



Town of Kill Devil Hills

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

PAID

NOV - 5 2019

Planning and Inspection Department

BJ2019-194

PROJECT NAME: Demarest Remodel
SITE ADDRESS: 408 EDEN ST ST W KILL DEVIL HILLS

BUILDING JOINT

ISSUED: 11/05/2019

EXPIRES: 05/03/2020

APPLICANT: DEMAREST, HARRY E
1906 GLEN RIDGE ROAD
BALTIMORE, MD 21234

OWNER: DEMAREST, HARRY E
1906 GLEN RIDGE ROAD
BALTIMORE, MD 21234

CONTRACTOR: LONDON, DAVID
9116 Caratoke Hwy
Point Harbor, NC 27964

UNLICENSED - REMODELING: LONDON, DAVID
9116 Caratoke Hwy
Point Harbor, NC 27964

License: 12345
Expires:

PARCEL:

PIN: 988517002706

Parcel Number: 003015000

Address: 408 EDEN ST ST W KILL DEVIL HILLS

Zoning:

Addition: VIRGINIA DARE SHORES

Block: 52 **Lot(s):** 24-27

Legal Description:

FEES:	<u>Paid</u>	<u>Due</u>	BUILDING AREA:	
Building Permit Fee - Minimum Fee	\$150.00	\$0.00	Remodel/Renovation	194 SQFT
Totals :	\$150.00	\$0.00		

PROJECT DESCRIPTION: Expand bedroom, add bathroom and walk-in closet, new kitchen cabinets

BJ2019-194

PROJECT NAME: Demarest Remodel

SITE ADDRESS: 408 EDEN ST ST W KILL DEVIL HILLS

BUILDING JOINT

ISSUED: 11/05/2019

EXPIRES: 05/03/2020

DETAILS**Permit**

Name	Value
ZONING DISTRICT	RL
FRONT YARD SETBACK	30
REAR YARD SETBACK	20% Depth >30
SIDE YARD SETBACK	10
HEALTH DEPARTMENT PERMIT #	29149
# PARKING SPACES/BEDROOM	2
CAMA PERMIT	N
CAMA EXEMPTION	N
FLOOD ZONE	AE
BASE FLOOD ELEVATION	8.3
SUBSTANTIAL IMPROVEMENT	NO
PURPOSE	Residential Repair/Remodel
CONSTRUCTION TYPE	V
CONSTRUCTION COST	19825.00
LIVING SPACE (SQFT)	194
TOTAL SQUARE FOOTAGE	194
CULVERT	N
DRIVEWAY INVERT 2	N
OCCUPANCY TYPE	One & Two Family Dwelling

REQUIRED INSPECTIONS

Framing	Final
Rough In	Zoning Final
Insulation	

CONDITIONS

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

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

BJ2019-194

PROJECT NAME: Demarest Remodel

SITE ADDRESS: 408 EDEN ST ST W KILL DEVIL HILLS

BUILDING JOINT

ISSUED: 11/05/2019

EXPIRES: 05/03/2020

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

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

Issued By: _____

Contractor or Authorized Agent: David London Date: 11-5-2019



Town of Kill Devil Hills

PO BOX 1719
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NOV - 6 2019

Planning and Inspection Department

BJ2019-195	BUILDING JOINT
PROJECT NAME: SAGA New 24 Bedroom SFD	ISSUED: 11/05/2019
SITE ADDRESS: 1209 VA DARE TRL S Kill Devil Hills	EXPIRES: 05/03/2020

APPLICANT: 1209 SVDT LLC PO BOX 90 Kill Devil Hills, NC 27948	OWNER: 1209 SVDT LLC PO BOX 90 Kill Devil Hills, NC 27948
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CONTRACTOR: SAGA CONSTRUCTION
 1314 S Croatan Hwy, Suite 301
 PO Box 90
 Kill Devil Hills, NC 27948
 252-441-9003

GENERAL BUILDING - LIMITED:	SAGA CONSTRUCTION 1314 S Croatan Hwy, Suite 301 PO Box 90 Kill Devil Hills, NC 27948 252-441-9003	License: 62306 Expires: 12/30/2019
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PARCEL:	Town of Kill Devil Hills Water Charges
PIN: 989305072684	Parcel Number: PAID
Address: 1209 VA DARE TRL S Kill Devil Hills	Water Tap #: T23765
Addition:	Zoning:
Legal Description: Lot 5, Blk. 5, Kill Devil Hills Sec. 1,	Block: Lot(s):

FEES:	Paid	Due	BUILDING AREA:
Covered Porch Residential	\$1,404.00	\$0.00	Covered Porches/Decks 1872 SQFT
Land Disturbing	\$100.00	\$0.00	Open Decks 1 EA
Open Deck Fee	\$150.00	\$0.00	Residential Unheated (.40) 76 Sq. Ft
Pool/Hot Tub	\$200.00	\$0.00	Residential Heated Space 10645 sq. Ft
Pool/Hot Tub	\$200.00	\$0.00	(.75)
Res. Building Permit Fee	\$8,014.15	\$0.00	# of Temporary Poles 1 EA
T-Pole	\$50.00	\$0.00	
Totals :			
	\$10,118.15	\$0.00	

PROJECT DESCRIPTION: New 24 Bedroom Single Family Dwelling, Pool, Pool House and walkway and dune deck

BJ2019-195

PROJECT NAME: SAGA New 24 Bedroom SFD
SITE ADDRESS: 1209 VA DARE TRL S Kill Devil Hills

BUILDING JOINT**ISSUED:** 11/05/2019**EXPIRES:** 05/03/2020

DETAILS**Permit**

Name	Value
# OF DUMPSTERS	2.00
ZONING DISTRICT	OIR
FRONT YARD SETBACK	30
REAR YARD SETBACK	CAMA
SIDE YARD SETBACK	10
# PARKING SPACES/BEDROOM	24
CAMA PERMIT	Y
CAMA EXEMPTION	N
FLOOD ZONE	VE
BASE FLOOD ELEVATION	11.0
Proposed First Floor Elevation	15.67
SUBSTANTIAL IMPROVEMENT	NO
PURPOSE	Residential New
CONSTRUCTION TYPE	V
CONSTRUCTION COST	1500000.00
LOT COVERAGE	52.40
LIVING SPACE (SQFT)	10645
COVERED PORCHES/DECKS (SQFT)	1872
ACCESSORY STRUCTURE (SQFT)	76
OPEN DECK (SQFT)	84
TOTAL SQUARE FOOTAGE	12677
SURVEYOR NAME AND NUMBER	Michael W. Robinson
ENGINEER AND LICENSE NUMBER	Fredrick House 24740
CULVERT	N
DRIVEWAY INVERT 2	Y
OCCUPANCY TYPE	One & Two Family Dwelling

BJ2019-195

PROJECT NAME: SAGA New 24 Bedroom SFD
SITE ADDRESS: 1209 VA DARE TRL S Kill Devil Hills

BUILDING JOINT

ISSUED: 11/05/2019

EXPIRES: 05/03/2020

REQUIRED INSPECTIONS

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

CONDITIONS

- * This permit becomes null and void if work or construction authorized is not commenced within 6 months or if construction or work is suspended for a period of 12 months at any time after work has started.
- * NOTICE: Call Public Services Department (252) 480-4080 before pouring driveway!
- * As-built survey will be required prior to Certificate of Occupancy or Certificate of Compliance.
- * The developer shall be responsible for maintaining erosion and sediment control at the disturbed area.
- * A final elevation certificate will be required prior to issuance of a Certificate of Occupancy or a Certificate of Compliance in accordance with 151.41(C).
- * Development must meet all aspects of Chapter 151 Flood Damage Prevention Ordinance including use and elevation.
- * THIS PROPERTY IS LOCATED IN A SPECIAL FLOOD HAZARD AREA.
 1. All Special Flood Hazard Areas limit the use of enclosures below the lowest floor for parking, building access and limited storage only.
 2. In the VE Zone, there shall be no alteration of the sand dunes which would increase potential flood damage.
 3. In the VE Zone, there shall be no fill used for structural support.
 4. Elevation Certificate will be required at time of application, 21 days from the establishment of the lowest floor and at construction completion.

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

- * Per §153.082(B)(1)(c) Mechanical equipment, including HVAC equipment and LP Gas equipment shall not project into a minimum yard setback more than four (4) feet.
- * Per §153.186(D)(1) Mechanical equipment shall not be visible from any right-of-way and (2) All Mechanical equipment and appurtenances shall be screened.
- * Must comply with Wind Borne Debris requirements as defined in NCBC R301.2.1.2 and NCBC 1609.2.
- * Construction must meet all aspect of Chapter 153 Zoning including lot coverage and setbacks.
- * Zoning Final Inspection is required.
- * Height Certification must be submitted prior to issuance of Certificate of Occupancy.
- * Stormwater Drainage Easement required to be recorded prior to issuance of Certificate of Occupancy

BJ2019-195

PROJECT NAME: SAGA New 24 Bedroom SFD
SITE ADDRESS: 1209 VA DARE TRL S Kill Devil Hills

BUILDING JOINT

ISSUED: 11/05/2019

EXPIRES: 05/03/2020

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

Issued By:  _____

Contractor or Authorized Agent: Greacen Mueck Date: 11.6.19



Town of Kill Devil Hills

PO BOX 1719
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NOV - 6 2019

Planning and Inspection Department

BJ2019-193

PROJECT NAME: White game room addition
SITE ADDRESS: 1805 APACHE ST KILL DEVIL HILLS

BUILDING JOINT

ISSUED: 11/04/2019

EXPIRES: 05/02/2020

APPLICANT: WHITE, MARK
1805 APACHE STREET
Kill Devil Hills, NC 27948

OWNER: WHITE, MARK
1805 APACHE STREET
Kill Devil Hills, NC 27948

CONTRACTOR: ZACHARY CHANTRY
1717 Wyandotte St.
Kill Devil Hills, NC 27948

UNLICENSED - REMODELING: ZACHARY CHANTRY
306 Shiloh Street
Kill Devil Hills, NC 27948
252-207-1686

License: 12345
Expires:

PARCEL:

PIN: 988409166940

Parcel Number: 002416000

Address: 1805 APACHE ST KILL DEVIL HILLS

Zoning:

Addition: SEA HOLLY RIDGE

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

Legal Description:

FEES:	Paid	Due	BUILDING AREA:	
Res. Building Permit Fee	\$283.50	\$0.00	Residential Heated Space	378 sq. Ft.
Fence	\$100.00	\$0.00	(.75)	
Totals :	\$383.50	\$0.00		

PROJECT DESCRIPTION: Add game room under existing house, add fence in rear yard

BJ2019-193

PROJECT NAME: White game room addition
SITE ADDRESS: 1805 APACHE ST KILL DEVIL HILLS

BUILDING JOINT

ISSUED: 11/04/2019

EXPIRES: 05/02/2020

DETAILS**Permit**

Name	Value
ZONING DISTRICT	RL
FRONT YARD SETBACK	30
REAR YARD SETBACK	20% Depth >30
SIDE YARD SETBACK	8
HEALTH DEPARTMENT PERMIT #	29135
# PARKING SPACES/BEDROOM	3
CAMA PERMIT	N
CAMA EXEMPTION	N
FLOOD ZONE	X
SUBSTANTIAL IMPROVEMENT	NO
PURPOSE	Residential Addition
CONSTRUCTION COST	20000.00
LOT COVERAGE	29.79
SURVEYOR NAME AND NUMBER	Gloria J. Rogers L-3531
CULVERT	N
DRIVEWAY INVERT 2	N
OCCUPANCY TYPE	One & Two Family Dwelling

REQUIRED INSPECTIONS

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

CONDITIONS

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

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

BJ2019-193

PROJECT NAME: White game room addition
SITE ADDRESS: 1805 APACHE ST KILL DEVIL HILLS

BUILDING JOINT

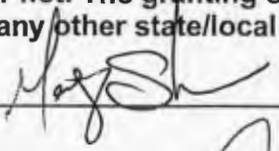
ISSUED: 11/04/2019

EXPIRES: 05/02/2020

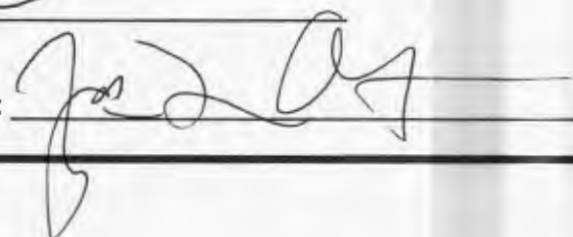
* Zoning Final Inspection is required.

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

Issued By: _____



Contractor or Authorized Agent: _____



Date: _____

10/6/19



Town of Kill Devil Hills

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



NOV - 6 2019

Planning and Inspection Department

BJ2019-185

PROJECT NAME: Delp New Single Family Dwelling
SITE ADDRESS: 804 Sixth Avenue Kill Devil Hills

BUILDING JOINT

ISSUED: 11/06/2019

EXPIRES: 05/04/2020

APPLICANT: Delp, Earnest
32 Woodlawn Drive
PALMYRA, VA 22963

OWNER: Delp, Earnest
32 Woodlawn Drive
PALMYRA, VA 22963

CONTRACTOR: MOYE, CHRISTOPHER A
3923 SMITH ST
kitty hawk, nc 27949
252-216-8155

GENERAL BUILDING-LIMITED: MOYE, CHRISTOPHER A
3923 SMITH ST
kitty hawk, nc 27949
252-216-8155

License: 76610
Expires: 12/31/2019

PARCEL:

PIN: 988311771107

Parcel Number:

Address: 804 Sixth Avenue Kill Devil Hills

Zoning:

Addition: KILL DEVIL HILLS REALTY CORP

Block: 38 **Lot(s):** 3

Legal Description: Lot 3, Block 38 Kill Devil Hills Realty Corp

FEES:	Paid	Due	BUILDING AREA:	
Covered Porch Residential	\$285.75	\$0.00	Covered Porches/Decks	381 SQFT
Land Disturbing	\$100.00	\$0.00	Residential Heated Space	1612 sq. Ft.
Res. Building Permit Fee	\$1,209.00	\$0.00	(.75)	
T-Pole	\$50.00	\$0.00	# of Temporary Poles	1 EA
Totals :	\$1,644.75	\$0.00		

PROJECT DESCRIPTION: New 2 Bedroom Single Family Dwelling

Town of Kill Devil Hills
Water Charges

PAID

Water Tap #: T23801

BJ2019-185**PROJECT NAME:** Delp New Single Family Dwelling
SITE ADDRESS: 804 Sixth Avenue Kill Devil Hills**BUILDING JOINT****ISSUED:** 11/06/2019**EXPIRES:** 05/04/2020

DETAILS**Permit**

Name	Value
ZONING DISTRICT	RL
FRONT YARD SETBACK	30
REAR YARD SETBACK	20% Depth >30
SIDE YARD SETBACK	10
HEALTH DEPARTMENT PERMIT #	29078
# PARKING SPACES/BEDROOM	2
CAMA PERMIT	N
CAMA EXEMPTION	N
FLOOD ZONE	X
SUBSTANTIAL IMPROVEMENT	NO
PURPOSE	Residential New
CONSTRUCTION TYPE	V
CONSTRUCTION COST	250000.00
LOT COVERAGE	34.00
LIVING SPACE (SQFT)	1612
COVERED PORCHES/DECKS (SQFT)	381
TOTAL SQUARE FOOTAGE	1993
SURVEYOR NAME AND NUMBER	Sorrell L-2849
ARCHITECT NAME AND LICENSE NUMBER	William Robson 13341
CULVERT	N
ROLL OUT CAN	1
DRIVEWAY INVERT 2	Y
OCCUPANCY TYPE	One & Two Family Dwelling

BJ2019-185

PROJECT NAME: Delp New Single Family Dwelling
SITE ADDRESS: 804 Sixth Avenue Kill Devil Hills

BUILDING JOINT

ISSUED: 11/06/2019

EXPIRES: 05/04/2020

REQUIRED INSPECTIONS

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

CONDITIONS

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

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

Issued By: _____

Contractor or Authorized Agent: Chris A. Myer Date: 11-6-19



Town of Kill Devil Hills

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

Planning and Inspection Department

BJ2019-188

PROJECT NAME: John Yancy Remodel
SITE ADDRESS: 2009 VA DARE TRL S KILL DEVIL HILLS

BUILDING JOINT

ISSUED: 11/05/2019

EXPIRES: 05/03/2020

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

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

CONTRACTOR: RM SAUNDERS GENERAL CONTRACTORS
PO Box 1922
Kill Devil Hills, NC 27948
480-9477

GENERAL BUILDING - UNLIMITED: SAUNDERS, R.M.
P.O. box 1922
Kill Devil Hills, NC 27948
252-207-8710

License: 32380
Expires: 12/31/2019

PARCEL:

PIN: 989313148592

Parcel Number: 005180000

Address: 2009 VA DARE TRL S KILL DEVIL HILLS

Addition: H B CAWTHORNE ESTATE LANDS

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

Legal Description:

FEES:	Paid	Due	BUILDING AREA:
Renovation/Remodel/Relocate	\$3,893.85	\$0.00	Remodel/Renovation 8653 SQFT
Totals :	\$3,893.85	\$0.00	

PROJECT DESCRIPTION: remodel bathrooms, repair replace siding, paint, new carpet, replace some windows

PAID

NOV - 6 2019

BJ2019-188

PROJECT NAME: John Yancy Remodel
SITE ADDRESS: 2009 VA DARE TRL S KILL DEVIL HILLS

BUILDING JOINT

ISSUED: 11/05/2019

EXPIRES: 05/03/2020

DETAILS**Permit**

Name	Value
ZONING DISTRICT	OIR
FRONT YARD SETBACK	30
REAR YARD SETBACK	CAMA
SIDE YARD SETBACK	10
CAMA PERMIT	N
CAMA EXEMPTION	N
FLOOD ZONE	VE
BASE FLOOD ELEVATION	11
SUBSTANTIAL IMPROVEMENT	NO
PURPOSE	Commercial Repair/Remodel
CONSTRUCTION COST	350000.00
SURVEYOR NAME AND NUMBER	Carlos F. Gomez
CULVERT	N
DRIVEWAY INVERT 2	N
OCCUPANCY TYPE	Business

REQUIRED INSPECTIONS

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

CONDITIONS

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

BJ2019-188

PROJECT NAME: John Yancy Remodel

SITE ADDRESS: 2009 VA DARE TRL S KILL DEVIL HILLS

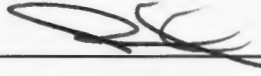
BUILDING JOINT

ISSUED: 11/05/2019

EXPIRES: 05/03/2020

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Issued By: 

Contractor or Authorized Agent:  Date: 11-5-19



Town of Kill Devil Hills

PO BOX 1719
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Phone: 252-449-5318 Fax: 252-441-4102

PAID

NOV 12 2019

Planning and Inspection Department

TOWN OF
KILL DEVIL HILLS

BJ2019-199	BUILDING JOINT
PROJECT NAME: BEALE INTERIOR REMODEL AND DECK	ISSUED: 11/08/2019
SITE ADDRESS: 1517 NEPTUNE DR KILL DEVIL HILLS	EXPIRES: 05/06/2020

APPLICANT: BEALE, JAMES CHESLEY III 308 SOUTH HIGH STREET FRANKLIN, VA 23841	OWNER: BEALE, JAMES CHESLEY III 308 SOUTH HIGH STREET FRANKLIN, VA 23841
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GENERAL:	Self UNKNOWN UNKNOWN, XX 00000 917-862-9006	License: Unlicensed Expires: 12/31/2020
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PARCEL:

PIN: 989309055313	Parcel Number: 008255000
Address: 1517 NEPTUNE DR KILL DEVIL HILLS	Zoning:
Addition: OCEAN ACRES INC	Block: 0 Lot(s): PT 67-70
Legal Description:	

FEES:	<u>Paid</u>	<u>Due</u>	BUILDING AREA:	
Renovation/Remodel/Relocate	\$559.87	\$0.00	Remodel/Renovation	1244 SQFT
Open Deck Fee	\$150.00	\$0.00	Open Decks	1 EA
Totals :	\$709.87	\$0.00		

PROJECT DESCRIPTION: REMODEL INTERIOR, REBUILD DECK, EXISTING PILINGS TO REMAIN

BJ2019-199

PROJECT NAME: BEALE INTERIOR REMODEL AND DECK
SITE ADDRESS: 1517 NEPTUNE DR KILL DEVIL HILLS

BUILDING JOINT

ISSUED: 11/08/2019

EXPIRES: 05/06/2020

DETAILS

Permit

Name	Value
ZONING DISTRICT	C
FRONT YARD SETBACK	30
REAR YARD SETBACK	20% Depth >30
SIDE YARD SETBACK	8
STREET SIDE SETBACK	15
CAMA PERMIT	N
CAMA EXEMPTION	N
FLOOD ZONE	AE
BASE FLOOD ELEVATION	9.3
SUBSTANTIAL IMPROVEMENT	NO
PURPOSE	Residential Repair/Remodel
CONSTRUCTION TYPE	V
CONSTRUCTION COST	32000.00
CULVERT	N
DRIVEWAY INVERT 2	N
OCCUPANCY TYPE	One & Two Family Dwelling

REQUIRED INSPECTIONS

Framing	Final
Rough In	Zoning Final
Insulation	

CONDITIONS

- * NOTICE: Call Public Services Department (252) 480-4080 before pouring driveway!
- * This permit becomes null and void if work or construction authorized is not commenced within 6 months or if construction or work is suspended for a period of 12 months at any time after work has started.
- * Zoning Final Inspection is required.
- * Construction must meet all aspect of Chapter 153 Zoning including lot coverage and setbacks.
- * Flood openings must be adequately sized to vent storage area. (1sq. inch per 1sq. ft)

BJ2019-199

PROJECT NAME: BEALE INTERIOR REMODEL AND DECK
SITE ADDRESS: 1517 NEPTUNE DR KILL DEVIL HILLS

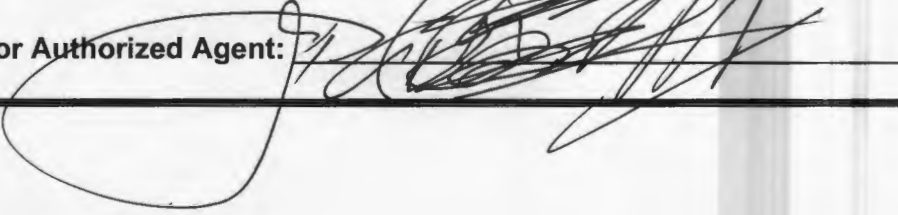
BUILDING JOINT

ISSUED: 11/08/2019

EXPIRES: 05/06/2020

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Issued By: 

Contractor or Authorized Agent: 

Date: 11-12-19



Town of Kill Devil Hills

PO BOX 1719
Kill Devil Hills, NC 27948
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PAID

NOV 12 2019

Planning and Inspection Department

BJ2019-198

PROJECT NAME: Harris Teeter fire alarm renovations
SITE ADDRESS: 2012 CROATAN HWY S KILL DEVIL HILLS

BUILDING JOINT

ISSUED: 11/07/2019

EXPIRES: 05/05/2020

APPLICANT: Harris Teeter
701 Crestdale Drive
MATTHEWS, NC 28105

OWNER: Harris Teeter
701 Crestdale Drive
MATTHEWS, NC 28105

ELECTRICAL: Rare Security
2716 Hidden Glen LN
Raleigh, NC 27606
919-815-8164

License: 23645
Expires: 10/15/2020

PARCEL:

PIN: 989313034150

Parcel Number: 028829000

Address: 2012 CROATAN HWY S KILL DEVIL HILLS

Addition: SUBDIVISION - NONE

Zoning:

Block: 0

Lot(s): BLKS 3,5,7
&

Legal Description:

FEES:	Paid	Due
Building Permit Fee - Minimum Fee	\$150.00	\$0.00
Totals :	\$150.00	\$0.00

PROJECT DESCRIPTION: Upgrade existing fire alarm panel with like control board.

BJ2019-198

PROJECT NAME: Harris Teeter fire alarm renovations
SITE ADDRESS: 2012 CROATAN HWY S KILL DEVIL HILLS

BUILDING JOINT

ISSUED: 11/07/2019

EXPIRES: 05/05/2020

DETAILS

Permit

Name	Value
ZONING DISTRICT	LI-1
CAMA PERMIT	N
CAMA EXEMPTION	N
FLOOD ZONE	X
SUBSTANTIAL IMPROVEMENT	NO
PURPOSE	Commercial Repair/Remodel
CONSTRUCTION TYPE	II
CONSTRUCTION COST	1000.00
CULVERT	N
DRIVEWAY INVERT 2	N

REQUIRED INSPECTIONS

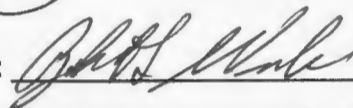
Final

CONDITIONS

- * NOTICE: Call Public Services Department (252) 480-4080 before pouring driveway!
- * This permit becomes null and void if work or construction authorized is not commenced within 6 months or if construction or work is suspended for a period of 12 months at any time after work has started.
- * Contact Fire Marshal John Risoldi for final inspection. 252-480-4060

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

Issued By: 

Contractor or Authorized Agent: 

Date: 12 Nov. 2019



Town of Kill Devil Hills

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

NOV 13 2019

Planning and Inspection Department

BJ2019-200 PROJECT NAME: SAGA New SFD SITE ADDRESS: 1207 VA DARE TRL S KILL DEVIL HILLS	BUILDING JOINT ISSUED: 11/12/2019 EXPIRES: 05/10/2020
--	--

APPLICANT: 1207 SVDT LLC PO Box 90 Kill Devil Hills, NC 27948 252-441-9003	OWNER: 1207 SVDT LLC PO Box 90 Kill Devil Hills, NC 27948 252-441-9003
--	--

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

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

PARCEL:

PIN: 989305072665	Parcel Number: 004275000
Address: 1207 VA DARE TRL S KILL DEVIL HILLS	
Addition: KILL DEVIL HILLS SEC 1	Zoning: Block: 5 Lot(s): 4-5
Legal Description:	

FEES:	Paid	Due	BUILDING AREA:	
Covered Porch Residential	\$1,404.00	\$0.00	Covered Porches/Decks	1872 SQFT
Land Disturbing	\$100.00	\$0.00	Open Decks	1 EA
Open Deck Fee	\$150.00	\$0.00	Residential Unheated (.40)	76 Sq. Ft
Pool/Hot Tub	\$200.00	\$0.00	Residential Heated Space	10645 sq. Ft.
Pool/Hot Tub	\$200.00	\$0.00	(.75)	
Res. Building Permit Fee	\$8,014.15	\$0.00	# of Temporary Poles	1 EA
T-Pole	\$50.00	\$0.00		
Totals :				
	\$10,118.15	\$0.00		

Town of Kill Devil Hills

Water Charges

PAID

Water Tap #: T2379f

PROJECT DESCRIPTION: New 24 Bedroom Single Family Dwelling

BJ2019-200

PROJECT NAME: SAGA New SFD

SITE ADDRESS: 1207 VA DARE TRL S KILL DEVIL HILLS

BUILDING JOINT

ISSUED: 11/12/2019

EXPIRES: 05/10/2020

DETAILS**Permit**

Name	Value
# OF DUMPSTERS	2.00
ZONING DISTRICT	OIR
FRONT YARD SETBACK	30
REAR YARD SETBACK	CAMA
SIDE YARD SETBACK	10
# PARKING SPACES/BEDROOM	24
CAMA PERMIT	Y
CAMA EXEMPTION	N
FLOOD ZONE	VE
BASE FLOOD ELEVATION	11.0
Proposed First Floor Elevation	15.67
SUBSTANTIAL IMPROVEMENT	NO
PURPOSE	Residential New
CONSTRUCTION TYPE	V
CONSTRUCTION COST	1500000.00
LOT COVERAGE	51.90
LIVING SPACE (SQFT)	10645
COVERED PORCHES/DECKS (SQFT)	1872
ACCESSORY STRUCTURE (SQFT)	76
OPEN DECK (SQFT)	84
TOTAL SQUARE FOOTAGE	12677
SURVEYOR NAME AND NUMBER	Michael W. Robinson
ENGINEER AND LICENSE NUMBER	Fredrick House 24740
CULVERT	N
DRIVEWAY INVERT 2	Y
OCCUPANCY TYPE	One & Two Family Dwelling

BJ2019-200

PROJECT NAME: SAGA New SFD

SITE ADDRESS: 1207 VA DARE TRL S KILL DEVIL HILLS

BUILDING JOINT

ISSUED: 11/12/2019

EXPIRES: 05/10/2020

REQUIRED INSPECTIONS

In-Slab Plumbing

Insulation

Slab/Foundation/Piling

Final

Framing

Zoning Final

Rough In

CONDITIONS

- * This permit becomes null and void if work or construction authorized is not commenced within 6 months or if construction or work is suspended for a period of 12 months at any time after work has started.
- * NOTICE: Call Public Services Department (252) 480-4080 before pouring driveway!
- * Height Certification must be submitted prior to issuance of Certificate of Occupancy.
- * Elevation Certificate will be required 21 days after establishment of the reference level in accordance with 151.41(C).
- * As-built survey will be required prior to Certificate of Occupancy or Certificate of Compliance.
- * The developer shall be responsible for maintaining erosion and sediment control at the disturbed area.
- * A final elevation certificate will be required prior to issuance of a Certificate of Occupancy or a Certificate of Compliance in accordance with 151.41(C).
- * Development must meet all aspects of Chapter 151 Flood Damage Prevention Ordinance including use and elevation.
- * Per §153.082(B)(1)(c) Mechanical equipment, including HVAC equipment and LP Gas equipment shall not project into a minimum yard setback more than four (4) feet.
- * Per §153.186(D)(1) Mechanical equipment shall not be visible from any right-of-way and (2) All Mechanical equipment and appurtenances shall be screened.
- * Must comply with Wind Borne Debris requirements as defined in NCBC R301.2.1.2 and NCBC 1609.2.
- * Construction must meet all aspect of Chapter 153 Zoning including lot coverage and setbacks.
- * Zoning Final Inspection is required.
- * Stormwater Drainage Easement required to be recorded prior to Issuance of Certificate of Occupancy.

