

PROJECT DESCRIPTION: Proposed 3 bedroom single family dwelling

Page 1 of 3

Town of KEE Devil Hills

Water Charges

Waller Tan #: T83979

PROJECT NAME: Water Oak Residential LLC SITE ADDRESS: 601 Zen Lane Kill Devil Hills

BUILDING JOINT ISSUED: 04/01/2020

EXPIRES: 09/28/2020

REQUIRED INSPECTIONS

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

- * Elevation Certificate will be required 21 days after establishment of the reference level in accordance with 151.41(C).
- * As-built survey will be required prior to Certificate of Occupancy or Certificate of Compliance.
- * The developer shall be responsible for maintaining erosion and sediment control at the disturbed area.
- * A final elevation certificate will be required prior to issuance of a Certificate of Occupancy or a Certificate of Compliance in accordance with 151.41(C).
- * Development must meet all aspects of Chapter 151 Flood Damage Prevention Ordinance including use and elevation.

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

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

- * Construction must meet all aspect of Chapter 153 Zoning including lot coverage and setbacks.
- * Zoning Final Inspection is required.
- * Engineered truss design drawings and layout required prior to installation.

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: Muck Date: 4.2.2020 Contractor or Authorized Agent:



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

APR - 2 2020

Planning and Inspection Department

BJ2020-074

PROJECT NAME: Housey Residence SITE ADDRESS: 2018 HIGHVIEW ST KILL DEVIL HILLS

BUILDING JOINT ISSUED: 04/02/2020

EXPIRES: 09/29/2020

APPLICANT:			OWNER:	Housey, Eric 22 Mill Pond Ro Jackson, NJ 085 732-616-1947	d Road J 08527		
CONTRACTOR	Dream Builders PO Box 33 Kill Devil Hillsl, NC 2 252-573-8910	27948					
GENERAL BUI	LDING - UNLIMITED:	PO Box 33	ills!, NC 2794	В		ense: 75296 pires: 01/01/2021	
PARCEL:							
PIN:	98840508789	6		Parcel Number:	00091300	0	
Address:	2018 HIGHVI	EW ST KILL DE	VIL HILLS				
				Zoni	ng:		
Addition:	AVALON BEA	CH ANNEX 2 &	3	Bloc	k: 0	Lot(s): 1191	
Legal Desc	ription:						
FEES:		Paid	Due	BUILDING ARE	EA:		
Covered Porch	Residential	\$180.00	\$0.00	Covered Porc	hes/Decks	240 SQFT	
Land Disturbing		\$100.00	\$0.00	Resdiential Unheated (.40)		175 Sq. Ft	
Res. Building Po	ermit Fee	\$1,236.25	\$0.00	Residential He	eated Space	1555 sq. Ft.	
T-Pole		\$50.00	\$0.00	(.75)			
	Totals :	\$1,566.25	\$0.00	# of Temporar	y Poles	1 EA	

PROJECT DESCRIPTION: new 3 bedroom single family dwelling

Town of Kill Devil Hills Water Charges PAID Water Tap #: T23960

BJ2020-074

PROJECT NAME: Housey Residence SITE ADDRESS: 2018 HIGHVIEW ST KILL DEVIL HILLS

BUILDING JOINT

ISSUED: 04/02/2020

EXPIRES: 09/29/2020

DETAILS

Permit	
Name	Value
ZONING DISTRICT	RL
FRONT YARD SETBACK	15
REAR YARD SETBACK	20% Depth >30
SIDE YARD SETBACK	6
HEALTH DEPARTMENT PERMIT #	27460
# PARKING SPACES/BEDROOM	3
CAMA PERMIT	N
CAMA EXEMPTION	Ν
FLOOD ZONE	Х
SUBSTANTIAL IMPROVEMENT	NO
PURPOSE	Residential New
CONSTRUCTION TYPE	V
CONSTRUCTION COST	227000.00
LOT COVERAGE	27.40
LIVING SPACE (SQFT)	1555
COVERED PORCHES/DECKS (SQFT)	240
STORAGE (SQFT)	175
TOTAL SQUARE FOOTAGE	1970
SURVEYOR NAME AND NUMBER	Michael Robinson
ENGINEER AND LICENSE NUMBER	Mike Osteen 032628
CULVERT	N
ROLL OUT CAN	1
DRIVEWAY INVERT 2	Υ
OCCUPANCY TYPE	One & Two Family Dwelling

PROJECT NAME: Housey Residence SITE ADDRESS: 2018 HIGHVIEW ST KILL DEVIL HILLS

BUILDING JOINT

ISSUED: 04/02/2020

EXPIRES: 09/29/2020

REQUIRED INSPECTIONS

In-Slab Plumbing Slab/Foundation/Piling

Framing

Rough In

Insulation

Final

Zoning Final

CONDITIONS

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

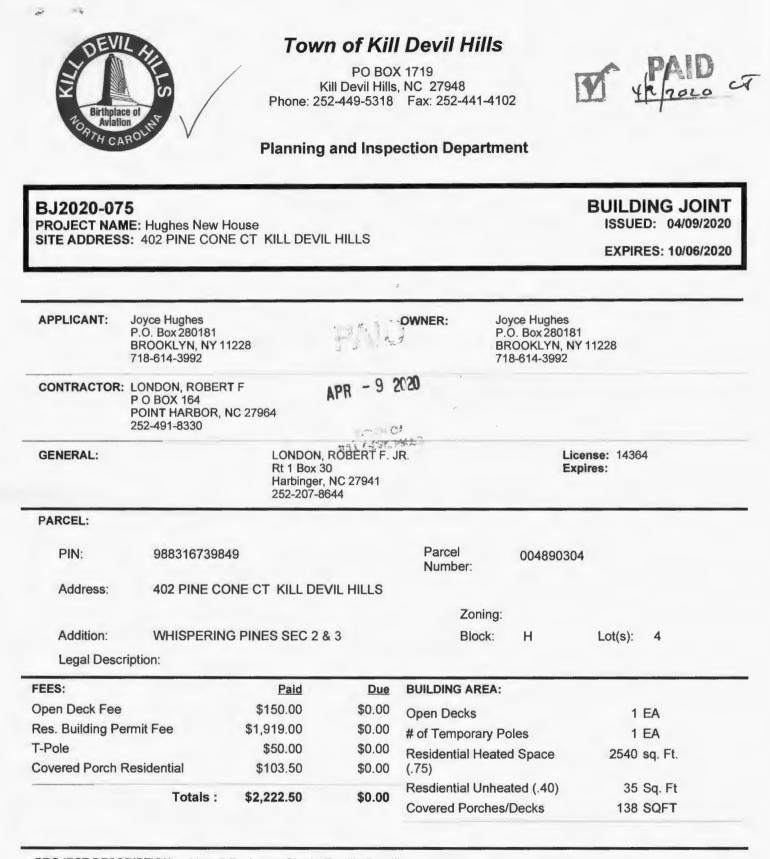
* NOTICE: Call Public Services Department	(252) 480-4080 before pouring driveway
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- * As-built survey will be required prior to Certificate of Occupancy or Certificate of Compliance.
- * The developer shall be responsible for maintaining erosion and 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: 4/2/2020



PROJECT DESCRIPTION: New 5 Bedroom Single Family Dwelling

Town of Kill Devil Hills Water Charges PAID Water Tap #: 123982

Page 1 of 3

Printed by : CTHUMAN on: 04/09/2020 10:12 AM

PROJECT NAME: Hughes New House SITE ADDRESS: 402 PINE CONE CT KILL DEVIL HILLS

BUILDING JOINT ISSUED: 04/09/2020

EXPIRES: 10/06/2020

REQUIRED INSPECTIONS

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

CONDITIONS

*	This pe	rmit bec	omes i	null and	void	if wor	k or	cons	stru	ctio	n aut	hor	ized	s no	t cor	nmen	ced	with	in 6	mo	nths	or if	const	truc	ction	
* 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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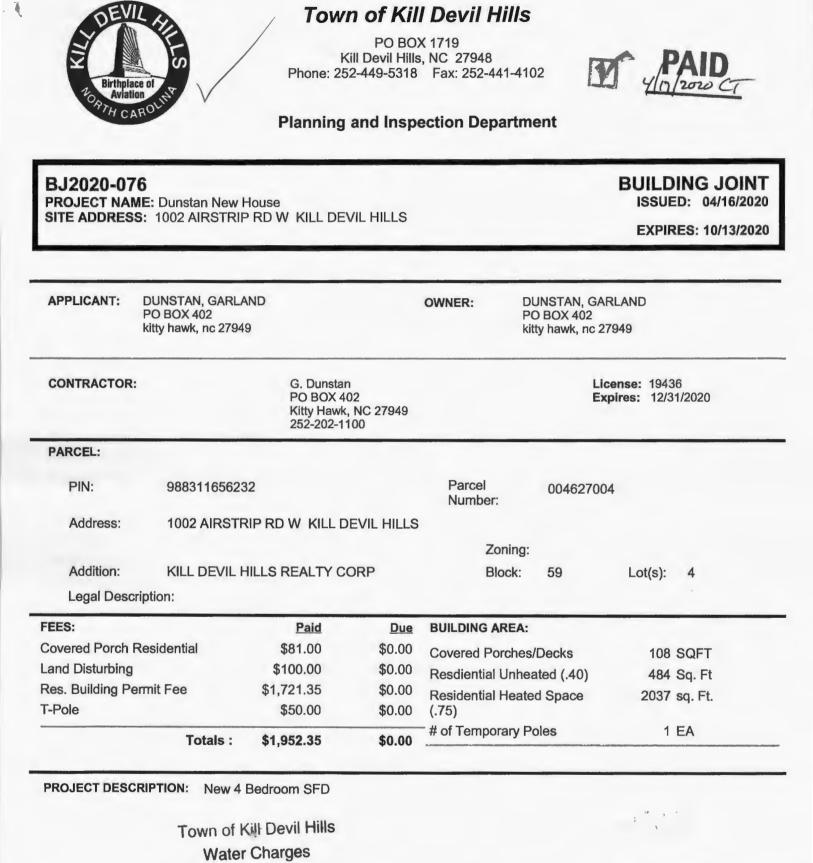
- * NOTICE: Call Public Services Department (252) 480-4080 before pouring driveway!
- * As-built survey will be required prior to Certificate of Occupancy or Certificate of Compliance.
- * The developer shall be responsible for maintaining erosion and sediment control at the disturbed area.
- * Per §153.082(B)(1)(c) 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.
- * Engineered truss design and layout required prior to installation.

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: 4/69/8020



APR 17 2020

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Water Tap #

PROJECT NAME: Dunstan New House SITE ADDRESS: 1002 AIRSTRIP RD W KILL DEVIL HILLS BUILDING JOINT ISSUED: 04/16/2020

EXPIRES: 10/13/2020

REQUIRED INSPECTIONS

In-Slab Plumbing Slab/Foundation/Piling

Framing

Rough In

Insulation Final

Zoning Final

CONDITIONS

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

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Issued By:	
Contractor or Authorized Agent:	Date: 4.17.2020



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

Planning and Inspection Department

BJ2020-083

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PROJECT NAME: Tinsley New House SITE ADDRESS: 516 WILKINSON ST W KILL DEVIL HILLS **BUILDING JOINT**

ISSUED: 04/30/2020

EXPIRES: 10/27/2020

APPLICANT: Tinsley, Richard 516 W Sothel Street Kill Devil Hills, NC 27948				OWNER:	Tinsley, Richard 516 W Sothel Street Kill Devil Hills, NC 27948			
CONTRACTOR:	DUNSTAN, GARLA PO BOX 402 kitty hawk, nc 2794							
CONTRACTOR:		G. Dunstan PO BOX 40 Kitty Hawk, 252-202-11)2 NC 27949			icense: 19436 xpires: 12/31/2020		
PARCEL:								
PIN:	98752082706	58		Parcel Number:	0006850	00		
Address:	516 WILKINS	ON ST W KILL D	EVIL HILLS	;				
				Zonii	ng:			
Addition:	VIRGINIA DA	RE SHORES		Block	c: 66	Lot(s): 27-29		
Legal Descr	iption:							
FEES:		Paid	Due	BUILDING ARE	A:			
Covered Porch F	Residential	\$73.50	\$0.00	Covered Porch	nes/Decks	98 SQFT		
Land Disturbing		\$100.00	\$0.00	Open Decks		1 EA		
Open Deck Fee		\$150.00	\$0.00	Resdiential Un	heated (.40)	266 Sq. Ft		
Res. Building Pe	rmit Fee	\$1,698.65	\$0.00	Residential He		2123 sq. Ft.		
T-Pole		\$50.00	\$0.00	(.75)				
	Totals :	\$2,072.15	\$0.00	# of Temporar	y Poles	1 EA		
						2 ° 1		
PROJECT DESC	RIPTION: New 4	Bedroom SFRill				×)		
		Water Ch	narges					
		PA	ID			APR 3 0 2020		
		T	7,401			2 N		
rinted by : Marty Shaw o		Tour Mr.		a na an				



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

Planning and Inspection Department

BJ2020-077

PROJECT NAME: Travelodge New Light Poles and Fixtures SITE ADDRESS: 804 VA DARE TRL N KILL DEVIL HILLS

BUILDING JOINT ISSUED: 04/28/2020

EXPIRES: 10/25/2020

APPLICANT:	LASGO, INC PO BOX 1349 Kill Devil Hills, NC 275	948	01	WNER:	LASGO, INC PO BOX 1349 Kill Devil Hills, NC 27948					
CONTRACTOR:	ADLIGHT SIGNS 600 West Boundry Str Kill Devil Hills, NC 279 252-449-2800	reet 948								
CONTRACTOR:			oundry Street Ils, NC 27948			License: LEGA Expires: 12/3	ACY UNKNOWN 1/2030			
PARCEL:										
PIN:	988415722512			Parcel Number:	00372	5000				
Address:	804 VA DARE	TRL N KILL DE	VIL HILLS							
				Zoni	ng:					
Addition:	KITTY HAWK S	SHORES - REV	SED	Bloc	k: 20	Lot(s):	1-8			
Legal Descr	iption:									
EES:		Paid	Due							
Building Permit F Fee	Fee - Minimum	\$150.00	\$0.00							

PROJECT DESCRIPTION: Install exterior new light poles and fixtures for parking lot



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PROJECT NAME: Travelodge New Light Poles and Fixtures SITE ADDRESS: 804 VA DARE TRL N KILL DEVIL HILLS **BUILDING JOINT**

ISSUED: 04/28/2020

EXPIRES: 10/25/2020

DETAILS

Permit	
Name	Value
ZONING DISTRICT	RH
FRONT YARD SETBACK	30
CAMA PERMIT	N
CAMA EXEMPTION	N
FLOOD ZONE	AE
BASE FLOOD ELEVATION	8.3
SUBSTANTIAL IMPROVEMENT	NO
PURPOSE	Commercial Repair/Remodel
CONSTRUCTION COST	7500.00
CULVERT	N
DRIVEWAY INVERT 2	N
OCCUPANCY TYPE	Business

REQUIRED INSPECTIONS

Slab/Foundation/Piling

Final

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.

