUTHERN SHORES  
PLANNING AND CODE ENFORCEMENT**  
5375 N Virginia Dare Trail, Southern Shores, NC 27949  
(252) 261-2394 Ext 3 - Office (252) 255-0876 - Fax  
[www.southernshores-nc.gov](http://www.southernshores-nc.gov)

**RESIDENTIAL  
BUILDING/FLOODPLAIN DEVELOPMENT PERMIT  
BUILDING PERMIT#10700**

**Location:** 190 Duck Road  
**Parcel:** 022098000 PIN: 986819610353  
**District:** 20- SOUTHERN SHORES  
**Subdivision:** SO/SH AMENDED PLAT B SEC 3 REV  
**LotBlkSect:** LOT: 31R BLK: 32 SEC: 3

**BLACK, THOMAS A JR EUX  
BLACK, SHELLY L EUX  
13804 WAYSIDE DR  
CLARKSVILLE MD 21029**

PHONE #: \_\_\_\_\_ CELL #: 410-917-0507

**BUSINESS NAME:**  
**CONTRACTOR'S NAME:** Property Owner  
**ADDRESS:**  
**CITY, STATE, ZIP:**  
**OFFICE#:**  
**CELL#:**  
**FAX#:**  
**EMAIL:**

**NC G.C. LICENSED CONTRACTOR:** \_\_\_YES \_\_\_X\_\_\_NO  
**NC G.C. LICENSE NUMBER:**  
**LIMITATION:**  
**CLASSIFICATION:**  
**QUALIFIER:**

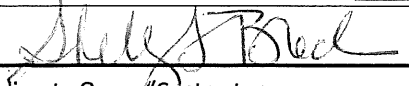

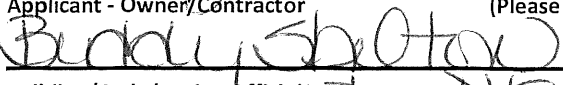
**LIEN AGENT:** n/a

**DESCRIPTION OF WORK – (Any deviation from the Building Plan or Site Plan requires prior approval):** Interior remodel – no increase in # of bedrooms/septic capacity/footprint or enclosed living space – Conversion of hallway and closet to new bathroom and remodel existing bathrooms

<b>TYPE OF CONSTRUCTION:</b> Remodel	<b>FOUNDATION:</b>	<b>ZONING DISTRICT:</b> RS-1
	<b>HEAT:</b>	<b>ZONING PERMIT #:</b> n/a
<b>BUILDING USE:</b> Single Family Dwelling	<b>A/C:</b>	
<b>TOTAL HEATED/LIVING AREAS (SF):</b>	<b>INTERIOR WALLS:</b> Drywall	<b>SEPTIC PERMIT #:</b> n/a
<b>TOTAL NON-HEATED AREAS (SF):</b>	<b>EXTERIOR WALLS:</b>	
<b>NUMBER OF STORIES:</b>	<b>FIREPLACE:</b>	
<b>BEDROOMS:</b>	<b>ROOF:</b>	
<b>SEPTIC CAPACITY # OF PERSONS:</b>	<b>INSULATION:</b>	
<b>BATHS:</b> 1 new to become 4 total	<b>ELEVATOR (SF):</b>	
<b>DETACHED/ATTACHED GARAGE(SF):</b>	<b>DECKS (SF):</b>	
<b>STORAGE ENCLOSURE(SF): POOL(SF):</b>	<b>PORCHES (SF):</b>	
<b>FLOOD ZONE:</b> Shaded X	<b>WINDOWS MAKE:</b>	
<b>BASE FLOOD ELEVATION:</b> FT PLUS 2FT=	<b>TYPE:</b>	

**\*\*\*The owner and builder are responsible for the following: All work done shall comply with the State Building Code and all other applicable State and local laws. The applicant certifies that the information on this permit is correct; that he/she is the owner or duly authorized agent of owner; that all construction shall be as shown on the submitted plans and specifications; the he/she understands this permit is valid for 180 days to begin construction and may be revoked for failure to comply with applicable regulations and laws.**

<b>TOTAL CONSTRUCTION COST</b>	\$17,000		
<b>HEATED/LIVING AREA (sf)</b> (new square footage)		X .60/sf (single family) = X .75/sf (all others) =	\$
<b>NON-HEATED AREA (sf)</b> (new square footage)		X .30/sf (single family) = X .35/sf (all others) =	\$
<b>REMODEL/REPAIR/ALTERATION</b> (no additional square footage)	\$17,000	X \$10 per \$1,000 of cost =	\$170.00
		Pool = \$125	\$
		Zoning Permit Fee = \$50	\$
		Plan Review Fee = \$150 or \$100	\$
		Minimum Permit Fee = \$100	\$
		Homeowner's Recovery Fund \$10	\$
		<b>TOTAL FEE</b>	<b>\$170.00</b>



10/28/19  
 Applicant - Owner/Contractor (Please print and sign name) Date Issued  
 10-28-19  
 Building/Code/Zoning Official Date Approved

**TOWN OF SOUTHERN SHORES**  
 5375 N Virginia Dare Trl  
 Southern Shores, NC  
 27949  
 (252) 261-2394 tel  
 (252) 255-0876 fax  
 www.southernshores-nc.gov



**SUBCONTRACTOR SIGN OFF AND/OR PERMIT**

Date 10/28/2019  
 PROJECT ADDRESS 13 FOURTH AVENUE  
 Owner MICHAEL POHN Sandra Palumbo  
 Mailing Address 250 PANTOPS MOUNTAIN RD  
 City, State, Zip CHARLOTTESVILLE, VA 22911  
 Phone 434-295-5880