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

Issued By: _____

Contractor or Authorized Agent: Grace Murek

Date: 11.13.19



Town of Kill Devil Hills

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

Planning and Inspection Department

BJ2019-197	BUILDING JOINT
PROJECT NAME: Reliant New House	ISSUED: 11/14/2019
SITE ADDRESS: 401 AIRSTRIP RD W KILL DEVIL HILLS	EXPIRES: 05/12/2020

APPLICANT: TRI B Construction LLC
 PO BOX 1592
 ELIZABETH CITY, NC 27906

OWNER: Harrington, Phillip
 PO Box 2232
 ELIZABETH CITY, NC 27906
 252-312-4500

CONTRACTOR: RELIANT CONSTRUCTION LLC
 4275 Worthington Lane
 kitty hawk, nc 27949
 252-202-7007

GENERAL, UNLIMITED: RELIANT CONSTRUCTION LLC
 4275 Worthington Lane
 kitty hawk, nc 27949
 252-202-7007

License: 62339
Expires: 12/30/2019

PARCEL:

PIN: 988312861663

Parcel Number: 004454000

Address: 401 AIRSTRIP RD W KILL DEVIL HILLS

Zoning:

Addition: KILL DEVIL HILLS REALTY CORP

Block: 29 **Lot(s):** 4

Legal Description:

FEES:	Paid	Due	BUILDING AREA:	
Land Disturbing	\$100.00	\$0.00	Covered Porches/Decks	139 SQFT
Covered Porch Residential	\$104.25	\$0.00	Open Decks	1 EA
Open Deck Fee	\$150.00	\$0.00	Residential Heated Space	1747 sq. Ft.
Res. Building Permit Fee	\$1,310.25	\$0.00	(.75)	
T-Pole	\$50.00	\$0.00	# of Temporary Poles	1 EA
Totals :		\$1,714.50		\$0.00

PROJECT DESCRIPTION: New 4 Bedroom SFD
 Town of Kill Devil Hills

Water Charges

PAID

Water Tap #: 723803

NOV 14 2019

BJ2019-197

PROJECT NAME: Reliant New House
SITE ADDRESS: 401 AIRSTRIP RD W KILL DEVIL HILLS

BUILDING JOINT

ISSUED: 11/14/2019

EXPIRES: 05/12/2020

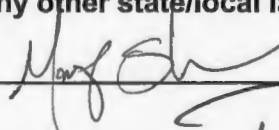
REQUIRED INSPECTIONS

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

CONDITIONS

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

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

Issued By: 

Contractor or Authorized Agent: 

Date: 11/14/19



Town of Kill Devil Hills

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

PAID

NOV 18 2019

TOWN OF
KILL DEVIL HILLS

Planning and Inspection Department

BJ2019-202

PROJECT NAME: Wilkins Addition
SITE ADDRESS: 1408 HILL ST KILL DEVIL HILLS

BUILDING JOINT

ISSUED: 11/18/2019

EXPIRES: 05/16/2020

APPLICANT: Wilkins, Jeremy
806 7th AVE
Kill Devil Hills, NC 27948
252-256-3144

OWNER: Wilkins, Jeremy
806 7th AVE
Kill Devil Hills, NC 27948
252-256-3144

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

License: Unlicensed
Expires: 12/31/2020

PARCEL:

PIN: 988315649064

Parcel Number: 004839000

Address: 1408 HILL ST KILL DEVIL HILLS

Zoning:

Addition: KILL DEVIL BEACH EXTENDED

Block: 14 Lot(s): 5

Legal Description:

FEES:	<u>Paid</u>	<u>Due</u>	BUILDING AREA:	
Res. Building Permit Fee	\$856.50	\$0.00	Residential Heated Space	1142 sq. Ft.
			(.75)	
Totals :	\$856.50	\$0.00		

PROJECT DESCRIPTION: enclose ground floor under existing house for storage and rec room, driveway addition

BJ2019-202

PROJECT NAME: Wilkins Addition
SITE ADDRESS: 1408 HILL ST KILL DEVIL HILLS

BUILDING JOINT**ISSUED:** 11/18/2019**EXPIRES:** 05/16/2020

DETAILS**Permit**

Name	Value
ZONING DISTRICT	LI-2
FRONT YARD SETBACK	30
REAR YARD SETBACK	20% Depth >30
SIDE YARD SETBACK	8
HEALTH DEPARTMENT PERMIT #	29058
# PARKING SPACES/BEDROOM	3
CAMA PERMIT	N
CAMA EXEMPTION	N
FLOOD ZONE	X
SUBSTANTIAL IMPROVEMENT	NO
PURPOSE	Residential Addition
CONSTRUCTION TYPE	V
CONSTRUCTION COST	20000.00
LOT COVERAGE	43.00
LIVING SPACE (SQFT)	1142
SURVEYOR NAME AND NUMBER	William S. Jones L-2532
CULVERT	N
DRIVEWAY INVERT 2	N
OCCUPANCY TYPE	One & Two Family Dwelling

REQUIRED INSPECTIONS

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

CONDITIONS

BJ2019-202

PROJECT NAME: Wilkins Addition
SITE ADDRESS: 1408 HILL ST KILL DEVIL HILLS

BUILDING JOINT

ISSUED: 11/18/2019

EXPIRES: 05/16/2020

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

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

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

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

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

Issued By: Max Sh

Contractor or Authorized Agent: Jesse Date: 11/18/19



Town of Kill Devil Hills

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

NOV 21 2019

Planning and Inspection Department

BJ2019-201

PROJECT NAME: Phillip Harrington
SITE ADDRESS: 403 AIRSTRIP RD W KILL DEVIL HILLS

BUILDING JOINT

ISSUED: 11/21/2019

EXPIRES: 05/19/2020

APPLICANT: RELIANT CONSTRUCTION LLC
4275 Worthington Lane
kitty hawk, nc 27949
252-202-7007

OWNER: Harrington, Phillip
PO Box 2232
ELIZABETH CITY, NC 27909
252-312-4500

GENERAL, UNLIMITED: RELIANT CONSTRUCTION LLC
4275 Worthington Lane
kitty hawk, nc 27949
252-202-7007

License: 62339
Expires: 12/30/2019

PARCEL:

PIN: 988312861517

Parcel Number: 004454005

Address: 403 AIRSTRIP RD W KILL DEVIL HILLS

Zoning:

Addition: KILL DEVIL HILLS REALTY CORP

Block: 29 **Lot(s):** 5

Legal Description:

FEES:	Paid	Due	BUILDING AREA:	
Covered Porch Residential	\$156.00	\$0.00	Covered Porches/Decks	208 SQFT
Land Disturbing	\$100.00	\$0.00	Open Decks	1 EA
Open Deck Fee	\$150.00	\$0.00	Residential Unheated (.40)	95 Sq. Ft
Res. Building Permit Fee	\$1,062.50	\$0.00	Residential Heated Space (.75)	1366 sq. Ft.
T-Pole	\$50.00	\$0.00	# of Temporary Poles	1 EA
Totals :	\$1,518.50	\$0.00		

PROJECT DESCRIPTION: Proposed 3 bedroom single family dwelling

Town of Kill Devil Hills

Water Charges

PAID

Water Tap #: 123535

BJ2019-201**PROJECT NAME:** Phillip Harrington**SITE ADDRESS:** 403 AIRSTRIP RD W KILL DEVIL HILLS**BUILDING JOINT****ISSUED:** 11/21/2019**EXPIRES:** 05/19/2020

DETAILS**Permit**

Name	Value
ZONING DISTRICT	RL
FRONT YARD SETBACK	30
REAR YARD SETBACK	30
SIDE YARD SETBACK	10
HEALTH DEPARTMENT PERMIT #	29171
# PARKING SPACES/BEDROOM	3
CAMA PERMIT	N
CAMA EXEMPTION	N
FLOOD ZONE	X
SUBSTANTIAL IMPROVEMENT	NO
PURPOSE	Residential New
CONSTRUCTION TYPE	V
CONSTRUCTION COST	225000.00
LOT COVERAGE	19.30
LIVING SPACE (SQFT)	1366
COVERED PORCHES/DECKS (SQFT)	208
STORAGE (SQFT)	95
OPEN DECK (SQFT)	64
TOTAL SQUARE FOOTAGE	1733
SURVEYOR NAME AND NUMBER	Eastern Geomatics, PLLC
ENGINEER AND LICENSE NUMBER	Mike Osteen 032628
CULVERT	N
ROLL OUT CAN	1
DRIVEWAY INVERT 2	Y
OCCUPANCY TYPE	One & Two Family Dwelling

BJ2019-201

PROJECT NAME: Phillip Harrington

SITE ADDRESS: 403 AIRSTRIP RD W KILL DEVIL HILLS

BUILDING JOINT

ISSUED: 11/21/2019

EXPIRES: 05/19/2020

REQUIRED INSPECTIONS

In-Slab Plumbing

Insulation

Slab/Foundation/Piling

Final

Framing

Zoning Final

Rough In

CONDITIONS

- * NOTICE: Call Public Services Department (252) 480-4080 before pouring driveway!
- * This permit becomes null and void if work or construction authorized is not commenced within 6 months or if construction or work is suspended for a period of 12 months at any time after work has started.
- * As-built survey will be required prior to Certificate of Occupancy or Certificate of Compliance.
- * The developer shall be responsible for maintaining erosion and sediment control at the disturbed area.
- * Per §153.082(B)(1)(c) Mechanical equipment, including HVAC equipment and LP Gas equipment shall not project into a minimum yard setback more than four (4) feet.
- * Must comply with Wind Borne Debris requirements as defined in NCBC R301.2.1.2 and NCBC 1609.2.
- * Construction must meet all aspect of Chapter 153 Zoning including lot coverage and setbacks.
- * Zoning Final Inspection is required.
- * Double frontage lot. Survey must show 30' on Airstrip and Harding Street.

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

Issued By: Marty Shaw

Contractor or Authorized Agent: Clay Remin Date: 11/21/19



Town of Kill Devil Hills

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

PAID

NOV 19 2019

Planning and Inspection Department

TOWN OF
KILL DEVIL HILLS

BJ2019-196

PROJECT NAME: East Coast Construction Group New SFD
SITE ADDRESS: 1408 VA DARE TRL S KILL DEVIL HILLS

BUILDING JOINT

ISSUED: 11/14/2019

EXPIRES: 05/12/2020

APPLICANT: LANE INVESTMENT PROPERTIES NC LLC
P.O. Box 329
KDH, NC 27948

OWNER: LANE INVESTMENT PROPERTIES NC LLC
P.O. Box 329
KDH, NC 27948

CONTRACTOR: EAST COAST CONSTRUCTION GROUP
PO Box 329
KILL DEVIL HILLS, NC 27948
252-202-1600

GENERAL: EAST COAST CONSTRUCTION GROUP
PO Box 329
KILL DEVIL HILLS, NC 27948
252-202-1600

License: 34495
Expires: 01/01/2020

PARCEL:

PIN: 989309067013

Parcel Number: 004708000

Address: 1408 VA DARE TRL S KILL DEVIL HILLS

Zoning:

Addition: KILL DEVIL BEACH SEC 1 REVISED

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

Legal Description:

FEES:	<u>Paid</u>	<u>Due</u>	BUILDING AREA:	
Covered Porch Residential	\$634.50	\$0.00	Covered Porches/Decks	846 SQFT
Land Disturbing	\$100.00	\$0.00	Residential Unheated (.40)	536 Sq. Ft
Pool/Hot Tub	\$200.00	\$0.00	Residential Heated Space (.75)	2865 sq. Ft.
Res. Building Permit Fee	\$2,363.15	\$0.00	# of Temporary Poles	1 EA
T-Pole	\$50.00	\$0.00		
Fence	\$100.00	\$0.00		
Totals :	\$3,447.65	\$0.00		

PROJECT DESCRIPTION: New 4 Bedroom Single Family Dwelling

Town of Kill Devil Hills

Water Charges

PAID

Water Tap #: 23285

BJ2019-196**PROJECT NAME:** East Coast Construction Group New SFD
SITE ADDRESS: 1408 VA DARE TRL S KILL DEVIL HILLS**BUILDING JOINT****ISSUED:** 11/14/2019**EXPIRES:** 05/12/2020

DETAILS**Permit**

Name	Value
ZONING DISTRICT	C
FRONT YARD SETBACK	30
REAR YARD SETBACK	20% Depth >30
SIDE YARD SETBACK	8
HEALTH DEPARTMENT PERMIT #	28954
# PARKING SPACES/BEDROOM	4
CAMA PERMIT	N
CAMA EXEMPTION	N
FLOOD ZONE	AE
BASE FLOOD ELEVATION	9.0
Proposed First Floor Elevation	10.00
SUBSTANTIAL IMPROVEMENT	NO
PURPOSE	Residential New
CONSTRUCTION TYPE	V
CONSTRUCTION COST	920000.00
LOT COVERAGE	39.30
LIVING SPACE (SQFT)	2865
COVERED PORCHES/DECKS (SQFT)	846
GARAGE (SQFT)	536
TOTAL SQUARE FOOTAGE	4247
SURVEYOR NAME AND NUMBER	Manson Ray Meekins L-2592
ENGINEER AND LICENSE NUMBER	Melissa McAllister 026946
CULVERT	N
ROLL OUT CAN	2
DRIVEWAY INVERT 2	Y
OCCUPANCY TYPE	One & Two Family Dwelling

BJ2019-196

PROJECT NAME: East Coast Construction Group New SFD
SITE ADDRESS: 1408 VA DARE TRL S KILL DEVIL HILLS

BUILDING JOINT

ISSUED: 11/14/2019

EXPIRES: 05/12/2020

REQUIRED INSPECTIONS

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

CONDITIONS

- * This permit becomes null and void if work or construction authorized is not commenced within 6 months or if construction or work is suspended for a period of 12 months at any time after work has started.
- * **NOTICE:** Call Public Services Department (252) 480-4080 before pouring driveway!
- * As-built survey will be required prior to Certificate of Occupancy or Certificate of Compliance.
- * The developer shall be responsible for maintaining erosion and sediment control at the disturbed area.
- * Development must meet all aspects of Chapter 151 Flood Damage Prevention Ordinance including use and elevation.
- * A final elevation certificate will be required prior to issuance of a Certificate of Occupancy or a Certificate of Compliance in accordance with 151.41(C).
- * Per §153.082(B)(1)(c) Mechanical equipment, including HVAC equipment and LP Gas equipment shall not project into a minimum yard setback more than four (4) feet.
- * Per §153.186(D)(1) Mechanical equipment shall not be visible from any right-of-way and (2) All Mechanical equipment and appurtenances shall be screened.
- * Must comply with Wind Borne Debris requirements as defined in NCBC R301.2.1.2 and NCBC 1609.2.
- * Construction must meet all aspect of Chapter 153 Zoning including lot coverage and setbacks.
- * Zoning Final Inspection is required.
- * Height Certification must be submitted prior to issuance of Certificate of Occupancy.

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

Issued By: _____

Contractor or Authorized Agent: _____ Date: 11/19/19



Town of Kill Devil Hills

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

PAID
NOV 25 2019

Planning and Inspection Department

BJ2019-210	BUILDING JOINT
PROJECT NAME: HARRIS INTERIOR REMODEL	ISSUED: 11/21/2019
SITE ADDRESS: 103 MEADOWLARK ST E KILL DEVIL HILLS	EXPIRES: 05/19/2020

APPLICANT: NATE HARRIS 103 E MEADOWLARK ST Kill Devil Hills, NC 27948 435-232-5508	OWNER: NATE HARRIS 103 E MEADOWLARK ST Kill Devil Hills, NC 27948 435-232-5508
--	--

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

PIN: 988308799740	Parcel Number: 003812000
Address: 103 MEADOWLARK ST E KILL DEVIL HILLS	Zoning:
Addition: KITTY HAWK SHORES - REVISED	Block: 33 Lot(s): 14
Legal Description:	

FEES:	Paid	Due	BUILDING AREA:
Renovation/Remodel/Relocate	\$421.20	\$0.00	Remodel/Renovation 936 SQFT
Totals :	\$421.20	\$0.00	

PROJECT DESCRIPTION: INTERIOR REMODEL DUE TO WATER DAMAGE, RELOCATE, ELECTRICAL AND PLUMBING FIXTURES, FRAMING NON LOAD BEARING WALL, REMOVE UNPERMITTED WINDOWS AND RETURN SCREENED PORCH TO ORIGINAL STATE.

BJ2019-210

PROJECT NAME: HARRIS INTERIOR REMODEL
SITE ADDRESS: 103 MEADOWLARK ST E KILL DEVIL HILLS

BUILDING JOINT

ISSUED: 11/21/2019

EXPIRES: 05/19/2020

DETAILS**Permit**

Name	Value
ZONING DISTRICT	C
FRONT YARD SETBACK	15
REAR YARD SETBACK	20% Depth >30
SIDE YARD SETBACK	6
CAMA PERMIT	N
CAMA EXEMPTION	N
FLOOD ZONE	AE
BASE FLOOD ELEVATION	8.00
SUBSTANTIAL IMPROVEMENT	NO
PURPOSE	Residential Repair/Remodel
CONSTRUCTION TYPE	V
CONSTRUCTION COST	22000.00
CULVERT	N
DRIVEWAY INVERT 2	N
OCCUPANCY TYPE	One & Two Family Dwelling

REQUIRED INSPECTIONS

Framing	Final
Rough In	Zoning Final
Insulation	

CONDITIONS

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

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

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

* Zoning Final Inspection is required.

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

BJ2019-210

PROJECT NAME: HARRIS INTERIOR REMODEL
SITE ADDRESS: 103 MEADOWLARK ST E KILL DEVIL HILLS

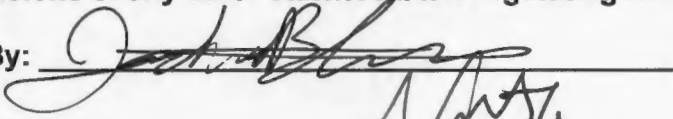
BUILDING JOINT

ISSUED: 11/21/2019

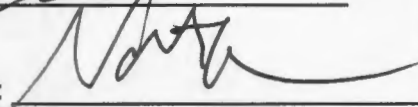
EXPIRES: 05/19/2020

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

Issued By: _____



Contractor or Authorized Agent: _____



Date: _____

11.25.19



Town of Kill Devil Hills

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

NOV 22 2019

Planning and Inspection Department

BUILDING JOINT
ISSUED: 11/15/2019
EXPIRES: 05/13/2020

BJ2019-203

PROJECT NAME: Owens Bathroom
SITE ADDRESS: 1731 BAY DR KILL DEVIL HILLS

APPLICANT: Amber Owens
1731 Bay Dr.
Kill Devil Hills, NC 27948
305-7702

OWNER: Amber Owens
1731 Bay Dr.
Kill Devil Hills, NC 27948
305-7702

CONTRACTOR: Outer Banks Tile & Stone
519 Wax Myrtle Ct.
Kill Devil Hills, NC 27948
252-364-4635

UNLICENSED - REMODELING: Outer Banks Tile & Stone
519 Wax Myrtle Ct.
Kill Devil Hills, NC 27948
252-364-4635

License: 000000
Expires: 12/31/2024

PARCEL:

PIN: 988409055907

Parcel Number: 002530004

Address: 1731 BAY DR KILL DEVIL HILLS

Addition: CROATAN SHORES INC SEC 1

Zoning:
Block: 20 **Lot(s):** 4,PT 6

Legal Description:

FEES:	Paid	Due
Building Permit Fee - Minimum Fee	\$150.00	\$0.00
Totals :	\$150.00	\$0.00

PROJECT DESCRIPTION: Add bathroom and wet bar to existing bedroom

BJ2019-203

PROJECT NAME: Owens Bathroom
SITE ADDRESS: 1731 BAY DR KILL DEVIL HILLS

BUILDING JOINT

ISSUED: 11/15/2019

EXPIRES: 05/13/2020

DETAILS**Permit**

Name	Value
ZONING DISTRICT	RL
FRONT YARD SETBACK	30
REAR YARD SETBACK	20% Depth >30
SIDE YARD SETBACK	10
CAMA PERMIT	N
CAMA EXEMPTION	N
FLOOD ZONE	AE
BASE FLOOD ELEVATION	8
SUBSTANTIAL IMPROVEMENT	NO
PURPOSE	Residential Repair/Remodel
CONSTRUCTION TYPE	V
CONSTRUCTION COST	20000.00
CULVERT	N
DRIVEWAY INVERT 2	N

REQUIRED INSPECTIONS

Framing	Shower Pan
Rough In	Final
Insulation	Zoning Final

CONDITIONS

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

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

BJ2019-203

PROJECT NAME: Owens Bathroom
SITE ADDRESS: 1731 BAY DR KILL DEVIL HILLS

BUILDING JOINT

ISSUED: 11/15/2019

EXPIRES: 05/13/2020

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

Issued By: _____

Contractor or Authorized Agent: _____

Date: _____



Town of Kill Devil Hills

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

PAID

NOV 25 2019

Planning and Inspection Department

TOWN OF
KILL DEVIL HILLS

BJ2019-205

PROJECT NAME: Whiddon house raise.
SITE ADDRESS: 115 ST CLAIR ST E KILL DEVIL HILLS

BUILDING JOINT

ISSUED: 11/18/2019

EXPIRES: 05/16/2020

APPLICANT: Whiddon, Christen and Paul
2744 WEST Meadow DR
CHESAPEAKE, VA 23321
757-676-4029

OWNER: Whiddon, Christen and Paul
2744 WEST Meadow DR
CHESAPEAKE, VA 23321
757-676-4029

GENERAL: TABB, WILLIAM D
PO Box 1077
Nags Head, NC 27959
252-207-2630

License: 18884
Expires:

PARCEL:

PIN: 988308893620

Parcel Number: 003801000

Address: 115 ST CLAIR ST E KILL DEVIL HILLS

Addition: KITTY HAWK SHORES - REVISED

Zoning:
Block: 32 **Lot(s):** 19

Legal Description:

FEES:	Paid	Due
Building Permit Fee - Minimum Fee	\$150.00	\$0.00
Totals :	\$150.00	\$0.00

PROJECT DESCRIPTION: Raise existing structure and provide new piling foundation.

BJ2019-205

PROJECT NAME: Whiddon house raise.

SITE ADDRESS: 115 ST CLAIR ST E KILL DEVIL HILLS

BUILDING JOINT

ISSUED: 11/18/2019

EXPIRES: 05/16/2020

DETAILS

Permit

Name	Value
ZONING DISTRICT	C
CAMA PERMIT	N
CAMA EXEMPTION	N
FLOOD ZONE	AE
BASE FLOOD ELEVATION	8
SUBSTANTIAL IMPROVEMENT	NO
CONSTRUCTION TYPE	V
CONSTRUCTION COST	32000.00
CULVERT	N
DRIVEWAY INVERT 2	N
OCCUPANCY TYPE	One & Two Family Dwelling

REQUIRED INSPECTIONS

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

CONDITIONS

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

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

BJ2019-205

PROJECT NAME: Whiddon house raise.