* Zoning Final Inspection is required.

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

SY DEV	L HILL		PO BOX	PAD		
TORTH C	ace of 13		2-449-5318	APR 2 2 2020		
ATH C	AROL	Planning	and Inspe	ection Depar	tment	
	79 ME: Mandvere fire da SS: 2017 HIGHVIEW		HILLS			BUILDING JOINT ISSUED: 04/20/2020 EXPIRES: 10/17/2020
APPLICANT:	ALLAN A MANDVEF 118 Creekview Ln. Manteo, NC 27954	RE		OWNER:	ALLAN A M 118 Creekv Manteo, NC	
CONTRACTOR	R: PHOENIX RESTOR 601 W Fresh Pond D Kill Devil Hills, NC 27 480-1044	ir.				
GENERAL BUI	LDING-LIMITED:	601 W Fres	RESTORATION RESTOR			License: 58038 Expires: 12/31/2020
PARCEL:	1					
PIN:	988405089859)		Parcel Number:	00148	38000
Address:	2017 HIGHVIE	W ST KILL DEV	/IL HILLS			
Addition			2	Zoni		L at(a): 1000
Addition: Legal Des		CH ANNEX 2 & 3	2	Bloc	k: 0	Lot(s): 1362
EES:		Paid	Due	BUILDING ARE	A:	
Renovation/Ren	model/Relocate	\$989.10	\$0.00	Remodel/Ren	ovation	2198 SQFT

PROJECT DESCRIPTION: repair damage from fire, hvac, electrical, plumbing siding and roofing, no change to footprint



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PROJECT NAME: Mandvere fire damage repair SITE ADDRESS: 2017 HIGHVIEW ST KILL DEVIL HILLS

BUILDING JOINT ISSUED: 04/20/2020

EXPIRES: 10/17/2020

	D	ETAILS	
Permit			
Name	Value	_	
ZONING DISTRICT	RL.		
FRONT YARD SETBACK	15		
REAR YARD SETBACK	20% Depth >30		
SIDE YARD SETBACK	6		
# PARKING SPACES/BEDROOM	2		
CAMA PERMIT	Ν		
CAMA EXEMPTION	Ν		
FLOOD ZONE	Х		
SUBSTANTIAL IMPROVEMENT	YES		
PURPOSE	Residential Repair/Remodel		
CONSTRUCTION TYPE	V		
CONSTRUCTION COST	175000.00		
LOT COVERAGE	32.00		
LIVING SPACE (SQFT)	2198		
SURVEYOR NAME AND NUMBER	Wesley M. Meekins L- 1466		
CULVERT	Ν		
DRIVEWAY INVERT 2	Ν		
OCCUPANCY TYPE	One & Two Family Dwelling		

REQUIRED INSPECTIONS

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

Insulation

Final

Zoning Final

CONDITIONS

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

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PROJECT NAME: Mandvere fire damage repair SITE ADDRESS: 2017 HIGHVIEW ST KILL DEVIL HILLS **BUILDING JOINT** ISSUED: 04/20/2020

EXPIRES: 10/17/2020

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

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

Issued By:

Marty Shaw

Contractor or Authorized Agent: Patricia L Broom

04 / 20 / 2020 Date:

HELLOSIGN

21 1

Audit Trail

TITLE FILE NAME DOCUMENT ID AUDIT TRAIL DATE FORMAT		2017 Highview Street 2017 HIGHVIEW BJ2020-079.pdf eacff610361c8e03f3a21b7cfce09683a8aac02e MM / DD / YYYY					
STATUS		Completed					
Document H	History						
(C) SENT	04 / 20 / 2020 20:36:32 UTC	Sent for signature to Pat Broom (pat@phoenixobx.com) and Marty Shaw (permits@kdhnc.com) from permits@kdhnc.com IP: 204.84.167.13					
© VIEWED	04 / 20 / 2020 20:36:56 UTC	Viewed by Pat Broom (pat@phoenixobx.com) IP: 47.133.145.197					
© VIEWED	04 / 20 / 2020 20:37:58 UTC	Viewed by Marty Shaw (permits@kdhnc.com) IP: 209.222.82.232					
SIGNED	04 / 20 / 2020 20:37:55 UTC	Signed by Pat Broom (pat@phoenixobx.com) IP: 47.133.145.197					
SIGNED	04 / 21 / 2020 13:15:03 UTC	Signed by Marty Shaw (permits@kdhnc.com) IP: 47.132.244.90					
COMPLETED	04 / 21 / 2020 13:15:03 UTC	The document has been completed.					



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



Planning and Inspection Department

BJ2020-081

BUILDING JOINT ISSUED: 04/23/2020

PROJECT NAME: Pirates Beachware Storage SITE ADDRESS: 305 VA DARE TRL S KILL DEVIL HILLS

EXPIRES: 10/20/2020

APPLICANT:	Yakov Cohe (Pirate' 305 S. Va Dare Trai Kill Devil Hillsl, NC 2 252-256-3403	1		OWNER:	Yakov Cohe 305 S. Va Da Kill Devil Hills 252-256-340	sl, NC 27948	vear)
GENERAL:	GODFREY CONSTRUC P.O. Box 694 Kill Devil Hillsl, NC 2794 252-202-1469		Expires: 01/31/2021			-	
PARCEL:							
PIN:	98842080629	5		Parcel Number:	008112	2000	
Address:	305 VA DARE	TRL S KILL DE	VIL HILLS				
				Zoni	ng:		
Addition:	SUBDIVISION	I-NONE		Bloc	k: 0	Lot(s):	PAR 1
Legal Desc	cription:						
FEES:		Paid	Due	BUILDING ARE	EA:		
Renovation/Ren	nodel/Relocate	\$312.04	\$0.00	Remodel/Ren	ovation	693 \$	SQFT
	Totals :	\$312.04	\$0.00				

PROJECT DESCRIPTION: Return un-permitted second floor living space to storage, all plumbing to be removed, all electrical to uncovered and inspected

PAID

APR 2 4 2020

DENE MILLS

PROJECT NAME: Pirates Beachware Storage SITE ADDRESS: 305 VA DARE TRL S KILL DEVIL HILLS **BUILDING JOINT**

ISSUED: 04/23/2020

EXPIRES: 10/20/2020

DETAILS

Permit		
Name	Value	
ZONING DISTRICT	С	
FRONT YARD SETBACK	30	
REAR YARD SETBACK	20% Depth >30	
SIDE YARD SETBACK	10	
CAMA PERMIT	Ν	
CAMA EXEMPTION	N	
FLOOD ZONE	VE	
BASE FLOOD ELEVATION	11.00	
SUBSTANTIAL IMPROVEMENT	NO	
PURPOSE	Commercial Repair/Remodel	
CONSTRUCTION TYPE	V	
CONSTRUCTION COST	10000.00	
CULVERT	Ν	
DRIVEWAY INVERT 2	Ν	
OCCUPANCY TYPE	Merchantile	

REQUIRED INSPECTIONS

Rough In

Final

Zoning Final

CONDITIONS

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

* Construction must meet all aspect of Chapter 153 Zoning including lot coverage and setbacks.
* Zoning Final Inspection is required.
* NC licensed plumber and electrician required to sign off on all work.
* 2nd floor unpermitted dwelling/office shall be returned back to storage per submitted drawings 4/22/2020. Space shall only be used as storage(Unoccupied by human occupancy). Any conversion of this space will deem a violation of the North Carolina Building Code and will be posted unsafe for human occupancy.

* Per notice of violation dated 4/9/2020, property is in violation until a final inspection is approved. All fines shall accrue per KDH Town Code until a approved final inspection is conducted.

PROJECT NAME: Pirates Beachware Storage SITE ADDRESS: 305 VA DARE TRL S KILL DEVIL HILLS

Date: 4-23-2020

EXPIRES: 10/20/2020

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.

24 **Issued By:**

Contractor or Authorized Agent:



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

Planning and Inspection Department

BJ2020-080

1

PROJECT NAME: Proof Bakery SITE ADDRESS: 402 CROATAN HWY S KILL DEVIL HILLS

BUILDING JOINT ISSUED: 04/16/2020

1550ED: 04/10/2020

EXPIRES: 10/13/2020

APPLICANT:	BEASLEY, BILLY O P O BOX 237 KILL DEVIL HILLS,			OWNER:	BEASLEY, P O BOX 2 KILL DEVIL		48
GENERAL:		Self UNKNOWN UNKNOWN 917-862-90	N, XX 00000			License: Unlic Expires: 12/3	
PARCEL:							
PIN:	98830879649	94		Parcel Number:	00402	9000	
Address:	402 CROATA	N HWY S KILL	DEVIL HILLS	6			
				Zoni	ng:		
Addition:	KITTY HAWK	SHORES - REV	ISED	Bloc	k: 66	Lot(s):	15-17 & PT 18
Legal Desc	cription:						
FEES:		Paid	Due	BUILDING ARE	EA:		
Renovation/Ren	model/Relocate	\$1,087.20	\$0.00	Remodel/Ren	ovation	2416	SQFT
ann san fadalan ak ta baharang Appanalan dipakanak	Totals :	\$1,087.20	\$0.00			a hand Millinghama - Anning Salaka sa Annin	nanariikin armandaranananiidarada
PROJECT DESC	CRIPTION: remode	el existing interior	commercial	space for proof	bakery	4 - Q	4
						APR 16	2020

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BJ2020-080 PROJECT NAME: Proof Bakery SITE ADDRESS: 402 CROATAN HWY S KILL DEVIL HILLS

BUILDING JOINT

ISSUED: 04/16/2020

EXPIRES: 10/13/2020

		DETAILS	
Permit			
Name	Value		
ZONING DISTRICT	С		
FRONT YARD SETBACK	30		
SIDE YARD SETBACK	10		
HEALTH DEPARTMENT PERMIT #	29523		
# PARKING SPACES/BEDROOM	16		
CAMA PERMIT	N		
CAMA EXEMPTION	N		
FLOOD ZONE	AE		
BASE FLOOD ELEVATION	9		
SUBSTANTIAL IMPROVEMENT	NO		
PURPOSE	Commercial Repair/Remodel		
CONSTRUCTION TYPE	111		
CONSTRUCTION COST	23000.00		
LIVING SPACE (SQFT)	2416		
ENGINEER AND LICENSE NUMBER	Fredrick House 2474	0	
CULVERT	N		
DRIVEWAY INVERT 2	N		
OCCUPANCY TYPE	Business		

REQUIRED INSPECTIONS

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

Insulation

Final

Zoning Final

CONDITIONS

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

BJ2020-080 PROJECT NAME: Proof Bakery SITE ADDRESS: 402 CROATAN HWY S KILL DEVIL HILLS

BUILDING JOINT ISSUED: 04/16/2020

EXPIRES: 10/13/2020

Date:

* Proposed Floor Plan approved as submitted 4/16/2020, any changes to proposed plans will require approval of each associated Town Department.

* Backflow Preventer must meet RPZ standards. Public Services must approve of installation of such device before Certificate of Occupancy can be approved.