Permit Number 10720  
 Fee \$ 100

EXISTING Building Permit Number \_\_\_\_\_ NO FEE \_\_\_\_\_

**ELECTRICAL** = Licensee Name FREDERICK MARKLIN NC License/Classification 22222-L / LTD  
 Company Name R A HOY HEATING & A/C, INC  
 Address P O BOX 179 Phone (252) 261-2008  
 City State & zip KITTY HAWK, NC 27949 Estimated Project Cost INCL in MECH  
 Description of Work: CONNECTION OF MECH EQUIP BELOW

**PLUMBING** = Licensee Name \_\_\_\_\_ NC License/Classification \_\_\_\_\_  
 Company Name \_\_\_\_\_  
 Address \_\_\_\_\_ Phone \_\_\_\_\_  
 City State & zip \_\_\_\_\_ Estimated Project Cost \_\_\_\_\_  
 Description of Work: \_\_\_\_\_

**GAS** = Licensee Name \_\_\_\_\_ NC License/Classification \_\_\_\_\_  
 Company Name \_\_\_\_\_  
 Address \_\_\_\_\_ Phone \_\_\_\_\_  
 City State & zip \_\_\_\_\_ Estimated Project Cost \_\_\_\_\_  
 Description of Work: \_\_\_\_\_

**MECHANICAL** = Licensee Name DOUGLAS WAKELEY NC License/Classification 13056 / H 2 & 3 P-1  
 Company Name R A HOY HEATING & A/C, INC  
 Address P O BOX 179 Phone (252) 261-2008  
 City State & zip KITTY HAWK, NC 27949 Estimated Project Cost 2580  
 Description of Work: INSTALLING DUCTWORK FOR RANGE HOOD AND MAKE UP AIR

I hereby certify that all information in this application is correct and all work will comply with the State Building Code and all other local laws and ordinances and regulations. The Inspection Department will be notified of any changes in the approved plans and specification for the project permitted herein.

Douglas Wakeley 10/28/2019  
 Signature of Licensee Date  
Frederick Marklin (ELEC)

Burley Sberton 10-29-19  
 Signature of Permit Official Date  
JB/DJS



**TOWN OF SOUTHERN SHORES  
PLANNING AND CODE ENFORCEMENT**  
5375 N Virginia Dare Trail, Southern Shores, NC 27949  
(252) 261-2394 Ext 3 - Office (252) 255-0876 - Fax  
[www.southernshores-nc.gov](http://www.southernshores-nc.gov)

**RESIDENTIAL  
BUILDING/FLOODPLAIN DEVELOPMENT PERMIT  
BUILDING PERMIT #10575**

**Location:** 37 Cypress Lane  
**Parcel:** 022726000 PIN: 986719617867  
**District:** 20- SOUTHERN SHORES  
**Subdivision:** SO/SH SOUND SIDE BLKS 170-175  
**LotBlkSect:** LOT: 2 BLK: 173 SEC:

**TCB PROPERTIES LLC**  
11061 MILL POND LN  
MECHANICSVILLE VA 23116

PHONE #:

CELL #:

**BUSINESS NAME:** JB Sims Construction Co, Inc  
**CONTRACTOR'S NAME:** JB Sims  
**ADDRESS:** 262 Wax Myrtle Trl  
**CITY, STATE, ZIP:** Southern Shores, NC 27949  
**OFFICE#:**  
**CELL#:** 757-748-2150  
**FAX#:**  
**EMAIL:** [jbsims1987@aol.com](mailto:jbsims1987@aol.com)

**NC G.C. LICENSED CONTRACTOR:**  YES  NO  
**NC G.C. LICENSE NUMBER:** 39307  
**LIMITATION:** Limited  
**CLASSIFICATION:** Residential  
**QUALIFIER:** James Boyd Sims

**LIEN AGENT:** Investors Title Insurance Company Entry# 1046882  
19 W. Hargett St., Suite 507 / Raleigh, NC 27601

**DESCRIPTION OF WORK – (Any deviation from the Building Plan or Site Plan requires prior approval):** Construction of a 14x28 unfinished storage building and new 572sf deck

*Remove and Replace Concrete around Pool  
\* To be bonded by electrician JBS 10/30/19*

**SPECIAL CONDITIONS -**

<b>TYPE OF CONSTRUCTION:</b> Accessory Storage Bldg & Deck Addition	<b>TYPE OF FOUNDATION:</b> Slab	<b>PERMIT TYPE:</b> Residential
<b>TOTAL HEATED/LIVING AREAS (SF):</b>	<b>HEAT:</b> A/C:	<b>RESIDENTIAL TYPE:</b> 2 <sup>nd</sup> Home
<b>TOTAL NON-HEATED AREAS (SF):</b> 572	<b>INTERIOR WALLS:</b>	<b>PROPERTY USE:</b> Single Family Dwelling
<b>NUMBER OF STORIES:</b>	<b>EXTERIOR WALLS:</b> Vinyl	<b>ZONING DISTRICT:</b> RS-1
<b>BEDROOMS:</b>	<b>FIREPLACE:</b>	<b>ZONING PERMIT #:</b> 2019-51
<b>SEPTIC CAPACITY # OF PERSONS:</b>	<b>ROOF:</b> Asphalt	<b>DATE APPROVED:</b> 6/28/2019
<b>BATHS:</b> ½ BATHS:	<b>INSULATION:</b>	<b>CAMA PERMIT #:</b> n/a
<b>DETACHED GARAGE:</b>	<b>ELEVATOR (SF):</b>	<b>DATE ISSUED:</b>
<b>STORAGE BUILDING:</b> 392 <b>POOL:</b>	<b>DECKS (SF):</b>	<b>SEPTIC PERMIT #:</b> 28816
<b>FLOOD ZONE:</b> AE	<b>PORCHES (SF):</b>	<b>DATE ISSUED:</b> 6/18/2019
<b>BASE FLOOD ELEVATION:</b> 7FT PLUS 2FT= 9FT	<b>WINDOWS MAKE:</b> Simonten	
	<b>TYPE:</b> Casement	

\*\*\*The owner and builder are responsible for the following: All work done shall comply with the State Building Code and all other applicable State and local laws. The applicant certifies that the information on this permit is correct; that he/she is the owner or duly authorized agent of owner; that all construction shall be as shown on the submitted plans and specifications; the he/she understands this permit is valid for 180 days to begin construction and may be revoked for failure to comply with applicable regulations and laws.