SITE ADDRESS: 115 ST CLAIR ST E KILL DEVIL HILLS

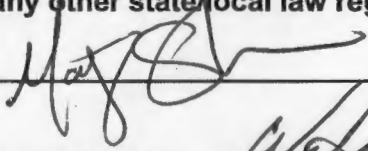
BUILDING JOINT

ISSUED: 11/18/2019

EXPIRES: 05/16/2020

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

Issued By: _____



Contractor or Authorized Agent: _____



Date: _____

11-25-19



Town of Kill Devil Hills

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

PAD

NOV 27 2019

Planning and Inspection Department

BJ2019-206

PROJECT NAME: Sandy Bottom Homes New House
SITE ADDRESS: 526 EDEN STREET W Kill Devil Hills

BUILDING JOINT

ISSUED: 11/27/2019

EXPIRES: 05/25/2020

APPLICANT: SOLES, FRANK
527 Chowan St
Kill Devil Hills, NC 27948
757-448-8162

OWNER: SOLES, FRANK
527 Chowan St
Kill Devil Hills, NC 27948
757-448-8162

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

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

License: 67524
Expires: 01/01/2020

PARCEL:

PIN: 987520905460

Parcel Number:

Address: 526 EDEN STREET W Kill Devil Hills

Zoning:

Addition:

Block:

Lot(s):

Legal Description: Lots 33 & 34, Block 73, Virginia Dare Shores

FEES:	Paid	Due	BUILDING AREA:	
Covered Porch Residential	\$152.25	\$0.00	Covered Porches/Decks	203 SQFT
Land Disturbing	\$100.00	\$0.00	Open Decks	1 EA
Open Deck Fee	\$150.00	\$0.00	Residential Unheated (.40)	128 Sq. Ft
Res. Building Permit Fee	\$1,382.45	\$0.00	Residential Heated Space	1775 sq. Ft.
T-Pole	\$50.00	\$0.00	(.75)	
Totals :	\$1,834.70	\$0.00	# of Temporary Poles	1 EA

PROJECT DESCRIPTION: New 3 Bedroom 3 Bath Single Family Dwelling

DOWN
Water
F...
Water Tap #: 290217

BJ2019-206**PROJECT NAME:** Sandy Bottom Homes New House
SITE ADDRESS: 526 EDEN STREET W Kill Devil Hills**BUILDING JOINT****ISSUED:** 11/27/2019**EXPIRES:** 05/25/2020

DETAILS**Permit**

Name	Value
ZONING DISTRICT	RL
FRONT YARD SETBACK	15
REAR YARD SETBACK	20% Depth >30
SIDE YARD SETBACK	6
HEALTH DEPARTMENT PERMIT #	29191
# PARKING SPACES/BEDROOM	3
CAMA PERMIT	N
CAMA EXEMPTION	N
FLOOD ZONE	AE
BASE FLOOD ELEVATION	8.3
Proposed First Floor Elevation	6.00
SUBSTANTIAL IMPROVEMENT	NO
PURPOSE	Residential New
CONSTRUCTION TYPE	V
CONSTRUCTION COST	175000.00
LOT COVERAGE	39.40
LIVING SPACE (SQFT)	1775
COVERED PORCHES/DECKS (SQFT)	203
STORAGE (SQFT)	128
OPEN DECK (SQFT)	58
TOTAL SQUARE FOOTAGE	2164
SURVEYOR NAME AND NUMBER	Manson Ray Meekins L-2592
ENGINEER AND LICENSE NUMBER	Mike Osteen 032628
CULVERT	N
ROLL OUT CAN	1
DRIVEWAY INVERT 2	Y
OCCUPANCY TYPE	One & Two Family Dwelling

BJ2019-206

PROJECT NAME: Sandy Bottom Homes New House
SITE ADDRESS: 526 EDEN STREET W Kill Devil Hills

BUILDING JOINT

ISSUED: 11/27/2019

EXPIRES: 05/25/2020

REQUIRED INSPECTIONS

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

CONDITIONS

- * This permit becomes null and void if work or construction authorized is not commenced within 6 months or if construction or work is suspended for a period of 12 months at any time after work has started.
- * NOTICE: Call Public Services Department (252) 480-4080 before pouring driveway!
- * As-built survey will be required prior to Certificate of Occupancy or Certificate of Compliance.
- * The developer shall be responsible for maintaining erosion and sediment control at the disturbed area.
- * A final elevation certificate will be required prior to issuance of a Certificate of Occupancy or a Certificate of Compliance in accordance with 151.41(C).
- * Development must meet all aspects of Chapter 151 Flood Damage Prevention Ordinance including use and elevation.
- * Per §153.082(B)(1)(c) Mechanical equipment, including HVAC equipment and LP Gas equipment shall not project into a minimum yard setback more than four (4) feet.
- * Per §153.186(D)(1) Mechanical equipment shall not be visible from any right-of-way and (2) All Mechanical equipment and appurtenances shall be screened.
- * Must comply with Wind Borne Debris requirements as defined in NCBC R301.2.1.2 and NCBC 1609.2.
- * Construction must meet all aspect of Chapter 153 Zoning including lot coverage and setbacks.
- * Zoning Final Inspection is required.

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

Issued By: 

Contractor or Authorized Agent: 

Date: 11-27-19



Town of Kill Devil Hills

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

NOV 27 2019

Planning and Inspection Department

BJ2019-207

PROJECT NAME: Sandy Bottom Homes
SITE ADDRESS: 522 EDEN STREET W Kill Devil Hills

BUILDING JOINT

ISSUED: 11/27/2019

EXPIRES: 05/25/2020

APPLICANT: FRANK SOLES
400 Da Vinci Lane
kitty hawk, nc 27949
757-448-8162

OWNER: FRANK SOLES
400 Da Vinci Lane
kitty hawk, nc 27949
757-448-8162

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

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

License: 67524
Expires: 01/01/2020

PARCEL:

PIN: 987520906402

Parcel Number:

Address: 522 EDEN STREET W Kill Devil Hills

Zoning:

Addition:

Block:

Lot(s):

Legal Description: Lots 31 & 32, Block 73, Virginia Dare Shores

FEES:	Paid	Due	BUILDING PERMIT:	
Open Deck Fee	\$150.00	\$0.00	Open Decks	1 EA
Covered Porch Residential	\$152.25	\$0.00	Residential Heated Space	1778 sq. Ft.
T-Pole	\$50.00	\$0.00	(.75)	
Res. Building Permit Fee	\$1,385.90	\$0.00	Covered Porches/Decks	203 SQFT
Totals :	\$1,738.15	\$0.00	# of Temporary Poles	1 EA
			Residential Unheated (.40)	131 Sq. Ft

PROJECT DESCRIPTION: New 3 Bedroom 3 Bath Single Family Dwelling

Town of Kill Devil Hills
Water Charges

PAID

Water Tap #: T23836

BJ2019-207**PROJECT NAME:** Sandy Bottom Homes
SITE ADDRESS: 522 EDEN STREET W Kill Devil Hills**BUILDING JOINT****ISSUED:** 11/27/2019**EXPIRES:** 05/25/2020

DETAILS**Permit**

Name	Value
ZONING DISTRICT	RL
FRONT YARD SETBACK	15
REAR YARD SETBACK	20% Depth >30
SIDE YARD SETBACK	6
HEALTH DEPARTMENT PERMIT #	29190
# PARKING SPACES/BEDROOM	3
CAMA PERMIT	N
CAMA EXEMPTION	N
FLOOD ZONE	AE
BASE FLOOD ELEVATION	8.3
Proposed First Floor Elevation	6.00
SUBSTANTIAL IMPROVEMENT	NO
PURPOSE	Residential New
CONSTRUCTION COST	175000.00
LOT COVERAGE	39.40
LIVING SPACE (SQFT)	1778
COVERED PORCHES/DECKS (SQFT)	203
STORAGE (SQFT)	131
OPEN DECK (SQFT)	58
SURVEYOR NAME AND NUMBER	Manson Ray Meekins L- 2592
ENGINEER AND LICENSE NUMBER	Mike O'Steen 032628
CULVERT	N
ROLL OUT CAN	1
DRIVEWAY INVERT 2	Y
OCCUPANCY TYPE	One & Two Family Dwelling

BJ2019-207

PROJECT NAME: Sandy Bottom Homes
SITE ADDRESS: 522 EDEN STREET W Kill Devil Hills

BUILDING JOINT

ISSUED: 11/27/2019

EXPIRES: 05/25/2020

REQUIRED INSPECTIONS

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

CONDITIONS

- * NOTICE: Call Public Services Department (252) 480-4080 before pouring driveway!
- * This permit becomes null and void if work or construction authorized is not commenced within 6 months or if construction or work is suspended for a period of 12 months at any time after work has started.
- * As-built survey will be required prior to Certificate of Occupancy or Certificate of Compliance.
- * Elevation Certificate will be required 21 days after establishment of the reference level in accordance with 151.41(C).
- * The developer shall be responsible for maintaining erosion and sediment control at the disturbed area.
- * A final elevation certificate will be required prior to issuance of a Certificate of Occupancy or a Certificate of Compliance in accordance with 151.41(C).
- * Development must meet all aspects of Chapter 151 Flood Damage Prevention Ordinance including use and elevation.
- * Per §153.082(B)(1)(c) Mechanical equipment, including HVAC equipment and LP Gas equipment shall not project into a minimum yard setback more than four (4) feet.
- * Per §153.186(D)(1) Mechanical equipment shall not be visible from any right-of-way and (2) All Mechanical equipment and appurtenances shall be screened.
- * Must comply with Wind Borne Debris requirements as defined in NCBC R301.2.1.2 and NCBC 1609.2.
- * Construction must meet all aspect of Chapter 153 Zoning including lot coverage and setbacks.
- * Zoning Final Inspection is required.

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

Issued By: _____

Contractor or Authorized Agent: *zsh* Date: 11-27-19



Town of Kill Devil Hills

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

FAD
NOV 27 2019

Planning and Inspection Department

BJ2019-208	BUILDING JOINT
PROJECT NAME: John and Mandy Bartell	ISSUED: 11/26/2019
SITE ADDRESS: 1104 Swan Street Kill Devil Hills	EXPIRES: 05/24/2020

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

OWNER: Bartell, John
PO Box 742
Manteo, NC 27954
252-489-1875

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

License: 67524
Expires: 01/01/2020

PARCEL:

PIN: 988312860116

Parcel Number:

Address: 1104 Swan Street Kill Devil Hills

Zoning:

Addition:

Block:

Lot(s):

Legal Description: Lot 2, Block 35, Kill Devil Hill Realty Corp. S/D

FEES:	Paid	Due	BUILDING AREA:	
Res. Building Permit Fee	\$1,353.20	\$0.00	# of Temporary Poles	1 EA
Open Deck Fee	\$150.00	\$0.00	Open Decks	1 EA
Covered Porch Residential	\$56.25	\$0.00	Residential Unheated (.40)	98 Sq. Ft
T-Pole	\$50.00	\$0.00	Residential Heated Space (.75)	1752 sq. Ft.
Totals :	\$1,609.45	\$0.00	Covered Porches/Decks	75 SQFT

PROJECT DESCRIPTION: Proposed 4 bedroom single family dwelling

Town of Kill Devil Hills
Water Charges

FAD
Water Tap #: *2323*

BJ2019-208**PROJECT NAME:** John and Mandy Bartell
SITE ADDRESS: 1104 Swan Street Kill Devil Hills**BUILDING JOINT****ISSUED:** 11/26/2019**EXPIRES:** 05/24/2020

DETAILS**Permit**

Name	Value
ZONING DISTRICT	RL
FRONT YARD SETBACK	30
REAR YARD SETBACK	20% Depth >30
SIDE YARD SETBACK	10
HEALTH DEPARTMENT PERMIT #	29196
# PARKING SPACES/BEDROOM	4
CAMA PERMIT	N
CAMA EXEMPTION	N
FLOOD ZONE	X
SUBSTANTIAL IMPROVEMENT	NO
PURPOSE	Residential New
CONSTRUCTION COST	185000.00
LOT COVERAGE	24.90
LIVING SPACE (SQFT)	1752
COVERED PORCHES/DECKS (SQFT)	75
STORAGE (SQFT)	98
OPEN DECK (SQFT)	180
TOTAL SQUARE FOOTAGE	2105
SURVEYOR NAME AND NUMBER	Seaboard Surveying
ENGINEER AND LICENSE NUMBER	Mike O'Steen 032628
CULVERT	N
ROLL OUT CAN	1
DRIVEWAY INVERT 2	Y
OCCUPANCY TYPE	One & Two Family Dwelling

BJ2019-208

PROJECT NAME: John and Mandy Bartell
SITE ADDRESS: 1104 Swan Street Kill Devil Hills

BUILDING JOINT

ISSUED: 11/26/2019

EXPIRES: 05/24/2020

REQUIRED INSPECTIONS

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

CONDITIONS

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

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

Issued By: 

Contractor or Authorized Agent:  Date: 11-27-19



Town of Kill Devil Hills

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

Planning and Inspection Department

BJ2019-209

PROJECT NAME: Sinanaj New House
SITE ADDRESS: 204 FIFTH ST W KILL DEVIL HILLS

BUILDING JOINT

ISSUED: 11/26/2019

EXPIRES: 05/24/2020

APPLICANT: SINANAJ, ERMAL
205 W. Morning View Drive
nags head, nc 27959

OWNER: SINANAJ, ERMAL
205 W. Morning View Drive
nags head, nc 27959

CONTRACTOR: ALL COUNTY BUILDERS LLC
205 West Morning Dove
NAGS HEAD, NC 27959
252-475-4047

GENERAL-LIMITED: ALL COUNTY BUILDERS LLC
205 West Morning Dove
NAGS HEAD, NC 27959
252-475-4047

License: 59306
Expires: 01/11/2020

PARCEL:

PIN: 988405283945

Parcel Number: 002057000

Address: 204 FIFTH ST W KILL DEVIL HILLS

Zoning:

Addition: WRIGHT'S SHORES

Block: 0 **Lot(s):** 3

Legal Description:

FEES:	Paid	Due	BUILDING PERMIT:	
Covered Porch Residential	\$80.25	\$0.00	Covered Porches/Decks	107 SQFT
Land Disturbing	\$100.00	\$0.00	Residential Unheated (.40)	393 Sq. Ft
Res. Building Permit Fee	\$1,781.70	\$0.00	Residential Heated Space	2166 sq. Ft.
T-Pole	\$50.00	\$0.00	(.75)	
Totals :	\$2,011.95	\$0.00	# of Temporary Poles	1 EA

PROJECT DESCRIPTION: New 4 Bedroom SFD

Town of Kill Devil Hills
Water Charges

PAID

Water Tap #: T23 859

PAID

NOV 26 2019

BJ2019-209**PROJECT NAME:** Sinanaj New House
SITE ADDRESS: 204 FIFTH ST W KILL DEVIL HILLS**BUILDING JOINT****ISSUED:** 11/26/2019**EXPIRES:** 05/24/2020

DETAILS**Permit**

Name	Value
ZONING DISTRICT	RL
FRONT YARD SETBACK	30
REAR YARD SETBACK	20% Depth >30
SIDE YARD SETBACK	8
HEALTH DEPARTMENT PERMIT #	28871
# PARKING SPACES/BEDROOM	4
CAMA PERMIT	N
CAMA EXEMPTION	N
FLOOD ZONE	X
SUBSTANTIAL IMPROVEMENT	NO
PURPOSE	Residential New
CONSTRUCTION TYPE	V
CONSTRUCTION COST	250000.00
LOT COVERAGE	39.00
LIVING SPACE (SQFT)	2166
COVERED PORCHES/DECKS (SQFT)	107
GARAGE (SQFT)	393
TOTAL SQUARE FOOTAGE	2666
SURVEYOR NAME AND NUMBER	Martin Barnette L-3740
ENGINEER AND LICENSE NUMBER	Mike Osteen 032628
CULVERT	N
ROLL OUT CAN	1
DRIVEWAY INVERT 2	Y
OCCUPANCY TYPE	One & Two Family Dwelling

BJ2019-209

PROJECT NAME: Sinanaj New House

SITE ADDRESS: 204 FIFTH ST W KILL DEVIL HILLS

BUILDING JOINT

ISSUED: 11/26/2019

EXPIRES: 05/24/2020

REQUIRED INSPECTIONS

In-Slab Plumbing

Insulation

Slab/Foundation/Piling

Final

Framing

Zoning Final

Rough In

CONDITIONS

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

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

Issued By: _____

Contractor or Authorized Agent: _____

Date: 11-26-19



Town of Kill Devil Hills

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

NOV - 4 2019

Planning and Inspection Department

BP2019-249	BUILDING
PROJECT NAME: Rogers Fence replacement and patio addition	ISSUED: 11/04/2019
SITE ADDRESS: 2023 MEMORIAL BLVD S KILL DEVIL HILLS	EXPIRES: 05/02/2020

APPLICANT: Matthews, Roger 2023 S Memorial Blvd Kill Devil Hills, NC 27948	OWNER: Matthews, Roger 2023 S Memorial Blvd Kill Devil Hills, NC 27948
---	---

CONTRACTOR: Set - Wave Construction
1400 Harrington Ave
Kill Devil Hills, NC 27948
252-996-0099

UNLICENSED - REMODELING: Set - Wave Construction 1400 Harrington Ave Kill Devil Hills, NC 27948 252-996-0099	License: 0000000 Expires: 06/28/2024
--	---

PARCEL:

PIN: 989313137687	Parcel Number: 008519000
Address: 2023 MEMORIAL BLVD S KILL DEVIL HILLS	Zoning:
Addition: NAGS HEAD SHORES AMENDED SEC 4	Block: 4 Lot(s): PT 10 & PT 11
Legal Description:	

FEES:	Paid	Due
Building Permit Fee - Minimum Fee	\$150.00	\$0.00
Totals :	\$150.00	\$0.00

PROJECT DESCRIPTION: replace pool fence moving location, add 6x24' patio addition to rear yard

BP2019-249

PROJECT NAME: Rogers Fence replacement and patio addition
SITE ADDRESS: 2023 MEMORIAL BLVD S KILL DEVIL HILLS

BUILDING

ISSUED: 11/04/2019

EXPIRES: 05/02/2020

DETAILS**Permit**

Name	Value
CAMA PERMIT	N
CAMA EXEMPTION	N
ZONING DISTRICT	C
PURPOSE	Residential Accessory
FRONT YARD SETBACK	30
SIDE YARD SETBACK	8
REAR YARD SETBACK	20% Depth >30
FLOOD ZONE	AE
BASE FLOOD ELEVATION	10.0
FINAL ELEVATION CERTIFICATE	N
CONSTRUCTION COST	10000.00
LOT COVERAGE	48.00
SURVEYOR NAME AND NUMBER	William S. Jones L-2532
OCCUPANCY TYPE	One & Two Family Dwelling

REQUIRED INSPECTIONS

Stringline	Final
Zoning Final	

CONDITIONS

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

BP2019-249

PROJECT NAME: Rogers Fence replacement and patio addition
SITE ADDRESS: 2023 MEMORIAL BLVD S KILL DEVIL HILLS

BUILDING

ISSUED: 11/04/2019

EXPIRES: 05/02/2020

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

Issued By: _____

Contractor or Authorized Agent: _____

Date: 11.4.19



Town of Kill Devil Hills

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

NOV - 4 2019

Planning and Inspection Department

BP2019-251

PROJECT NAME: Stuart Fence Replacement
SITE ADDRESS: 600 OCEAN ACRES DR W KILL DEVIL HILLS

BUILDING

ISSUED: 11/04/2019

EXPIRES: 05/02/2020

APPLICANT: STUART, MARIA
600 OCEAN ACRES W
Kill Devil Hills, NC 27948

OWNER: STUART, MARIA
600 OCEAN ACRES W
Kill Devil Hills, NC 27948

CONTRACTOR: Set - Wave Construction
1400 Harrington Ave
Kill Devil Hills, NC 27948
252-996-0099

UNLICENSED - REMODELING: Set - Wave Construction
1400 Harrington Ave
Kill Devil Hills, NC 27948
252-996-0099

License: 0000000
Expires: 06/28/2024

PARCEL:

PIN: 988320729415

Parcel Number: 004984000

Address: 600 OCEAN ACRES DR W KILL DEVIL HILLS

Addition: OCEAN ACRES TRACT 3 SEC 2

Zoning:
Block: E **Lot(s):** 45

Legal Description:

FEES:	Paid	Due
Building Permit Fee - Minimum Fee	\$150.00	\$0.00
Totals :	\$150.00	\$0.00

PROJECT DESCRIPTION: Remove and relocate fence along property line, replace slider with window on main structure

BP2019-251**PROJECT NAME:** Stuart Fence Replacement
SITE ADDRESS: 600 OCEAN ACRES DR W KILL DEVIL HILLS**BUILDING****ISSUED:** 11/04/2019**EXPIRES:** 05/02/2020

DETAILS**Permit**

Name	Value
CAMA PERMIT	N
CAMA EXEMPTION	N
ZONING DISTRICT	RL
PURPOSE	Residential Repair/Remodel
FRONT YARD SETBACK	30
SIDE YARD SETBACK	10
REAR YARD SETBACK	20% Depth >30
STREET SIDE SETBACK	15
FLOOD ZONE	X
FINAL ELEVATION CERTIFICATE	N
CONSTRUCTION COST	5000.00
LOT COVERAGE	20.62
SURVEYOR NAME AND NUMBER	J.H. Miller Jr L-4958
OCCUPANCY TYPE	One & Two Family Dwelling

REQUIRED INSPECTIONS

Stringline	Zoning Final
Rough In	Final
Insulation	

CONDITIONS

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

BP2019-251

PROJECT NAME: Stuart Fence Replacement

SITE ADDRESS: 600 OCEAN ACRES DR W KILL DEVIL HILLS

BUILDING

ISSUED: 11/04/2019

EXPIRES: 05/02/2020

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

Issued By: _____

Contractor or Authorized Agent: _____

Date: _____

11.4.19



Town of Kill Devil Hills

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

NOV - 5 2019

Planning and Inspection Department

BP2019-252	BUILDING
PROJECT NAME: Foxwell Wood Stove	ISSUED: 11/05/2019
SITE ADDRESS: 1104 SPORTSMAN DR W KILL DEVIL HILLS	EXPIRES: 05/03/2020

APPLICANT: Foxwell, William 1104 W Sportsman dr Kill Devil Hills, NC 27948 757-621-6068	OWNER: Foxwell, William 1104 W Sportsman dr Kill Devil Hills, NC 27948 757-621-6068
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GENERAL:	Self UNKNOWN UNKNOWN, XX 00000 917-862-9006	License: Unlicensed Expires: 12/31/2020
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PARCEL:

PIN: 987408994577	Parcel Number: 001660000
Address: 1104 SPORTSMAN DR W KILL DEVIL HILLS	
Addition: AVALON BEACH	Zoning:
Legal Description:	Block: 0 Lot(s): 306&307

FEES:	Paid	Due
Building Permit Fee - Minimum Fee	\$150.00	\$0.00
Totals :	\$150.00	\$0.00

PROJECT DESCRIPTION: Instal freestanding wood stove, double wall pipe will exit through existing chimney chase

BP2019-252

PROJECT NAME: Foxwell Wood Stove

SITE ADDRESS: 1104 SPORTSMAN DR W KILL DEVIL HILLS

BUILDING

ISSUED: 11/05/2019

EXPIRES: 05/03/2020

DETAILS**Permit**

Name	Value
CAMA PERMIT	N
CAMA EXEMPTION	N
ZONING DISTRICT	RL
PURPOSE	Residential Repair/Remodel
FRONT YARD SETBACK	15
SIDE YARD SETBACK	6
REAR YARD SETBACK	20% Depth >30
FLOOD ZONE	AE
BASE FLOOD ELEVATION	8
FINAL ELEVATION CERTIFICATE	N
CONSTRUCTION COST	3500.00

REQUIRED INSPECTIONS

Rough In

Final

CONDITIONS

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

Issued By: _____

Contractor or Authorized Agent: _____

Date: _____

11-5-19



Town of Kill Devil Hills

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

NOV - 6 2019

Planning and Inspection Department

BP2019-255

PROJECT NAME: Scango Deck/Stair Repair
SITE ADDRESS: 1510 VA DARE TRL N KILL DEVIL HILLS

BUILDING

ISSUED: 11/06/2019

EXPIRES: 05/04/2020

APPLICANT: SCANGO, DAVID E
CATHERINE SCANGO
4233 BERRITT STREET
FAIRFAX, VA 22030

OWNER: SCANGO, DAVID E
CATHERINE SCANGO
4233 BERRITT STREET
FAIRFAX, VA 22030

CONTRACTOR: Perry, Ronald
1411 Pirates Loop
Kill Devil Hills, NC 27948
252-202-3635

UNLICENSED - REMODELING: Perry, Ronald
1411 Pirates Loop
Kill Devil Hills, NC 27948

License: 12345
Expires:

PARCEL:

PIN: 988411556582

Parcel Number: 002835000

Address: 1510 VA DARE TRL N KILL DEVIL HILLS

Zoning:

Addition: CROATAN SHORES

Block: D **Lot(s):** 15

Legal Description:

FEES:	Paid	Due
Building Permit Fee - Minimum Fee	\$150.00	\$0.00
Totals :	\$150.00	\$0.00

PROJECT DESCRIPTION: repair/replace decking, bring stairs up to current code

BP2019-255**PROJECT NAME:** Scango Deck/Stair Repair
SITE ADDRESS: 1510 VA DARE TRL N KILL DEVIL HILLS**BUILDING****ISSUED:** 11/06/2019**EXPIRES:** 05/04/2020

DETAILS**Permit**

Name	Value
ZONING DISTRICT	RL
FRONT YARD SETBACK	30
REAR YARD SETBACK	20% Depth >30
SIDE YARD SETBACK	10
CAMA PERMIT	N
CAMA EXEMPTION	N
FLOOD ZONE	AE
BASE FLOOD ELEVATION	8.3
SUBSTANTIAL IMPROVEMENT	NO
PURPOSE	Residential Repair/Remodel
CONSTRUCTION COST	6000.00
ENGINEER AND LICENSE NUMBER	Barrett Crook 027540
CULVERT	N
DRIVEWAY INVERT 2	N
OCCUPANCY TYPE	One & Two Family Dwelling

REQUIRED INSPECTIONS

Final

Zoning Final

CONDITIONS

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

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

BP2019-255

PROJECT NAME: Scango Deck/Stair Repair
SITE ADDRESS: 1510 VA DARE TRL N KILL DEVIL HILLS

BUILDING

ISSUED: 11/06/2019

EXPIRES: 05/04/2020

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

Issued By: _____

Contractor or Authorized Agent: _____

Date: _____

11/06/19



Town of Kill Devil Hills

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

PAD

NOV - 6 2019

Planning and Inspection Department

BP2019-254

PROJECT NAME: DADISMAN SIDING AND SHEATHING
SITE ADDRESS: 103 SPORTSMAN DR E KILL DEVIL HILLS

BUILDING

ISSUED: 11/06/2019
EXPIRES: 05/04/2020

APPLICANT: Dadisman, David & Becky
1091 Scenic DR
WILLIAMSTON, NC 27892
252-217-4260

OWNER: Dadisman, David & Becky
1091 Scenic DR
WILLIAMSTON, NC 27892
252-217-4260

GENERAL: WES LIVERMAN
UNKNOWN
UNKNOWN, XX 00000
252-619-2599

License: unlicensed
Expires: 12/31/2019

PARCEL:

PIN: 988517200813

Parcel Number: 001712000

Address: 103 SPORTSMAN DR E KILL DEVIL HILLS

Addition: AVALON BEACH

Zoning:
Block: 0 **Lot(s):** 60

Legal Description:

FEES:	Paid	Due
Building Permit Fee - Minimum Fee	\$150.00	\$0.00
Totals :	\$150.00	\$0.00

PROJECT DESCRIPTION: REPLACE VINYL SIDING AND ROTTEN SHEATHING

BP2019-254

PROJECT NAME: DADISMAN SIDING AND SHEATHING
SITE ADDRESS: 103 SPORTSMAN DR E KILL DEVIL HILLS

BUILDING

ISSUED: 11/06/2019

EXPIRES: 05/04/2020

DETAILS

Permit

Name	Value
CAMA PERMIT	N
CAMA EXEMPTION	N
ZONING DISTRICT	C
PURPOSE	Residential Repair/Remodel
FRONT YARD SETBACK	15
SIDE YARD SETBACK	6
REAR YARD SETBACK	20% Depth >30
FLOOD ZONE	AE
BASE FLOOD ELEVATION	9.00
FINAL ELEVATION CERTIFICATE	N
CONSTRUCTION COST	5000.00
CONSTRUCTION TYPE	V
OCCUPANCY TYPE	One & Two Family Dwelling

REQUIRED INSPECTIONS


Framing


Final

CONDITIONS

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Issued By: 

Contractor or Authorized Agent: 

Date: 11/6/19



Town of Kill Devil Hills

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

PAID

NOV - 6 2019

Planning and Inspection Department

BP2019-250	BUILDING
PROJECT NAME: Shive front deck and stair replacement	ISSUED: 11/04/2019
SITE ADDRESS: 2016 PHOEBUS ST KILL DEVIL HILLS	EXPIRES: 05/02/2020

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

CONTRACTOR: Outer Banks Roofing LLC
PO BOX 3854
Kill Devil Hills, NC 27948
252-207-3549

UNLICENSED BUILDER: Outer Banks Roofing LLC PO BOX 3854 Kill Devil Hills, NC 27948 252-207-3549	License: 12345 Expires:
---	--

PARCEL:

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

FEES:	Paid	Due
Building Permit Fee - Minimum Fee	\$150.00	\$0.00
Totals :	\$150.00	\$0.00

PROJECT DESCRIPTION: rebuild the front stairs and deck to current code, same footprint

BP2019-250

PROJECT NAME: Shive front deck and stair replacement
SITE ADDRESS: 2016 PHOEBUS ST KILL DEVIL HILLS

BUILDING**ISSUED:** 11/04/2019**EXPIRES:** 05/02/2020**DETAILS****Permit**

Name	Value
CAMA PERMIT	N
CAMA EXEMPTION	N
ZONING DISTRICT	RL
PURPOSE	Residential Repair/Remodel
FRONT YARD SETBACK	15
SIDE YARD SETBACK	6
REAR YARD SETBACK	20% Depth >30
FLOOD ZONE	X
FINAL ELEVATION CERTIFICATE	N
CONSTRUCTION COST	3700.00
SURVEYOR NAME AND NUMBER	W.C. Owen L-3216
OCCUPANCY TYPE	One & Two Family Dwelling

REQUIRED INSPECTIONS

Slab/Foundation/Piling Final
 Zoning Final

CONDITIONS

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

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

* Zoning Final Inspection is required.