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:



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

Planning and Inspection Department

BJ2020-078 PROJECT NAME: Bob Saunders

SITE ADDRESS: 2707 BAY DR KILL DEVIL HILLS

BUILDING JOINT

ISSUED: 04/14/2020

EXPIRES: 10/11/2020

APPLICANT:	CARIBBEAN POOL 3017 Martins Point F kitty hawk, nc 27949 252-207-1773	Rd		OWNER:	Saunders, Bo 13503 Great SMITHVILLE 757-621-0715	Spring Rd. VA 23430
CONTRACTOR	:	CARIBBEA 3017 Martii kitty hawk, 252-207-17	ns Point Rd nc 27949			L icense: 73571 E xpires: 12/31/2020
PARCEL:						
PIN:	987520807958	3		Parcel Number:	016626	002
Address:	2707 BAY DR	KILL DEVIL HIL	LS			
				Zoni	ing:	
Addition:	VIRGINIA DAR	RE SHORES		Bloc	k: 81	Lot(s): 1
Legal Desc	cription:					
EES:		Paid	Due			
Pool/Hot Tub		\$200.00	\$0.00			5573
	Totals :	\$200.00	\$0.00			o a himer
PRO JECT DESC		and more deals on	d fance			APR 1.5 2020

PROJECT DESCRIPTION: Install pool, pool deck and fence

APH 15 2020

11. 11.3 ML 12.2 1043



BJ2020-078 PROJECT NAME: Bob Saunders SITE ADDRESS: 2707 BAY DR KILL DEVIL HILLS

BUILDING JOINT

ISSUED: 04/14/2020

EXPIRES: 10/11/2020

DETAILS

Permit	
Name	Value
ZONING DISTRICT	RL
FRONT YARD SETBACK	30
REAR YARD SETBACK	20% Depth >30
SIDE YARD SETBACK	8
HEALTH DEPARTMENT PERMIT #	29577
CAMA PERMIT	Ν
CAMA EXEMPTION	N
FLOOD ZONE	AE
BASE FLOOD ELEVATION	8
SUBSTANTIAL IMPROVEMENT	NO
CONSTRUCTION COST	36353.00
LOT COVERAGE	39.75
SURVEYOR NAME AND NUMBER	Gloria Rogers
CULVERT	N
DRIVEWAY INVERT 2	Ν

REQUIRED INSPECTIONS

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

CONDITIONS

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

BJ2020-078 PROJECT NAME: Bob Saunders SITE ADDRESS: 2707 BAY DR KILL DEVIL HILLS

BUILDING JOINT ISSUED: 04/14/2020

EXPIRES: 10/11/2020

* 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: Charles Thuman

Contractor or Authorized Agent:

Peter F Kelly

04 / 14 / 2020 Date:

DEV	IL AD	Tow	n of Kill	Devil Hil	ls		
Ĭ	L'ES		PO BOX (ill Devil Hills, 2-449-5318		-4102	First F U J	ta la
ZORTH C	AROLINP	Planning	and Inspe	ection Depar	tment	· APR -	2 2020
	_					1.1 2.2	1 -) R
	71 ME: Piccone Pool S: 302 VA DARE T			-			DING JOINT ED: 04/02/2020
SHE ADDRES	5. 302 VA DARE 1	RES KILL DEV				EXPI	RES: 09/29/2020
APPLICANT:	PICCONE, ADAM			OWNER:	PICCONE	, ADAM	
	3657 Lipane Street DENVER, CO 80211	1			3657 Lipar DENVER,	ne Street CO 80211	
CONTRACTOR	: RM SAUNDERS GE PO Box 1922 Kill Devil Hills, NC 27 480-9477		CTORS				
GENERAL - UN	ILIMITED:	CONTRAC PO Box 19	TORS INC 22 ills, NC 27948	AUNDERS GEN	ERAL	License: 323 Expires: 01/	
PARCEL:							
PIN:	988420804295	5		Parcel Number:	0037	76000	
Address:	302 VA DARE	TRL S KILL DE	VIL HILLS				
				Zoni	-		
Addition:	KITTY HAWK SHORES - REVISED			Bloc	k: 30	Lot(s):	2
Legal Desc	cription:						
FEES:		Paid	Due				
Pool/Hot Tub		\$200.00	\$0.00				
	Totals :	\$200.00	\$0.00				

Replace septic with engineered system, add pool and pool fence in rear yard JN:

jî.

1

PROJECT NAME: Piccone Pool SITE ADDRESS: 302 VA DARE TRL S KILL DEVIL HILLS **BUILDING JOIN** ISSUED: 04/02/2020

EXPIRES: 09/29/2020

	DETAILS	
Permit		
Name	Value	
ZONING DISTRICT	С	
FRONT YARD SETBACK	30	
REAR YARD SETBACK	20% Depth >30	
SIDE YARD SETBACK	8	
HEALTH DEPARTMENT PERMIT #	29150	
CAMA PERMIT	N	
CAMA EXEMPTION	N	
FLOOD ZONE	AE	
BASE FLOOD ELEVATION	8.3	
SUBSTANTIAL IMPROVEMENT	NO	
PURPOSE	Residential Accessory	
CONSTRUCTION COST	95000.00	
LOT COVERAGE	50.10	
ENGINEER AND LICENSE NUMBER	Michael Robinson	
CULVERT	N	
DRIVEWAY INVERT 2	N	
OCCUPANCY TYPE	One & Two Family Dwelling	

REQUIRED INSPECTIONS

Final

Pool Bonding

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.

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

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.

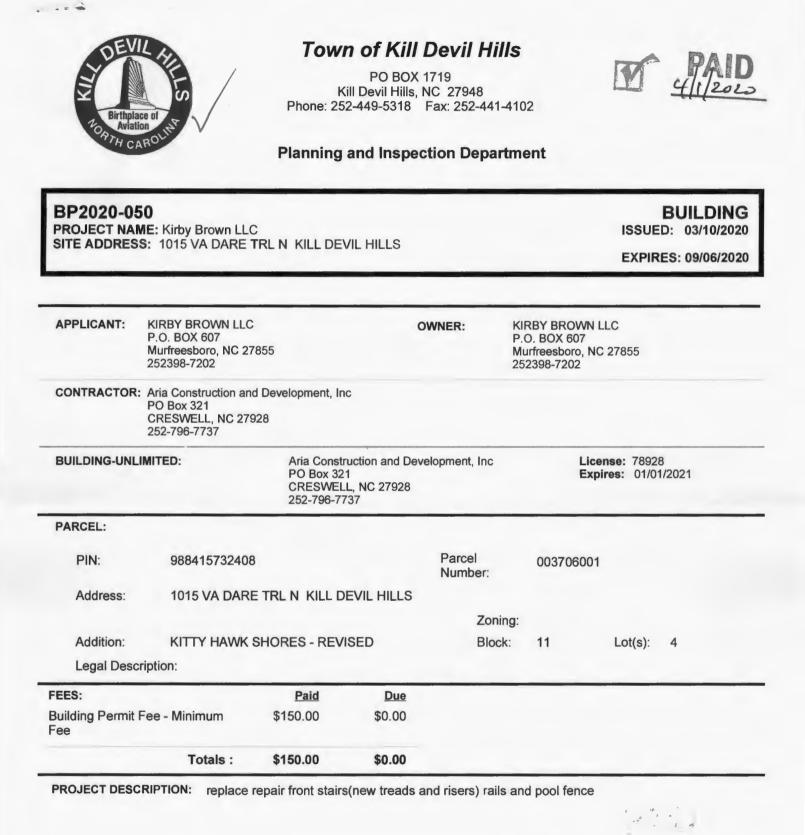
Construction must meet all aspect of Chapter 153 Zoning including lot coverage and setbacks.

Printed by : Marty Shaw on: 04/02/2020 02:22 PM

BJ2020-071 PROJECT NAME: Piccone Pool SITE ADDRESS: 302 VA DARE TRL S KILL DEVIL HILLS BUILDING JOINT ISSUED: 04/02/2020

EXPIRES: 09/29/2020

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



APR - 2 2020

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BP2020-050 PROJECT NAME: Kirby Brown LLC SITE ADDRESS: 1015 VA DARE TRL N KILL DEVIL HILLS

BUILDING ISSUED: 03/10/2020

EXPIRES: 09/06/2020

	0	DETAILS	
Permit			
Name	Value	_	
CAMA PERMIT	Ν		
CAMA EXEMPTION	Ν		
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		
FINAL ELEVATION CERTIFICATE	Ν		
CONSTRUCTION COST	15000.00		
SURVEYOR NAME AND NUMBER	Wesley M. Meekins L- 1486		
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.

BP2020-050 PROJECT NAME: Kirby Brown LLC SITE ADDRESS: 1015 VA DARE TRL N KILL DEVIL HILLS

n -- 4

BUILDING ISSUED: 03/10/2020

EXPIRES: 09/06/2020

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: nad alepand Date: 4-1-20 Contractor or Authorized Agent:

Property Car	SUTTR	K Phone: 25	PO BO ill Devil Hills 2-449-5318	I Devil Hil X 1719 S, NC 27948 Fax: 252-441 ection Depar	4102	V	PAID
	1 E: WRB Rentals In : 1011 VA DARE		VIL HILLS				BUILDING SUED: 03/10/2020 (PIRES: 09/06/2020
	WRB RENTALS INC P O BOX 607 MURFREESBORO, NC 27855			OWNER:	WRB RENTALS INC P O BOX 607 MURFREESBORO, NC 27855		
	Aria Construction an PO Box 321 CRESWELL, NC 279 252-796-7737		c				
BUILDING-UNLIMITED:		PO Box 32 CRESWEL	Aria Construction and Development, Inc PO Box 321 CRESWELL, NC 27928 252-796-7737		License: 78928 Expires: 01/01/2021		
PARCEL:							
PIN:	988415732472	2		Parcel Number:	0037	05001	
Address:	1011 VA DAR	E TRL N KILL D	EVIL HILLS				
				Zoni	ng:		
Addition: KITTY HAWK SHORES - REVISED			ISED	Bloc	k: 11	Lot(s): 2
Legal Descri	ption:						
EES:		Paid	Due				
Building Permit F Fee	ee - Minimum	\$150.00	\$0.00				
	Totals :	\$150.00	\$0.00				

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APR - 2 2020

BP2020-051 PROJECT NAME: WRB Rentals Inc SITE ADDRESS: 1011 VA DARE TRL N KILL DEVIL HILLS

BUILDING ISSUED: 03/10/2020

EXPIRES: 09/06/2020

DETAILS Permit Name Value CAMA PERMIT Ν CAMA EXEMPTION N ZONING DISTRICT OIR PURPOSE Residential Repair/Remodel 30 FRONT YARD SETBACK SIDE YARD SETBACK 10 REAR YARD SETBACK CAMA VE FLOOD ZONE **BASE FLOOD ELEVATION** 11 **FINAL ELEVATION** N CERTIFICATE CONSTRUCTION COST 15000.00 SURVEYOR NAME AND Wesley M. Meekins L-1486 NUMBER 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.

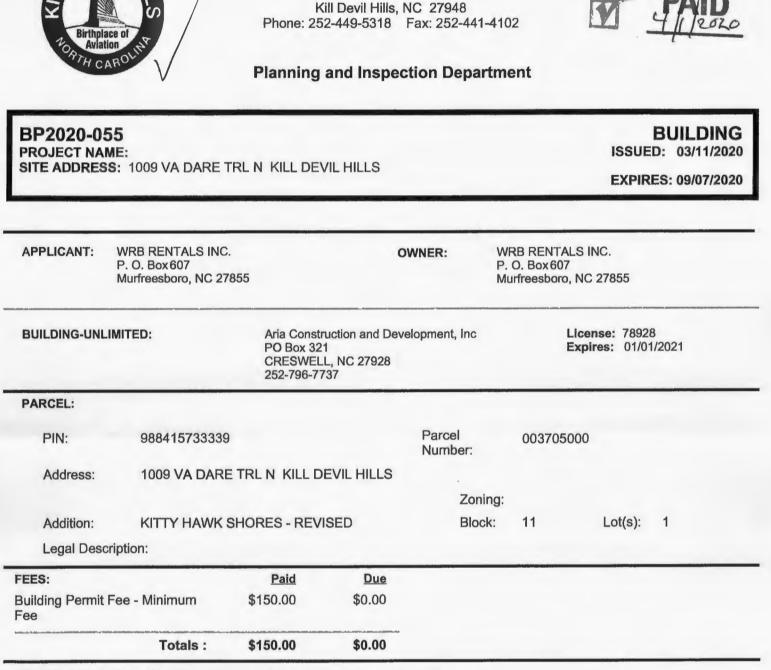
* Construction must meet all aspect of Chapter 153 Zoning including lot coverage and setbacks.

BP2020-051 PROJECT NAME: WRB Rentals Inc SITE ADDRESS: 1011 VA DARE TRL N KILL DEVIL HILLS BUILDING ISSUED: 03/10/2020

EXPIRES: 09/06/2020

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: Brad alefand - Date: 4-1-20



PO BOX 1719

PROJECT DESCRIPTION: Repair/replace front stairs/railings and pool fence.

Printed by : Marty Shaw on: 03/11/2020 02:50 PM

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APR - 2 2020

4

EXPIRES: 09/07/2020

DETAILS

Permit	
Name	Value
CAMA PERMIT	Ν
CAMA EXEMPTION	Ν
ZONING DISTRICT	OIR
PURPOSE	Residential Repair/Remodel
FLOOD ZONE	VE
FINAL ELEVATION CERTIFICATE	Ν
CONSTRUCTION COST	15000.00
CONSTRUCTION TYPE	V
OCCUPANCY TYPE	One & Two Family Dwelling

REQUIRED INSPECTIONS

Zoning Final

- 14

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 pot. 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: Dad Alertand	Date:	4-1-20
Contractor of Authorized Agent. June / Le upon	Date.	11.90



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

BP2020-056 PROJECT NAME:

SITE ADDRESS: 1013 VA DARE TRL N KILL DEVIL HILLS

BUILDING ISSUED: 03/11/2020

EXPIRES: 09/07/2020

APPLICANT:	WRB RENTALS INC P. O. Box 607 Murfreesboro, NC 27		O		WRB RENTA P. O. Box 607 Murfreesboro	'	
BUILDING-UNL	MITED:	PO Box 32	LL, NC 27928	elopment, Inc		License: 78928 Expires: 01/01/2	2021
PARCEL:							
PIN:	988415732424			Parcel Number:	0037060	000	
Address:	1013 VA DARE	TRL N KILL D	DEVIL HILLS				
				Zoning	j :		
Addition:	KITTY HAWK	SHORES - REV	ISED	Block:	11	Lot(s):	3
Legal Desci	ription:						
FEES:		Paid	Due				
Building Permit I Fee	⁻ ee - Minimum	\$150.00	\$0.00				
	Totals :	\$150.00	\$0.00				

PROJECT DESCRIPTION: Repair/replace front stairs/railings and pool fence.