<b>TOTAL CONSTRUCTION COST</b>	\$100,000	+ \$14,000 = \$114,000	
<b>HEATED/LIVING AREA (sf)</b> (new square footage)		X .60/sf (single family) =	\$
		X .75/sf (all others) =	
<b>NON-HEATED AREA (sf)</b> (new square footage)	964	X .30/sf (single family) =	\$289.20
		X .35/sf (all others) =	
<b>REMODEL/REPAIR/ALTERATION</b> (no additional square footage)		X \$10 per \$1,000 of cost =	\$
		Pool = \$125	\$
<i>Additional fee \$100 - pd 10-30-14</i>		Zoning Permit Fee = \$50	\$50.00
		Plan Review Fee = \$150 or \$100	\$
		Minimum Permit Fee = \$100	\$
		Homeowner's Recovery Fund \$10	\$10.00
		<b>TOTAL FEE</b>	<b>\$349.20</b>

Applicant - Owner/Contractor (Please print and sign name)

Building/Code/Zoning Official

Date Issued

Date Approved

6/28/19

6-28-19



**TOWN OF SOUTHERN SHORES  
PLANNING AND CODE ENFORCEMENT**  
5375 N Virginia Dare Trail, Southern Shores, NC 27949  
(252) 261-2394 Ext 3 - Office (252) 255-0876 - Fax  
[www.southernshores-nc.gov](http://www.southernshores-nc.gov)

**RESIDENTIAL  
BUILDING/FLOODPLAIN DEVELOPMENT PERMIT  
BUILDING PERMIT #10721**

**Location:** 184 Wax Myrtle Trail

**Parcel:** 021987000 PIN: 986819508546

**District:** 20- SOUTHERN SHORES

**Subdivision:** SO/SH AMENDED PLAT B SEC 3

**LotBlkSect:** LOT: 50A BLK: 41 SEC: 3

**SCHMITZ, BARBARA F EVR  
LEONARD J SCHMITZ EVR  
184 WAX MYRTLE TRL  
SOUTHERN SHORES NC 27949**

**PHONE #:** 240-401-9555

**CELL #:**

**BUSINESS NAME:** Piddington Construction T/A Intrepidd Construction, Inc  
**CONTRACTOR'S NAME:** Mike Piddington  
**ADDRESS:** 2 Ginguite Trail  
**CITY, STATE, ZIP:** Southern Shores, NC 27949  
**OFFICE#:**  
**CELL#:** 252-207-1122  
**FAX#:**  
**EMAIL:** mikelmia@gmail.com

**NC G.C. LICENSED CONTRACTOR:**  X  YES  NO  
**NC G.C. LICENSE NUMBER:** 52198  
**LIMITATION:** Limited  
**CLASSIFICATION:** Building  
**QUALIFIER:** Michael S. Piddington

**LIEN AGENT:** n/a

**DESCRIPTION OF WORK – (Any deviation from the Building Plan or Site Plan requires prior approval):** Remodel bathroom – relocate bath fan and add new walk-in shower

**SPECIAL CONDITIONS -**

<b>TYPE OF CONSTRUCTION:</b> Remodel	<b>FOUNDATION:</b>	<b>ZONING DISTRICT:</b> RS-1
<b>BUILDING USE:</b> Single Family Dwelling	<b>HEAT:</b>	<b>ZONING PERMIT #:</b> n/a
<b>TOTAL HEATED/LIVING AREAS (SF):</b>	<b>A/C:</b>	
<b>TOTAL NON-HEATED AREAS (SF):</b>	<b>INTERIOR WALLS:</b> Drywall	
<b>NUMBER OF STORIES:</b>	<b>EXTERIOR WALLS:</b>	
<b>BEDROOMS:</b>	<b>FIREPLACE:</b>	
<b>SEPTIC CAPACITY # OF PERSONS:</b>	<b>ROOF:</b>	
<b>BATHS:</b> ½ BATHS:	<b>INSULATION:</b>	
<b>DETACHED/ATTACHED GARAGE(SF):</b>	<b>ELEVATOR (SF):</b>	
<b>STORAGE ENCLOSURE(SF): POOL(SF):</b>	<b>DECKS (SF):</b>	<b>CAMA PERMIT #:</b> n/a
<b>FLOOD ZONE:</b> Shaded X	<b>PORCHES (SF):</b>	
<b>BASE FLOOD ELEVATION:</b> FT PLUS 2FT=	<b>WINDOWS MAKE:</b>	<b>SEPTIC PERMIT #:</b> n/a
	<b>TYPE:</b>	

**\*\*\*The owner and builder are responsible for the following: All work done shall comply with the State Building Code and all other applicable State and local laws. The applicant certifies that the information on this permit is correct; that he/she is the owner or duly authorized agent of owner; that all construction shall be as shown on the submitted plans and specifications; the he/she understands this permit is valid for 180 days to begin construction and may be revoked for failure to comply with applicable regulations and laws.**