BP2019-250

PROJECT NAME: Shive front deck and stair replacement
SITE ADDRESS: 2016 PHOEBUS ST KILL DEVIL HILLS

BUILDING

ISSUED: 11/04/2019

EXPIRES: 05/02/2020

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

Issued By:  _____

Contractor or Authorized Agent:  _____ Date: 11-6-2019



Town of Kill Devil Hills

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

PAID

NOV - 7 2019

Planning and Inspection Department

BP2019-245

PROJECT NAME: Gore Shed

SITE ADDRESS: 1513 DOGWOOD LN KILL DEVIL HILLS

BUILDING

ISSUED: 10/24/2019

EXPIRES: 04/21/2020

APPLICANT: Gore, Rick
1513 DOGWOOD LN
Kill Devil Hills, NC 27948

OWNER: Gore, Rick
1513 DOGWOOD LN
Kill Devil Hills, NC 27948

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

License: Unlicensed
Expires: 12/31/2020

PARCEL:

PIN: 988413138997

Parcel Number: 026983000

Address: 1513 DOGWOOD LN KILL DEVIL HILLS

Addition: FIRST FLIGHT VLG PH A SEC 3

Zoning:
Block: 0 **Lot(s):** 57

Legal Description:

FEES:	Paid	Due
Accessory Residential (MIN)	\$100.00	\$0.00
Totals :	\$100.00	\$0.00

PROJECT DESCRIPTION: 12'x12' Shed

BP2019-245

PROJECT NAME: Gore Shed

SITE ADDRESS: 1513 DOGWOOD LN KILL DEVIL HILLS

BUILDING

ISSUED: 10/24/2019

EXPIRES: 04/21/2020

DETAILS

Permit

Name	Value
CAMA PERMIT	N
CAMA EXEMPTION	N
ZONING DISTRICT	RL
PURPOSE	Residential Accessory
FRONT YARD SETBACK	30
SIDE YARD SETBACK	10
HEALTH DEPARTMENT PERMIT #	29112
FLOOD ZONE	AE
BASE FLOOD ELEVATION	8.3
FINAL ELEVATION CERTIFICATE	N
CONSTRUCTION COST	5000.00
LOT COVERAGE	29.00
SURVEYOR NAME AND NUMBER	Manson Ray Meekins L-2592
OCCUPANCY TYPE	One & Two Family Dwelling

REQUIRED INSPECTIONS

Zoning Final

Final

CONDITIONS

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

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

* Zoning Final Inspection is required.

BP2019-245

PROJECT NAME: Gore Shed

SITE ADDRESS: 1513 DOGWOOD LN KILL DEVIL HILLS

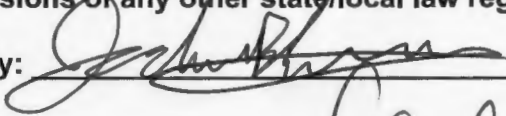
BUILDING

ISSUED: 10/24/2019

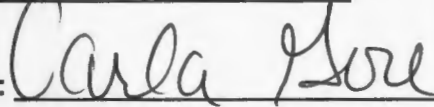
EXPIRES: 04/21/2020

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

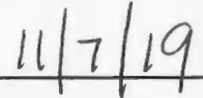
Issued By:



Contractor or Authorized Agent:



Date:





Town of Kill Devil Hills

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

NOV - 7 2019

Planning and Inspection Department

BP2019-259

PROJECT NAME: Osprey Management Cabana Repair
SITE ADDRESS: 1003 Virginia Dare Tr. N. Kill Devil Hills

BUILDING

ISSUED: 11/07/2019

EXPIRES: 05/05/2020

APPLICANT: OSPREY ENGINEERING & MANAGEMENT, LLC
11141 WILLOWBROOK DR
POTOMAC, MD 20854

OWNER: OSPREY ENGINEERING & MANAGEMENT, LLC
11141 WILLOWBROOK DR
POTOMAC, MD 20854

CONTRACTOR: SEA THRU CONSTRUCTION
PO BOX 2471
Kitty Hawk, NC 27949
252-491-6964

GENERAL BUILDING-LIMITED: SEA THRU CONSTRUCTION
PO BOX 2471
Kitty Hawk, NC 27949
252-491-6964

License: 57130
Expires: 01/01/2020

PARCEL:

PIN: 988415733187

Parcel Number: 003703001

Address: 1003 Virginia Dare Tr. N. Kill Devil Hills

Addition: Kitty Hawk Shores

Zoning:
Block: 10 **Lot(s):** 2

Legal Description:

FEES:	Paid	Due
Building Permit Fee - Minimum Fee	\$150.00	\$0.00
Totals :	\$150.00	\$0.00

PROJECT DESCRIPTION: Repair and re roof cabana

BP2019-259**PROJECT NAME:** Osprey Management Cabana Repair
SITE ADDRESS: 1003 Virginia Dare Tr. N. Kill Devil Hills**BUILDING****ISSUED:** 11/07/2019**EXPIRES:** 05/05/2020**DETAILS****Permit**

Name	Value
CAMA PERMIT	N
CAMA EXEMPTION	N
ZONING DISTRICT	OIR
PURPOSE	Residential Repair/Remodel
FRONT YARD SETBACK	30
SIDE YARD SETBACK	10
REAR YARD SETBACK	CAMA
FLOOD ZONE	VE
BASE FLOOD ELEVATION	11.0
FINAL ELEVATION CERTIFICATE	N
CONSTRUCTION COST	8950.00
OCCUPANCY TYPE	One & Two Family Dwelling

REQUIRED INSPECTIONS

Zoning Final

Final

CONDITIONS

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

Issued By: Contractor or Authorized Agent: 

Date: 11/7/19



Town of Kill Devil Hills

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

NOV - 7 2019

Planning and Inspection Department

BP2019-258

PROJECT NAME:

SITE ADDRESS: 2300 CROATAN HWY N KILL DEVIL HILLS

BUILDING

ISSUED: 11/06/2019

EXPIRES: 05/04/2020

APPLICANT: JANICKI, EDWARD J
CAROL ANN ANGELOS
2300 N CROATAN HWY
KILL DEVIL HILLS, NC 27948

OWNER: JANICKI, EDWARD J
CAROL ANN ANGELOS
2300 N CROATAN HWY
KILL DEVIL HILLS, NC 27948

GENERAL: CAROLINA BEACH BUILDERS
2300 North Croatan Highway
Kill Devil Hills, NC 27948
256-1521

License: 27951
Expires:

PARCEL:

PIN: 988517115109

Parcel Number: 000795000

Address: 2300 CROATAN HWY N KILL DEVIL HILLS

Addition: VIRGINIA DARE SHORE AMD BLK 23

Zoning:
Block: 23 **Lot(s):** 13-14

Legal Description:

FEES:	Paid	Due
Building Permit Fee - Minimum Fee	\$150.00	\$0.00
Totals :	\$150.00	\$0.00

PROJECT DESCRIPTION: Replace existing stairs.

BP2019-258

PROJECT NAME:

SITE ADDRESS: 2300 CROATAN HWY N KILL DEVIL HILLS

BUILDING

ISSUED: 11/06/2019

EXPIRES: 05/04/2020

DETAILS

Permit

Name	Value
CAMA PERMIT	N
CAMA EXEMPTION	N
ZONING DISTRICT	C
FLOOD ZONE	AE
BASE FLOOD ELEVATION	9
FINAL ELEVATION CERTIFICATE	N
CONSTRUCTION COST	850.00
OCCUPANCY TYPE	Business

REQUIRED INSPECTIONS

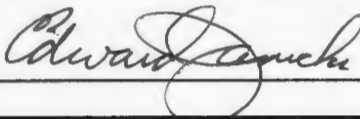
Final

CONDITIONS

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

Issued By: 

Contractor or Authorized Agent: 

Date: 11/7/19



Town of Kill Devil Hills

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

Planning and Inspection Department

BP2019-257	BUILDING
PROJECT NAME: NEWMAN STAIR AND RAMP	ISSUED: 11/06/2019
SITE ADDRESS: 2503 VA DARE TRL N KILL DEVIL HILLS	EXPIRES: 05/04/2020

APPLICANT: 123 Property Services, LLC PO Box 1450 kitty hawk, nc 27949	OWNER: 123 Property Services, LLC PO Box 1450 kitty hawk, nc 27949
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GENERAL:	NEWMAN, BRAIN K./ BRIAN NEWMAN COMPANY PO Box 1450 Kitty Hawk, NC 27949	License: 10087 Expires:
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PARCEL:

PIN: 988517223371	Parcel Number: 000840000
Address: 2503 VA DARE TRL N KILL DEVIL HILLS	
Addition: VIRGINIA DARE SHORES PLAT B	Zoning:
Legal Description:	Block: 0 Lot(s): 36

FEES:	Paid	Due
Building Permit Fee - Minimum Fee	\$150.00	\$0.00
Totals :	\$150.00	\$0.00

PROJECT DESCRIPTION: REBUILD RAMP AND STAIR IN EXISTING FOOTPRINT

NOV - 6 2019

BP2019-257**PROJECT NAME:** NEWMAN STAIR AND RAMP**SITE ADDRESS:** 2503 VA DARE TRL N KILL DEVIL HILLS**BUILDING****ISSUED:** 11/06/2019**EXPIRES:** 05/04/2020

DETAILS**Permit**

Name	Value
CAMA PERMIT	N
CAMA EXEMPTION	N
ZONING DISTRICT	OIR
PURPOSE	Residential Repair/Remodel
FRONT YARD SETBACK	30
SIDE YARD SETBACK	10
REAR YARD SETBACK	CAMA
FLOOD ZONE	VE
BASE FLOOD ELEVATION	11.00
FINAL ELEVATION CERTIFICATE	N
CONSTRUCTION COST	4000.00
CONSTRUCTION TYPE	V
OCCUPANCY TYPE	One & Two Family Dwelling

REQUIRED INSPECTIONS

Zoning Final

Final

CONDITIONS

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

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

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

* V ZONE DESIGN AND CONSTRUCTION CERTIFICATION REQUIRED PRIOR TO C.O.

BP2019-257

PROJECT NAME: NEWMAN STAIR AND RAMP

SITE ADDRESS: 2503 VA DARE TRL N KILL DEVIL HILLS

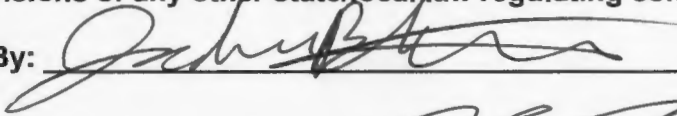
BUILDING

ISSUED: 11/06/2019

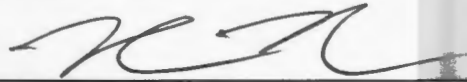
EXPIRES: 05/04/2020

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

Issued By: _____



Contractor or Authorized Agent: _____



Date: _____

11/6/19



Town of Kill Devil Hills

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

Planning and Inspection Department

BP2019-248

PROJECT NAME: Long Sister Piling
SITE ADDRESS: 206 THIRD ST W KILL DEVIL HILLS

BUILDING

ISSUED: 11/07/2019

EXPIRES: 05/05/2020

APPLICANT: LONG, ROBERT E
TRUSTEE
221 PALEN AVENUE
NEWPORT NEWS, VA 23601

OWNER: LONG, ROBERT E
TRUSTEE
221 PALEN AVENUE
NEWPORT NEWS, VA 23601

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

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

License: 79801
Expires: 01/01/2020

PARCEL:

PIN: 988406370503

Parcel Number: 027170000

Address: 206 THIRD ST W KILL DEVIL HILLS

Zoning:

Addition: HEDRICKS ADDITION - CROATAN SH

Block: 0 **Lot(s):** 36

Legal Description:

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

NOV - 8 2019

PROJECT DESCRIPTION: Install 5 8x8x12 sister piles

BP2019-248

PROJECT NAME: Long Sister Piling
SITE ADDRESS: 206 THIRD ST W KILL DEVIL HILLS

BUILDING**ISSUED:** 11/07/2019**EXPIRES:** 05/05/2020**DETAILS****Permit**

Name	Value
CAMA PERMIT	N
CAMA EXEMPTION	N
ZONING DISTRICT	RL
PURPOSE	Residential Repair/Remodel
FRONT YARD SETBACK	30
SIDE YARD SETBACK	8
REAR YARD SETBACK	20% Depth >30
HEALTH DEPARTMENT PERMIT #	29127
FLOOD ZONE	AE
BASE FLOOD ELEVATION	8.3
FINAL ELEVATION CERTIFICATE	N
CONSTRUCTION COST	2800.00
OCCUPANCY TYPE	One & Two Family Dwelling

REQUIRED INSPECTIONS

Zoning Final

Final

CONDITIONS

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

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

BP2019-248

PROJECT NAME: Long Sister Piling
SITE ADDRESS: 206 THIRD ST W KILL DEVIL HILLS

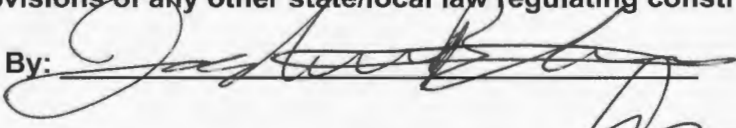
BUILDING

ISSUED: 11/07/2019

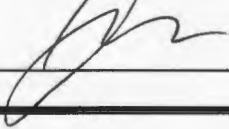
EXPIRES: 05/05/2020

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

Issued By: _____



Contractor or Authorized Agent: _____



Date: _____

11/8/19



Town of Kill Devil Hills

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

PAD

NOV - 8 2019

Planning and Inspection Department

BP2019-253

PROJECT NAME: Barker Deck Repair
SITE ADDRESS: 2030 EDENTON ST KILL DEVIL HILLS

BUILDING

ISSUED: 11/08/2019

EXPIRES: 05/06/2020

APPLICANT: BARKER, DONALD
23 13TH AVE
SOUTHERN SHORES, nc 27949
252-489-9389

OWNER: BARKER, DONALD
23 13TH AVE
SOUTHERN SHORES, nc 27949
252-489-9389

CONTRACTOR: Andy's Toolbox
PO BOX 2557
kitty hawk, nc 27949

UNLICENSED BUILDER: Andy's Toolbox
PO BOX 2557
kitty hawk, nc 27949

License: 12345
Expires:

PARCEL:

PIN: 987408987668

Parcel Number: 001267000

Address: 2030 EDENTON ST KILL DEVIL HILLS

Addition: AVALON BEACH ANNEX 2 & 3

Zoning:
Block: 0 **Lot(s):** 819

Legal Description:

FEES:	Paid	Due
Building Permit Fee - Minimum Fee	\$150.00	\$0.00
Totals :	\$150.00	\$0.00

PROJECT DESCRIPTION: replace deck railings, surface planks and steps, staying within existing footprint

BP2019-253

PROJECT NAME: Barker Deck Repair

SITE ADDRESS: 2030 EDENTON ST KILL DEVIL HILLS

BUILDING

ISSUED: 11/08/2019

EXPIRES: 05/06/2020

DETAILS

Permit

Name	Value
CAMA PERMIT	N
CAMA EXEMPTION	N
ZONING DISTRICT	RL
PURPOSE	Residential Repair/Remodel
FRONT YARD SETBACK	15
SIDE YARD SETBACK	8
REAR YARD SETBACK	20% Depth >30
FLOOD ZONE	AE
BASE FLOOD ELEVATION	8.3
FINAL ELEVATION CERTIFICATE	N
CONSTRUCTION COST	9000.00
SURVEYOR NAME AND NUMBER	William S. Jones L-2532
OCCUPANCY TYPE	One & Two Family Dwelling

REQUIRED INSPECTIONS

Final

CONDITIONS

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

BP2019-253

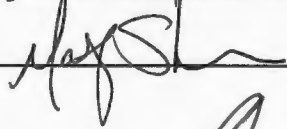
PROJECT NAME: Barker Deck Repair
SITE ADDRESS: 2030 EDENTON ST KILL DEVIL HILLS

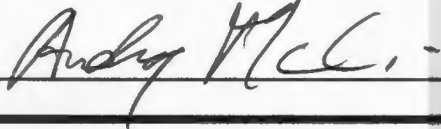
BUILDING

ISSUED: 11/08/2019

EXPIRES: 05/06/2020

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

Issued By: 

Contractor or Authorized Agent:  Date: 11/8/19



Town of Kill Devil Hills

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

Planning and Inspection Department

BP2019-263	BUILDING
PROJECT NAME: CHAMBER OF COMMERCE RAMP AND STAIR	ISSUED: 11/12/2019
SITE ADDRESS: 101 Town Hall Dr. ST KILL DEVIL HILLS	EXPIRES: 05/10/2020

APPLICANT: OUTER BANKS CHAMBER OF COMMERCE 101 Town Hall Dr. Kill Devil Hills, NC 27948	OWNER: TOWN OF KILL DEVIL HILLS P O BOX 1719 102 Town Hall Drive KILL DEVIL HILLS, NC 27948
--	---

UNLICENSED BUILDER:	ROPER COASTAL BUILDING 621 CANAL DR Kill Devil Hills, NC 27948 252-489-1338	License: XXXXX Expires:
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PARCEL:

PIN: 988307696324	Parcel Number: 008165006
Address: 101 Town Hall Dr. ST KILL DEVIL HILLS	Zoning:
Addition: SUBDIVISION - NONE	Block: 0 Lot(s): 0
Legal Description:	

FEES:	Paid	Due
Building Permit Fee - Minimum Fee	\$150.00	\$0.00
Totals :	\$150.00	\$0.00

PROJECT DESCRIPTION: REPAIR HANDICAP RAMP, REBUILD STAIRS, SISTER 6X6 PILING

PAID
NOV 12 2019

BP2019-263

PROJECT NAME: CHAMBER OF COMMERCE RAMP AND STAIR
SITE ADDRESS: 101 Town Hall Dr. ST KILL DEVIL HILLS

BUILDING

ISSUED: 11/12/2019

EXPIRES: 05/10/2020

DETAILS

Permit

Name	Value
CAMA PERMIT	N
CAMA EXEMPTION	N
ZONING DISTRICT	G&I Public
PURPOSE	Commercial Repair/Remodel
FRONT YARD SETBACK	30
SIDE YARD SETBACK	10
REAR YARD SETBACK	20% Depth >30
STREET SIDE SETBACK	15
FLOOD ZONE	AE
BASE FLOOD ELEVATION	9.00
FINAL ELEVATION CERTIFICATE	N
CONSTRUCTION COST	4500.00
CONSTRUCTION TYPE	V
OCCUPANCY TYPE	Business

REQUIRED INSPECTIONS

Zoning Final

Final

CONDITIONS

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

BP2019-263

PROJECT NAME: CHAMBER OF COMMERCE RAMP AND STAIR
SITE ADDRESS: 101 Town Hall Dr. ST KILL DEVIL HILLS

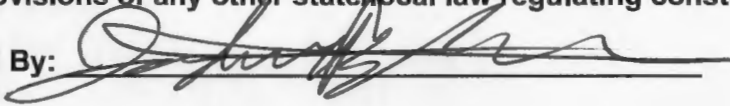
BUILDING

ISSUED: 11/12/2019

EXPIRES: 05/10/2020

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

Issued By: _____



Contractor or Authorized Agent: _____

Date: _____

11-12-19



Town of Kill Devil Hills

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

NOV - 8 2019

Planning and Inspection Department

BP2019-261	BUILDING
PROJECT NAME: EGGLESTON SIDING AND SHEATHING	ISSUED: 11/08/2019
SITE ADDRESS: 208 DOLLY ST KILL DEVIL HILLS	EXPIRES: 05/06/2020

APPLICANT: EGGLESTON, JEFFREY L 208 DOLLY STREET KILL DEVIL HILLS, NC 27948	OWNER: EGGLESTON, JEFFREY L 208 DOLLY STREET KILL DEVIL HILLS, NC 27948
--	--

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

PIN: 988406278705	Parcel Number: 003453000
Address: 208 DOLLY ST KILL DEVIL HILLS	Zoning:
Addition: OCEAN EAST	Block: 0 Lot(s): 10
Legal Description:	

FEES:	Paid	Due
Building Permit Fee - Minimum Fee	\$150.00	\$0.00
Totals :	\$150.00	\$0.00

PROJECT DESCRIPTION: REPLACE SIDING, SHEATHING AS NEEDED

BP2019-261**PROJECT NAME:** EGGLESTON SIDING AND SHEATHING
SITE ADDRESS: 208 DOLLY ST KILL DEVIL HILLS**BUILDING****ISSUED:** 11/08/2019**EXPIRES:** 05/06/2020**DETAILS****Permit**

Name	Value
CAMA PERMIT	N
CAMA EXEMPTION	N
ZONING DISTRICT	RL
PURPOSE	Residential Repair/Remodel
FRONT YARD SETBACK	15
SIDE YARD SETBACK	6
REAR YARD SETBACK	20% Depth >30
FLOOD ZONE	AE
BASE FLOOD ELEVATION	8.00
FINAL ELEVATION CERTIFICATE	N
CONSTRUCTION COST	20000.00
CONSTRUCTION TYPE	V
OCCUPANCY TYPE	One & Two Family Dwelling

REQUIRED INSPECTIONS

Final

CONDITIONS

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Issued By: Contractor or Authorized Agent: P. EgglestonDate: 11/8/19



Town of Kill Devil Hills

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

Planning and Inspection Department

BP2019-264	BUILDING
PROJECT NAME: MCGHEE HARRIS STAIR	ISSUED: 11/14/2019
SITE ADDRESS: 305 CHOWAN ST W KILL DEVIL HILLS	EXPIRES: 05/12/2020

APPLICANT: SMART CONSTRUCTION UNKNOWN UNKNOWN, XX 00000	OWNER: MCGHEE, VANCE A JR 4900 HATTON POINT ROAD PORTSMOUTH, VA 23703
--	--

CONTRACTOR: SAME AS APPLICANT 0000000 00000000, nc 00000	License: 123456 Expires: 04/30/2020
---	--

PARCEL:

PIN: 988517020383	Parcel Number: 000565000
Address: 305 CHOWAN ST W KILL DEVIL HILLS	Zoning:
Addition: VIRGINIA DARE SHORES	Block: 42 Lot(s): 18-20
Legal Description:	

FEES:	Paid	Due
Building Permit Fee - Minimum Fee	\$150.00	\$0.00
Totals :	\$150.00	\$0.00

PROJECT DESCRIPTION: REBUILD EXTERIOR STAIR, DECKING AND RAILING

PAID
NOV 14 2019

SP2019-264

PROJECT NAME: MCGHEE HARRIS STAIR
SITE ADDRESS: 305 CHOWAN ST W KILL DEVIL HILLS

BUILDING

ISSUED: 11/14/2019

EXPIRES: 05/12/2020

DETAILS

Permit

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

REQUIRED INSPECTIONS

Zoning Final

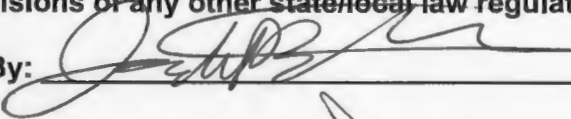
Final

CONDITIONS

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Issued By:



Contractor or Authorized Agent:



Date:

11-14-19



Town of Kill Devil Hills

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

NOV 13 2019

Planning and Inspection Department

BP2019-262	BUILDING
PROJECT NAME: Powell deck repair	ISSUED: 11/08/2019
SITE ADDRESS: 917 SHARON CT KILL DEVIL HILLS	EXPIRES: 05/06/2020

APPLICANT: POWELL, CHARLES 917 SHARON CT Kill Devil Hills, NC 27948	OWNER: POWELL, CHARLES 917 SHARON CT Kill Devil Hills, NC 27948
--	--

CONTRACTOR: Surfside Construction
9506 S Old Oregon Inlet Rd.
nags head, nc 27959
252-548-9253

UNLICENSED BUILDER: Surfside Construction 9506 S Old Oregon Inlet Rd. nags head, nc 27959 252-548-9253	License: Unlicensed Expires: 01/26/2029
--	--

PARCEL:

PIN: 988405076779	Parcel Number: 002188000
Address: 917 SHARON CT KILL DEVIL HILLS	Zoning:
Addition: WRIGHT'S SHORES	Block: 0 Lot(s): 92
Legal Description:	

FEES:	Paid	Due
Building Permit Fee - Minimum Fee	\$150.00	\$0.00
Totals :	\$150.00	\$0.00

PROJECT DESCRIPTION: replace open deck, handrails, piles and stairs, add additional decking

BP2019-262

PROJECT NAME: Powell deck repair

SITE ADDRESS: 917 SHARON CT KILL DEVIL HILLS

BUILDING

ISSUED: 11/08/2019

EXPIRES: 05/06/2020

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

Issued By: _____

Contractor or Authorized Agent: _____

Date: _____

11/13/19



Town of Kill Devil Hills

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

NOV 18 2019

Planning and Inspection Department

BP2019-265

PROJECT NAME: DAYS INN RE-ROOF
SITE ADDRESS: 201 VA DARE TRL N KILL DEVIL HILLS

BUILDING

ISSUED: 11/18/2019

EXPIRES: 05/16/2020

APPLICANT: WILBUR WRIGHT ASSOCIATES INC
301 N VIRGINIA DARE TRAIL
KILL DEVIL HILLS, NC 27948

OWNER: WILBUR WRIGHT ASSOCIATES INC
301 N VIRGINIA DARE TRAIL
KILL DEVIL HILLS, NC 27948

GENERAL BUILDING INTERMEDIATE: GALLOP ROOFING AND REMODELING, INC.
673 Old Wharf Road
Wanchese, NC 27981
252-207-7269

License: 32504
Expires: 01/01/2020

PARCEL:

PIN: 988420813294

Parcel Number: 023811000

Address: 201 VA DARE TRL N KILL DEVIL HILLS

Addition: KITTY HAWK SHORES - REVISED

Zoning:

Block: 3A

Lot(s): 1-4 & BLK.
3B 1-3 &

Legal Description:

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

PROJECT DESCRIPTION: INSTALL NEW PVC MEMBRANE ROOF SYSTEM

BP2019-265

PROJECT NAME: DAYS INN RE-ROOF
SITE ADDRESS: 201 VA DARE TRL N KILL DEVIL HILLS

BUILDING

ISSUED: 11/18/2019

EXPIRES: 05/16/2020

DETAILS

Permit	
Name	Value
CAMA PERMIT	N
CAMA EXEMPTION	N
ZONING DISTRICT	OIR
PURPOSE	Commercial Repair/Remodel
FRONT YARD SETBACK	30
SIDE YARD SETBACK	12
REAR YARD SETBACK	CAMA
FLOOD ZONE	VE
BASE FLOOD ELEVATION	11.00
FINAL ELEVATION CERTIFICATE	N
CONSTRUCTION COST	35710.00
CONSTRUCTION TYPE	V
OCCUPANCY TYPE	Residential

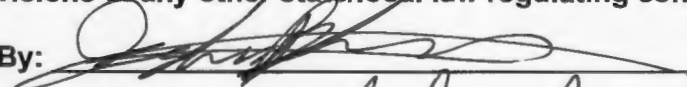
REQUIRED INSPECTIONS

Final

CONDITIONS

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

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

Issued By: 

Contractor or Authorized Agent: John Baclaw Date: 11/18/19



Town of Kill Devil Hills

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

PAID

NOV 20 2019

Planning and Inspection Department

TOWN OF
KILL DEVIL HILLS

BP2019-267

PROJECT NAME: Wilson deck addition
SITE ADDRESS: 1632 VA DARE TRL N KILL DEVIL HILLS

BUILDING

ISSUED: 11/20/2019

EXPIRES: 05/18/2020

APPLICANT: Wilson, Kevin
311 Irenie WAY
STEVENSVILLE, MD 21666
410-490-8950

OWNER: Wilson, Kevin
311 Irenie WAY
STEVENSVILLE, MD 21666
410-490-8950

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

License: 47372
Expires: 12/31/2019

PARCEL:

PIN: 988410469954

Parcel Number: 002819000

Address: 1632 VA DARE TRL N KILL DEVIL HILLS

Addition: CROATAN SHORES

Zoning:
Block: C **Lot(s):** 3 & PT 2

Legal Description:

FEES:	Paid	Due
Building Permit Fee - Minimum Fee	\$150.00	\$0.00
Totals :	\$150.00	\$0.00

PROJECT DESCRIPTION: Add new deck and pergola at rear of main structure.