APR - 2 2020

ISSUED: 03/11/2020

EXPIRES: 09/07/2020

DETAILS

Permit	
Name	Value
CAMA PERMIT	Ν
CAMA EXEMPTION	Ν
ZONING DISTRICT	OIR
PURPOSE	Residential Repair/Remodel
FLOOD ZONE	VE
BASE FLOOD ELEVATION	11
FINAL ELEVATION CERTIFICATE	Ν
CONSTRUCTION COST	15000.00
CONSTRUCTION TYPE	V
OCCUPANCY TYPE	One & Two Family Dwelling

REQUIRED INSPECTIONS

Zoning Final

Final

CONDITIONS

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

I hereby certify that I have read and examined this application and know the same to be true and correct. All provisions of Laws and Ordinances governing this type of work will be complied with whether specified herein or not. The granting of a permit does not presume to give authority to violate or cancel
the provisions of any other state/local law regulating construction or the performance of construction.
Issued By:
Contractor or Authorized Agent: Brad Oleyend Date: 4-1-20

EY DEV	RILL		PO BOX III Devil Hills,		lls	К. Миниз Ц	
Birthplac Aviation PTH CA		Phone: 25	2-449-5318	Fax: 252-441	-4102	APR	- 2 2020
1 H CA	ROU	Planning	and Inspe	ction Depai	tment		mg =
	32 ME: Price raise groun S: 809 CEDAR DR		LS				BUILDING D: 04/01/2020 ES: 09/28/2020
APPLICANT:	PRICE, GEORGE W 809 CEDAR DRIVE KILL DEVIL HILLS, N		(OWNER:	809 CEDAF	ORGE W III } DRIVE . HILLS, NC 2794	8
CONTRACTOR	RELIANT CONSTRU 4275 Worthington La kitty hawk, nc 27949 252-202-7007						
GENERAL, UNL	IMITED:			ON LLC		License: 6233 Expires: 12/3	
PARCEL:							
PIN:	988413133070)		Parcel Number:	02753	8000	
Address:	809 CEDAR D	R KILL DEVIL H	IILLS				
				Zon	ing:		
Addition:				Bloc	ck: 0	Lot(s):	96
Legal Desc	ription:						
FEES:		Paid	Due				
Building Permit Fee	Fee - Minimum	\$150.00	\$0.00				
	Totals :	\$150.00	\$0.00				

PROJECT DESCRIPTION: build floor system over existing ground floor hallway to raise floor to match existing first floor, frame in doorway opening



Page 1 of 3

PROJECT NAME: Price raise ground floor hallway SITE ADDRESS: 809 CEDAR DR KILL DEVIL HILLS BUILDING ISSUED: 04/01/2020

EXPIRES: 09/28/2020

		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	CAMA		
FLOOD ZONE	AE		
BASE FLOOD ELEVATION	9		
FINAL ELEVATION CERTIFICATE	N		
CONSTRUCTION COST	2000.00		
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.

* 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).

BP2020-082 PROJECT NAME: Price raise ground floor hallway	BUILDING ISSUED: 04/01/2020
SITE ADDRESS: 809 CEDAR DR KILL DEVIL HILLS	EXPIRES: 09/28/2020
I hereby certify that I have read and examined this application and known All provisions of Laws and Ordinances governing this type of work with the second s	
specified herein or not. The granting of a permit does not presume to	give authority to violate or cancel
specified herein or not. The granting of a permit does not presume to the provisions of any other state/local law regulating construction or is a state of the st	give authority to violate or cancel

A.A.



Town of Kill Devil Hills

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

Planning and Inspection Department

BP2020-081

PROJECT NAME: WHITE STAIR REPLACEMENT SITE ADDRESS: 601 KELLY CT KILL DEVIL HILLS BUILDING ISSUED: 03/31/2020

EXPIRES: 09/27/2020

APPLICANT:	PPLICANT: WHITE, ROBERT F JR & OW 313 WIMBERLY WAY BRISTOL, TN 37620			WNER: WHITE, ROBERT F JR & 313 WIMBERLY WAY BRISTOL, TN 37620				
UNLICENSED -	REMODELING:	Smith, Dale 3118 N Cro Kill Devil Hi 252-256-19	atan Highway IIs, NC 27948			License: 12345 Expires:		
PARCEL:								
PIN:	988405185302			Parcel Number:	0020960	000		
Address:	601 KELLY CT	KILL DEVIL HI	LLS					
				Zonin	g:			
Addition:	WRIGHT'S SH	ORES		Block	: 0	Lot(s):	134	
Legal Desc	ription:							
FEES:		Paid	Due					
Building Permit Fee	Fee - Minimum	\$150.00	\$0.00					
	Totals :	\$150.00	\$0.00					

THIRD LEVEL DECK

BP2020-081 PROJECT NAME: WHITE STAIR REPLACEMENT SITE ADDRESS: 601 KELLY CT KILL DEVIL HILLS

BUILDING ISSUED: 03/31/2020

EXPIRES: 09/27/2020

		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	
STREET SIDE SETBACK	15	
FLOOD ZONE	X	
FINAL ELEVATION CERTIFICATE	Ν	
CONSTRUCTION COST	4200.00	
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 work is suspended for a period of 12 months at any time after work has started.	
* As-built survey will be required prior to Certificate of Occupancy or Certificate of Compliance.	
* Zoning Final Inspection is required.	
* Steps and landing can be replaced as-is/where-is.	

BP2020-081 PROJECT NAME: WHITE STAIR REPLACEMENT * SITE ADDRESS: 601 KELLY CT KILL DEVIL HILLS

EXPIRES: 09/27/2020

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

Issued By:

Contractor or Authorized Agent:

Dale A Smith

Date: 04 / 01 / 2020



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

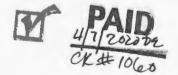
BP2020-083

PROJECT NAME: Shervin Deck and stair replacement SITE ADDRESS: 215 ORVILLE CT KILL DEVIL HILLS BUILDING ISSUED: 04/07/2020

EXPIRES: 10/04/2020

APPLICANT:	MICHEAL SHERVIN 215 Orville Crt. K D H, NC 27948			OWNER:	MICHEAL S 215 Orville K D H, NC	Crt.	
GENERAL:		Self UNKNOWI UNKNOWI 917-862-90	N, XX 00000			License: Unlicens Expires: 12/31/20	
PARCEL:							
PIN:	988405284517	,		Parcel Number:	00213	30000	
Address:	215 ORVILLE	CT KILL DEVIL	HILLS				
				Zonii	ng:		
Addition:	WRIGHT'S SH	ORES		Block	k: 0	Lot(s): 1	71
Legal Desc	ription:						
FEES:		Paid	Due				
Building Permit Fee	Fee - Minimum	\$150.00	\$0.00				
	Totals :	\$150.00	\$0.00				

PROJECT DESCRIPTION: replace rear stairs and deck to same footprint



Downit

PROJECT NAME: Shervin Deck and stair replacement SITE ADDRESS: 215 ORVILLE CT KILL DEVIL HILLS

1 -- 5

BUILDING

ISSUED: 04/07/2020

EXPIRES: 10/04/2020

DETAILS

Permit	
Name	Value
CAMA PERMIT	Ν
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	Ν
CONSTRUCTION COST	400.00
SURVEYOR NAME AND NUMBER	William S. Jones
OCCUPANCY TYPE	One & Two Family Dwelling

REQUIRED INSPECTIONS

Zoning Final

Final

Slab/Foundation/Piling

CONDITIONS

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

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

BP2020-083 PROJECT NAME: Shervin Deck and stair replacement SITE ADDRESS: 215 ORVILLE CT KILL DEVIL HILLS

Marty Shaw

8 20

BUILDING ISSUED: 04/07/2020

EXPIRES: 10/04/2020

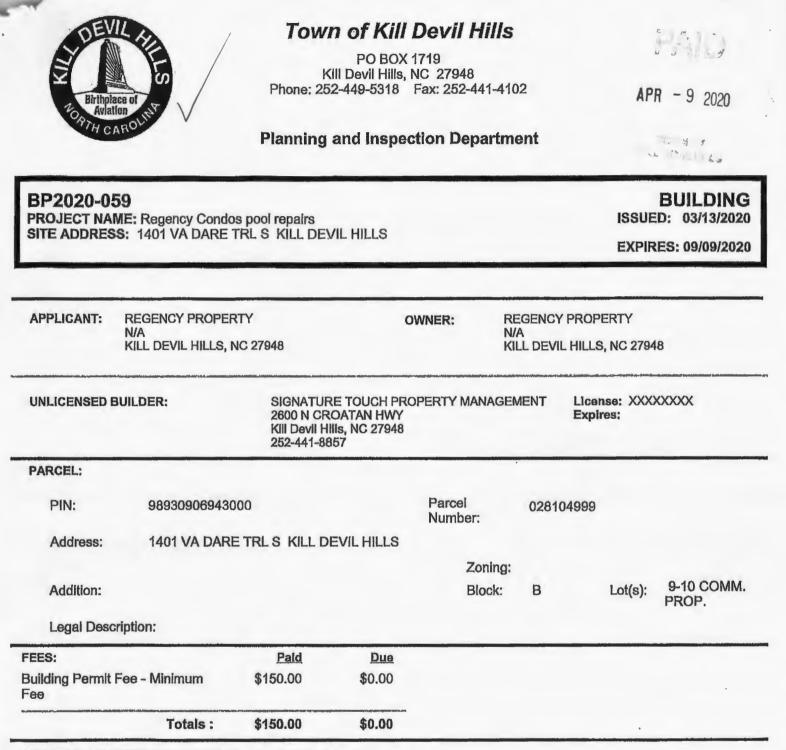
I hereby certify that I have read and examined this application and know the same to be true and correct. All provisions of Laws and Ordinances governing this type of work will be complied with whether specified herein or not. The granting of a permit does not presume to give authority to violate or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

Issued By:

Contractor or Authorized Agent: ____

AL

04 / 07 / 2020 Date:



PROJECT DESCRIPTION: Repair/replace pool deck and barrier.



PROJECT NAME: Regency Condos pool repairs SITE ADDRESS: 1401 VA DARE TRL S KILL DEVIL HILLS BUILDING ISSUED: 03/13/2020

EXPIRES: 09/09/2020

DETAILS Permit Name Value **CAMA PERMIT** N CAMA EXEMPTION N ZONING DISTRICT OIR PURPOSE Commercial Repair/Remodel VE FLOOD ZONE **BASE FLOOD ELEVATION** 11 N FINAL ELEVATION CERTIFICATE CONSTRUCTION COST 15000.00 CONSTRUCTION TYPE V OCCUPANCY TYPE Residential

REQUIRED INSPECTIONS

Zoning Final

Final

CONDITIONS

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

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.

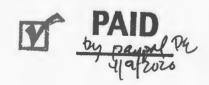
Issued By: Martin J Regan

Contractor or Authorized Agent:

Date: 04/09/2020

2.4	a, ,						
Rogin Car	STITLES	K Phone: 25	n of Kill PO BOX (ill Devil Hills, 2-449-5318 and Inspec	1719 NC 27948 Fax: 252-441	-4102	APR -	9 2020
BP2020-084 PROJECT NAM SITE ADDRESS	4 E: Terry and Jane : 322 PINE GROV	Gray /E TRL KILL DE	VIL HILLS				BUILDING ED: 04/09/2020 RES: 10/06/2020
	GRAY, JANE ELLEN P.O. BOX 999 NAGS HEAD, NC 27		C	OWNER:	GRAY, JANE P.O. BOX999 NAGS HEAD	9	
CONTRACTOR:		SAME AS UNKNOW UNKNOW				License: Sam Expires: 12/3	
PARCEL:							
PIN:	988316842333	3		Parcel Number:	027000	010	
Address:	322 PINE GRO	OVE TRL KILL D	DEVIL HILLS				
A deltat	WILLIODEDILLO			Zon	-		
Addition: Legal Descri		PINES SEC 2 8	13	Bloc	ck: D	Lot(s):	10 & 11
FEES:		Paid	Due			·····	
Building Permit Fe	ee - Minimum	\$150.00	\$0.00				
	Totals :	\$150.00	\$0.00				

PROJECT DESCRIPTION: Repair and replace steps within existing footprint



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PROJECT NAME: Terry and Jane Gray SITE ADDRESS: 322 PINE GROVE TRL KILL DEVIL HILLS BUILDING ISSUED: 04/09/2020

EXPIRES: 10/06/2020

DETAILS

Permit	
Name	Value
CAMA PERMIT	N
CAMA EXEMPTION	N
ZONING DISTRICT	RL
FRONT YARD SETBACK	30
SIDE YARD SETBACK	10
REAR YARD SETBACK	20% Depth >30
FLOOD ZONE	×
BASE FLOOD ELEVATION	11.6
FINAL ELEVATION CERTIFICATE	Ν
CONSTRUCTION COST	350.00

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.

* 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: Charles Thuman

Terry Gray **Contractor or Authorized Agent:**

Date: 04 / 09 / 2020



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

BP2020-073

PROJECT NAME: Garten Homes, LLC SITE ADDRESS: 201A VIRGINIA DARE Tr. S. KILL DEVIL HILLS BUILDING ISSUED: 03/24/2020

1550ED: 03/24/2020

EXPIRES: 09/20/2020

128 CC	rten Homes, LLC 8 Maple Ave. VINGTON, VA 244 0-962-1155	26	C	OWNER:	128 M	Homes, LL aple Ave. NGTON, VA 52-1155		
BUILDING:		PO Box 20	illsl, NC 27948	struction			nse: 1234 res: 03/22	
PARCEL:								
PIN:	988420806669			Parcel Number:	0	03668001		
Address:	201A VIRGINIA	DARE Tr. S. H	KILL DEVIL H	ILLS				
				Zoni	ing:			
Addition:	KITTY HAWK S	SHORES - REV	ISED	Bloc	:k: 1	I	Lot(s):	А
Legal Description	on:							
FEES:		Paid	Due					
Building Permit Fee Fee	- Minimum	\$150.00	\$0.00					
	Totals :	\$150.00	\$0.00					

PROJECT DESCRIPTION: Replace existing walkway/replace deck, steps, railing caps on east side of house

APR 1 4 2020

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£.