<b>TOTAL CONSTRUCTION COST</b>	<b>\$12,000</b>		
<b>HEATED/LIVING AREA (sf)</b> (new square footage)		X .60/sf (single family) = X .75/sf (all others) =	\$
<b>NON-HEATED AREA (sf)</b> (new square footage)		X .30/sf (single family) = X .35/sf (all others) =	\$
<b>REMODEL/REPAIR/ALTERATION</b> (no additional square footage)	<b>\$12,000</b>	X \$10 per \$1,000 of cost =	<b>\$12,000</b>
		Pool = \$125	\$
		Zoning Permit Fee = \$50	\$
		Plan Review Fee = \$150 or \$100	\$
		Minimum Permit Fee = \$100	\$
		Homeowner's Recovery Fund \$10	\$10.00
		<b>TOTAL FEE</b>	<b>\$130.00</b>

Kelly Piddington Kelly Pidd 10/31/19  
Applicant - Owner/Contractor (Please print and sign name) Date Issued  
Bunkey J. Piddington  
Building/Code/Zoning Official Date Approved  
J. P. DKS





Grant

PERMIT NUMBER: 4764

BUILDING PERMIT

DATE: 9/30/19

OWNER: Moongate LLC

ADDRESS: 120 Lee Court

CITY: Kill Devil Hills STATE: NC ZIP: 27948

BUILDER: Simple Side Construction

CONTRACTOR LICENSE #: 78583

ADDRESS: 308 W Helga St

CITY: Kill Devil Hills STATE: NC ZIP: 27948

PHONE: 252-564-8307

LOCATION OF BUILDING SITE: 102 N Bay Club Drive

PARCEL NUMBER: 030835037 FLOOD ZONE: \_\_\_\_\_ ZONING DISTRICT: \_\_\_\_\_

NC POWER WORK REQUEST NUMBER OR POWER METER NUMBER (IF APPLICABLE) \_\_\_\_\_ BFE: \_\_\_\_\_ FFE: \_\_\_\_\_

ERECT: \_\_\_\_\_ ALTER: \_\_\_\_\_ REPAIR: X

SQUARE FOOTAGE OF HEATED SPACE: 1486 UNHEATED SPACE: \_\_\_\_\_

NUMBER OF STORIES: \_\_\_\_\_ ROOMS: 3 BATHS: 2 FIREPLACES: \_\_\_\_\_

EXTERIOR WALLS: \_\_\_\_\_ FINISHES: \_\_\_\_\_ INTERIOR WALLS: Drywall ROOF TYPE AND MATERIAL: \_\_\_\_\_

HEAT TYPE: \_\_\_\_\_ INSULATION & R VALUE: R-15, R-38 FLOORING: LVP & Carpet

FOOTING: \_\_\_\_\_ FOUNDATION: \_\_\_\_\_

ADDITIONAL NOTES: Install new insulation where removed by restoration company, install new drywall, paint entire condo, install new flooring, replace appliances, install new mattress, pictures

EACH APPLICATION MUST BE ACCOMPANIED BY:

- SITE PLAN SHOWING ACTUAL DIMENSIONS OF THE LOT, ALL STRUCTURES, DRIVEWAYS AND PARKING
- TWO SETS OF WORKING DRAWINGS
- ELEVATION OF THE SITE
- RESTAURANTS: HEALTH DEPARTMENT APPROVALS
- CAMA PERMIT IF REQUIRED

\*\*\* CALL BUILDING INSPECTOR 24 HOURS IN ADVANCE FOR ALL INSPECTIONS\*\*\*

This building is to be erected or altered in accordance with the latest edition of the General Building Laws of North Carolina and all amendments as adopted by the Town of Manteo. This permit is valid for six (6) months. Compliance with Building Regulations is the responsibility of the undersigned applicant. Any change in construction or site plans will be subject to prior notification of the Planning and Zoning Department and the Building Inspector.

Estimated or Contract Cost: 18,000

Review 50.00

Date of Issuance: 10/1/19

Permit Cost: 180.00

Seals: [Signature]  
Applicant

[Signature]  
Inspector

\$230.00  
[Signature]  
Zoning Official

Conditions of Permit: \_\_\_\_\_





PERMIT NUMBER: 4765

BUILDING PERMIT

DATE: 9/30/19

OWNER: Owen & Joan Maxwell  
ADDRESS: 926 Pirates Way # 926C  
CITY: Manteo STATE: NC ZIP: 27954

BUILDER: Coastal Cottage Contracting, LLC  
CONTRACTOR LICENSE #: 75876  
ADDRESS: Po Box 433  
CITY: Nags Head STATE: NC ZIP: 27959  
PHONE: 252-715-2576 919-279-1702

LOCATION OF BUILDING SITE: 926 Pirates Way ZONING DISTRICT: \_\_\_\_\_  
PARCEL NUMBER: 031057000 FLOOD ZONE: AE9/10 BFE: 9/10 FFE: 11  
NC POWER WORK REQUEST NUMBER OR POWER METER NUMBER (IF APPLICABLE) \_\_\_\_\_  
ERECT: \_\_\_\_\_ ALTER: \_\_\_\_\_ REPAIR: \_\_\_\_\_

SQUARE FOOTAGE OF HEATED SPACE: 1232 UNHEATED SPACE: \_\_\_\_\_  
NUMBER OF STORIES: 2<sup>nd</sup> Floor ROOMS: 3 BATHS: 2 FIREPLACES: X

EXTERIOR WALLS: / INTERIOR WALLS: / ROOF TYPE AND MATERIAL: Asphalt  
HEAT TYPE: Electric INSULATION & R VALUE: \_\_\_\_\_ FLOORING: Vinyl  
FOOTING: / FOUNDATION: Piling

ADDITIONAL NOTES: Remodel kitchen and update / change out bath Faucets / Fixtures