BP2019-267

PROJECT NAME: Wilson deck addition
SITE ADDRESS: 1632 VA DARE TRL N KILL DEVIL HILLS

BUILDING

ISSUED: 11/20/2019

EXPIRES: 05/18/2020

DETAILS

Permit

Name	Value
CAMA PERMIT	N
CAMA EXEMPTION	N
ZONING DISTRICT	RL
PURPOSE	Residential Repair/Remodel
FLOOD ZONE	AE
BASE FLOOD ELEVATION	8
FINAL ELEVATION CERTIFICATE	N
CONSTRUCTION COST	28000.00
CONSTRUCTION TYPE	V
OCCUPANCY TYPE	One & Two Family Dwelling

REQUIRED INSPECTIONS

Zoning Final
Final

Slab/Foundation/Piling

CONDITIONS

- * This permit becomes null and void if work or construction authorized is not commenced within 6 months or if construction or work is suspended for a period of 12 months at any time after work has started.
- * As-built survey will be required prior to Certificate of Occupancy or Certificate of Compliance.
- * Development must meet all aspects of Chapter 151 Flood Damage Prevention Ordinance including use and elevation.

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

Issued By: 

Contractor or Authorized Agent: 

Date: 11/19/19



Town of Kill Devil Hills

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

PAD
NOV 22 2019

Planning and Inspection Department

BP2019-269	BUILDING
PROJECT NAME: Dematteo Door remodel	ISSUED: 11/22/2019
SITE ADDRESS: 115 AVALON DR E KILL DEVIL HILLS	EXPIRES: 05/20/2020

APPLICANT: JOSEPH DEMATTEO 24534 BOWS AND ARROWS RD Zuni, VA 23898 757-876-5187	OWNER: JOSEPH DEMATTEO 24534 BOWS AND ARROWS RD Zuni, VA 23898 757-876-5187
---	---

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

GENERAL:	PRUITT, ERIC GLADSTONE 2055 New Bern Street Kill Devil Hills, NC 27948	License: 21008 Expires: 01/01/2020
-----------------	--	---

PARCEL:

PIN: 988517204707	Parcel Number: 001689001
Address: 115 AVALON DR E KILL DEVIL HILLS	Zoning:
Addition: AVALON BEACH	Block: 0 Lot(s): 34
Legal Description:	

FEES:	Paid	Due
Building Permit Fee - Minimum Fee	\$0.00	\$150.00
Totals :	\$0.00	\$150.00

PROJECT DESCRIPTION: move downstairs door over 3 ft

BP2019-269**PROJECT NAME:** Dematteo Door remodel**SITE ADDRESS:** 115 AVALON DR E KILL DEVIL HILLS**BUILDING****ISSUED:** 11/22/2019**EXPIRES:** 05/20/2020

DETAILS**Permit**

Name	Value
CAMA PERMIT	N
CAMA EXEMPTION	N
ZONING DISTRICT	C
PURPOSE	Residential Repair/Remodel
FRONT YARD SETBACK	15
SIDE YARD SETBACK	6
REAR YARD SETBACK	20% Depth >30
FLOOD ZONE	AE
BASE FLOOD ELEVATION	9.0
FINAL ELEVATION CERTIFICATE	N
CONSTRUCTION COST	1000.00
CONSTRUCTION TYPE	V
SURVEYOR NAME AND NUMBER	William S. Jones L-2532
OCCUPANCY TYPE	One & Two Family Dwelling

REQUIRED INSPECTIONS

Zoning Final

Slab/Foundation/Piling

Final

CONDITIONS

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

BP2019-269

PROJECT NAME: Dematteo Door remodel
SITE ADDRESS: 115 AVALON DR E KILL DEVIL HILLS

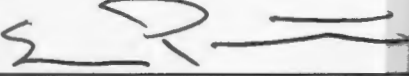
BUILDING

ISSUED: 11/22/2019

EXPIRES: 05/20/2020

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

Issued By: 

Contractor or Authorized Agent:  Date: 11/22/19



Town of Kill Devil Hills

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

Planning and Inspection Department

BP2019-227

PROJECT NAME: Goodrich Deck expansion with new front stairs and landing

SITE ADDRESS: 702 MEMORIAL BLVD S KILL DEVIL HILLS

BUILDING

ISSUED: 11/21/2019

EXPIRES: 05/19/2020

APPLICANT: Alison Goodrich
69135 Mutton Hollow Rd.
BRIDGEPORT, OH 43912
304-215-0119

OWNER: Alison Goodrich
69135 Mutton Hollow Rd.
BRIDGEPORT, OH 43912
304-215-0119

CONTRACTOR: Salty Souls Inc.
P. O. Box 69
nags head, nc 27959
252-450-8902

GENERAL REMODELING-UNLICENSED: Salty Souls Inc.
P. O. Box 69
nags head, nc 27959
252-450-8902

License: Unlic.
Expires:

PARCEL:

PIN: 988308895373

Parcel Number: 004196000

Address: 702 MEMORIAL BLVD S KILL DEVIL HILLS

Addition: KILL DEVIL HILLS SEC 1

Zoning:
Block: 11 **Lot(s):** 7

Legal Description:

FEES:	Paid	Due
Building Permit Fee - Minimum Fee	\$150.00	\$0.00
Totals :	\$150.00	\$0.00

PROJECT DESCRIPTION: replace front deck and expand toward street, add stairs and landing

NOV 22 2019

BP2019-227**PROJECT NAME:** Goodrich Deck expansion with new front stairs and landing**SITE ADDRESS:** 702 MEMORIAL BLVD S KILL DEVIL HILLS**BUILDING****ISSUED:** 11/21/2019**EXPIRES:** 05/19/2020**DETAILS****Permit**

Name	Value
CAMA PERMIT	N
CAMA EXEMPTION	N
ZONING DISTRICT	C
PURPOSE	Residential Repair/Remodel
FRONT YARD SETBACK	30
SIDE YARD SETBACK	8
REAR YARD SETBACK	20% Depth >30
FLOOD ZONE	AE
BASE FLOOD ELEVATION	8.3
FINAL ELEVATION CERTIFICATE	N
CONSTRUCTION COST	9500.00
SURVEYOR NAME AND NUMBER	W.L. Norris Jr. L-4554
OCCUPANCY TYPE	One & Two Family Dwelling

REQUIRED INSPECTIONS

Slab/Foundation/Piling	Final
Zoning Final	

CONDITIONS

- * This permit becomes null and void if work or construction authorized is not commenced within 6 months or if construction or work is suspended for a period of 12 months at any time after work has started.
- * Construction must meet all aspect of Chapter 153 Zoning including lot coverage and setbacks.
- * Zoning Final Inspection is required.
- * Must comply with Wind Borne Debris requirements as defined in NCBC R301.2.1.2 and NCBC 1609.2.

BP2019-227

PROJECT NAME: Goodrich Deck expansion with new front stairs and landing

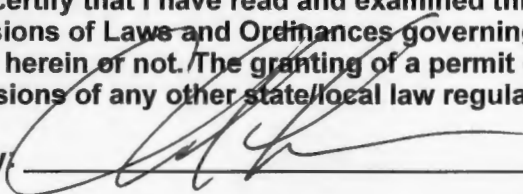
SITE ADDRESS: 702 MEMORIAL BLVD S KILL DEVIL HILLS

BUILDING

ISSUED: 11/21/2019

EXPIRES: 05/19/2020

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

Issued By:  _____

Contractor or Authorized Agent:  _____

Date: 11/22/19



Town of Kill Devil Hills

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

PAID
NOV 25 2019

Planning and Inspection Department

BP2019-270

PROJECT NAME: Kent Rear Deck Extension
SITE ADDRESS: 113 ROCKY MOUNT ST KILL DEVIL HILLS

BUILDING

ISSUED: 11/22/2019

EXPIRES: 05/20/2020

APPLICANT: KENT, ANTHONY
1660 Reed Street
DENVER, CO 80214

OWNER: KENT, ANTHONY
1660 Reed Street
DENVER, CO 80214

CONTRACTOR: HOME REMODELERS
522 Ocean Trail
Corolla, NC 27927
252-599-2508

GENERAL - LIMITED: HOME REMODELERS
522 Ocean Trail
Corolla, NC 27927
252-599-2508

License: 70729
Expires: 12/31/2019

PARCEL:

PIN: 988518205393

Parcel Number: 001841000

Address: 113 ROCKY MOUNT ST KILL DEVIL HILLS

Addition: AVALON BEACH ANNEX 1

Zoning:
Block: 0 **Lot(s):** 395

Legal Description:

FEES:	Paid	Due
Building Permit Fee - Minimum Fee	\$150.00	\$0.00
Totals :	\$150.00	\$0.00

PROJECT DESCRIPTION: Extend rear back deck 5'

BP2019-270

PROJECT NAME: Kent Rear Deck Extension
SITE ADDRESS: 113 ROCKY MOUNT ST KILL DEVIL HILLS

BUILDING

ISSUED: 11/22/2019

EXPIRES: 05/20/2020

DETAILS

Permit

Name	Value
CAMA PERMIT	N
CAMA EXEMPTION	N
ZONING DISTRICT	C
PURPOSE	Residential Addition
FRONT YARD SETBACK	15
SIDE YARD SETBACK	6
REAR YARD SETBACK	20% Depth >30
FLOOD ZONE	AE
BASE FLOOD ELEVATION	9
FINAL ELEVATION CERTIFICATE	N
CONSTRUCTION COST	4760.00
LOT COVERAGE	33.00
SURVEYOR NAME AND NUMBER	Robert C. Cummins L- 2951
OCCUPANCY TYPE	One & Two Family Dwelling

REQUIRED INSPECTIONS

Zoning Final

Final

CONDITIONS

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

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

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

BP2019-270

PROJECT NAME: Kent Rear Deck Extension
SITE ADDRESS: 113 ROCKY MOUNT ST KILL DEVIL HILLS

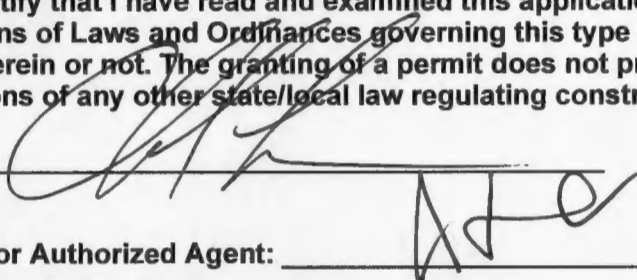
BUILDING

ISSUED: 11/22/2019

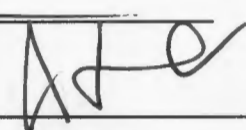
EXPIRES: 05/20/2020

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

Issued By: _____



Contractor or Authorized Agent: _____



Date: 11-25-19



Town of Kill Devil Hills

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

PAID

NOV 22 2019

Planning and Inspection Department

BP2019-271

PROJECT NAME: NIXON STAIR REBUILD
SITE ADDRESS: 608 SUFFOLK ST KILL DEVIL HILLS

BUILDING

ISSUED: 11/22/2019

EXPIRES: 05/20/2020

APPLICANT: TANNER NIXON
111 DOGWOOD DR.
Camden, NC 27921

OWNER: TANNER NIXON
111 DOGWOOD DR.
Camden, NC 27921

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

License: Unlicensed
Expires: 12/31/2020

PARCEL:

PIN: 988405097700

Parcel Number: 001136000

Address: 608 SUFFOLK ST KILL DEVIL HILLS

Zoning:

Addition: AVALON BEACH ANNEX 2 & 3

Block: 0 **Lot(s):** 931

Legal Description:

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

PROJECT DESCRIPTION: REBUILD STAIRS TO SIDE YARD

\$1000⁰⁰ value

BP2019-271

PROJECT NAME: NIXON STAIR REBUILD
SITE ADDRESS: 608 SUFFOLK ST KILL DEVIL HILLS

BUILDING

ISSUED: 11/22/2019

EXPIRES: 05/20/2020

DETAILS

Permit

Name	Value
CAMA PERMIT	N
CAMA EXEMPTION	N
ZONING DISTRICT	RL
PURPOSE	Residential Repair/Remodel
FRONT YARD SETBACK	15
SIDE YARD SETBACK	6
REAR YARD SETBACK	20% Depth >30
STREET SIDE SETBACK	7.5
FLOOD ZONE	AE
BASE FLOOD ELEVATION	8.00
FINAL ELEVATION CERTIFICATE	N
CONSTRUCTION TYPE	V
OCCUPANCY TYPE	One & Two Family Dwelling

REQUIRED INSPECTIONS

Zoning Final

Final

CONDITIONS

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

BP2019-271

PROJECT NAME: NIXON STAIR REBUILD
SITE ADDRESS: 608 SUFFOLK ST KILL DEVIL HILLS

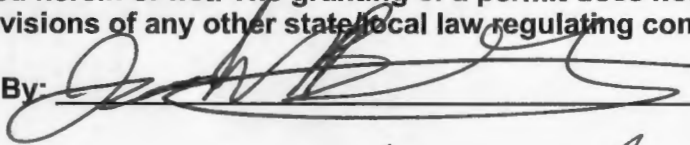
BUILDING

ISSUED: 11/22/2019

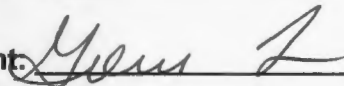
EXPIRES: 05/20/2020

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

Issued By:



Contractor or Authorized Agent:



Date: 11/22/2019



Town of Kill Devil Hills

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

Planning and Inspection Department

BP2019-268

PROJECT NAME: Kuykendall Storage Room
SITE ADDRESS: 1722 SEA SWEPT RD KILL DEVIL HILLS

BUILDING

ISSUED: 11/22/2019

EXPIRES: 05/20/2020

APPLICANT: KUYKENDALL, CHELSEA
1722 SEA SWEPT RD
Kill Devil Hills, NC 27948

OWNER: KUYKENDALL, CHELSEA
1722 SEA SWEPT RD
Kill Devil Hills, NC 27948

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

License: Unlicensed
Expires: 12/31/2020

PARCEL:

PIN: 988409161179

Parcel Number: 002579007

Address: 1722 SEA SWEPT RD KILL DEVIL HILLS

Addition: CROATAN SHORES SUBDIV

Zoning:
Block: 16 **Lot(s):** 7

Legal Description:

FEES:	Paid	Due
Building Permit Fee - Minimum Fee	\$150.00	\$0.00
Totals :	\$150.00	\$0.00

PROJECT DESCRIPTION: Close in underneath existing dwelling for storage room

PAID

NOV 22 2019

BP2019-268

PROJECT NAME: Kuykendall Storage Room
SITE ADDRESS: 1722 SEA SWEEP RD KILL DEVIL HILLS

BUILDING**ISSUED:** 11/22/2019**EXPIRES:** 05/20/2020**DETAILS****Permit**

Name	Value
CAMA PERMIT	N
CAMA EXEMPTION	N
ZONING DISTRICT	RL
PURPOSE	Residential Repair/Remodel
FRONT YARD SETBACK	30
SIDE YARD SETBACK	8
REAR YARD SETBACK	20% Depth >30
FLOOD ZONE	AE
BASE FLOOD ELEVATION	8.3
FINAL ELEVATION CERTIFICATE	N
CONSTRUCTION COST	1500.00
LOT COVERAGE	32.00
SURVEYOR NAME AND NUMBER	Gloria J. Rogers L-3531
OCCUPANCY TYPE	One & Two Family Dwelling

REQUIRED INSPECTIONS

Zoning Final

Rough In

Final

CONDITIONS

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

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

* Zoning Final Inspection is required.

* Permit is approved for unheated storage only.

BP2019-268

PROJECT NAME: Kuykendall Storage Room
SITE ADDRESS: 1722 SEA SWEPT RD KILL DEVIL HILLS

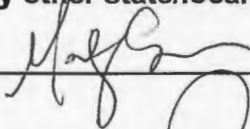
BUILDING

ISSUED: 11/22/2019

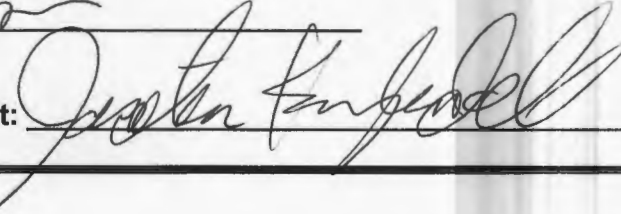
EXPIRES: 05/20/2020

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Issued By: _____



Contractor or Authorized Agent: _____



Date: _____



Town of Kill Devil Hills

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

NOV 27 2019

Planning and Inspection Department

BP2019-273

PROJECT NAME: MCCAIN DECK REBUILD
SITE ADDRESS: 118 MEADOWLARK ST E KILL DEVIL HILLS

BUILDING

ISSUED: 11/27/2019

EXPIRES: 05/25/2020

APPLICANT: MCCAIN, JAMES
524 IRONINGTON ROAD
RICHMOND, VA 23227

OWNER: MCCAIN, JAMES
524 IRONINGTON ROAD
RICHMOND, VA 23227

UNLICENSED - REMODELING: RYAN MCCARRON
1306 PERCY ST
Kill Devil Hills, NC 27948
757-822-2748

License: XXXXXXXX
Expires:

PARCEL:

PIN: 988420802012 **Parcel Number:** 003820001

Address: 118 MEADOWLARK ST E KILL DEVIL HILLS

Addition: KITTY HAWK SHORES - REVISED

Zoning:
Block: 34 **Lot(s):** PT 3 & 4

Legal Description:

FEES:	Paid	Due
Building Permit Fee - Minimum Fee	\$150.00	\$0.00
Totals :	\$150.00	\$0.00

PROJECT DESCRIPTION: REBUILD EXTERIOR DECKS AND STAIRS, SAME PILINGS AND GIRDERS

BP2019-273**PROJECT NAME:** MCCAIN DECK REBUILD**SITE ADDRESS:** 118 MEADOWLARK ST E KILL DEVIL HILLS**BUILDING****ISSUED:** 11/27/2019**EXPIRES:** 05/25/2020

DETAILS**Permit**

Name	Value
CAMA PERMIT	N
CAMA EXEMPTION	N
ZONING DISTRICT	C
PURPOSE	Residential Repair/Remodel
FRONT YARD SETBACK	15
SIDE YARD SETBACK	6
REAR YARD SETBACK	20% Depth >30
STREET SIDE SETBACK	7.5
FLOOD ZONE	AE
BASE FLOOD ELEVATION	8.3
FINAL ELEVATION CERTIFICATE	N
CONSTRUCTION COST	5500.00
CONSTRUCTION TYPE	V
OCCUPANCY TYPE	One & Two Family Dwelling

REQUIRED INSPECTIONS

Zoning Final

Final

CONDITIONS

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

BP2019-273

PROJECT NAME: MCCAIN DECK REBUILD

SITE ADDRESS: 118 MEADOWLARK ST E KILL DEVIL HILLS

BUILDING

ISSUED: 11/27/2019

EXPIRES: 05/25/2020

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

Issued By: _____

Contractor or Authorized Agent: _____

Date: _____



Town of Kill Devil Hills

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

Planning and Inspection Department

BP2019-256

PROJECT NAME: Woods Stair and Deck Replacement
SITE ADDRESS: 2601 VA DARE TRL N KILL DEVIL HILLS

BUILDING

ISSUED: 11/13/2019

EXPIRES: 05/11/2020

APPLICANT: WOODS, CHARLES R
MICHAEL D WOODS
410 FULCHER LANE
CHESTER, VA 23836

OWNER: WOODS, CHARLES R
MICHAEL D WOODS
410 FULCHER LANE
CHESTER, VA 23836

CONTRACTOR: HARRELL, ASHTON L
4625 SEASCAPE DRIVE
KITTY HAWK, NC 27949

BUILDING LIMITED: ASHTON HARRELL CONSTRUCTION
4144 Poor Ridge Road
kitty hawk, nc 27949
252-207-1247
License: 82429
Expires:

PARCEL:

PIN: 988517222469
Address: 2601 VA DARE TRL N KILL DEVIL HILLS
Addition: VIRGINIA DARE SHORES PLAT B
Legal Description:

Parcel Number: 000838000
Zoning:
Block: 0 **Lot(s):** 33

FEES:	Paid	Due
Building Permit Fee - Minimum Fee	\$150.00	\$0.00
Totals :	\$150.00	\$0.00

PROJECT DESCRIPTION: Replace front and rear decks, stair landings to same footprint

PAID

NOV 15 2019

PAID
WITH
CASH

TOWN OF
KILL DEVIL HILLS

BP2019-256**PROJECT NAME:** Woods Stair and Deck Replacement
SITE ADDRESS: 2601 VA DARE TRL N KILL DEVIL HILLS**BUILDING****ISSUED:** 11/13/2019**EXPIRES:** 05/11/2020

DETAILS**Permit**

Name	Value
CAMA PERMIT	N
CAMA EXEMPTION	Y
ZONING DISTRICT	OIR
PURPOSE	Residential Repair/Remodel
FRONT YARD SETBACK	30
SIDE YARD SETBACK	10
REAR YARD SETBACK	CAMA
FLOOD ZONE	VE
FINAL ELEVATION CERTIFICATE	N
CONSTRUCTION COST	13170.00
LOT COVERAGE	31.50
SURVEYOR NAME AND NUMBER	M. Douglas Styons L- 3227
OCCUPANCY TYPE	One & Two Family Dwelling

REQUIRED INSPECTIONS

Zoning Final

Final

CONDITIONS

- * This permit becomes null and void if work or construction authorized is not commenced within 6 months or if construction or work is suspended for a period of 12 months at any time after work has started.
- * The developer shall be responsible for maintaining erosion and sediment control at the disturbed area.
- * Construction must meet all aspect of Chapter 153 Zoning including lot coverage and setbacks.
- * Zoning Final Inspection is required.
- * Must comply with Wind Borne Debris requirements as defined in NCBC R301.2.1.2 and NCBC 1609.2.
- * Deck joist framing per specifications provided in letter from engineer Michael O'Steen.