Printed by : Marty Shaw on: 03/24/2020 08:37 AM

PROJECT NAME: Garten Homes, LLC SITE ADDRESS: 201A VIRGINIA DARE Tr. S. KILL DEVIL HILLS

BUILDING ISSUED: 03/24/2020

EXPIRES: 09/20/2020

	DETAILS	
Permit		
Name	Value	
CAMA PERMIT	Y	
CAMA EXEMPTION	N	
ZONING DISTRICT	OIR	
FRONT YARD SETBACK	30	
SIDE YARD SETBACK	10	
REAR YARD SETBACK	CAMA	
STREET SIDE SETBACK	15	
FLOOD ZONE	VE	
BASE FLOOD ELEVATION	11	
FINAL ELEVATION CERTIFICATE	Ν	
CONSTRUCTION COST	22281.64	
LOT COVERAGE	33.20	
SURVEYOR NAME AND	Quible and Associates	

REQUIRED INSPECTIONS

Zoning Final

NUMBER

Final

CONDITIONS

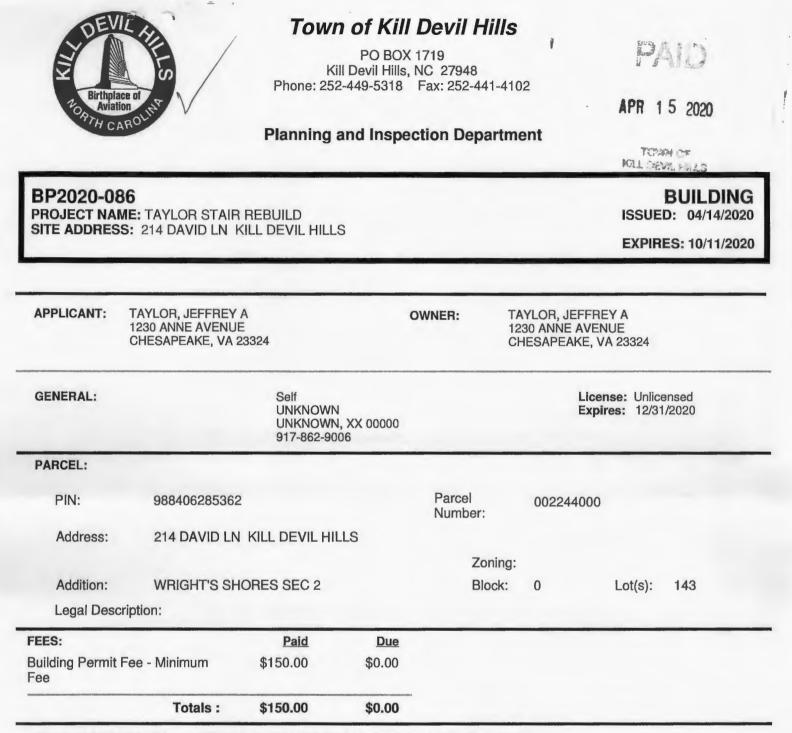
* This permit becomes null and void if work or construction authorized is not commenced within 6 months or if construction or work is suspended for a period of 12 months at any time after work has started.
* The developer shall be responsible for maintaining erosion and sediment control at the disturbed area.
* Construction must meet all aspect of Chapter 153 Zoning including lot coverage and setbacks.
* Zoning Final Inspection is required.
* Walkway cannot extend oceanward of the vegetation line.
* Must pay for CAMA Permit.

PROJECT NAME: Garten Homes, LLC SITE ADDRESS: 201A VIRGINIA DARE Tr. S. KILL DEVIL HILLS BUILDING ISSUED: 03/24/2020

EXPIRES: 09/20/2020

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: hutul Date: 4-14-2020 Contractor or Authorized Agent: _____



PROJECT DESCRIPTION: REBUILD EXTERIOR STAIR TO SECOND LEVEL DECK



BP2020-086 PROJECT NAME: TAYLOR STAIR REBUILD SITE ADDRESS: 214 DAVID LN KILL DEVIL HILLS

EXPIRES: 10/11/2020

		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	Ν			
CONSTRUCTION COST	800.00			
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
0	r work is suspended for a period of 12 months at any time after work has started.
*	Construction must meet all aspect of Chapter 153 Zoning including lot coverage and setbacks.
*	Zoning Final Inspection is required.

BP2020-086 PROJECT NAME: TAYLOR STAIR REBUILD SITE ADDRESS: 214 DAVID LN KILL DEVIL HILLS BUILDING ISSUED: 04/14/2020

EXPIRES: 10/11/2020

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. Jordan Blythe

Issued By:

Contractor or Authorized Agent:

Iton for Leyon

Date: 04 / 14 / 2020

NO PTH C	Is	Ki	PO BO) Il Devil Hills	Devil Hil (1719 , NC 27948 Fax: 252-441-	÷	PAID APR 16 2020
	Ano	Planning	and Inspe	ection Depar	tment	TOWN TY FOLL DEVIL HILLS
	35 ME: Gray Stair and c S: 307 Aycock St. V		ent			BUILDING ISSUED: 04/14/2020 EXPIRES: 10/11/2020
APPLICANT:	Gray, Michael 307 Aycock St W Kill Devil Hills, NC 27	7948		OWNER:	Gray, Micha 307 Aycock Kill Devil Hil	
CONTRACTOR	Emanuelson and Dav 6705 CROATAN HW 6705 S. Croatan Hwy nags head, nc 27959 252-261-2212	Y SOUTH y.				
RESIDENTIAL,	LIMITED:	Emanuelson 6705 CROA 6705 S. Cro nags head, 252-261-22	TAN HWY S atan Hwy. nc 27959	OUTH		License: 79801 Expires: 01/01/2021
PARCEL:						
PIN:	988517017115	5		Parcel Number:	000603	3001
Address:	307 Aycock St	. W. Kill Devil Hi	lls			
				Zoni	ng:	
Addition:	VIRGINIA DAF	RE SHORES		Bloc	k: 47	Lot(s): 17 &18
Legal Desc	ription:					
EES:		Paid	Due			
Building Permit	Fee - Minimum	\$150.00	\$0.00			

Town of Kill Dovil Hills

PROJECT DESCRIPTION: replace stairs, rails and decking



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PROJECT NAME: Gray Stair and decking replacement **SITE ADDRESS:** 307 Aycock St. W. Kill Devil Hills

BUILDING ISSUED: 04/14/2020

EXPIRES: 10/11/2020

DETAILS

Permit	
Name	Value
CAMA PERMIT	Ν
CAMA EXEMPTION	N
ZONING DISTRICT	RL
PURPOSE	Residential Repair/Remodel
FRONT YARD SETBACK	15
SIDE YARD SETBACK	6
REAR YARD SETBACK	20% Depth >30
HEALTH DEPARTMENT PERMIT #	29251
FLOOD ZONE	AE
BASE FLOOD ELEVATION	8.3
FINAL ELEVATION CERTIFICATE	N
CONSTRUCTION COST	6100.00
SURVEYOR NAME AND NUMBER	Martin Barnette L-3740
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.

BP2020-085 PROJECT NAME: Gray Stair and decking replacement SITE ADDRESS: 307 Aycock St. W. Kill Devil Hills BUILDING ISSUED: 04/14/2020

EXPIRES: 10/11/2020

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:

Jacqueline O Lewis

04 / 14 / 2020 Date:

Birthplace of Aviation Program CAROLIN	LS	K Phone: 25	PO BOX ill Devil Hills, I 2-449-5318		4102	APR	17 202	20 *.
BP2020-088 PROJECT NAME: H SITE ADDRESS: 27			/IL HILLS				ISSUE	BUILDING D: 04/16/2020 ES: 10/13/2020
5015	(S, HORACE FR NEWBYS BRID STERFIELD, VA	GE RD	c	OWNER:	5015 NE	HORACE WBYS BF ERFIELD, 1		JR
UNLICENSED BUILDE	ER:	MIKE RAD 2703 N VA Kill Devil H 252-455-09	Dare Trl ills, NC 27948				ise: xxxxx es: 04/01	
PARCEL:								
PIN:	988513221741			Parcel Number:	000	833000		
Address:	2703 VA DARE	TRL N KILL D	EVIL HILLS					
				Zoni	ng:			
Addition:	VIRGINIA DAR	E SHORES PL	AT B	Bloc	k: 0		Lot(s):	28
Legal Description	1:							
FEES:		Paid	Due					
Building Permit Fee - Fee	Minimum	\$150.00	\$0.00					
	Totals :	\$150.00	\$0.00					

PROJECT DESCRIPTION: REBUILD EXTERIOR STAIR, REPLACE DECKING AND RAILING

PROJECT NAME: HICKS STAIR AND RAILING SITE ADDRESS: 2703 VA DARE TRL N KILL DEVIL HILLS BUILDING

ISSUED: 04/16/2020

EXPIRES: 10/13/2020

		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	12		
FINAL ELEVATION CERTIFICATE	Ν		
CONSTRUCTION COST	5000.00		
LOT COVERAGE	33.30		
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.

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

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

* V-Zone Certificate shall be submitted prior to issuance of Certificate of Compliance.

BP2020-088		
PROJECT NAME:	HICKS STAIR AND RAILING	
SITE ADDRESS:	2703 VA DARE TRL N KILL DEVIL HILLS	S

BUILDING ISSUED: 04/16/2020

EXPIRES: 10/13/2020

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. Jordon Blythe

Issued By:

Contractor or Authorized Agent:

MRODAN

Date: 04 / 16 / 2020

YDEV	HIE	Tow	PO BOX	Devil Hil	ls	FAI)
Birthpla To A TH C	ace of		ill Devil Hills, I		4102	APR 20	2020
ITH C	AROL	Planning	and Inspec	ction Depart	ment	TOUR C	
	87 ME: Romaniello Bulk SS: 3124 BAY DR K		3			ISSUEI	BUILDING D: 04/20/2020 ES: 10/17/2020
APPLICANT:	ROMANIELLO, LEO 327 HIGHLAND AVE DOWNINGTOWN, P		c	WNER:	327 HIGHL	LO, LEONARD & AND AVE TOWN, PA 19335	
CONTRACTOR	R: AFFORDABLE BILL 300 West Albermark nags head, nc 27959 252-480-0000	Drive					
BUILDER:		AFFORDAU 300 West A nags head, 252-480-00	Ibermarle Drive nc 27959	9		License: Unlice Expires: 12/31	
PARCEL:							
PIN:	987520822380)		Parcel Number:	00107	1000	
Address:	3124 BAY DR	KILL DEVIL HIL	LS				
A .1. !!!!		50		Zonin	-	1	100
Addition: Legal Desc	MOOR SHOR	E3		Block	: 0	Lot(s):	136
FEES:	-	Paid	Due				
Building Permit	Fee - Minimum	\$150.00	\$0.00				
Fee							

PROJECT DESCRIPTION: construct 100' bulkhead along sound



PROJECT NAME: Romaniello Bulkhead SITE ADDRESS: 3124 BAY DR KILL DEVIL HILLS BUILDING ISSUED: 04/20/2020

EXPIRES: 10/17/2020

	DETAILS	
Permit		
Name	Value	
CAMA PERMIT	Υ	
CAMA EXEMPTION	N	
ZONING DISTRICT	RL	
PURPOSE	Residential Accessory	
FRONT YARD SETBACK	30	
SIDE YARD SETBACK	10	
REAR YARD SETBACK	CAMA	
FLOOD ZONE	AE	
BASE FLOOD ELEVATION	8.3	
FINAL ELEVATION CERTIFICATE	Ν	
CONSTRUCTION COST	14500.00	
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.

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.	
Master Chain	

Issued By:

Contractor or Authorized Agent:

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William Eger

04 / 20 / 2020 Date:

DEVIL A
The states
Birthplace of Aviation Prin CAROLINY

Town of Kill Devil Hills

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

Planning and Inspection Department

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1410

APR 17 2020

BP2020-091

PROJECT NAME: Wendy Walker SITE ADDRESS: 400 FIFTH ST W KILL DEVIL HILLS BUILDING ISSUED: 04/16/2020

EXPIRES: 10/13/2020

1	Brown and Sons 118 Par Four GRANDY, NC 27939 252-457-5185		OWNER:				
BUILDING: Brown and Sons 118 Par Four GRANDY, NC 27939 252-457-5185			our NC 27939		6 /2021		
PARCEL:							
PIN:	988405189764	4		Parcel Number:	00206	65000	
Address:	400 FIFTH ST	W KILL DEVIL	HILLS				
				Zon	ing:		
Addition:	WRIGHT'S SH	IORES		Bloc	ck: 0	Lot(s):	11
Legal Descrip	otion:						
FEES:		Paid	Due				
Building Permit Fe Fee	e - Minimum	\$150.00	\$0.00				
	Totals :	\$150.00	\$0.00	nation			

PROJECT DESCRIPTION: Replace 3 pilings



BP2020-091 PROJECT NAME: Wendy Walker SITE ADDRESS: 400 FIFTH ST W KILL DEVIL HILLS

ISSUED: 04/16/2020

EXPIRES: 10/13/2020

DETAILS

Fermit	
Name	Value
CAMA PERMIT	N
CAMA EXEMPTION	Ν
ZONING DISTRICT	RL
PURPOSE	Residential Repair/Remodel
FLOOD ZONE	AE
BASE FLOOD ELEVATION	8
FINAL ELEVATION CERTIFICATE	Ν
CONSTRUCTION COST	3350.00

REQUIRED INSPECTIONS

Slab/Foundation/Piling

Final

Zoning Final

Permit

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.

* Pilings notched more than 50% are required to have metal straps on each side of piling.

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:

51.