EACH APPLICATION MUST BE ACCOMPANIED BY:

- SITE PLAN SHOWING ACTUAL DIMENSIONS OF THE LOT, ALL STRUCTURES, DRIVEWAYS AND PARKING
- TWO SETS OF WORKING DRAWINGS
- ELEVATION OF THE SITE
- RESTAURANTS: HEALTH DEPARTMENT APPROVALS
- CAMA PERMIT IF REQUIRED

\*\*\* CALL BUILDING INSPECTOR 24 HOURS IN ADVANCE FOR ALL INSPECTIONS\*\*\*

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Estimated or Contract Cost: 25,000 Permit Cost: 250.00  
Date of Issuance: 10/2/19 Review 50.00  
300.00

Seals: Coastal Cottage Contracting, LLC [Signature] [Signature]  
Applicant By Vanyhon Robinson Inspector Zoning Official  
managing member

Conditions of Permit: \_\_\_\_\_



MECHANICAL PERMIT

PERMIT NUMBER: 4764

DATE: 10/02/2019

OWNER: JAMES BENNETT

CONTRACTOR: RA HOY HEATING & A/C, INC

ADDRESS: 9620 DANE HOLLOW LANE

ADDRESS: P O Box #179

CITY: GLEN ALLEN STATE: VA ZIP: 23060

CITY: KITTY HAWK STATE: NC ZIP: 27949

PHONE: 804-497-6810

PHONE: (252) 261-2008

LOCATION: 1424 BALLAST POINT DR

BUILDER: \_\_\_\_\_

NUMBER OF HEATING UNITS: 1

NUMBER OF REGISTERS: \_\_\_\_\_

NUMBER OF B.T.U.'S: \_\_\_\_\_

TONNAGE: 2.5

LICENSE NUMBER: 13056

WORK ORDER NUMBER: \_\_\_\_\_

COST: \$7052

Permit Cost: \$150.00

If repairing or altering, please describe work: C/O 2 TON 16 SEER TRANE SYSTEM  
NORTH WITH XL724 THERMOSTAT

\*\*\*CALL BUILDING INSPECTOR 24 HOURS IN ADVANCE FOR ALL INSPECTIONS\*\*\*

DATE OF ISSUANCE: 10/3/19

SEALS: [Signature]  
(Applicant)

[Signature]  
(Inspector)





4767

PERMIT NUMBER: ~~4767~~

BUILDING PERMIT

DATE: 10/3/19

OWNER: Roanoke Island Fitness Lab LLC  
ADDRESS: P.O. Box 300  
CITY: Wanchesse STATE: NC ZIP: 27981

BUILDER: Deep Creek Developments LLC  
CONTRACTOR LICENSE #: 80375  
ADDRESS: 182 See View Lane  
CITY: Hertford STATE: NC ZIP: 27944  
PHONE: 252-207-3739

LOCATION OF BUILDING SITE: 823 Hwy 64/264 Manteo NC ZONING DISTRICT: 10-Manteo IN

PARCEL NUMBER: 024472000 FLOOD ZONE: AE BFE: AE 8 FFE: \_\_\_\_\_  
NC POWER WORK REQUEST NUMBER OR POWER METER NUMBER (IF APPLICABLE): \_\_\_\_\_

ERECT: \_\_\_\_\_ ALTER: X REPAIR: \_\_\_\_\_

SQUARE FOOTAGE OF HEATED SPACE: 3,750 UNHEATED SPACE: N/A  
NUMBER OF STORIES: 1 ROOMS: 5 BATHS: 4 FIREPLACES: N/A

FINISHES:  
EXTERIOR WALLS: Metal INTERIOR WALLS: Wood ROOF TYPE AND MATERIAL: Metal  
HEAT TYPE: \_\_\_\_\_ INSULATION & R VALUE: R-11 FLOORING: Concrete  
FOOTING: N/A FOUNDATION: N/A

ADDITIONAL NOTES: Existing Pre-Engineered Metal Building

EACH APPLICATION MUST BE ACCOMPANIED BY:

- SITE PLAN SHOWING ACTUAL DIMENSIONS OF THE LOT, ALL STRUCTURES, DRIVEWAYS AND PARKING
- TWO SETS OF WORKING DRAWINGS
- ELEVATION OF THE SITE
- RESTAURANTS: HEALTH DEPARTMENT APPROVALS
- CAMA PERMIT IF REQUIRED

\*\*\* CALL BUILDING INSPECTOR 24 HOURS IN ADVANCE FOR ALL INSPECTIONS\*\*\*

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Estimated or Contract Cost: \$89,500<sup>00</sup>

Review fee: \$50 + \$895

Permit Cost: \$945

Date of Issuance: 10/3/19

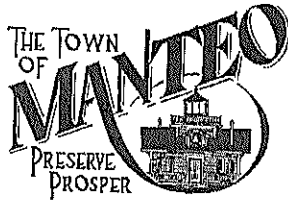
Seals:

Stephen B. M.  
Applicant

MEMD for Fred Featherstone  
Inspector

[Signature]  
Zoning Official

Conditions of Permit: \_\_\_\_\_



ELECTRICAL PERMIT

PERMIT NUMBER: 4768

DATE: 10/4/19

OWNER: Hassell Bros.  
ADDRESS: 210 Heritage Trl N  
CITY: Bellville STATE: TX ZIP: 77418  
PHONE: \_\_\_\_\_

CONTRACTOR: Kramer electric inc  
ADDRESS: 3847 ivy lane  
CITY: Kitty hawk STATE: NC ZIP: 27949  
PHONE: \_\_\_\_\_