BP2019-256

PROJECT NAME: Woods Stair and Deck Replacement
SITE ADDRESS: 2601 VA DARE TRL N KILL DEVIL HILLS

BUILDING

ISSUED: 11/13/2019

EXPIRES: 05/11/2020

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

Issued By:  _____

Contractor or Authorized Agent:  _____

Date: 11-15-19



Town of Kill Devil Hills

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

OCT 31 2019

Planning and Inspection Department

MC2019-295

PROJECT NAME:

SITE ADDRESS: 907 WRIGHTSVILLE BLVD KILL DEVIL HILLS

MECHANICAL

ISSUED: 10/31/2019

EXPIRES: 04/28/2020

APPLICANT: BLACK, FREDERICK E
907 Wrightsville Blvd
Kill Devil Hills, NC 27948

OWNER: BLACK, FREDERICK E
907 Wrightsville Blvd
Kill Devil Hills, NC 27948

MECHANICAL: NORTH BEACH SERVICES
P.O. Box 181
Kitty Hawk, NC 27949
252-491-2878

License: 33023
Expires: 12/31/2019

PARCEL:

PIN: 988308888498

Parcel Number: 004220001

Address: 907 WRIGHTSVILLE BLVD KILL DEVIL HILLS

Addition: KILL DEVIL HILLS SEC 1

Zoning:
Block: 13 **Lot(s):** 14

Legal Description:

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

PROJECT DESCRIPTION: HVAC replacement



Town of Kill Devil Hills

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

NOV - 4 2019

Planning and Inspection Department

MC2019-296

PROJECT NAME:

SITE ADDRESS: 1400 CROATAN HWY S KILL DEVIL HILLS

MECHANICAL

ISSUED: 11/04/2019

EXPIRES: 05/02/2020

APPLICANT: Circle K Stores, Inc.
305 Gregson Dr.
CARY, NC 27511
919-774-6700

OWNER: Circle K Stores, Inc.
305 Gregson Dr.
CARY, NC 27511
919-774-6700

REFRIGERATION: 3GS REPAIR & SERVICE
PO BOX 573
SEAFORD, VA 23696
910-777-9032

License: 4388
Expires:

PARCEL:

PIN: 988312956568

Parcel Number: 004886000

Address: 1400 CROATAN HWY S KILL DEVIL HILLS

Zoning:

Addition:

Block: 0 **Lot(s):** 5-6

Legal Description:

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

PROJECT DESCRIPTION: Walk in cooler addition



Town of Kill Devil Hills

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

Planning and Inspection Department

MC2019-297

PROJECT NAME:
SITE ADDRESS: 1611 VA DARE TRL N KILL DEVIL HILLS

MECHANICAL

ISSUED: 11/05/2019

EXPIRES: 05/03/2020

APPLICANT: Douglass, Michael & Barbara
7102 Colgate DR
ALEXANDRIA, VA 22307

OWNER: Douglass, Michael & Barbara
7102 Colgate DR
ALEXANDRIA, VA 22307

H-3, CLASS I: ISLAND HEATING AND COOLING
UNKNOWN
UNKNOWN, XX 00000

License: 22354
Expires: 12/31/2019

PARCEL:

PIN: 98841156567106

Parcel Number: 002780006

Address: 1611 VA DARE TRL N KILL DEVIL HILLS

Addition:

Zoning:

Block: B

Lot(s): UNIT 6 LOT
14,15

Legal Description:

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

PROJECT DESCRIPTION: HVAC replacement

NOV - 5 2019



Town of Kill Devil Hills

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

NOV - 6 2019

Planning and Inspection Department

MC2019-298

PROJECT NAME: Seagate North Unit 4 HVAC
SITE ADDRESS: 3105 CROATAN HWY N KILL DEVIL HILLS

MECHANICAL

ISSUED: 11/06/2019

EXPIRES: 05/04/2020

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

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

H-1, H-2, H-3, CLASS I: ROBERSON'S HTG & AIR.
14698 US Hwy 64
WILLIAMSTON, NC 27892
252-792-3006

License: 13851 H3
Expires: 12/30/2019

PARCEL:

PIN: 988513035596

Parcel Number: 002991000

Address: 3105 CROATAN HWY N KILL DEVIL HILLS

Addition: SUBDIVISION - NONE

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

Legal Description:

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

PROJECT DESCRIPTION: C/O 2.5 Ton HVAC System

DETAILS

Permit

Name	Value
PURPOSE	Commercial Repair/Remodel
CONSTRUCTION COST	4615.00
FLOOD ZONE	AE
BASE FLOOD ELEVATION	9
NATURAL GAS SIGNOFF	N

IC2019-298

PROJECT NAME: Seagate North Unit 4 HVAC
SITE ADDRESS: 3105 CROATAN HWY N KILL DEVIL HILLS

MECHANICAL

ISSUED: 11/06/2019

EXPIRES: 05/04/2020

REQUIRED INSPECTIONS

Final

CONDITIONS

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

Issued By: _____

Contractor or Authorized Agent: _____

Date: _____

11/6/19



Town of Kill Devil Hills

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

Planning and Inspection Department

MC2019-301	MECHANICAL
PROJECT NAME:	ISSUED: 11/14/2019
SITE ADDRESS: 1633 VA DARE TRL N KILL DEVIL HILLS	EXPIRES: 05/12/2020

APPLICANT: KAREN KHAN
6805 5th St.
Washington DC, XX 20012

OWNER: Willard, Freddie
105 Hawthorne LN
CHARLOTTESVILLE, VA 22911
434-962-9213

MECHANICAL H-3: ARMSTRONG AND SON
3978 Albermarle Curch rd.
Columbia, NC 27925
252-394-5316

License: 22516
Expires: 12/31/2019

PARCEL:

PIN: 98841157320002

Parcel Number: 027589000

Address: 1633 VA DARE TRL N KILL DEVIL HILLS

Zoning:

Addition:

Block: B **Lot(s):** UNIT A-2 LT
1,2 PT

Legal Description:

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

PROJECT DESCRIPTION: HVAC replacement

NOV 15 2019

C2019-301

PROJECT NAME:
SITE ADDRESS: 1633 VA DARE TRL N KILL DEVIL HILLS

MECHANICAL

ISSUED: 11/14/2019

EXPIRES: 05/12/2020

DETAILS

Permit

Name	Value
PURPOSE	Residential Repair/Remodel
CONSTRUCTION COST	2800.00
CONSTRUCTION TYPE	V
FLOOD ZONE	VE
BASE FLOOD ELEVATION	14
NATURAL GAS SIGNOFF	N
OCCUPANCY TYPE	Residential

REQUIRED INSPECTIONS

Final

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Issued By: _____

Contractor or Authorized Agent: _____

Date: 11-15-19



Town of Kill Devil Hills

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

Planning and Inspection Department

MC2019-299

PROJECT NAME: WILLIAMS HVAC CHANGE OUT
SITE ADDRESS: 304 CALVIN ST KILL DEVIL HILLS

MECHANICAL

ISSUED: 11/06/2019

EXPIRES: 05/04/2020

APPLICANT: WILLIAMS, RICHARD H JR
420 FIRE TOWER ROAD
ELIZABETH CITY, NC 27909

OWNER: WILLIAMS, RICHARD H JR
420 FIRE TOWER ROAD
ELIZABETH CITY, NC 27909

MECHANICAL H2 AND H3: DAVID ARMSTRONG SERVICES
Rt. 2, box 2-1A
Creswell, NC 27928

License: 21460
Expires: 12/31/2019

PARCEL:

PIN: 988308984192

Parcel Number: 004296009

Address: 304 CALVIN ST KILL DEVIL HILLS

Zoning:

Addition: KILL DEVIL HILLS SEC 1

Block: 8 **Lot(s):** 9

Legal Description:

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

PROJECT DESCRIPTION: CHANGE OUT 2..5 SPLIT SYSTEM W. 2.5 TON 14 SEER

PAID

NOV - 6 2019

2019-299

PROJECT NAME: WILLIAMS HVAC CHANGE OUT
SITE ADDRESS: 304 CALVIN ST KILL DEVIL HILLS

MECHANICAL

ISSUED: 11/06/2019

EXPIRES: 05/04/2020

DETAILS

Permit

Name	Value
PURPOSE	Residential Repair/Remodel
CONSTRUCTION COST	4725.00
CONSTRUCTION TYPE	V
FLOOD ZONE	AE
BASE FLOOD ELEVATION	8.00
NATURAL GAS SIGNOFF	N
OCCUPANCY TYPE	One & Two Family Dwelling

REQUIRED INSPECTIONS

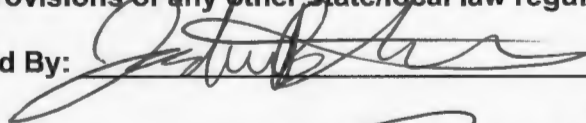
Final

CONDITIONS

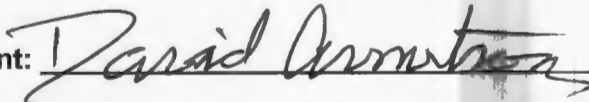
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Issued By:



Contractor or Authorized Agent:



Date:

11-16-19



Town of Kill Devil Hills

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

NOV 19 2019

Planning and Inspection Department

MC2019-304

PROJECT NAME:

SITE ADDRESS: 119 PORTHOLE CT KILL DEVIL HILLS

MECHANICAL

ISSUED: 11/18/2019

EXPIRES: 05/16/2020

APPLICANT: MICHAEL BOLLING
119 Porthole Ct.
Kill Devil Hills, NC 27948

OWNER: MICHAEL BOLLING
119 Porthole Ct.
Kill Devil Hills, NC 27948

H3, CLASS 1:

OUTER BANKS HEATING AND COOLING
P.O. Box 1415
Nags Head, NC 27959
441-1740

License: 12643
Expires: 12/31/2019

PARCEL:

PIN: 988414446541

Parcel Number: 003545000

Address: 119 PORTHOLE CT KILL DEVIL HILLS

Addition: LANDING SECTION 1, THE

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

Legal Description:

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

PROJECT DESCRIPTION: HVAC replacement



Town of Kill Devil Hills

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

Planning and Inspection Department

MC2019-305	MECHANICAL
PROJECT NAME:	ISSUED: 11/20/2019
SITE ADDRESS: 104 PORTHOLE CT KILL DEVIL HILLS	EXPIRES: 05/18/2020

APPLICANT: DAILEY, LAURA C
45 ELM STREET
ALLENDALE, NJ 07401

OWNER: DAILEY, LAURA C
45 ELM STREET
ALLENDALE, NJ 07401

H3, CLASS 1:

OUTER BANKS HEATING AND COOLING
P.O. Box 1415
Nags Head, NC 27959
441-1740

License: 12643
Expires: 12/31/2019

PARCEL:

PIN: 988414448586

Parcel Number: 003552000

Address: 104 PORTHOLE CT KILL DEVIL HILLS

Zoning:

Addition: LANDING SECTION 1, THE

Block: 0 **Lot(s):** 47

Legal Description:

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

PROJECT DESCRIPTION: HVAC replacement

PAID

NOV 20 2019

C2019-305

PROJECT NAME:

SITE ADDRESS: 104 PORTHOLE CT KILL DEVIL HILLS

MECHANICAL

ISSUED: 11/20/2019

EXPIRES: 05/18/2020

DETAILS

Permit

Name	Value
PURPOSE	Residential Repair/Remodel
CONSTRUCTION COST	6098.00
CONSTRUCTION TYPE	V
FLOOD ZONE	AE
BASE FLOOD ELEVATION	9
NATURAL GAS SIGNOFF	N
OCCUPANCY TYPE	One & Two Family Dwelling

REQUIRED INSPECTIONS

Final

CONDITIONS

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Issued By: 

Contractor or Authorized Agent:  Date: 11-20-19



Town of Kill Devil Hills

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

Planning and Inspection Department

MC2019-306

PROJECT NAME: Fountain HVAC
SITE ADDRESS: 300 SOTHEL ST W KILL DEVIL HILLS

MECHANICAL

ISSUED: 11/20/2019

EXPIRES: 05/18/2020

APPLICANT: FOUNTAIN, PATRICIA LEE
300 W SOTHEL ST
KILL DEVIL HILLS, NC 27948

OWNER: FOUNTAIN, PATRICIA LEE
300 W SOTHEL ST
KILL DEVIL HILLS, NC 27948

MECHANICAL H-3, CLASS 1: Land and Sea Mech Michael Brynteson
128 Oberlin Rd
Wanchese, NC 27981
252-473-7585

License: 33550
Expires: 12/31/2019

PARCEL:

PIN: 988517021235

Parcel Number: 000566000

Address: 300 SOTHEL ST W KILL DEVIL HILLS

Addition: VIRGINIA DARE SHORES

Zoning:

Block: 42 **Lot(s):** 21-23

Legal Description:

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

PROJECT DESCRIPTION: C/O HVAC System

11 21 2019

MC2019-306

PROJECT NAME: Fountain HVAC
SITE ADDRESS: 300 SOTHEL ST W KILL DEVIL HILLS

MECHANICAL

ISSUED: 11/20/2019

EXPIRES: 05/18/2020

DETAILS

Permit

Name	Value
PURPOSE	Residential Repair/Remodel
CONSTRUCTION COST	4000.00
CONSTRUCTION TYPE	V
FLOOD ZONE	AE
BASE FLOOD ELEVATION	8
NATURAL GAS SIGNOFF	N

REQUIRED INSPECTIONS

Final

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Issued By: _____

Contractor or Authorized Agent: _____

Date: 11-21-19



Town of Kill Devil Hills

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

PAID

NOV 21 2019

Planning and Inspection Department

MC2019-308

PROJECT NAME:

SITE ADDRESS: 1608 MEMORIAL BLVD S KILL DEVIL HILLS

MECHANICAL

ISSUED: 11/21/2019

EXPIRES: 05/19/2020

APPLICANT: MARY RYAN
3736 MILITARY RD
WASHINGTON, DC 20015

OWNER: MARY RYAN
3736 MILITARY RD
WASHINGTON, DC 20015

MECHANICAL: ALL IN ONE MECHANICAL
PO BOX 3392
KITTY HAWK, NC 27949
252-619-0049

License: 27675
Expires: 12/31/2019

PARCEL:

PIN: 989309057242

Parcel Number: 008279000

Address: 1608 MEMORIAL BLVD S KILL DEVIL HILLS

Addition: OCEAN ACRES INC

Zoning:
Block: 0 **Lot(s):** 115-116

Legal Description:

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

PROJECT DESCRIPTION: HVAC replacement

2019-308

PROJECT NAME:

SITE ADDRESS: 1608 MEMORIAL BLVD S KILL DEVIL HILLS

MECHANICAL

ISSUED: 11/21/2019

EXPIRES: 05/19/2020

DETAILS

Permit

Name	Value
PURPOSE	Residential Repair/Remodel
CONSTRUCTION COST	5800.00
CONSTRUCTION TYPE	V
FLOOD ZONE	AE
BASE FLOOD ELEVATION	9
NATURAL GAS SIGNOFF	N
OCCUPANCY TYPE	One & Two Family Dwelling

REQUIRED INSPECTIONS

Final

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Issued By: [Signature]

Contractor or Authorized Agent: D.W. 7 Date: 11-21-19



Town of Kill Devil Hills

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

Planning and Inspection Department

MC2019-309

PROJECT NAME: Perri HVAC
SITE ADDRESS: 1700 Paget Rd #111 -A3 Kill Devil Hills

MECHANICAL

ISSUED: 11/21/2019

EXPIRES: 05/19/2020

APPLICANT: Perri, Peter
206 Grays LN
LANSDALE, PA 19446

OWNER: Perri, Peter
206 Grays LN
LANSDALE, PA 19446

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

License: 13056
Expires: 12/31/2019

PARCEL:

PIN: 98830927406121

Parcel Number:

Address: 1700 Paget Rd #111 -A3 Kill Devil Hills

Zoning:

Addition:

Block:

Lot(s):

Legal Description: Residential condominium

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

PROJECT DESCRIPTION: C/O 3 Ton HVAC System

NOV 21 2019

MC2019-309

PROJECT NAME: Perri HVAC

SITE ADDRESS: 1700 Paget Rd #111 -A3 Kill Devil Hills

MECHANICAL

ISSUED: 11/21/2019

EXPIRES: 05/19/2020

DETAILS

Permit

Name	Value
PURPOSE	Residential Repair/Remodel
CONSTRUCTION COST	6535.00
CONSTRUCTION TYPE	V
FLOOD ZONE	AE
BASE FLOOD ELEVATION	8
NATURAL GAS SIGNOFF	N

REQUIRED INSPECTIONS

Final

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Issued By: 

Contractor or Authorized Agent:  Date: 11/21/19



Town of Kill Devil Hills

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

PAID
NOV 25 2019

Planning and Inspection Department

MC2019-310

PROJECT NAME: HOLMAN HVAC
SITE ADDRESS: 628 FROELICH PL KILL DEVIL HILLS

MECHANICAL

ISSUED: 11/25/2019

EXPIRES: 05/23/2020

APPLICANT: RANDALL HOLMAN
628 FRPELICH PL
Kill Devil Hills, NC 27948
252-564-4879

OWNER: RANDALL HOLMAN
628 FRPELICH PL
Kill Devil Hills, NC 27948
252-564-4879

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

License: 29031
Expires: 12/31/2019

PARCEL:

PIN: 988413241992

Parcel Number: 003363000

Address: 628 FROELICH PL KILL DEVIL HILLS

Addition: FIRST FLIGHT VILLAGE SEC 1

Zoning:
Block: 0 **Lot(s):** 90

Legal Description:

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

PROJECT DESCRIPTION: HVAC CHANGE OUT

2019-310

PROJECT NAME: HOLMAN HVAC
SITE ADDRESS: 628 FROELICH PL KILL DEVIL HILLS

MECHANICAL

ISSUED: 11/25/2019

EXPIRES: 05/23/2020

DETAILS

Permit

Name	Value
PURPOSE	Residential Repair/Remodel
CONSTRUCTION COST	6400.00
CONSTRUCTION TYPE	V
FLOOD ZONE	AE
BASE FLOOD ELEVATION	8.00
NATURAL GAS SIGNOFF	N
OCCUPANCY TYPE	One & Two Family Dwelling

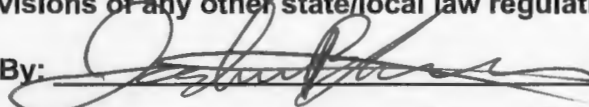
REQUIRED INSPECTIONS

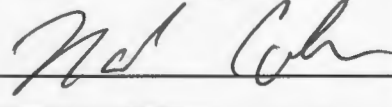
Final

CONDITIONS

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Issued By: 

Contractor or Authorized Agent:  Date: 11/25/19



Town of Kill Devil Hills

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

Planning and Inspection Department

MC2019-302

PROJECT NAME: Edelin HVAC
SITE ADDRESS: 409 CANAL DR KILL DEVIL HILLS

MECHANICAL

ISSUED: 11/15/2019

EXPIRES: 05/13/2020

APPLICANT: Edelin, Joyce
409 Canal Drive
Kill Devil Hills, NC 27948

OWNER: Edelin, Joyce
409 Canal Drive
Kill Devil Hills, NC 27948

MECHANICAL, H-2, H-3:

ATLANTIC HEATING AND COOLING
P.O. Box 132
Kill Devil Hills, NC 27948
441-7642

License: 11618
Expires: 12/31/2019

PARCEL:

PIN: 988414347213

Parcel Number: 003311000

Address: 409 CANAL DR KILL DEVIL HILLS

Addition: FIRST FLIGHT VILLAGE SEC 1

Zoning:
Block: 0 **Lot(s):** 22

Legal Description:

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

PROJECT DESCRIPTION: C/O 2 ton HVAC System, install multi zone mini split system upstairs

NOV 18 2019

MC2019-302

PROJECT NAME: Edelin HVAC
SITE ADDRESS: 409 CANAL DR KILL DEVIL HILLS

MECHANICAL

ISSUED: 11/15/2019

EXPIRES: 05/13/2020

DETAILS

Permit

Name	Value
PURPOSE	Residential Repair/Remodel
CONSTRUCTION COST	11000.00
CONSTRUCTION TYPE	V
FLOOD ZONE	AE
BASE FLOOD ELEVATION	9
NATURAL GAS SIGNOFF	N

REQUIRED INSPECTIONS

Final

CONDITIONS

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Issued By: _____

Contractor or Authorized Agent: _____

Date: _____

11-18-19



Town of Kill Devil Hills

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

PAID

NOV 18 2019

Planning and Inspection Department

TOWN OF
KILL DEVIL HILLS

MC2019-303

PROJECT NAME: Gard HVAC
SITE ADDRESS: 1201 Virginia Dare Tr. N. Kill Devil Hills

MECHANICAL

ISSUED: 11/15/2019

EXPIRES: 05/13/2020

APPLICANT: GARD, ALBERT W III
11 PILLING PLACE
DURHAM, NC 27707

OWNER: GARD, ALBERT W III
11 PILLING PLACE
DURHAM, NC 27707

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

License: 13056
Expires: 12/31/2019

PARCEL:

PIN: 988415648212

Parcel Number: 004057000

Address: 1201 Virginia Dare Tr. N. Kill Devil Hills

Addition: SUBDIVISION - NONE

Zoning:
Block: Lot(s): 2

Legal Description:

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

PROJECT DESCRIPTION: C/O 4.5 Ton HVAC System

MC2019-303

PROJECT NAME: Gard HVAC
SITE ADDRESS: 1201 Virginia Dare Tr. N. Kill Devil Hills

MECHANICAL

ISSUED: 11/15/2019

EXPIRES: 05/13/2020

DETAILS

Permit

Name	Value
PURPOSE	Residential Repair/Remodel
CONSTRUCTION COST	10247.00
CONSTRUCTION TYPE	V
FLOOD ZONE	VE
BASE FLOOD ELEVATION	11
NATURAL GAS SIGNOFF	N

REQUIRED INSPECTIONS

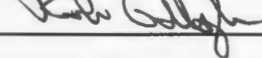
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CONDITIONS

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Issued By: 

Contractor or Authorized Agent: 

Date: 11/18/19



Town of Kill Devil Hills

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

Planning and Inspection Department

EL2019-089

PROJECT NAME:

SITE ADDRESS: 304 OCEAN ACRES DR W KILL DEVIL HILLS

ELECTRICAL

ISSUED: 11/07/2019

EXPIRES: 05/05/2020

APPLICANT: Carey, Bradley & Abby
133 WEST Windjammer RD
nags head, nc 27959
252-564-5298

OWNER: Carey, Bradley & Abby
133 WEST Windjammer RD
nags head, nc 27959
252-564-5298

PARCEL:

PIN: 988316942050

Parcel Number: 008464000

Address: 304 OCEAN ACRES DR W KILL DEVIL HILLS

Addition: OCEAN ACRES TRACT 3 SEC 1

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

Legal Description:

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

PROJECT DESCRIPTION: Add solar panels to existing roof structure with associated electrical connections.

DETAILS

Permit

Name	Value
ZONING DISTRICT	RL
PURPOSE	Residential Repair/Remodel
CONSTRUCTION COST	6000.00
CONSTRUCTION TYPE	V
FLOOD ZONE	X
OCCUPANCY TYPE	One & Two Family Dwelling

NOV 15 2019



Town of Kill Devil Hills

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

Planning and Inspection Department

EL2019-087

PROJECT NAME: D'AUGE METER BASE CHANGE
SITE ADDRESS: 2035 VA DARE TRL N KILL DEVIL HILLS

ELECTRICAL

ISSUED: 11/05/2019

EXPIRES: 05/03/2020

APPLICANT: Vincent D'Auge
443 Blue Beechway
CHESAPEAKE, VA 23320
757-724-0866

OWNER: Vincent D'Auge
443 Blue Beechway
CHESAPEAKE, VA 23320
757-724-0866

ELECTRICAL-I: SPECIALTY ELECTRICAL CONTRACTORS, INC.
104 Waterway CT
Aydlett, NC 27916
252-599-0163
License: 24891-I
Expires: 08/19/2020

PARCEL:

PIN: 988518303693 **Parcel Number:** 002327000
Address: 2035 VA DARE TRL N KILL DEVIL HILLS
Addition: MILES CLARK **Zoning:**
Block: 0 **Lot(s):** 23 & PT 21
Legal Description:

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

PROJECT DESCRIPTION: CHANGE OUT METER BASE AND 2 DISCONNECTS

NOV - 5 2019

019-087

PROJECT NAME: D'AUGE METER BASE CHANGE
ADDRESS: 2035 VA DARE TRL N KILL DEVIL HILLS

ELECTRICAL
ISSUED: 11/05/2019
EXPIRES: 05/03/2020

DETAILS

Permit

Name	Value
ZONING DISTRICT	OIR
PURPOSE	Residential Repair/Remodel
CONSTRUCTION COST	950.00
CONSTRUCTION TYPE	V
FLOOD ZONE	VE
BASE FLOOD ELEVATION	11.00
OCCUPANCY TYPE	One & Two Family Dwelling

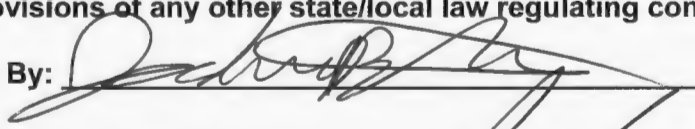
REQUIRED INSPECTIONS

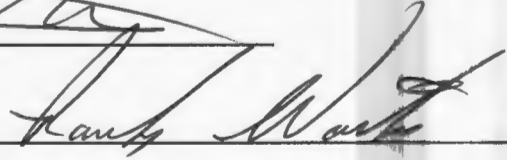
Final

CONDITIONS

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

Issued By: 

Contractor or Authorized Agent:  Date: 11-5-19



Town of Kill Devil Hills

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

Planning and Inspection Department

EL2019-088

PROJECT NAME: Walker Service C/O
SITE ADDRESS: 105 GREENVILLE ST KILL DEVIL HILLS

ELECTRICAL

ISSUED: 11/05/2019

EXPIRES: 05/03/2020

APPLICANT: Walker, Arthur
3328 Kindlewood Cresent
CHESAPEAKE, VA 23321
757-404-0589

OWNER: Walker, Arthur
3328 Kindlewood Cresent
CHESAPEAKE, VA 23321
757-404-0589

ELECTRICAL-I: SPECIALTY ELECTRICAL CONTRACTORS, INC. **License:** 24891-I
104 Waterway CT **Expires:** 08/19/2020
Aydlett, NC 27916
252-599-0163

PARCEL:

PIN: 988518205032 **Parcel Number:** 001865000
Address: 105 GREENVILLE ST KILL DEVIL HILLS
Addition: AVALON BEACH ANNEX 1 **Zoning:**
Block: 0 **Lot(s):** 419
Legal Description:

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

PROJECT DESCRIPTION: Replace overhead meter base

PAID

NOV - 5 2019

EL2019-088

PROJECT NAME: Walker Service C/O
SITE ADDRESS: 105 GREENVILLE ST KILL DEVIL HILLS

ELECTRICAL
ISSUED: 11/05/2019
EXPIRES: 05/03/2020

DETAILS

Permit

Name	Value
NCP PROJECT #	32437756
ZONING DISTRICT	C
PURPOSE	Residential Repair/Remodel
CONSTRUCTION COST	650.00
FLOOD ZONE	AE
BASE FLOOD ELEVATION	9

REQUIRED INSPECTIONS

Final

CONDITIONS

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Issued By: _____

Contractor or Authorized Agent: _____

Date: _____

11-5-19



Town of Kill Devil Hills

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

Planning and Inspection Department

EL2019-086

PROJECT NAME:

SITE ADDRESS: 208 BAUM ST E KILL DEVIL HILLS

ELECTRICAL

ISSUED: 11/04/2019

EXPIRES: 05/02/2020

APPLICANT: JOHN GREGORY
11180 Oberlin Rd.
Oberlin, OH 44074

OWNER: JOHN GREGORY
11180 Oberlin Rd.
Oberlin, OH 44074

ELECTRICAL - LIMITED: Angel Advanced Technologies, LLC
PO Box 254
Point Harbor, NC 27964
252-207-7519

License: 30701-L
Expires: 10/02/2020

PARCEL:

PIN: 988308896273

Parcel Number: 004190000

Address: 208 BAUM ST E KILL DEVIL HILLS

Addition: KILL DEVIL HILLS SEC 1

Zoning:
Block: 11 **Lot(s):** 1

Legal Description:

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

PROJECT DESCRIPTION: Relocate electrical panel and meter base.

NOV - 6 2019

EL2019-086

PROJECT NAME:

SITE ADDRESS: 208 BAUM ST E KILL DEVIL HILLS

ELECTRICAL

ISSUED: 11/04/2019

EXPIRES: 05/02/2020

DETAILS

Permit

Name	Value
ZONING DISTRICT	C
PURPOSE	Residential Repair/Remodel
CONSTRUCTION COST	3500.00
CONSTRUCTION TYPE	V
FLOOD ZONE	AE
BASE FLOOD ELEVATION	8
OCCUPANCY TYPE	One & Two Family Dwelling

REQUIRED INSPECTIONS

Final

CONDITIONS

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

Issued By: Marty Shaw

Contractor or Authorized Agent: Bruce Colquhoun Date: 11.6.19



Town of Kill Devil Hills

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

Planning and Inspection Department

EL2019-092

PROJECT NAME: MORGAN HOME GENERATOR
SITE ADDRESS: 2026 EDENTON ST ST KILL DEVIL HILLS

ELECTRICAL

ISSUED: 11/21/2019

EXPIRES: 05/19/2020

APPLICANT: NATHAN MORGAN
2026 EDENTON ST
Kill Devil Hills, NC 27948
252-339-0314

OWNER: NATHAN MORGAN
2026 EDENTON ST
Kill Devil Hills, NC 27948
252-339-0314

ELECTRICAL - LIMITED: TERRY MORGAN ELECTRICAL SERVICE
116 SEAVIEW DR
ELIZABETH CITY, NC 27909
252-339-0717

License: 14680-L
Expires: 04/30/2020

PARCEL:

PIN: 987408988610

Parcel Number: 001271000

Address: 2026 EDENTON ST ST KILL DEVIL HILLS

Addition: AVALON BEACH ANNEX 2 & 3

Zoning:
Block: 0 **Lot(s):** 823

Legal Description:

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

PAID WITH CASH

PROJECT DESCRIPTION: INSTALL HOME GENERATOR

NOV 21 2019

EL2019-092

PROJECT NAME: MORGAN HOME GENERATOR
SITE ADDRESS: 2026 EDENTON ST ST KILL DEVIL HILLS

ELECTRICAL

ISSUED: 11/21/2019

EXPIRES: 05/19/2020

DETAILS

Permit

Name	Value
ZONING DISTRICT	RL
PURPOSE	Residential Accessory
CONSTRUCTION COST	6000.00
CONSTRUCTION TYPE	V
FLOOD ZONE	AE
BASE FLOOD ELEVATION	8.00
OCCUPANCY TYPE	One & Two Family Dwelling

REQUIRED INSPECTIONS

Final

CONDITIONS

- * This permit becomes null and void if work or construction authorized is not commenced within 6 months or if construction or work is suspended for a period of 12 months at any time after work has started.
- * Construction must meet all aspect of Chapter 153 Zoning including lot coverage and setbacks.
- * Per §153.082(B)(1)(c) Mechanical equipment, including HVAC equipment and LP Gas equipment shall not project into a minimum yard setback more than four (4) feet.
- * Development must meet all aspects of Chapter 151 Flood Damage Prevention Ordinance including use and elevation.