Charles Thuman

Steven Brown

Date: 04 / 16 / 2020

Contractor or Authorized Agent:



PROJECT DESCRIPTION: Replace roof, repair leak damage, replace handrails, clean and stain house

BP2020-089 PROJECT NAME: Bruce McDonald SITE ADDRESS: 405 SEAGULL CT KILL DEVIL HILLS

EXPIRES: 10/13/2020

		DETAILS	
Permit			
Name	Value		
CAMA PERMIT	N		
CAMA EXEMPTION	N		
ZONING DISTRICT	RL		
PURPOSE	Modular Home Repair/Remodel		
FLOOD ZONE	AE		
BASE FLOOD ELEVATION	9		
FINAL ELEVATION CERTIFICATE	Ν		
CONSTRUCTION COST	31680.00		

REQUIRED INSPECTIONS

Zoning Final

Final

CONDITIONS

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

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

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Issued By:

Charles Thuman

Contractor or Authorized Agent:

Date: 04 / 20 / 2020



Town of Kill Devil Hills

102 Town Hall Drive PO BOX 1719 Kill Devil Hills, NC 27948 Phone: 252-449-5318 Fax: 252-441-4102 www.kdhnc.com

Kill Devil Hills Planning and Inspection Department

FDP2020-226 PROJECT NAME: Bruce McDonald SITE ADDRESS: 405 SEAGULL CT KILL DEVIL HILLS

FLOOD DEVELOPMENT

ISSUED: 04/16/2020

PARENT PERMIT #: BP2020-089

APPLICANT:	PLICANT: Sea Country Homes OBX, LLC OW 1508 Captains Ln. Kill Devil Hills, NC 27948			VNER: MACDONALD, JOHN BRUCE 405 SEAGULL CT KILL DEVIL HILLS, NC 27948 252-202-9805				
GENERAL BUILDING INTERMEDIATE:		Sea Country Homes OBX, LLC 1508 Captains Ln. Kill Devil Hills, NC 27948			License: 73029 Expires: 12/31/2020			
GENERAL BUILDING INTERMEDIATE:		Sea Country Homes OBX, LLC 1508 Captains Ln. Kill Devil Hills, NC 27948				License: 73029 Expires: 12/31/2020		
PARCEL:				<u></u>				
PIN:	988414334776			Parcel Number:	003	574000		
Address:	405 SEAGULL CT	KILL DEVIL	HILLS					
				Zoni	ing:			
Addition:	LANDING SECTIO	N 2, THE		Bloc	k: 0	Lot(s): 69)	
Legal Des	cription:							
EES:		Paid	Due					
	Totals :							
PROJECT DES	CRIPTION: Replace roo	f, repair leak	damage, repl	ace handrails	, clean and	d stain house		
		, topun iour	aumago, ropi		, oroun and			
			DETAILS					

REQUIRED INSPECTIONS

Final

CONDITIONS

FDP2020-226 PROJECT NAME: Bruce McDonald SITE ADDRESS: 405 SEAGULL CT KILL DEVIL HILLS

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

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

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

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

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

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

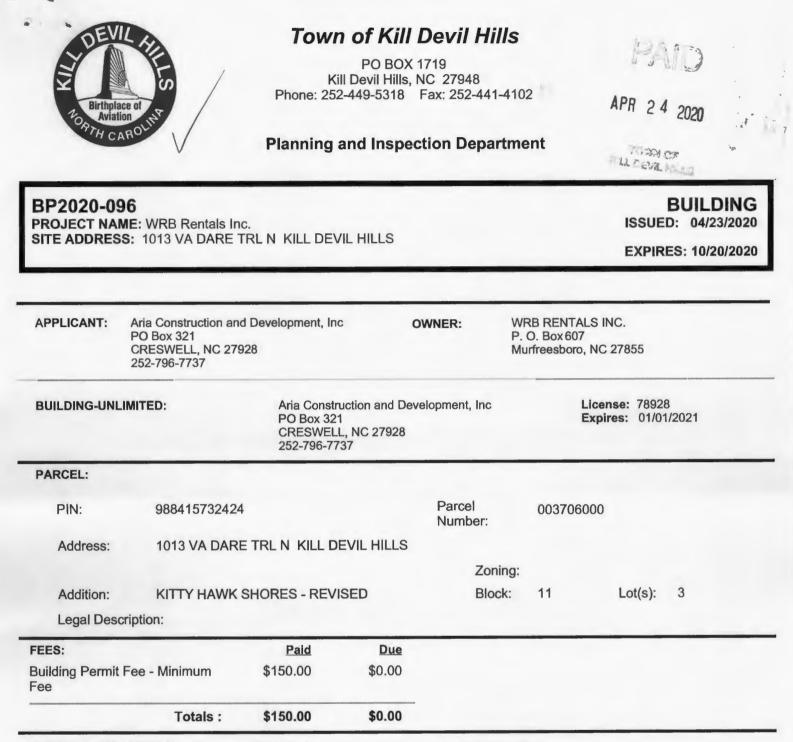
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04 / 20 / 2020

Date

Applicant Signature

Printed by : CTHUMAN on: 04/16/2020 12:20 PM



PROJECT DESCRIPTION: Replace 16' X 16' deck, steps, stringers, decking and rails



PROJECT NAME: WRB Rentals Inc. SITE ADDRESS: 1013 VA DARE TRL N KILL DEVIL HILLS BUILDING ISSUED: 04/23/2020

EXPIRES: 10/20/2020

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
FINAL ELEVATION CERTIFICATE	Ν
CONSTRUCTION COST	2500.00
SURVEYOR NAME AND NUMBER	Styons Surveying

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.

BP2020-096 PROJECT NAME: WRB Rentals Inc. SITE ADDRESS: 1013 VA DARE TRL N KILL DEVIL HILLS

Issued By:

BUILDING ISSUED: 04/23/2020

EXPIRES: 10/20/2020

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.

Contractor or Authorized Agent: Brad alefand Date: 4-23-20

Page 3 of 3

Printed by : Jordan Blythe on: 04/23/2020 11:14 AM



Town of Kill Devil Hills

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

APR 2 4 2020

Planning and Inspection Department

TONOF

BP2020-094

PROJECT NAME: Christopher Gilmore SITE ADDRESS: 506 Suffolk Street Kill Devil Hills

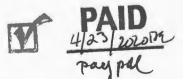
EXPIRES: 10/19/2020

ISSUED: 04/22/2020

BUILDING

APPLICANT:	Gilmore, Christophe 302 Deer Spring Lar Smithfield, VA 23430 757-788-1837	ne		OWNER:	Gilmore, Chri 302 Deer Spr Smithfield, V/ 757-788-183	ring Lane A 23430	
UNLIMITED BU	JILDING:	Finch & Co 116 Sandy kitty hawk, 252-261-87	nc 27949			License: 52567 Expires:	,
PARCEL:							
PIN:	98840509987	5		Parcel Number:	001127	000	
Address:	506 Suffolk St	reet Kill Devil Hi	lls				
				Zoni	ng:		
Addition:	AVALON BEA	CH ANNEX 2 &	3	Bloc	k: 0	Lot(s):	919
Legal Desc	cription:						
FEES:		Paid	Due				
Building Permit Fee	Fee - Minimum	\$150.00	\$0.00				
	Totals :	\$150.00	\$0.00	500A			

PROJECT DESCRIPTION: Replace stairs/remove roof deck and stairs/fill in handrail opening on lower deck



PROJECT NAME: Christopher Gilmore SITE ADDRESS: 506 Suffolk Street Kill Devil Hills BUILDING ISSUED: 04/22/2020

EXPIRES: 10/19/2020

	DETAILS
Permit	
Name	Value
CAMA PERMIT	Ν
CAMA EXEMPTION	N
ZONING DISTRICT	RL
PURPOSE	Residential Repair/Remodel
FLOOD ZONE	AE
BASE FLOOD ELEVATION	8
FINAL ELEVATION CERTIFICATE	Ν
CONSTRUCTION COST	2400.00
	REQUIRED INSPECTIONS
Zoning Final	Final
	CONDITIONS
work is suspended for a period	I void if work or construction authorized is not commenced within 6 months or if construction od of 12 months at any time after work has started.
Construction must meet all as	spect 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: Charles Thuman

Christopher Gilmore

Date: 04 / 23 / 2020

Contractor or Authorized Agent: _

Y DEVI	THES	к	PO BOX ill Devil Hills,			P	AID
Birthplac Aviatio	ROLINA	Planning	and Inspe	ction Depart	ment		2 4 2020
	5 IE: Newsome retair 5: 1419 SHAY ST				-	ISSUE	BUILDING D: 04/22/2020 ES: 10/19/2020
	NEWSOME, KEITH 806 Dean Street Kill Devil Hills, NC 27	7948		OWNER:	NEWSOME, I 806 Dean Stro Kill Devil Hills	eet	
CONTRACTOR:	W M DUNN CONST PO Box 201 Powels Point, NC 27 252-207-8964						
BUILDER UNLIM	IITED:	PO Box 20	nt, NC 27966	TION LLC		License: 7041 Expires: 01/02	
PARCEL:							
PIN:	98831674939	1		Parcel Number:	0273540	002	
Address:	1419 SHAY S	T KILL DEVIL H	ILLS				
				Zonin			
Addition:		EACH EXTENDE	D	Block	:: 4A	Lot(s):	1
Legal Descr	iption:						
FEES:		Paid	Due				
Building Permit F Fee	ee - Minimum	\$150.00	\$0.00				
	Totals :	\$150.00	\$0.00				

PROJECT DESCRIPTION: retaining wall and sidewalk on street side of house under construction

Permit

PROJECT NAME: Newsome retaining wall and sidewalk SITE ADDRESS: 1419 SHAY ST KILL DEVIL HILLS

BUILDING ISSUED: 04/22/2020

EXPIRES: 10/19/2020

DETAILS

Permit	
Name	Value
ZONING DISTRICT	RL
FRONT YARD SETBACK	15
REAR YARD SETBACK	20% Depth >30
SIDE YARD SETBACK	6
STREET SIDE SETBACK	7.5
CAMA PERMIT	Ν
CAMA EXEMPTION	Ν
FLOOD ZONE	Х
CONSTRUCTION COST	2500.00
LOT COVERAGE	33.80
SURVEYOR NAME AND NUMBER	John Mayne L-4567
CULVERT	Ν
DRIVEWAY INVERT 2	Ν

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.

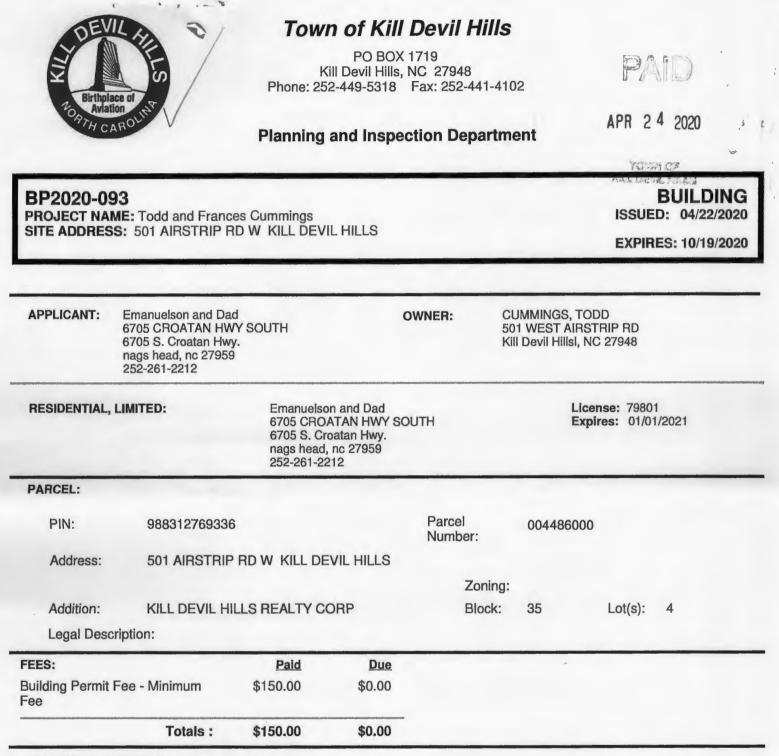
I hereby certify that I have read and examined this application and know the same to be true and correct. All provisions of Laws and Ordinances governing this type of work will be complied with whether specified herein or not. The granting of a permit does not presume to give authority to violate or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

Issued By:

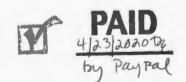
Mike Dunn

04/23/2020 Date:

Contractor or Authorized Agent:



PROJECT DESCRIPTION: Replace 6 deck pilings



PROJECT NAME: Todd and Frances Cummings SITE ADDRESS: 501 AIRSTRIP RD W KILL DEVIL HILLS

1 1 . ma

BUILDING ISSUED: 04/22/2020

EXPIRES: 10/19/2020

	DETAILS	
Permit		
Name	Value	
CAMA PERMIT	N	
CAMA EXEMPTION	Ν	
ZONING DISTRICT	RL	
PURPOSE	Residential Repair/Remodel	
FLOOD ZONE	X	
FINAL ELEVATION CERTIFICATE	Ν	
CONSTRUCTION COST	4800.00	
	REQUIRED INSPECTIONS	
Zoning Final	Final	

CONDITIONS

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

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

Jacqueline O Lewis

Issued By: Charles Thuman

Contractor or Authorized Agent:

Date: 04 / 22 / 2020

NOEV NOEV No Aviation	ROLINP ROLINP	K Phone: 25	PO BOX (ill Devil Hills, 2-449-5318		-4102 #	APR 2	2 2020
	0 ME: Breakers Condo S: 1801 VA DARE			kets		ISSU	BUILDING ED: 04/20/2020 RES: 10/17/2020
APPLICANT:	BREAKERS PROPE 1801 S. Va. Dare Tr. Kill Devil Hills, NC 27			OWNER:	BREAKERS 1801 S. Va. Kill Devil Hil		
GENERAL:		Self UNKNOWN UNKNOWN 917-862-90	N, XX 00000			License: Unlie Expires: 12/3	
PARCEL:							
PIN:	989309155170	000		Parcel Number:	02813	1999	
Address:	1801 VA DAR	E TRL S KILL D	EVIL HILLS				
				Zoni	ng:		
Addition:				Bloc	k: 0	Lot(s):	COMMON PROPERTY
Legal Desci	ription:						
FEES:		Paid	Due				
Building Permit F	Fee - Minimum	\$150.00	\$0.00				
Fee							

PROJECT DESCRIPTION: replace railings and pickets on existing dune deck

PAID M

PROJECT NAME: Breakers Condos Dune Deck Railing and Pickets **SITE ADDRESS:** 1801 VA DARE TRL S KILL DEVIL HILLS ISSUED: 04/20/2020

EXPIRES: 10/17/2020

DETAILS

Permit	
Name	Value
CAMA PERMIT	Ν
CAMA EXEMPTION	Υ
ZONING DISTRICT	OIR
PURPOSE	Residential Repair/Remodel
FRONT YARD SETBACK	30
SIDE YARD SETBACK	12
REAR YARD SETBACK	CAMA
FLOOD ZONE	VE
BASE FLOOD ELEVATION	11.0
FINAL ELEVATION CERTIFICATE	Ν
CONSTRUCTION COST	1500.00
SURVEYOR NAME AND NUMBER	William S. Jones L-2532
OCCUPANCY TYPE	Residential

REQUIRED INSPECTIONS

Zoning Final

Final

CONDITIONS

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

* All guard rails, hand rails, and stair construction shall meet the requirements of the 2018 NC Building Code.