LOCATION: 321 N. HWY 64 PARCEL NUMBER: 023273000  
BUILDER: \_\_\_\_\_

RESIDENTIAL:  NEW  ALTERATION  
COMMERCIAL:  NEW  ALTERATION

NC POWER WORK REQUEST NUMBER OR POWER METER NUMBER (IF APPLICABLE) \_\_\_\_\_

SERVICE AMPS: \_\_\_\_\_ INCREASED TO: \_\_\_\_\_

LICENSE NUMBER: \_\_\_\_\_ WORK ORDER NUMBER: \_\_\_\_\_

COST: \$1750 Permit Cost: \$50

If repairing or altering, please describe work: replacing wire to out building

\*\*\*CALL BUILDING INSPECTOR 24 HOURS IN ADVANCE FOR ALL INSPECTIONS\*\*\*

DATE OF ISSUANCE: 10/4/19 SEALS: [Signature]  
(Applicant) (Inspector)



BUILDING PERMIT

PERMIT NUMBER: 4769

DATE: 10/7/19

OWNER: Kermit Layton

BUILDER: Aniebl Gomez  
Sycamore Craftsman

ADDRESS: 501 S Broad St.  
CITY: Edenton STATE: NC ZIP: 27932

CONTRACTOR LICENSE #: \_\_\_\_\_  
ADDRESS: 327 Sycamore Rd  
CITY: Edenton STATE: NC ZIP: 27932  
PHONE: 252-312-1552

LOCATION OF BUILDING SITE: 103 Fernando ZONING DISTRICT: \_\_\_\_\_  
PARCEL NUMBER: 024811002 FLOOD ZONE: \_\_\_\_\_ BFE: \_\_\_\_\_ FFE: \_\_\_\_\_  
NC POWER WORK REQUEST NUMBER OR POWER METER NUMBER (IF APPLICABLE) \_\_\_\_\_  
ERECT: \_\_\_\_\_ ALTER: \_\_\_\_\_ REPAIR: \_\_\_\_\_

SQUARE FOOTAGE OF HEATED SPACE: \_\_\_\_\_ UNHEATED SPACE: \_\_\_\_\_  
NUMBER OF STORIES: \_\_\_\_\_ ROOMS: \_\_\_\_\_ BATHS: \_\_\_\_\_ FIREPLACES: \_\_\_\_\_  
FINISHES: \_\_\_\_\_

EXTERIOR WALLS: \_\_\_\_\_ INTERIOR WALLS: \_\_\_\_\_ ROOF TYPE AND MATERIAL: \_\_\_\_\_  
HEAT TYPE: \_\_\_\_\_ INSULATION & R VALUE: \_\_\_\_\_ FLOORING: \_\_\_\_\_  
FOOTING: \_\_\_\_\_ FOUNDATION: \_\_\_\_\_

ADDITIONAL NOTES: build shed roof over 3rd floor door

EACH APPLICATION MUST BE ACCOMPANIED BY:

- SITE PLAN SHOWING ACTUAL DIMENSIONS OF THE LOT, ALL STRUCTURES, DRIVEWAYS AND PARKING
- TWO SETS OF WORKING DRAWINGS
- ELEVATION OF THE SITE
- RESTAURANTS: HEALTH DEPARTMENT APPROVALS
- CAMA PERMIT IF REQUIRED

\*\*\* CALL BUILDING INSPECTOR 24 HOURS IN ADVANCE FOR ALL INSPECTIONS\*\*\*

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Estimated or Contract Cost: 2500 Permit Cost: \$50

Date of Issuance: 10/7/19

Seals: Kermit Layton Applicant Willard Featherstone Inspector Willard Zoning Official

Conditions of Permit: Planning board approval on 12/





ELECTRICAL PERMIT

PERMIT NUMBER: 4770

DATE: 10/10/2019

OWNER: BOB NEWSOME CONTRACTOR: SUBURBAN ELECTRIC SERVICES INC  
ADDRESS: 22 RUDDER ADDRESS: PO BOX 336  
CITY: MANTEO STATE: NC ZIP: \_\_\_\_\_ CITY: MANN'S HARBOR STATE: NC ZIP: 27953  
PHONE: \_\_\_\_\_ PHONE: 252.475.1372

LOCATION: 22 RUDDER (PIRATES COVE) PARCEL NUMBER: \_\_\_\_\_  
BUILDER: \_\_\_\_\_

RESIDENTIAL:  NEW  ALTERATION  
COMMERCIAL:  NEW  ALTERATION

NC POWER WORK REQUEST NUMBER OR POWER METER NUMBER (IF APPLICABLE) \_\_\_\_\_

SERVICE AMPS: 200AMP INCREASED TO: \_\_\_\_\_

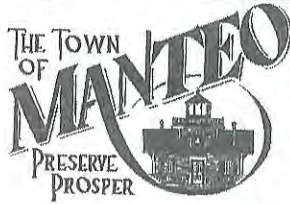
LICENSE NUMBER: U306633 WORK ORDER NUMBER: \_\_\_\_\_

COST: \$500 Permit Cost: \$75.00

If repairing or altering, please describe work: INSTALL 50 AMP ELECTRIC CAR CHARGER

\*\*\*CALL BUILDING INSPECTOR 24 HOURS IN ADVANCE FOR ALL INSPECTIONS\*\*\*

DATE OF ISSUANCE: 10/10/2019 SEALS: Julia Hudson (Applicant) [Signature] (Inspector)



ELECTRICAL PERMIT

PERMIT NUMBER: 4771

DATE: 10/02/2019

OWNER: BRENDA G ELLISON  
ADDRESS: 815 BACK BAY RD  
CITY: MANTEO STATE: NC ZIP: 27954  
PHONE: \_\_\_\_\_

CONTRACTOR: SUBURBAN ELECTRIC SERVICES, INC  
ADDRESS: 1078 HWY 64 N  
CITY: MANTEO STATE: NC ZIP: 27954  
PHONE: 252.475.1372