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

Issued By: _____

Contractor or Authorized Agent: _____

Date: _____

11/21/19



Town of Kill Devil Hills

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

PAID

NOV 26 2019

Planning and Inspection Department

TOWN OF
KILL DEVIL HILLS

EL2019-090

PROJECT NAME:

SITE ADDRESS: 317 BURNS DR KILL DEVIL HILLS

ELECTRICAL

ISSUED: 11/18/2019

EXPIRES: 05/16/2020

APPLICANT: Beddoo, Valerie
190 Barnes Creek Court
MONTROSS, VA 22520

OWNER: Beddoo, Valerie
190 Barnes Creek Court
MONTROSS, VA 22520

ELECTRICAL - UNLIMITED: Gault Electric LLC
11840 Canon BLVD
Newport News, VA 23606
757-930-0587

License: 29762-U
Expires:

PARCEL:

PIN: 988316838874

Parcel Number: 008475000

Address: 317 BURNS DR KILL DEVIL HILLS

Zoning:

Addition: OCEAN ACRES TRACT 3 SEC 1

Block: F **Lot(s):** 17

Legal Description:

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

PROJECT DESCRIPTION: Install new generator.

EL2019-090

PROJECT NAME:

SITE ADDRESS: 317 BURNS DR KILL DEVIL HILLS

ELECTRICAL

ISSUED: 11/18/2019

EXPIRES: 05/16/2020

DETAILS

Permit

Name	Value
ZONING DISTRICT	RL
PURPOSE	Residential Repair/Remodel
CONSTRUCTION COST	3569.20
CONSTRUCTION TYPE	V
FLOOD ZONE	X
OCCUPANCY TYPE	One & Two Family Dwelling

REQUIRED INSPECTIONS

Final

CONDITIONS

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

Issued By: _____

Contractor or Authorized Agent: _____

Date: 11/26/19



Town of Kill Devil Hills

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

PAID
NOV - 5 2019

Planning and Inspection Department

SG2019-028

PROJECT NAME: Bermuda Bay - Cambridge Cove
SITE ADDRESS: 1100 Cambridge Rd. Kill Devil Hills

SIGN

ISSUED: 11/04/2019

EXPIRES: 05/02/2020

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

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

CONTRACTOR: SAME AS OWNER
UNKNOWN
UNKNOWN, XX 00000

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

PARCEL:

PIN: 988310279410301-7570

Parcel Number:

Address: 1100 Cambridge Rd. Kill Devil Hills

Zoning: G&I

Addition: Bermuda Bay

Block: **Lot(s):**

Legal Description:

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

PROJECT DESCRIPTION: Sale/Rental Sign

SG2019-028

PROJECT NAME: Bermuda Bay - Cambridge Cove
SITE ADDRESS: 1100 Cambridge Rd. Kill Devil Hills

SIGN

ISSUED: 11/04/2019

EXPIRES: 05/02/2020

DETAILS

Permit

Name	Value
# OF SIGNS	1
SIGN - FREE STANDING PERMITTED (SQFT)	36.00
SIGN - FREE STANDING PROPOSED (SQ FT)	32.00
ZONING DISTRICT	RL
PURPOSE	Commercial Accessory
CONSTRUCTION COST	500.00
FLOOD ZONE	AE

REQUIRED INSPECTIONS

Final

CONDITIONS

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


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

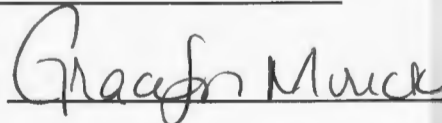
No exposed neon, argon, krypton or similar gas lighting allowed except as permitted in Section 153.077(B)(10).

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

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

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

Issued By: 

Contractor or Authorized Agent:  **Date:** 11.5.19



Town of Kill Devil Hills

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

NOV - 5 2019

Planning and Inspection Department

SG2019-027

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

SIGN

ISSUED: 11/04/2019

EXPIRES: 05/02/2020

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

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

CONTRACTOR: SAME AS OWNER
UNKNOWN
UNKNOWN, XX 00000

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

PARCEL:

PIN: 988417126342

**Parcel
Number:**

Address: 1200 West First Street Kill Devil Hills

Zoning:

Addition:

Block:

Lot(s):

Legal Description: Parcel A

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

PROJECT DESCRIPTION: Subdivision sign



Town of Kill Devil Hills

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

PAID

NOV 22 2019

Planning and Inspection Department

TOWN OF
KILL DEVIL HILLS

PL2019-017

PROJECT NAME: McDonald plumbing upgrades
SITE ADDRESS: 700 F2 FIRST ST W KILL DEVIL HILLS

AD
WT
C

PLUMBING

ISSUED: 11/22/2019

EXPIRES: 05/20/2020

APPLICANT: McDonald, William & Eva
700 WEST First ST F2
Kill Devil Hills, NC 27948
252-385-5119

OWNER: McDonald, William & Eva
700 WEST First ST F2
Kill Devil Hills, NC 27948
252-385-5119

RESIDENTIAL, LIMITED: PLUMBING MATTERS
UNKNOWN
UNKNOWN, XX 00000
252-599-6593

License: 25626
Expires: 12/31/2020

PARCEL:

PIN: 98841314042672

Parcel Number: 008075602

Address: 700 F2 FIRST ST W KILL DEVIL HILLS

Addition:

Zoning:

Block: 0

Lot(s): UT 2 BLDG
F

Legal Description:

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

PROJECT DESCRIPTION: Change water distribution from polybutalen to pex.

PL2019-017

PROJECT NAME: McDonald plumbing upgrades
SITE ADDRESS: 700 F2 FIRST ST W KILL DEVIL HILLS

PLUMBING

ISSUED: 11/22/2019

EXPIRES: 05/20/2020

DETAILS

Permit

Name	Value
PURPOSE	Residential Repair/Remodel
CONSTRUCTION COST	6180.00
CONSTRUCTION TYPE	V
FLOOD ZONE	AE
BASE FLOOD ELEVATION	9
OCCUPANCY TYPE	Residential

REQUIRED INSPECTIONS

Final

Rough In

CONDITIONS

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Issued By: _____

Contractor or Authorized Agent: _____

Date: _____

11/22/19



Town of Kill Devil Hills

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

PAID
NOV 22 2019
NO
MAY
CASH

Planning and Inspection Department

PL2019-018

PROJECT NAME: Modlin plumbing repairs
SITE ADDRESS: 700 F6 FIRST ST W KILL DEVIL HILLS

PLUMBING

ISSUED: 11/22/2019

EXPIRES: 05/20/2020

APPLICANT: Modlin, Jimi & Michael
2125 Mill RD
Jamesville, NC 27846
252-799-6132

OWNER: Modlin, Jimi & Michael
2125 Mill RD
Jamesville, NC 27846
252-799-6132

RESIDENTIAL, LIMITED: PLUMBING MATTERS
UNKNOWN
UNKNOWN, XX 00000
252-599-6593

License: 25626
Expires: 12/31/2020

PARCEL:

PIN: 98841314042676

Parcel Number: 008075606

Address: 700 F6 FIRST ST W KILL DEVIL HILLS

Addition:

Zoning:

Block: 0

Lot(s): UT 6 BLDG
F

Legal Description:

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

PROJECT DESCRIPTION: Change water distribution from polybutalen to pex.

PL2019-018

PROJECT NAME: Modlin plumbing repairs
SITE ADDRESS: 700 F6 FIRST ST W KILL DEVIL HILLS

PLUMBING

ISSUED: 11/22/2019

EXPIRES: 05/20/2020

DETAILS

Permit

Name	Value
PURPOSE	Residential Repair/Remodel
CONSTRUCTION COST	6180.00
CONSTRUCTION TYPE	V
FLOOD ZONE	AE
BASE FLOOD ELEVATION	9
OCCUPANCY TYPE	Residential

REQUIRED INSPECTIONS

Final

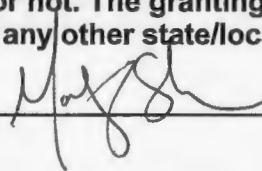
Rough In

CONDITIONS

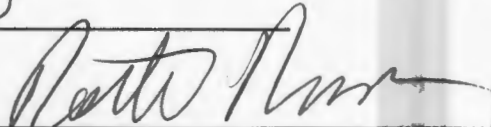
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Issued By: _____



Contractor or Authorized Agent: _____



Date: _____

11/22/19



Town of Kill Devil Hills

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

PAID

NOV 22 2019

Planning and Inspection Department

PL2019-019

PROJECT NAME:

SITE ADDRESS: 700 F10 FIRST ST W KILL DEVIL HILLS

PLUMBING

ISSUED: 11/22/2019

EXPIRES: 05/20/2020

APPLICANT: Shankles, Dell
118 Bailey DR
YORKTOWN, VA 23692
757-879-4439

OWNER: Shankles, Dell
118 Bailey DR
YORKTOWN, VA 23692
757-879-4439

RESIDENTIAL, LIMITED: PLUMBING MATTERS
UNKNOWN
UNKNOWN, XX 00000
252-599-6593

License: 25626
Expires: 12/31/2020

PARCEL:

PIN: 98841314042680

Parcel Number: 008075610

Address: 700 F10 FIRST ST W KILL DEVIL HILLS

Addition:

Zoning:

Block: 0

Lot(s): UT 10 BLDG
F

Legal Description:

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

PROJECT DESCRIPTION: Change water distribution from polybutalen to pex.

PL2019-019

PROJECT NAME:

SITE ADDRESS: 700 F10 FIRST ST W KILL DEVIL HILLS

PLUMBING

ISSUED: 11/22/2019

EXPIRES: 05/20/2020

DETAILS

Permit

Name	Value
PURPOSE	Residential Repair/Remodel
CONSTRUCTION COST	6180.00
CONSTRUCTION TYPE	V
FLOOD ZONE	AE
BASE FLOOD ELEVATION	9
OCCUPANCY TYPE	Residential

REQUIRED INSPECTIONS

Final

Rough In

CONDITIONS

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

Issued By: _____

Contractor or Authorized Agent: _____

Date: _____

[Handwritten Signature]
[Handwritten Signature]
11/22/19



Town of Kill Devil Hills

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

NOV - 6 2019

Planning and Inspection Department

ZONING PERMIT
ISSUED: 11/04/2019
EXPIRES: 05/02/2020

ZP2019-077

PROJECT NAME: Newman Fence Repair
SITE ADDRESS: 3310 RAYMOND AVE KILL DEVIL HILLS

APPLICANT: Newman, Deloane
506 Sleepy Hollow Rd
Richmond, VA 23229

OWNER: Newman, Deloane
506 Sleepy Hollow Rd
Richmond, VA 23229

GENERAL LIMITED: B. R. Neier Construction
208 Barco Rd.
Barco, NC 27917
207-8236

License: 60862
Expires:

PARCEL:

PIN: 988509051013

Parcel Number: 000003000

Address: 3310 RAYMOND AVE KILL DEVIL HILLS

Addition: ORVILLE BEACH AMENDED BLK 3

Zoning:
Block: 3 **Lot(s):** 4

Legal Description:

FEE:	Paid	Due
Fence	\$100.00	\$0.00
Totals :	\$100.00	\$0.00

PROJECT DESCRIPTION: Repair 32' of storm damaged fence

Value - \$1000.00

ZP2019-077

PROJECT NAME: Newman Fence Repair
SITE ADDRESS: 3310 RAYMOND AVE KILL DEVIL HILLS

ZONING PERMIT

ISSUED: 11/04/2019

EXPIRES: 05/02/2020

DETAILS

Permit

Name	Value
ZONING DISTRICT	C
CAMA PERMIT	N
CAMA EXEMPTION	N
FLOOD ZONE	AE
BASE FLOOD ELEVATION	9
PURPOSE	Residential Repair/Remodel
CULVERT	N
DRIVEWAY INVERT 2	N

REQUIRED INSPECTIONS

Final

Zoning Final

CONDITIONS

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

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

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

Issued By: _____

Contractor or Authorized Agent: _____

Date: 11-6-19



Town of Kill Devil Hills

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

Planning and Inspection Department

ZP2019-079

PROJECT NAME: Denton Fence
SITE ADDRESS: 400 FIRST ST W KILL DEVIL HILLS

ZONING PERMIT

ISSUED: 11/18/2019

EXPIRES: 05/16/2020

APPLICANT: DENTON, SARAH
400 First Street W
Kill Devil Hills, NC 27948

OWNER: DENTON, SARAH
400 First Street W
Kill Devil Hills, NC 27948

CONTRACTOR: Sam Wright and Sons Fence Co
1103 Boundary Street
Kill Devil Hills, NC 27948

UNLICENSED BUILDER: Sam Wright and Sons Fence Co
1103 Boundary Street
Kill Devil Hills, NC 27948

License: 12345
Expires:

PARCEL:

PIN: 988410350282

Parcel Number: 003203000

Address: 400 FIRST ST W KILL DEVIL HILLS

Addition: FIRST FLIGHT VILLAGE SEC 2

Zoning:
Block: 0 **Lot(s):** 202

Legal Description:

FEES:	Paid	Due
Fence	\$100.00	\$0.00
Totals :	\$100.00	\$0.00

PROJECT DESCRIPTION: Fence around rear and side yard

NOV 19 2019

ZP2019-079

PROJECT NAME: Denton Fence
SITE ADDRESS: 400 FIRST ST W KILL DEVIL HILLS

ZONING PERMIT

ISSUED: 11/18/2019

EXPIRES: 05/16/2020

DETAILS

Permit

Name	Value
ZONING DISTRICT	RL
FRONT YARD SETBACK	30
REAR YARD SETBACK	20% Depth >30
SIDE YARD SETBACK	10
STREET SIDE SETBACK	15
CAMA PERMIT	N
CAMA EXEMPTION	N
FLOOD ZONE	AE
BASE FLOOD ELEVATION	8.3
PURPOSE	Residential Accessory
CONSTRUCTION COST	4000.00
SURVEYOR NAME AND NUMBER	James C Baker
CULVERT	N
DRIVEWAY INVERT 2	N

REQUIRED INSPECTIONS

Stringline

Final

CONDITIONS

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

Issued By: 

Contractor or Authorized Agent: 

Date: 11-18-2019



Town of Kill Devil Hills

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

Planning and Inspection Department

ZP2019-080

PROJECT NAME:

SITE ADDRESS: 108 FRESH POND DR E KILL DEVIL HILLS

ZONING PERMIT

ISSUED: 11/19/2019

EXPIRES: 05/17/2020

APPLICANT: DAVID OWEN
150 Suxxex Ave.
P.O.Box 215
Wakefield, VA 23888

OWNER: DAVID OWEN
150 Suxxex Ave.
P.O.Box 215
Wakefield, VA 23888

UNLICENSED - REMODELING: Harrup Construction
119 John Lloyd Drive
Point Harbor, NC 27964
252-489-0523

License: 12345
Expires: 06/07/2030

PARCEL:

PIN: 989313140101

Parcel Number: 004952000

Address: 108 FRESH POND DR E KILL DEVIL HILLS

Addition: LAKE DRIVE DEVELOPMENT SEC 2

Zoning:

Block: 0 **Lot(s):** 24

Legal Description:

FEES:	Paid	Due
Fence	\$100.00	\$0.00
Totals :	\$100.00	\$0.00

PROJECT DESCRIPTION: Remove and replace existing fence in same location.

PAID

NOV 20 2019

TOWN OF
KILL DEVIL HILLS

ZP2019-080

PROJECT NAME:

SITE ADDRESS: 108 FRESH POND DR E KILL DEVIL HILLS

ZONING PERMIT

ISSUED: 11/19/2019

EXPIRES: 05/17/2020

DETAILS

Permit

Name	Value
CAMA PERMIT	N
CAMA EXEMPTION	N
PURPOSE	Residential Repair/Remodel
CONSTRUCTION COST	14000.00
CULVERT	N
DRIVEWAY INVERT 2	N

REQUIRED INSPECTIONS

Final

Stringline

CONDITIONS

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

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

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

Issued By: _____

Contractor or Authorized Agent: _____

Date: 11-20-19



Town of Kill Devil Hills

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

PAID

NOV 22 2019

Planning and Inspection Department

ZONING PERMIT
ISSUED: 11/22/2019
EXPIRES: 05/20/2020

ZP2019-082

PROJECT NAME: Sorto Fence
SITE ADDRESS: 309 INDIAN DR KILL DEVIL HILLS

APPLICANT: SORTO, OSCAR
309 Indian Drive
Kill Devil Hills, NC 27948

OWNER: SORTO, OSCAR
309 Indian Drive
Kill Devil Hills, NC 27948

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

License: Unlicensed
Expires: 12/31/2020

PARCEL:

PIN: 988410361385

Parcel Number: 028819000

Address: 309 INDIAN DR KILL DEVIL HILLS

Addition: HIGH VIEW - HEDRICKS ADD

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

Legal Description:

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

PROJECT DESCRIPTION: Fence along side and rear property lines

ZP2019-082

PROJECT NAME: Sorto Fence
SITE ADDRESS: 309 INDIAN DR KILL DEVIL HILLS

ZONING PERMIT

ISSUED: 11/22/2019

EXPIRES: 05/20/2020

DETAILS

Permit

Name	Value
ZONING DISTRICT	RL
FRONT YARD SETBACK	30
REAR YARD SETBACK	20% Depth >30
SIDE YARD SETBACK	8
CAMA PERMIT	N
CAMA EXEMPTION	N
FLOOD ZONE	AE
BASE FLOOD ELEVATION	9
PURPOSE	Residential Accessory
CONSTRUCTION COST	2000.00
SURVEYOR NAME AND NUMBER	Benjamin A. Hardin L-3200
CULVERT	N
DRIVEWAY INVERT 2	N

REQUIRED INSPECTIONS

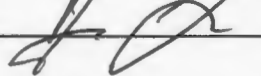
Stringline


Final

CONDITIONS

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

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Issued By: 

Contractor or Authorized Agent: 

Date: 11-22-19



Town of Kill Devil Hills

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

PAID

NOV 22 2019

Planning and Inspection Department

ZP2019-081

PROJECT NAME: WILKINSON FENCE
SITE ADDRESS: 300 SOTHEL ST W KILL DEVIL HILLS

ZONING PERMIT

ISSUED: 11/22/2019

EXPIRES: 05/20/2020

APPLICANT: FOUNTAIN, PATRICIA LEE
300 W SOTHEL ST
KILL DEVIL HILLS, NC 27948

OWNER: FOUNTAIN, PATRICIA LEE
300 W SOTHEL ST
KILL DEVIL HILLS, NC 27948

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

License: Unlicensed
Expires: 12/31/2020

PARCEL:

PIN: 988517021235

Parcel Number: 000566000

Address: 300 SOTHEL ST W KILL DEVIL HILLS

Addition: VIRGINIA DARE SHORES

Zoning:
Block: 42 **Lot(s):** 21-23

Legal Description:

FEES:	Paid	Due
Fence	\$100.00	\$0.00
Totals :	\$100.00	\$0.00

PROJECT DESCRIPTION: FENCE IN REAR YARD

ZP2019-081

PROJECT NAME: WILKINSON FENCE
SITE ADDRESS: 300 SOTHEL ST W KILL DEVIL HILLS

ZONING PERMIT

ISSUED: 11/22/2019

EXPIRES: 05/20/2020

DETAILS

Permit

Name	Value
ZONING DISTRICT	RL
FRONT YARD SETBACK	30
REAR YARD SETBACK	20% Depth >30
SIDE YARD SETBACK	8
STREET SIDE SETBACK	15
CAMA PERMIT	N
CAMA EXEMPTION	N
FLOOD ZONE	AE
BASE FLOOD ELEVATION	8.00
PURPOSE	Residential Repair/Remodel
CONSTRUCTION COST	3500.00
CULVERT	N
DRIVEWAY INVERT 2	N

REQUIRED INSPECTIONS

Final

Zoning Final

CONDITIONS

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

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

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

Issued By: 

Contractor or Authorized Agent: 

Date: 11/22/19



Town of Kill Devil Hills

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

Planning and Inspection Department

PL2019-014

PROJECT NAME: Goulder HVAC
SITE ADDRESS: 106 PARK DR KILL DEVIL HILLS

PLUMBING

ISSUED: 10/31/2019

EXPIRES: 04/28/2020

APPLICANT: GOULDER, ROBERT A
 3214 HOLLY AVE
 COLONIAL HEIGHTS, VA 23834

OWNER: GOULDER, ROBERT A
 3214 HOLLY AVE
 COLONIAL HEIGHTS, VA 23834

PLUMBING, MECHANICAL: NORRIS MECHANICAL
 P.O. Box 217
 HARBINGER, NC 27941
 252-491-2673

License: 11100
Expires: 12/31/2019

PARCEL:

PIN: 988419608329 **Parcel Number:** 008161000
Address: 106 PARK DR KILL DEVIL HILLS
Addition: BAUM BAY SHORES - REVISED **Zoning:**
Block: C **Lot(s):** 4
Legal Description:

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

PROJECT DESCRIPTION: Replace plumbing under house and two tub/shower valves

DETAILS

Permit

Name	Value
PURPOSE	Residential Repair/Remodel
CONSTRUCTION COST	4000.00
CONSTRUCTION TYPE	V
FLOOD ZONE	AE
BASE FLOOD ELEVATION	9

PAID
 NOV 14 2019

PL2019-014

PROJECT NAME: Goulder HVAC
SITE ADDRESS: 106 PARK DR KILL DEVIL HILLS

PLUMBING

ISSUED: 10/31/2019

EXPIRES: 04/28/2020

REQUIRED INSPECTIONS

Rough In

Final

CONDITIONS

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Issued By: _____

Contractor or Authorized Agent: _____

Date: 11-14-19



Town of Kill Devil Hills

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

Planning and Inspection Department

PL2019-015	PLUMBING
PROJECT NAME: LAMBODERA TANKLESS WATER HEATER	ISSUED: 11/13/2019
SITE ADDRESS: 1111 VA DARE TRL N KILL DEVIL HILLS	EXPIRES: 05/11/2020

APPLICANT: Lambodera Holdings LLC
4005 River Park Drive
Suffolk, VA 23435
252-333-4102

OWNER: Lambodera Holdings LLC
4005 River Park Drive
Suffolk, VA 23435
252-333-4102

PLUMBING CLASS I: ABSOLUTE PLUMBING
101 Quarter Landing
Harbinger, NC 27941
252-489-1439

License: 30190
Expires: 12/31/2019

PARCEL:

PIN: 988415649035

Parcel Number: 003711000

Address: 1111 VA DARE TRL N KILL DEVIL HILLS

Addition: KITTY HAWK SHORES - REVISED

Zoning:
Block: 2A **Lot(s):** 6 & N PT 5

Legal Description:

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

PROJECT DESCRIPTION: REPLACEMENT OF GAS REGULATORS ON 3 TANKLESS WATER HEATERS

NOV 13 2019

2019-015

PROJECT NAME: LAMBODERA TANKLESS WATER HEATER
SITE ADDRESS: 1111 VA DARE TRL N KILL DEVIL HILLS

PLUMBING

ISSUED: 11/13/2019

EXPIRES: 05/11/2020

DETAILS

Permit

Name	Value
PURPOSE	Residential Repair/Remodel
CONSTRUCTION COST	700.00
CONSTRUCTION TYPE	V
FLOOD ZONE	VE
BASE FLOOD ELEVATION	11.00
OCCUPANCY TYPE	One & Two Family Dwelling

REQUIRED INSPECTIONS

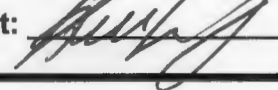
Final

CONDITIONS

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Issued By: 

Contractor or Authorized Agent: 

Date: 11/13/19



Town of Kill Devil Hills

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

PAID

NOV 19 2019

Planning and Inspection Department

PL2019-016

PROJECT NAME: Spring Arbor Fuel Gas
SITE ADDRESS: 803 Ocean Bay Blvd. W. Kill Devil Hills

PLUMBING

ISSUED: 11/19/2019

EXPIRES: 05/17/2020

APPLICANT: SPRING ARBOR
803 W. Ocean Bay Blvd.
Kill Devil Hills, NC 27948

OWNER: SPRING ARBOR
803 W. Ocean Bay Blvd.
Kill Devil Hills, NC 27948

PLUMBING CLASS I: ABSOLUTE PLUMBING
101 Quarter Landing
Harbinger, NC 27941
252-489-1439

License: 30190
Expires: 12/31/2019

PARCEL:

PIN: 988306484499

Parcel Number: 008164003

Address: 803 Ocean Bay Blvd. W. Kill Devil Hills

Zoning:

Addition:

Block:

Lot(s):

Legal Description:

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

PROJECT DESCRIPTION: Install gas regulator and appliance shut off valve

DETAILS

Permit

Name	Value
PURPOSE	Commercial Repair/Remodel
CONSTRUCTION COST	700.00
FLOOD ZONE	X

PL2019-016

PROJECT NAME: Spring Arbor Fuel Gas
SITE ADDRESS: 803 Ocean Bay Blvd. W. Kill Devil Hills

PLUMBING

ISSUED: 11/19/2019

EXPIRES: 05/17/2020

REQUIRED INSPECTIONS

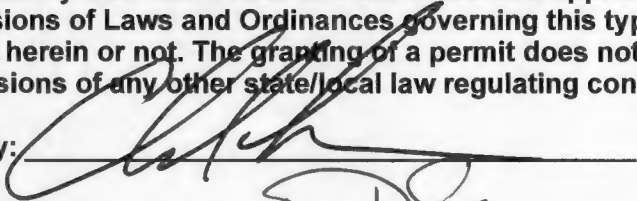
Final

CONDITIONS

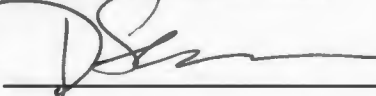
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Issued By: _____



Contractor or Authorized Agent: _____



Date: _____

11/19/19



Town of Kill Devil Hills

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

NOV - 4 2019

Planning and Inspection Department

SG2019-029

PROJECT NAME: Shane Cook
SITE ADDRESS: 2407 CROATAN HWY N KILL DEVIL HILLS

SIGN

ISSUED: 11/04/2019

EXPIRES: 05/02/2020

APPLICANT: Shane, Cook
918 Colington Drive
Kill Devil Hills, NC 27948
252-207-2665

OWNER: For The Dogs OBX LLC
308 W Helga Street
Kill Devil Hills, NC 27948

BUILDING LIMITED: Simple Side Construction
308 W. Helga St.
Kill Devil Hills, NC 27948
252-564-8307

License: 78583
Expires:

PARCEL:

PIN: 988517115645

Parcel Number: 003038000

Address: 2407 CROATAN HWY N KILL DEVIL HILLS

Addition: VIRGINIA DARE SHORE AMD BLK 22

Zoning:
Block: 22 **Lot(s):** 9

Legal Description:

FEES:	Paid	Due
Sign Permit Fee	\$100.00	\$0.00
Totals :	\$100.00	\$0.00

PROJECT DESCRIPTION: Sign on the building

SG2019-029

PROJECT NAME: Shane Cook

SITE ADDRESS: 2407 CROATAN HWY N KILL DEVIL HILLS

SIGN

ISSUED: 11/04/2019

EXPIRES: 05/02/2020

DETAILS

Permit

Name	Value
# OF SIGNS	1
SIGN - WALL PERMITTED (SQFT)	36.00
SIGN- WALL PROPOSED (SQ FT)	9.00
ZONING DISTRICT	C
PURPOSE	Commercial Accessory
CONSTRUCTION COST	100.00
FLOOD ZONE	AE

REQUIRED INSPECTIONS

Final

CONDITIONS

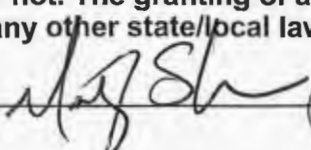
* This permit becomes null and void if work or construction authorized is not commenced within 6 months or if construction or work is suspended for a period of 12 months at any time after work has started.