EXPIRES: 10/17/2020

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. Marty Shaw

Issued By:

Contractor or Authorized Agent:

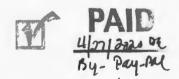
the forme

Date: 04 / 20 / 2020

Printed by : Marty Shaw on: 04/20/2020 03:38 PM

N DEV N DEV N DEV N DEV N DEV N DEV N DEV	ROLINP	K Phone: 25	PO BOX ill Devil Hills, 2-449-5318		-4102	PA10 APR 27 202	
	7 ME: ANDES STAIR S: 2027 SMITHFIE		/IL HILLS			ISSUED:	JILDING 04/24/2020 10/21/2020
APPLICANT:	ANDES, JEFFREY 2112 COLWYN BAY MIDLOTHIAN, VA 2 804-405-0787			OWNER:		VYN BAY DR AN, VA 23112	
BUILDING UNL	MITED:	Gibbs, Clar Po Box 238 Manteo, NG	37			License: 76990 Expires: 01/01/20	21
PARCEL:							
PIN:	98840519449	В		Parcel Number:	00095	58000	
Address:	2027 SMITHF	IELD ST KILL D	EVIL HILLS	Zoni	ing:		
Addition:	AVALON BEA	CH ANNEX 2 &	3	Bloc	-	Lot(s): 1	254
Legal Desc	ription:						
FEES:		Paid	Due				
Building Permit	Fee - Minimum	\$150.00	\$0.00				
			And when the state of the second s				

PROJECT DESCRIPTION: REBUILD FRONT EXTERIOR STAIR AND RAILING



PROJECT NAME: ANDES STAIR REBUILD SITE ADDRESS: 2027 SMITHFIELD ST KILL DEVIL HILLS BUILDING ISSUED: 04/24/2020

EXPIRES: 10/21/2020

DETAILS Permit Name Value CAMA PERMIT N CAMA EXEMPTION N ZONING DISTRICT RI PURPOSE **Residential** Repair/Remodel FRONT YARD SETBACK 15 6 SIDE YARD SETBACK REAR YARD SETBACK 20% Depth >30 FLOOD ZONE X FINAL ELEVATION N CERTIFICATE CONSTRUCTION COST 4300.00 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.

Tordon Bluthe

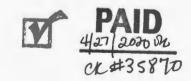
I hereby certify that I have read and examined this application and know the same to be true and correct. All provisions of Laws and Ordinances governing this type of work will be complied with whether specified herein or not. The granting of a permit does not presume to give authority to violate or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

Issued By:		
Contractor or Authorized Agent:	Clarence Gibbs	Date: 04 / 24 / 2020

Printed by : Jordan Blythe on: 04/24/2020 09:01 AM

TO BITHPL TO AVIA	AROLINF	K Phone: 25	PO BOX Ill Devil Hills, 2-449-5318		4102		2 7 2020
	98 ME: Catherine Vand S: 1933 VA DARE		VIL HILLS				BUILDING ED: 04/24/2020 RES: 10/21/2020
APPLICANT:	FIVE STAR CONST 1004 INDIAN DR Kill Devil Hills, NC 2 252-489-1252		c	OWNER:	VANDERHOO 56 RAVINE A CALDWELL, I	VENUE	IE
GENERAL, UN	LICENSED:	1004 INDI/	ills, NC 27948	ION		icense: XXX Expires:	
PARCEL:			<u></u>				
PIN:	988406399713	3		Parcel Number:	0028070	000	
Address:	1933 VA DAR	E TRL N KILL D	EVIL HILLS				
				Zoni	ng:		
Addition:	Croatan Shore	s Amended		Bloc	k: E	Lot(s):	3
Legal Desc	cription:						
FEES:	-	Paid	Due				
	Fee - Minimum	\$150.00	\$0.00				
Building Permit Fee							

PROJECT DESCRIPTION: Replace windows and siding



PROJECT NAME: Catherine Vanderhoof SITE ADDRESS: 1933 VA DARE TRL N KILL DEVIL HILLS

P .. 1

BUILDING ISSUED: 04/24/2020

EXPIRES: 10/21/2020

	DETAILS
Permit	
Name	Value
CAMA PERMIT	Ν
CAMA EXEMPTION	N
ZONING DISTRICT	OIR
PURPOSE	Modular Home Repair/Remodel
FLOOD ZONE	VE
FINAL ELEVATION CERTIFICATE	N
CONSTRUCTION COST	3000.00
	REQUIRED INSPECTIONS
r work is suspended for a per	Final CONDITIONS and void if work or construction authorized is not commenced within 6 months or if construction priod of 12 months at any time after work has started.
This permit becomes null an work is suspended for a per Must comply with Wind Borr hereby certify that I have all provisions of Laws an specified herein or not. T	Final CONDITIONS nd void if work or construction authorized is not commenced within 6 months or if construction riod of 12 months at any time after work has started. ne Debris requirements as defined in NCBC R301.2.1.2 and NCBC 1609.2. We read and examined this application and know the same to be true and correct nd Ordinances governing this type of work will be complied with whether The granting of a permit does not presume to give authority to violate or cancel
This permit becomes null an r work is suspended for a per Must comply with Wind Borr hereby certify that I have All provisions of Laws an specified herein or not. T	Final CONDITIONS nd void if work or construction authorized is not commenced within 6 months or if construction riod of 12 months at any time after work has started. ne Debris requirements as defined in NCBC R301.2.1.2 and NCBC 1609.2. We read and examined this application and know the same to be true and correct nd Ordinances governing this type of work will be complied with whether The granting of a permit does not presume to give authority to violate or cancel

P P P P P P P P P P P P P P P P P P P	STILL'S	K Phone: 25	PO BOX ill Devil Hills, 2-449-5318		41'02	PAI APR 27	2020
BP2020-099 PROJECT NAMI SITE ADDRESS		ST KILL DEVIL	. HILLS		· · · · · · · · · · · · · · · · · · ·	ISSUE	BUILDING D: 04/24/2020 ES: 10/21/2020
	Emanuelson and Da 6705 CROATAN HV 6705 S. Croatan Hw nags head, nc 2795 252-261-2212	VY SOUTH Iy.		OWNER:	Lambert, M 1239 Rever Chalfont, P 717-650-21	re Drive A 18914	
RESIDENTIAL, LI	MITED:	Emanuelso 6705 CRO/ 6705 S. Cro nags head, 252-261-22	ATAN HWY So batan Hwy. nc 27959	OUTH		License: 7980 Expires: 01/0	
PARCEL:							
PIN:	98840508196	7		Parcel Number:	00087	2001	
Address:	2034 HAMPTO	ON ST KILL DE	/IL HILLS				
				Zoni	ng:		
Addition:		CH ANNEX 2 & 3	3	Bloc	k: 0	Lot(s):	1131
Legal Descri	otion:						
FEES:		Paid	Due				
Building Permit Fo	ee - Minimum	\$150.00	\$0.00				
Fee							

PROJECT DESCRIPTION: Replace 4 pilings

 \mathcal{T}_{i}

PROJECT NAME: Mary Lambert SITE ADDRESS: 2034 HAMPTON ST KILL DEVIL HILLS

BUILDING ISSUED: 04/24/2020

EXPIRES: 10/21/2020

	DETAILS	
Permit		
Name	Value	
CAMA PERMIT	Ν	
CAMA EXEMPTION	N	
ZONING DISTRICT	RL	
PURPOSE	Modular Home Repair/Remodel	
FLOOD ZONE	AE	
FINAL ELEVATION CERTIFICATE	Ν	
CONSTRUCTION COST	4850.00	
	REQUIRED INSPECT	TIONS
Slab/Foundation/Piling	Final	
Zoning Final		
	CONDITIONS	
		not commenced within 6 months or if construction
r work is suspended for a per	iod of 12 months at any time after work ha	s started.
		and know the same to be true and correct work will be complied with whether
specified herein or not. T	he granting of a permit does not pre	sume to give authority to violate or cancel ction or the performance of construction.
ssued By: Charles	es Thuman	
Contractor or Authorized	Jacqueline O Lewis	Date: 04 / 24 / 2020



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

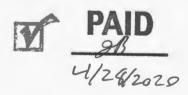
BP2020-102

PROJECT NAME: COLEMAN EXTERIOR STAIR AND RAILING SITE ADDRESS: 1819 VA DARE TRL N KILL DEVIL HILLS BUILDING ISSUED: 04/27/2020

EXPIRES: 10/24/2020

APPLICANT:	Wanda & Robert Cole 500 Sterling Rd. Virginia Beach, VA 23		OV	5	Vanda & Robert 6 600 Sterling Rd. /irginia Beach, V		
CONTRACTOR:		229 Eagle I	llsl, NC 27948			nse: LEGA i res: 12/01	CY UNKNOWN /2021
PARCEL:							
PIN:	988406485524			Parcel Number:	002798000		
Address:	1819 VA DARE	TRL N KILL D	EVIL HILLS				
				Zoning	:		
Addition:	Croatan Shores	Amended		Block:	D	Lot(s):	10
Legal Descr	iption:						
EES:		Paid	Due				
Building Permit F Fee	ee - Minimum	\$150.00	\$0.00				
	Totals :	\$150.00	\$0.00				

SEATING



3

BP2020-102

Downit

PROJECT NAME: COLEMAN EXTERIOR STAIR AND RAILING SITE ADDRESS: 1819 VA DARE TRL N KILL DEVIL HILLS

BUILDING ISSUED: 04/27/2020

EXPIRES: 10/24/2020

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	Ν
CONSTRUCTION COST	2100.00
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
C	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.
*	Development must meet all aspects of Chapter 151 Flood Damage Prevention Ordinance including use and elevation.
*	V-Zone Certificate shall be submitted prior to issuance of Certificate of Compliance

v-zone Certificate shall be submitted prior to issuance of Certificate of Compliance.

BP2020-102	
PROJECT NAME: COLEMAN EXTERIOR STAIR AND RAILING	
SITE ADDRESS: 1819 VA DARE TRL N KILL DEVIL HILLS	

BUILDING ISSUED: 04/27/2020

EXPIRES: 10/24/2020

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

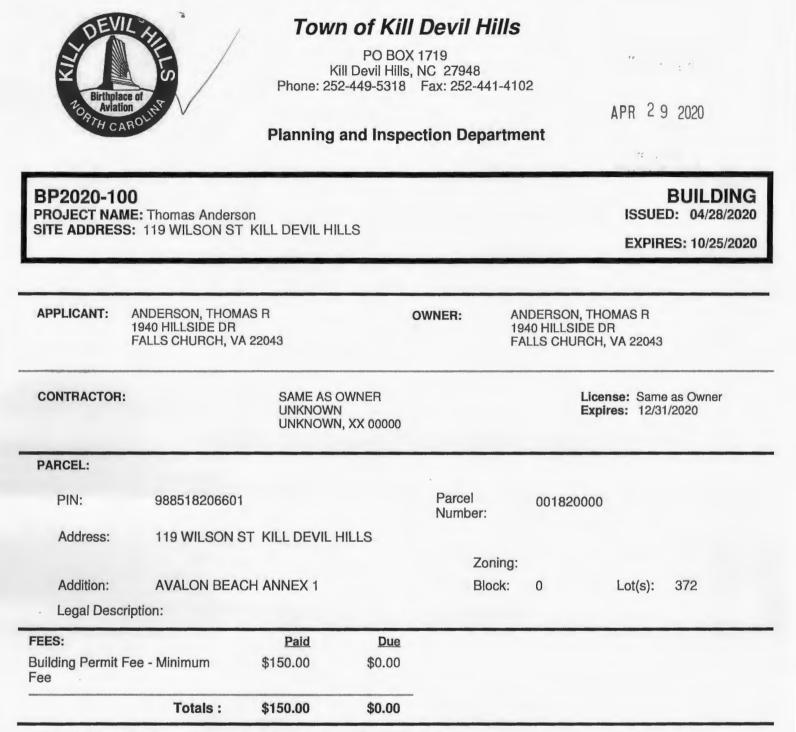
Issued By:

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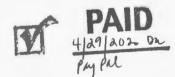
Contractor or Authorized Agent:

phil moore

04 / 27 / 2020 Date:



PROJECT DESCRIPTION: Replace decking, stairs and handrails within existing footprint



ISSUED: 04/28/2020

EXPIRES: 10/25/2020

D	E	ГА	IL	S

Permit	
Name	Value
CAMA PERMIT	N
CAMA EXEMPTION	Ν
ZONING DISTRICT	RL
PURPOSE	Residential Repair/Remodel
FLOOD ZONE	AE
FINAL ELEVATION CERTIFICATE	Ν
CONSTRUCTION COST	1000.00

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

* Zoning Final Inspection is required.