LOCATION: 815 BACK BAY RD, MANTEO PARCEL NUMBER: \_\_\_\_\_  
BUILDER: \_\_\_\_\_

RESIDENTIAL:  NEW  ALTERATION  
COMMERCIAL:  NEW  ALTERATION

NC POWER WORK REQUEST NUMBER OR POWER METER NUMBER (IF APPLICABLE) \_\_\_\_\_  
SERVICE AMPS: 200 INCREASED TO: \_\_\_\_\_

LICENSE NUMBER: U30633 WORK ORDER NUMBER: \_\_\_\_\_  
COST: 1,000.00 Permit Cost: 500.00

If repairing or altering, please describe work: ~~INSTALL 200 AMP DISCONNECT~~ Install 200 amp disconnect

\*\*\*CALL BUILDING INSPECTOR 24 HOURS IN ADVANCE FOR ALL INSPECTIONS\*\*\*

DATE OF ISSUANCE: 10/10/2019 SEALS: Julia Hubson  
(Applicant)

[Signature]  
(Inspector)



MECHANICAL PERMIT

PERMIT NUMBER: 4772

DATE: 10/23/19

OWNER: Brett Meisenheimer  
ADDRESS: 27 Ballast Dr. Dr.  
CITY: Manteo STATE: NC ZIP: 27954  
PHONE: \_\_\_\_\_

CONTRACTOR: Schwartz & Strawser LLC  
ADDRESS: 148 Fields Dr.  
CITY: Manteo STATE: NC ZIP: 27954  
PHONE: 252 423 1015

LOCATION: \_\_\_\_\_ PARCEL NUMBER: \_\_\_\_\_  
BUILDER: \_\_\_\_\_

NUMBER OF HEATING UNITS: 1  
NUMBER OF B.T.U.'S: 60,000  
LICENSE NUMBER: L34529  
COST: \_\_\_\_\_

NUMBER OF REGISTERS: 18  
TONNAGE: 5  
WORK ORDER NUMBER: \_\_\_\_\_  
Permit Cost: \$150

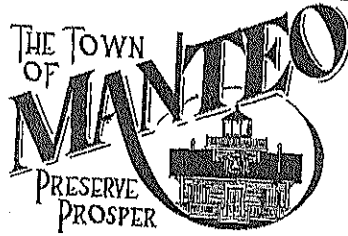
If repairing or altering, please describe work: Replacing heat pump and air handler on the third floor

\*\*\*CALL BUILDING INSPECTOR 24 HOURS IN ADVANCE FOR ALL INSPECTIONS\*\*\*

DATE OF ISSUANCE: 10/21/19 SEALS: \_\_\_\_\_

(Applicant)

(Inspector)



SIGN PERMIT

PERMIT NUMBER: 4773

DATE: 10/21/19

APPLICANT: The Gypsy's Cupboard  
ADDRESS: 308 Updown St.  
Manteo NC 27954  
PHONE: 252-473-8200

THIS PERMIT IS TO: ERECT \_\_\_\_\_ ALTER: \_\_\_\_\_ REPAIR: \_\_\_\_\_ A SIGN. (PLEASE CHECK ONE.)  
TYPE OF SIGN: 21 x 36

LOCATION OF SIGN: 101 Sir Walter

PARCEL NUMBER: 024774000

ZONING DISTRICT: B-1 SQUARE FOOTAGE OF SIGN: 5.25 sq ft.

THIS PERMIT MUST BE ACCOMPANIED BY:  
 DRAWING OF SIGN TO SCALE  
 LOCATION OF PROPOSED SIGN AND ANY OTHER SIGNS ON THE SAME LOT  
 DRAWING TO SCALE OF FACE OF BUILDING IF THE SIGN IS TO BE MOUNTED ON THE FACE OF A BUILDING

[Signature]  
CONTRACTOR/OWNER SIGNATURE

10-21-19  
DATE

[Signature] & Fred  
BUILDING INSPECTOR Teather 10/21/19  
DATE

COMMENTS:

COST OF PERMIT: \$ 50





BUILDING PERMIT

PERMIT NUMBER: 4774

DATE: 10/22/19

OWNER: Stuart Abernathy  
ADDRESS: 1007 Croatan Ave  
CITY: Manteo STATE: NC ZIP: 27954

BUILDER: Albermarle Bulkheads  
CONTRACTOR LICENSE #: \_\_\_\_\_  
ADDRESS: Po Box 50  
CITY: KDH STATE: NC ZIP: 27948  
PHONE: 252-241-7466

LOCATION OF BUILDING SITE: 1007 Croatan Ave ZONING DISTRICT: \_\_\_\_\_  
PARCEL NUMBER: 024731000 FLOOD ZONE: \_\_\_\_\_ BFE: \_\_\_\_\_ FFE: \_\_\_\_\_  
NC POWER WORK REQUEST NUMBER OR POWER METER NUMBER (IF APPLICABLE) \_\_\_\_\_  
ERECT: \_\_\_\_\_ ALTER: \_\_\_\_\_ REPAIR: \_\_\_\_\_

SQUARE FOOTAGE OF HEATED SPACE: \_\_\_\_\_ UNHEATED SPACE: \_\_\_\_\_  
NUMBER OF STORIES: \_\_\_\_\_ ROOMS: \_\_\_\_\_ BATHS: \_\_\_\_\_ FIREPLACES: \_\_\_\_\_