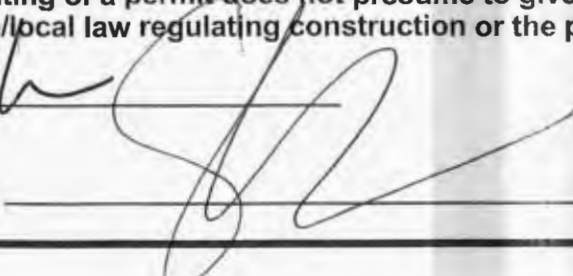
* Proposed sign cannot be flashing or intermittently illuminated or appear to be flashing or glittering or moving.

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

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

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

Issued By: 

Contractor or Authorized Agent: 

Date: 11-4-19



Town of Kill Devil Hills

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

PAID

NOV - 6 2019

Planning and Inspection Department

SG2019-020

PROJECT NAME: First Bank
SITE ADDRESS: 2007 CROATAN HWY S KILL DEVIL HILLS

SIGN

ISSUED: 08/28/2019

EXPIRES: 02/24/2020

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

OWNER: FIRST BANK
2007 S. Croatan Hwy.
Kill Devil Hills, NC 27948

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

License: LEGACY UNKNOWN
Expires: 12/31/2019

PARCEL:

PIN: 989313131584

Parcel Number: 004962000

Address: 2007 CROATAN HWY S KILL DEVIL HILLS

Zoning:

Addition:

Block: 0 **Lot(s):** 4

Legal Description:

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

PROJECT DESCRIPTION: Sign on the building

SG2019-020

PROJECT NAME: First Bank

SITE ADDRESS: 2007 CROATAN HWY S KILL DEVIL HILLS

SIGN

ISSUED: 08/28/2019

EXPIRES: 02/24/2020

DETAILS

Permit

Name	Value
# OF SIGNS	1
SIGN - WALL PERMITTED (SQFT)	100.00
SIGN- WALL PROPOSED (SQ FT)	11.20
ZONING DISTRICT	C
PURPOSE	Commercial Accessory
CONSTRUCTION COST	2500.00
FLOOD ZONE	AE

REQUIRED INSPECTIONS

Final

CONDITIONS

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

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

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

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

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

* Zoning Final Inspection is required.

* Electrical trade affidavit required before CC can be issued.

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

Issued By: _____

Contractor or Authorized Agent: _____

Date: 11-6-19



Town of Kill Devil Hills

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

Planning and Inspection Department

DW2019-017

PROJECT NAME: SEAL DRIVEWAY
SITE ADDRESS: 114 AVALON DR E KILL DEVIL HILLS

DRIVEWAY

ISSUED: 11/13/2019

EXPIRES: 05/11/2020

APPLICANT: Seal, John Forrest
PO BOX 2333
kitty hawk, nc 27949

OWNER: Seal, John Forrest
PO BOX 2333
kitty hawk, nc 27949

GENERAL, UNLIMITED: FORREST SEAL LLC
PO Box 2333
KITTY HAWK, NC 27949
252-599-2521

License: 57289
Expires: 01/01/2020

PARCEL:

PIN: 988517203829

Parcel Number: 001698000

Address: 114 AVALON DR E KILL DEVIL HILLS

Addition: AVALON BEACH

Zoning:
Block: 0 **Lot(s):** 44

Legal Description:

FEES:	Paid	Due
Driveway Permit Fee	\$50.00	\$0.00
Totals :	\$50.00	\$0.00

PROJECT DESCRIPTION: REPLACE 13'X30' DRIVEWAY WITH 20'X30' DRIVEWAY

PAID
NOV 18 2019

DW2019-017

PROJECT NAME: SEAL DRIVEWAY

SITE ADDRESS: 114 AVALON DR E KILL DEVIL HILLS

DRIVEWAY

ISSUED: 11/13/2019

EXPIRES: 05/11/2020

DETAILS

Permit

Name	Value
DRIVEWAY INVERT 2	N
CULVERT	N
ZONING DISTRICT	C
CONSTRUCTION COST	4000.00
FLOOD ZONE	AE
BASE FLOOD ELEVATION	9.00
LOT COVERAGE	46.00

REQUIRED INSPECTIONS

Zoning Final

Final

CONDITIONS

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

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

* Must do to public services specifications.

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

Issued By: 

Contractor or Authorized Agent: 

Date: 11/18/19



Town of Kill Devil Hills

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

PAID

NOV 12 2019

Planning and Inspection Department

TOWN OF
KILL DEVIL HILLS

OP2019-071

PROJECT NAME: Auten New SFD
SITE ADDRESS: 211 ARCHDALE ST E KILL DEVIL HILLS

OCCUPANCY
ISSUED: 11/12/2019

EXPIRES:

PARENT PERMIT #: BJ2019-106

APPLICANT: Auten, John
225 Downing Drive
CHESAPEAKE, VA 23323

OWNER: Auten, John
225 Downing Drive
CHESAPEAKE, VA 23323

CONTRACTOR: SANDY BOTTOM HOMES
400 DaVinci Lane
kitty hawk, nc 27949
757-448-8162

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

License: 67524
Expires: 01/01/2020

PARCEL:

PIN: 988517128318

Parcel Number: 000807000

Address: 211 ARCHDALE ST E KILL DEVIL HILLS

Zoning:

Addition: VIRGINIA DARE SHORES AMD BLK 5

Block: 5 **Lot(s):** 13

Legal Description:

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

PROJECT DESCRIPTION: New 3 Bedroom 3 Bath Single Family Dwelling

OP2019-071

PROJECT NAME: Auten New SFD

SITE ADDRESS: 211 ARCHDALE ST E KILL DEVIL HILLS

OCCUPANCY

ISSUED: 11/12/2019

EXPIRES:

DETAILS

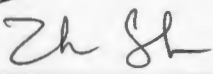
Permit

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

CONDITIONS

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

Issued By: 

Contractor or Authorized Agent:  Date: 11-12-19



Town of Kill Devil Hills

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

Planning and Inspection Department

OP2019-072

PROJECT NAME: O'Hara New Hoouse
SITE ADDRESS: 305 QUAIL LN KILL DEVIL HILLS

OCCUPANCY
ISSUED: 11/22/2019

EXPIRES:

PARENT PERMIT #: BJ2019-083

APPLICANT: O'HARA, JACQUELINE A
2002 NEPTUNE WAY
KITTY HAWK, NC 27949

OWNER: O'HARA, JACQUELINE A
2002 NEPTUNE WAY
KITTY HAWK, NC 27949

CONTRACTOR: Simple Side Construction
308 W. Helga St.
Kill Devil Hills, NC 27948
252-564-8307

BUILDING LIMITED: Simple Side Construction
308 W. Helga St.
Kill Devil Hills, NC 27948
252-564-8307

License: 78583
Expires:

PARCEL:

PIN: 988316849371

Parcel Number: 027010000

Address: 305 QUAIL LN KILL DEVIL HILLS

Addition: WHISPERING PINES SEC 2 & 3

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

Legal Description:

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

PROJECT DESCRIPTION: New 3 Bedroom 2 Bath Single Family Dwelling

PAID

NOV 22 2019

OP2019-072

PROJECT NAME: O'Hara New Hoise
SITE ADDRESS: 305 QUAIL LN KILL DEVIL HILLS

OCCUPANCY
ISSUED: 11/22/2019

EXPIRES:

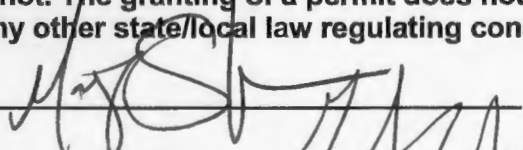
DETAILS

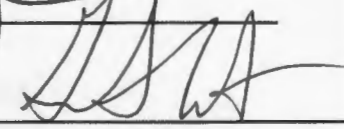
Permit

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

CONDITIONS

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

Issued By: 

Contractor or Authorized Agent:  Date: 11-22-19



Town of Kill Devil Hills

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

PAID
NOV 21 2019

Planning and Inspection Department

EG2019-023

PROJECT NAME: Dunstan Land Clearing
SITE ADDRESS: 1002 AIRSTRIP RD W KILL DEVIL HILLS

EXCAVATION AND GRADING

ISSUED: 11/21/2019

EXPIRES: 05/19/2020

APPLICANT: DUNSTAN, GARLAND
PO BOX 402
kitty hawk, nc 27949

OWNER: DUNSTAN, GARLAND
PO BOX 402
kitty hawk, nc 27949

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

License: Unlicensed
Expires: 12/31/2020

PARCEL:

PIN: 988311656232

Parcel Number: 004627004

Address: 1002 AIRSTRIP RD W KILL DEVIL HILLS

Addition: KILL DEVIL HILLS REALTY CORP

Zoning:

Block: 59 **Lot(s):** 4

Legal Description:

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

PROJECT DESCRIPTION: land disturbance, clearing lot, removing dead trees

DETAILS

Permit

Name	Value
ESTIMATED CONSTRUCTION COST	4000.00
ZONING DISTRICT	LI-2
CAMA PERMIT	N
FLOOD ZONE	X

EG2019-023

PROJECT NAME: Dunstan Land Clearing
SITE ADDRESS: 1002 AIRSTRIP RD W KILL DEVIL HILLS

EXCAVATION AND GRADING

ISSUED: 11/21/2019

EXPIRES: 05/19/2020

REQUIRED INSPECTIONS

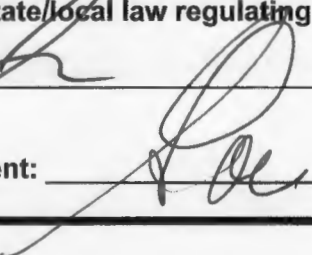
Final

CONDITIONS

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

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

Issued By: 

Contractor or Authorized Agent: 

Date: 11-21-2019



Town of Kill Devil Hills

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

NOV - 4 2019

Planning and Inspection Department

EG2019-022

PROJECT NAME: Reliant Construction Land Clearing
SITE ADDRESS: 1706 AZTEC ST KILL DEVIL HILLS

EXCAVATION AND GRADING

ISSUED: 10/30/2019

EXPIRES: 04/27/2020

APPLICANT: EARLY, R SHANE
1213 FLOBERT DRIVE
VIRGINIA BEACH, VA 23464

OWNER: EARLY, R SHANE
1213 FLOBERT DRIVE
VIRGINIA BEACH, VA 23464

CONTRACTOR: RELIANT CONSTRUCTION LLC
4275 Worthington Lane
kitty hawk, nc 27949
252-202-7007

GENERAL, UNLIMITED: RELIANT CONSTRUCTION LLC
4275 Worthington Lane
kitty hawk, nc 27949
252-202-7007

License: 62339
Expires: 12/30/2019

PARCEL:

PIN: 988410362712

**Parcel
Number:**

Address: 1706 AZTEC ST KILL DEVIL HILLS

Zoning:

Addition:

Block:

Lot(s):

Legal Description: LOT 17-R, BLOCK A, HIGH VIEW -- Hedricks Addition

FEES:	Paid	Due
Land Disturbing	\$100.00	\$0.00
Totals :	\$100.00	\$0.00

PROJECT DESCRIPTION: Mow Lots

EG2019-022

PROJECT NAME: Reliant Construction Land Clearing
SITE ADDRESS: 1706 AZTEC ST KILL DEVIL HILLS

EXCAVATION AND GRADING

ISSUED: 10/30/2019

EXPIRES: 04/27/2020

DETAILS

Permit

Name	Value
ESTIMATED CONSTRUCTION COST	220.00
ZONING DISTRICT	RL
CAMA PERMIT	N
FLOOD ZONE	AE
BASE FLOOD ELEVATION	9.0

REQUIRED INSPECTIONS

Final

CONDITIONS

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

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Issued By: 

Contractor or Authorized Agent:  Date: _____



Town of Kill Devil Hills

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

NOV - 4 2019

Planning and Inspection Department

EG2019-021

PROJECT NAME: Reliant Construction Land Clearing
SITE ADDRESS: 1704 AZTEC ST KILL DEVIL HILLS

EXCAVATION AND GRADING

ISSUED: 10/30/2019

EXPIRES: 04/27/2020

APPLICANT: EARLY, R SHANE
1213 FLOBERT DRIVE
VIRGINIA BEACH, VA 23464

OWNER: EARLY, R SHANE
1213 FLOBERT DRIVE
VIRGINIA BEACH, VA 23464

CONTRACTOR: RELIANT CONSTRUCTION LLC
4275 Worthington Lane
kitty hawk, nc 27949
252-202-7007

GENERAL, UNLIMITED: RELIANT CONSTRUCTION LLC
4275 Worthington Lane
kitty hawk, nc 27949
252-202-7007

License: 62339
Expires: 12/30/2019

PARCEL:

PIN: 988410362647

Parcel Number:

Address: 1704 AZTEC ST KILL DEVIL HILLS

Zoning:

Addition:

Block:

Lot(s):

Legal Description: Lot 16-R, Block A, High View -- Hedricks Addition

FEES:	Paid	Due
Land Disturbing	\$100.00	\$0.00
Totals :	\$100.00	\$0.00

PROJECT DESCRIPTION: Mow Lots

EG2019-021

PROJECT NAME: Reliant Construction Land Clearing
SITE ADDRESS: 1704 AZTEC ST KIII DEVIL HILLS

EXCAVATION AND GRADING

ISSUED: 10/30/2019

EXPIRES: 04/27/2020

DETAILS

Permit

Name	Value
ESTIMATED CONSTRUCTION COST	220.00
ZONING DISTRICT	RL
CAMA PERMIT	N
FLOOD ZONE	AE
BASE FLOOD ELEVATION	9.0

REQUIRED INSPECTIONS

Final

CONDITIONS

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Issued By: _____

Contractor or Authorized Agent: _____ Date: _____



Town of Kill Devil Hills

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

PAID
NOV - 4 2019

Planning and Inspection Department

TOWN OF
KILL DEVIL HILLS

EG2019-020

PROJECT NAME: Reliant Construction Land Disturbance
SITE ADDRESS: 302 INDIAN DR KILL DEVIL HILLS

EXCAVATION AND GRADING

ISSUED: 10/30/2019

EXPIRES: 04/27/2020

APPLICANT: EARLY, R SHANE
1213 FLOBERT DRIVE
VIRGINIA BEACH, VA 23464

OWNER: EARLY, R SHANE
1213 FLOBERT DRIVE
VIRGINIA BEACH, VA 23464

CONTRACTOR: RELIANT CONSTRUCTION LLC
4275 Worthington Lane
kitty hawk, nc 27949
252-202-7007

GENERAL, UNLIMITED: RELIANT CONSTRUCTION LLC
4275 Worthington Lane
kitty hawk, nc 27949
252-202-7007

License: 62339
Expires: 12/30/2019

PARCEL:

PIN: 988410362558

**Parcel
Number:**

Address: 302 INDIAN DR KILL DEVIL HILLS

Zoning:

Addition:

Block:

Lot(s):

Legal Description: LOT 14-R, BLOCK A, HIGH VIEW -- HEDRICKS ADDITION

FEES:	Paid	Due
Land Disturbing	\$100.00	\$0.00
Totals :	\$100.00	\$0.00

PROJECT DESCRIPTION: Mow Lots

EG2019-020

PROJECT NAME: Reliant Construction Land Disturbance
SITE ADDRESS: 302 INDIAN DR KILL DEVIL HILLS

EXCAVATION AND GRADING

ISSUED: 10/30/2019

EXPIRES: 04/27/2020

DETAILS

Permit

Name	Value
ESTIMATED CONSTRUCTION COST	220.00
ZONING DISTRICT	RL
CAMA PERMIT	N
FLOOD ZONE	AE
BASE FLOOD ELEVATION	9.0

REQUIRED INSPECTIONS

Final

CONDITIONS

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Issued By: _____

Contractor or Authorized Agent: _____ Date: _____



Town of Kill Devil Hills

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

NOV - 4 2019

Planning and Inspection Department

EG2019-019

PROJECT NAME: Reliant Construction Land Clearing
SITE ADDRESS: 300 INDIAN DR KILL DEVIL HILLS

EXCAVATION AND GRADING

ISSUED: 10/30/2019

EXPIRES: 04/27/2020

APPLICANT: EARLY, R SHANE
1213 FLOBERT DRIVE
VIRGINIA BEACH, VA 23464

OWNER: EARLY, R SHANE
1213 FLOBERT DRIVE
VIRGINIA BEACH, VA 23464

CONTRACTOR: RELIANT CONSTRUCTION LLC
4275 Worthington Lane
kitty hawk, nc 27949
252-202-7007

GENERAL, UNLIMITED: RELIANT CONSTRUCTION LLC
4275 Worthington Lane
kitty hawk, nc 27949
252-202-7007

License: 62339
Expires: 12/30/2019

PARCEL:

PIN: 988410363601
Address: 300 INDIAN DR KILL DEVIL HILLS

Parcel Number:

Addition:
Legal Description: LOT 15-R, BLOCK A, HIGH VIEW -- Hedricks Addition

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

FEES:	Paid	Due
Land Disturbing	\$100.00	\$0.00
Totals :	\$100.00	\$0.00

PROJECT DESCRIPTION: Mow Lots

EG2019-019

PROJECT NAME: Reliant Construction Land Clearing
SITE ADDRESS: 300 INDIAN DR KILL DEVIL HILLS

EXCAVATION AND GRADING

ISSUED: 10/30/2019

EXPIRES: 04/27/2020

DETAILS

Permit

Name	Value
ESTIMATED CONSTRUCTION COST	220.00
ZONING DISTRICT	RL
CAMA PERMIT	N
FLOOD ZONE	AE
BASE FLOOD ELEVATION	9.0

REQUIRED INSPECTIONS

Final

CONDITIONS

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Issued By: _____

Contractor or Authorized Agent: _____ Date: _____



Town of Kill Devil Hills

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

PAID

NOV - 4 2019

Planning and Inspection Department

TOWN OF
KILL DEVIL HILLS

EG2019-018	EXCAVATION AND GRADING
PROJECT NAME: Reliant Construction Land Clearing	ISSUED: 10/30/2019
SITE ADDRESS: 1705 SEMINOLE ST Kill Devil Hills	EXPIRES: 04/27/2020

APPLICANT: EARLY, R SHANE 1213 FLOBERT DRIVE VIRGINIA BEACH, VA 23464	OWNER: EARLY, R SHANE 1213 FLOBERT DRIVE VIRGINIA BEACH, VA 23464
--	--

CONTRACTOR: RELIANT CONSTRUCTION LLC
4275 Worthington Lane
kitty hawk, nc 27949
252-202-7007

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

PIN: 988410361621	Parcel Number:
Address: 1705 SEMINOLE ST Kill Devil Hills	Zoning:
Addition:	Block: Lot(s):
Legal Description: LOT 11-R, BLOCK A, HIGH VIEW -- HENDRICKS ADDITION	

FEES:	Paid	Due
Land Disturbing	\$100.00	\$0.00
Totals :	\$100.00	\$0.00

PROJECT DESCRIPTION: Mow Lots

EG2019-018

PROJECT NAME: Reliant Construction Land Clearing
SITE ADDRESS: 1705 SEMINOLE ST Kill Devil Hills

EXCAVATION AND GRADING

ISSUED: 10/30/2019

EXPIRES: 04/27/2020

DETAILS

Permit

Name	Value
ESTIMATED CONSTRUCTION COST	220.00
ZONING DISTRICT	RL
CAMA PERMIT	N
FLOOD ZONE	AE
BASE FLOOD ELEVATION	9.0

REQUIRED INSPECTIONS

Final

CONDITIONS

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

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

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

Issued By: _____

Contractor or Authorized Agent: _____

Date: _____



Town of Kill Devil Hills

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

NOV - 4 2019

Planning and Inspection Department

EG2019-017

PROJECT NAME: Reliant Construction Land Clearing
SITE ADDRESS: 301 INDIAN DR Kill Devil Hills

EXCAVATION AND GRADING

ISSUED: 10/30/2019

EXPIRES: 04/27/2020

APPLICANT: EARLY, R SHANE
1213 FLOBERT DRIVE
VIRGINIA BEACH, VA 23464

OWNER: EARLY, R SHANE
1213 FLOBERT DRIVE
VIRGINIA BEACH, VA 23464

CONTRACTOR: RELIANT CONSTRUCTION LLC
4275 Worthington Lane
kitty hawk, nc 27949
252-202-7007

GENERAL, UNLIMITED: RELIANT CONSTRUCTION LLC
4275 Worthington Lane
kitty hawk, nc 27949
252-202-7007

License: 62339
Expires: 12/30/2019

PARCEL:

PIN: 988410364407

**Parcel
Number:**

Address: 301 INDIAN DR Kill Devil Hills

Zoning:

Addition:

Block:

Lot(s):

Legal Description: LOT 1R, BLOCK F, HIGH VIEW -- HENDRICKS ADDITION

FEES:	Paid	Due
Building Permit Fee - Minimum Fee	\$100.00	\$0.00
Totals :	\$100.00	\$0.00

PROJECT DESCRIPTION: Mowing Lots

EG2019-017

PROJECT NAME: Reliant Construction Land Clearing

SITE ADDRESS: 301 INDIAN DR Kill Devil Hills

EXCAVATION AND GRADING

ISSUED: 10/30/2019

EXPIRES: 04/27/2020

DETAILS

Permit

Name	Value
ESTIMATED CONSTRUCTION COST	220.00
ZONING DISTRICT	RL
CAMA PERMIT	N
FLOOD ZONE	AE
BASE FLOOD ELEVATION	9.0

REQUIRED INSPECTIONS

Final

CONDITIONS

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

Issued By: _____

Contractor or Authorized Agent: _____ **Date:** 11/4/19



Town of Kill Devil Hills

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

NOV - 4 2019

Planning and Inspection Department

EG2019-016

EXCAVATION AND GRADING

PROJECT NAME: Reliant Construction Land Clearing
SITE ADDRESS: 303 INDIAN DR KILL DEVIL HILLS

ISSUED: 10/30/2019

EXPIRES: 04/27/2020

APPLICANT: EARLY, R SHANE
5238 CHALLEDON DRIVE
VIRGINIA BEACH, VA 23462

OWNER: EARLY, R SHANE
5238 CHALLEDON DRIVE
VIRGINIA BEACH, VA 23462

CONTRACTOR: RELIANT CONSTRUCTION LLC
4275 Worthington Lane
kitty hawk, nc 27949
252-202-7007

GENERAL, UNLIMITED: RELIANT CONSTRUCTION LLC
4275 Worthington Lane
kitty hawk, nc 27949
252-202-7007

License: 62339
Expires: 12/30/2019

PARCEL:

PIN: 988410363443

Parcel Number: 002718000

Address: 303 INDIAN DR KILL DEVIL HILLS

Addition: HIGH VIEW - HEDRICKS ADD

Zoning:
Block: F **Lot(s):** 1-4

Legal Description:

FEES:	Paid	Due
Land Disturbing	\$100.00	\$0.00
Totals :	\$100.00	\$0.00

PROJECT DESCRIPTION: Mow lots

EG2019-016

PROJECT NAME: Reliant Construction Land Clearing
SITE ADDRESS: 303 INDIAN DR KILL DEVIL HILLS

EXCAVATION AND GRADING

ISSUED: 10/30/2019

EXPIRES: 04/27/2020

DETAILS

Permit

Name	Value
ESTIMATED CONSTRUCTION COST	220.00
ZONING DISTRICT	RL
CAMA PERMIT	N
FLOOD ZONE	AE
BASE FLOOD ELEVATION	9.0

REQUIRED INSPECTIONS

Final

CONDITIONS

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

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

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

Issued By: _____

Contractor or Authorized Agent: _____ Date: _____



Town of Kill Devil Hills

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

NOV - 4 2019

Planning and Inspection Department

EG2019-015	EXCAVATION AND GRADING
PROJECT NAME: Reliant Construction Land Clearing	ISSUED: 10/30/2019
SITE ADDRESS: 305 INDIAN DR Kill Devil Hills	EXPIRES: 04/27/2020

APPLICANT: EARLY, R SHANE 1213 FLOBERT DRIVE VIRGINIA BEACH, VA 23464	OWNER: EARLY, R SHANE 1213 FLOBERT DRIVE VIRGINIA BEACH, VA 23464
--	--

CONTRACTOR: RELIANT CONSTRUCTION LLC
4275 Worthington Lane
kitty hawk, nc 27949
252-202-7007

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

PIN: 988410363401	Parcel Number:
Address: 305 INDIAN DR Kill Devil Hills	Zoning:
Addition:	Block: Lot(s):
Legal Description: LOT 3-R, BLOCK F, HIGH VEIW -- HENDRICKS ADDITION	

FEES:	Paid	Due
Land Disturbing	\$100.00	\$0.00
Totals :	\$100.00	\$0.00

PROJECT DESCRIPTION: Mowing Lots

EG2019-015

PROJECT NAME: Reliant Construction Land Clearing
SITE ADDRESS: 305 INDIAN DR Kill Devil Hills

EXCAVATION AND GRADING

ISSUED: 10/30/2019

EXPIRES: 04/27/2020

DETAILS

Permit

Name	Value
ESTIMATED CONSTRUCTION COST	222,000
ZONING DISTRICT	RL
CAMA PERMIT	N
FLOOD ZONE	AE
BASE FLOOD ELEVATION	9.0

REQUIRED INSPECTIONS

Final

CONDITIONS

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Issued By: _____

Contractor or Authorized Agent: _____ **Date:** _____



Town of Kill Devil Hills

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

PAID

NOV - 4 2019

Planning and Inspection Department

EG2019-014

PROJECT NAME: Reliant Construction Land Clearing
SITE ADDRESS: 307 INDIAN DR Kill Devil Hills

EXCAVATION AND GRADING

ISSUED: 10/30/2019

EXPIRES: 04/27/2020

APPLICANT: EARLY, R SHANE
1213 FLOBERT DRIVE
VIRGINIA BEACH, VA 23464

OWNER: EARLY, R SHANE
1213 FLOBERT DRIVE
VIRGINIA BEACH, VA 23464

CONTRACTOR: RELIANT CONSTRUCTION LLC
4275 Worthington Lane
kitty hawk, nc 27949
252-202-7007

GENERAL, UNLIMITED: RELIANT CONSTRUCTION LLC
4275 Worthington Lane
kitty hawk, nc 27949
252-202-7007

License: 62339
Expires: 12/30/2019

PARCEL:

PIN: 988410362348

Parcel Number:

Address: 307 INDIAN DR Kill Devil Hills

Zoning:

Addition:

Block:

Lot(s):

Legal Description: LOT 4-R, BLOCK F, HIGH VIEW-HENDRICKS ADDITION

FEES:	Paid	Due
Land Disturbing	\$100.00	\$0.00
Totals :	\$100.00	\$0.00

PROJECT DESCRIPTION: Mowing Lots

EG2019-014

PROJECT NAME: Reliant Construction Land Clearing

SITE ADDRESS: 307 INDIAN DR Kill Devil Hills

EXCAVATION AND GRADING

ISSUED: 10/30/2019

EXPIRES: 04/27/2020

DETAILS

Permit

Name	Value
ESTIMATED CONSTRUCTION COST	2000.00
ZONING DISTRICT	RL
CAMA PERMIT	N
FLOOD ZONE	AE
BASE FLOOD ELEVATION	9.0

REQUIRED INSPECTIONS

Final

CONDITIONS

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

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

Issued By: _____

Contractor or Authorized Agent: _____ **Date:** _____