FINISHES: \_\_\_\_\_  
EXTERIOR WALLS: \_\_\_\_\_ INTERIOR WALLS: \_\_\_\_\_ ROOF TYPE AND MATERIAL: \_\_\_\_\_  
HEAT TYPE: \_\_\_\_\_ INSULATION & R VALUE: \_\_\_\_\_ FLOORING: \_\_\_\_\_  
FOOTING: \_\_\_\_\_ FOUNDATION: \_\_\_\_\_

ADDITIONAL NOTES: 6'x24' addition to pier, 12'x32' platform, 12'x12' boat lift, 3 tie pilings

EACH APPLICATION MUST BE ACCOMPANIED BY:

- SITE PLAN SHOWING ACTUAL DIMENSIONS OF THE LOT, ALL STRUCTURES, DRIVEWAYS AND PARKING
- TWO SETS OF WORKING DRAWINGS
- ELEVATION OF THE SITE
- RESTAURANTS: HEALTH DEPARTMENT APPROVALS
- CAMA PERMIT IF REQUIRED

\*\*\* CALL BUILDING INSPECTOR 24 HOURS IN ADVANCE FOR ALL INSPECTIONS\*\*\*

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Estimated or Contract Cost: 18,480.00

Permit Cost: 156.00  
Review 50.00  
206.00

Date of Issuance: 10/22/19

Seals: Mark Humes  
Applicant

[Signature]  
Inspector

[Signature]  
Zoning Official

Conditions of Permit: \_\_\_\_\_



ELECTRICAL PERMIT

PERMIT NUMBER: 4775

DATE: 10/24/19

OWNER: Clarence & Ruth Lewis  
ADDRESS: 514 Sir Walter Raleigh St.  
CITY: Manteo STATE: NC ZIP: 27954  
PHONE: \_\_\_\_\_

CONTRACTOR: Self  
ADDRESS: \_\_\_\_\_  
CITY: \_\_\_\_\_ STATE: \_\_\_\_\_ ZIP: \_\_\_\_\_  
PHONE: \_\_\_\_\_

LOCATION: 514 Sir Walter Raleigh PARCEL NUMBER: 025631000  
BUILDER: \_\_\_\_\_

RESIDENTIAL:  NEW  ALTERATION  
COMMERCIAL:  NEW  ALTERATION

NC POWER WORK REQUEST NUMBER OR POWER METER NUMBER (IF APPLICABLE) \_\_\_\_\_

SERVICE AMPS: \_\_\_\_\_ INCREASED TO: \_\_\_\_\_

LICENSE NUMBER: \_\_\_\_\_ WORK ORDER NUMBER: \_\_\_\_\_

COST: ~~1~~ \_\_\_\_\_ Permit Cost: N/A Hurricane Dorian

If repairing or altering, please describe work: Repairing power pole after Hurricane Dorian

Dominion# 32408756

\*\*\*CALL BUILDING INSPECTOR 24 HOURS IN ADVANCE FOR ALL INSPECTIONS\*\*\*

DATE OF ISSUANCE: 10/24/19

SEALS: Clarence E. Lewis  
(Applicant)

Fred Featherstone  
(Inspector)





BUILDING PERMIT

PERMIT NUMBER: 4776

DATE: 9/27/19

OWNER: Rufus Pritchard  
ADDRESS: 400 Upowoc Ave  
CITY: Manteo STATE: NC ZIP: 27954

BUILDER: JES Construction, LLC  
CONTRACTOR LICENSE #: 69678  
ADDRESS: 1741 Corporate Landing Pkwy  
CITY: Virginia Beach STATE: VA ZIP: 23454  
PHONE: (757) 558-9909

LOCATION OF BUILDING SITE: 400 Upowoc Ave ZONING DISTRICT: \_\_\_\_\_  
PARCEL NUMBER: 023250000 FLOOD ZONE: AE BFE: \_\_\_\_\_ FFE: \_\_\_\_\_  
NC POWER WORK REQUEST NUMBER OR POWER METER NUMBER (IF APPLICABLE) \_\_\_\_\_  
ERECT: \_\_\_\_\_ ALTER: \_\_\_\_\_ REPAIR: \_\_\_\_\_

SQUARE FOOTAGE OF HEATED SPACE: \_\_\_\_\_ UNHEATED SPACE: \_\_\_\_\_  
NUMBER OF STORIES: 2 ROOMS: 3 BATHS: 3.5 FIREPLACES: \_\_\_\_\_

FINISHES: \_\_\_\_\_  
EXTERIOR WALLS: \_\_\_\_\_ INTERIOR WALLS: \_\_\_\_\_ ROOF TYPE AND MATERIAL: \_\_\_\_\_  
HEAT TYPE: \_\_\_\_\_ INSULATION & R VALUE: \_\_\_\_\_ FLOORING: \_\_\_\_\_  
FOOTING: \_\_\_\_\_ FOUNDATION: \_\_\_\_\_

ADDITIONAL NOTES: Stabilizing existing portion of the foundation using Intellijacks, Crawlspace Carpentry, and Encapsulation.

EACH APPLICATION MUST BE ACCOMPANIED BY:

- SITE PLAN SHOWING ACTUAL DIMENSIONS OF THE LOT, ALL STRUCTURES, DRIVEWAYS AND PARKING
- TWO SETS OF WORKING DRAWINGS
- ELEVATION OF THE SITE
- RESTAURANTS: HEALTH DEPARTMENT APPROVALS
- CAMA PERMIT IF REQUIRED

\*\*\* CALL BUILDING INSPECTOR 24 HOURS IN ADVANCE FOR ALL INSPECTIONS\*\*\*

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Estimated or Contract Cost: \$27,500

Date of Issuance: 10/31/19

Permit Cost: 250.00

REVIEW 50.00

300.00

Seals: Jessica Mitchell  
Applicant

[Signature]  
Inspector

[Signature]  
Zoning Official

Conditions of Permit: \_\_\_\_\_