* Stairs must be built with in the original footprint

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:

Charles Thuman

Contractor or Authorized Agent:

Thomas Anderson

Date: 04 / 28 / 2020



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

BP2020-105

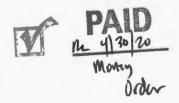
PROJECT NAME: Daniels Deck Replacement SITE ADDRESS: 103 BAKER AVE KILL DEVIL HILLS BUILDING ISSUED: 04/30/2020

1330LD. 04/30/2020

EXPIRES: 10/27/2020

F	DANIELS, GRAHAM (O BOX 580 CHESTER, VA 23831		(OWNER:	POBOX 5	GRAHAM C 580 , VA 23831	
4	PARAGON DECKS 407 Canal Drive Kill Devil Hills, NC 279	48					
REMODEL:		PARAGON 407 Canal Kill Devil H				License: L Expires: 1	EGACY UNKNOWN 2/30/2030
PARCEL:							
PIN:	988419627023			Parcel Number:	0039	70000	
Address:	103 BAKER AV	E KILL DEVIL	HILLS				
				Zoni	ng:		
Addition:	KITTY HAWK S	HORES - REV	ISED	Bloc	k: 43	Lot(s	s): 14
Legal Descrip	otion:						
FEES:		Paid	Due				
Building Permit Fe Fee	ee - Minimum	\$150.00	\$0.00				
	Totals :	\$150.00	\$0.00				

PROJECT DESCRIPTION: Replace rear and side deck, replace stairs and outdoor shower stall



PROJECT NAME: Daniels Deck Replacement SITE ADDRESS: 103 BAKER AVE KILL DEVIL HILLS BUILDING

ISSUED: 04/30/2020

EXPIRES: 10/27/2020

DETAILS

Permit	
Name	Value
CAMA PERMIT	Ν
CAMA EXEMPTION	Ν
ZONING DISTRICT	RL
PURPOSE	Residential Repair/Remodel
FRONT YARD SETBACK	15
SIDE YARD SETBACK	6
REAR YARD SETBACK	20% Depth >30
HEALTH DEPARTMENT PERMIT #	29617
FLOOD ZONE	AE
BASE FLOOD ELEVATION	8.3
FINAL ELEVATION CERTIFICATE	Ν
CONSTRUCTION COST	19980.00
LOT COVERAGE	39.70
SURVEYOR NAME AND NUMBER	Doug Styons L-3227
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.

* 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.

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

BP2020-105 PROJECT NAME: Daniels Deck Replacement SITE ADDRESS: 103 BAKER AVE KILL DEVIL HILLS BUILDING ISSUED: 04/30/2020

EXPIRES: 10/27/2020

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

Contractor or Authorized Agent:

2 - - 5

PS4

04 / 30 / 2020 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

APR - 1 2020

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TO NE

PAID

MC2020-058

PROJECT NAME: Kilburn HVAC SITE ADDRESS: 1306 Devonshire Rd. Kill Devil Hills MECHANICAL ISSUED: 03/31/2020

EXPIRES: 09/27/2020

APPLICANT:	Kilburn, Heather 1306 Devonshire Rd Kill Devil Hills, NC 27			OWNER:	Kilburn, He 1306 Devo Kill Devil H	
MECHANICAL:	an a	R A HOY PO Box 26 Kitty Hawk, 252-261-20	NC 27949			License: 13056 Expires: 12/31/2020
PARCEL:						
PIN:	988310279410	056		Parcel Number:		
Address:	1306 Devonsh	ire Rd. Kill Devil	Hills			
				Zonin	g: G&I	
Addition:	Bermuda Bay			Block		Lot(s):
Legal Desc	ription:					
FEES:		Paid	Due			
Mechanical Perr	mit Fee	\$150.00	\$0.00			
	Totals :	\$150.00	\$0.00			

PROJECT DESCRIPTION: C/O 1.5 Ton & 2 Ton Hvac Systems

Printed by : CTHUMAN on: 03/31/2020 09:45 AM

Page 1 of 2

Dan 10: 000-040-000-0004E00-0E04EE--04-040-0-4-0

MC2020-058 PROJECT NAME: Kilburn HVAC SITE ADDRESS: 1306 Devonshire Rd. Kill Devil Hills

1-1-1

MECHANICAL ISSUED: 03/31/2020

EXPIRES: 09/27/2020

r work is suspended for a period of 12 months at any time after work has started.	Name Value PURPOSE Residential Repair/Remodel CONSTRUCTION COST 10296.00 CONSTRUCTION TYPE V FLOOD ZONE AE BASE FLOOD ELEVATION 8 NATURAL GAS SIGNOFF N REQUIRED INSPECTIONS Final CONDITIONS This permit becomes null and void if work or construction authorized is not commenced within 6 months or if construction r work is suspended for a period of 12 months at any time after work has started. 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
PURPOSE Residential Repair/Remodel CONSTRUCTION COST 10296.00 CONSTRUCTION TYPE V FLOOD ZONE AE BASE FLOOD ELEVATION 8 NATURAL GAS SIGNOFF N	PURPOSE Residential Repair/Remodel CONSTRUCTION COST 10296.00 CONSTRUCTION TYPE V FLOOD ZONE AE BASE FLOOD ELEVATION 8 NATURAL GAS SIGNOFF N REQUIRED INSPECTIONS Final This permit becomes null and void if work or construction authorized is not commenced within 6 months or if construction work is suspended for a period of 12 months at any time after work has started.
Repair/Remodel CONSTRUCTION COST 10296.00 CONSTRUCTION TYPE V FLOOD ZONE AE BASE FLOOD ELEVATION 8 NATURAL GAS SIGNOFF N REQUIRED INSPECTIONS Final CONDITIONS This permit becomes null and void if work or construction authorized is not commenced within 6 months or if const work is suspended for a period of 12 months at any time after work has started. hereby certify that I have read and examined this application and know the same to be true and or all provisions of Laws and Ordinances governing this type of work will be complied with whether pecified herein or not. The granting of a permit does not presume to give authority to violate or che provisions of any other state/local law regulating construction or the performance of construction assued By:	Repair/Remodel CONSTRUCTION COST 10296.00 CONSTRUCTION TYPE V FLOOD ZONE AE BASE FLOOD ELEVATION 8 NATURAL GAS SIGNOFF N REQUIRED INSPECTIONS Final CONDITIONS This permit becomes null and void if work or construction authorized is not commenced within 6 months or if construction work is suspended for a period of 12 months at any time after work has started. hereby certify that I have read and examined this application and know the same to be true and correct and provisions of Laws and Ordinances governing this type of work will be complied with whether
CONSTRUCTION TYPE V FLOOD ZONE AE BASE FLOOD ELEVATION 8 NATURAL GAS SIGNOFF N REQUIRED INSPECTIONS Final CONDITIONS This permit becomes null and void if work or construction authorized is not commenced within 6 months or if const work is suspended for a period of 12 months at any time after work has started. hereby certify that I have read and examined this application and know the same to be true and of All provisions of Laws and Ordinances governing this type of work will be complied with whether pecified herein or not. The granting of a permit does not presume to give authority to violate or of the provisions of any other state/local law regulating construction or the performance of construction ssued By:	CONSTRUCTION TYPE V FLOOD ZONE AE BASE FLOOD ELEVATION 8 NATURAL GAS SIGNOFF N REQUIRED INSPECTIONS Final Final CONDITIONS This permit becomes null and void if work or construction authorized is not commenced within 6 months or if construction work is suspended for a period of 12 months at any time after work has started.
FLOOD ZONE AE BASE FLOOD ELEVATION 8 NATURAL GAS SIGNOFF N REQUIRED INSPECTIONS Final CONDITIONS This permit becomes null and void if work or construction authorized is not commenced within 6 months or if const work is suspended for a period of 12 months at any time after work has started. hereby certify that I have read and examined this application and know the same to be true and coll provisions of Laws and Ordinances governing this type of work will be complied with whether pecified herein or not. The granting of a permit does not presume to give authority to violate or one provisions of any other state/local law regulating construction or the performance of constructions Sweed By: MARCEY BAMM	FLOOD ZONE AE BASE FLOOD ELEVATION 8 NATURAL GAS SIGNOFF N REQUIRED INSPECTIONS Final CONDITIONS This permit becomes null and void if work or construction authorized is not commenced within 6 months or if construction work is suspended for a period of 12 months at any time after work has started. hereby certify that I have read and examined this application and know the same to be true and correct. JI provisions of Laws and Ordinances governing this type of work will be complied with whether
BASE FLOOD ELEVATION 8 NATURAL GAS SIGNOFF N REQUIRED INSPECTIONS Final CONDITIONS This permit becomes null and void if work or construction authorized is not commenced within 6 months or if const work is suspended for a period of 12 months at any time after work has started. hereby certify that I have read and examined this application and know the same to be true and coll provisions of Laws and Ordinances governing this type of work will be complied with whether pecified herein or not. The granting of a permit does not presume to give authority to violate or one provisions of any other state/local law regulating construction or the performance of constructions seued By:	BASE FLOOD ELEVATION 8 NATURAL GAS SIGNOFF N REQUIRED INSPECTIONS Final CONDITIONS This permit becomes null and void if work or construction authorized is not commenced within 6 months or if construction work is suspended for a period of 12 months at any time after work has started.
NATURAL GAS SIGNOFF N REQUIRED INSPECTIONS Final CONDITIONS This permit becomes null and void if work or construction authorized is not commenced within 6 months or if construction suspended for a period of 12 months at any time after work has started. hereby certify that I have read and examined this application and know the same to be true and or a period of 12 months at any time after work has started. hereby certify that I have read and examined this application and know the same to be true and or a period of a permit does not presume to give authority to violate or or be provisions of any other state/local law regulating construction or the performance of constructions ssued By:	NATURAL GAS SIGNOFF N REQUIRED INSPECTIONS Final CONDITIONS This permit becomes null and void if work or construction authorized is not commenced within 6 months or if construction work is suspended for a period of 12 months at any time after work has started. hereby certify that I have read and examined this application and know the same to be true and correct il provisions of Laws and Ordinances governing this type of work will be complied with whether
REQUIRED INSPECTIONS Final CONDITIONS This permit becomes null and void if work or construction authorized is not commenced within 6 months or if const work is suspended for a period of 12 months at any time after work has started. hereby certify that I have read and examined this application and know the same to be true and on a period of 12 months at any time after work has started. hereby certify that I have read and examined this application and know the same to be true and on a provisions of Laws and Ordinances governing this type of work will be complied with whether pecified herein or not. The granting of a permit does not presume to give authority to violate or one provisions of any other state/local law regulating construction or the performance of constructions Stude By: MARCEY BAVM	Final CONDITIONS This permit becomes null and void if work or construction authorized is not commenced within 6 months or if construction work is suspended for a period of 12 months at any time after work has started. hereby certify that I have read and examined this application and know the same to be true and correct II provisions of Laws and Ordinances governing this type of work will be complied with whether
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CONDITIONS This permit becomes null and void if work or construction authorized is not commenced within 6 months or if construction is suspended for a period of 12 months at any time after work has started. hereby certify that I have read and examined this application and know the same to be true and constructions of Laws and Ordinances governing this type of work will be complied with whether pecified herein or not. The granting of a permit does not presume to give authority to violate or constructions of any other state/local law regulating construction or the performance of construction such as the same By: Charles Thuman MARCEY BAVM 03/31/2020	CONDITIONS This permit becomes null and void if work or construction authorized is not commenced within 6 months or if construction work is suspended for a period of 12 months at any time after work has started. hereby certify that I have read and examined this application and know the same to be true and correct I provisions of Laws and Ordinances governing this type of work will be complied with whether
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Il provisions of Laws and Ordinances governing this type of work will be complied with whether pecified herein or not. The granting of a permit does not presume to give authority to violate or one provisions of any other state/local law regulating construction or the performance of construction such as the state of	Il provisions of Laws and Ordinances governing this type of work will be complied with whether
MARCEY BAUM Date: Date:	Charles Thuman n
Contractor or Authorized Agent: Date: Date:	MARCEY BAUM 03/31/2020
	Contractor or Authorized Agent: Date:
1-1	
nted by : CTHUMAN on: 03/31/2020 09:45 AM	nted by : CTHUMAN on: 03/31/2020 09:45 AM Page 2
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Town of Kill Devil Hills

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

APR - 2 2020

Planning and Inspection Department

 MC2020-059 PROJECT NAME: SITE ADDRESS: 1100 FOX ST KILL DEVIL HILLS
 MECHANICAL ISSUED: 04/01/2020 EXPIRES: 09/28/2020

 APPLICANT:
 LAFONTAINE, ROGER W 301 AIRSTRIP RD KILL DEVIL HILLS, NC 27948
 OWNER:
 LAFONTAINE, ROGER W 301 AIRSTRIP RD KILL DEVIL HILLS, NC 27948

 MECHANICAL, H-2, H-3:
 ATLANTIC HEATING AND COOLING P.O. Box 132 Kill Devil Hills, NC 27948
 License: 11618 Expires: 12/31/2020

441-7642

PARCEL:								
PIN:	988312864819)		Parcel Number:	0284150	001		
Address:	1100 FOX ST	KILL DEVIL HIL	LS					
				Zoning:				
Addition:	KILL DEVIL HI	LLS REALTY CO	ORP	Block:	23	Lot(s):	4	
Legal Descripti	ion:							
FEES:		Paid	Due					
Mechanical Permit	Fee	\$150.00	\$0.00					
	Totals :	\$150.00	\$0.00					

PROJECT DESCRIPTION: HVAC Changeout



Printed by : Marty Shaw on: 04/01/2020 02:50 PM

Page 1 of 2 Doc ID: 35892530380c3fb20be7ff5e4fa6bd1bac8dbfbe

MC2020-059 PROJECT NAME: SITE ADDRESS: 1100 FOX ST KILL DEVIL HILLS

EXPIRES: 09/28/2020

		DETAILS		
Permit				
Name	Value			
PURPOSE	Residential Repair/Remodel			
CONSTRUCTION COST	5200.00			
CONSTRUCTION TYPE	V			
FLOOD ZONE	Х			
NATURAL GAS SIGNOFF	Ν			
OCCUPANCY TYPE	One & Two Family Dwelling			

REQUIRED INSPECTIONS

Final

7 -5 3

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:

Henry J. Liverman, Jr

Date: 04 / 01 / 2020

Printed by : Marty Shaw on: 04/01/2020 02:50 PM

Contractor or Authorized Agent:

Page 2 of 2 Doc ID: 35892530380c3fb20be7ff5e4fa6bd1bac8dbfbe

PARCEL: PIN: Address: Addition: Legal Desc FEES: Mechanical Per	HEDRICKS AD	DDITION - CROA Paid \$150.00		S Zonin Block		Lot(s): 0	
PIN: Address: Addition: Legal Desc	HEDRICKS AD	DDITION - CROA	ATAN SH	Zonin		Lot(s): 0	
PIN: Address: Addition:	HEDRICKS AD			Zonin		Lot(s): 0	
PIN: Address:				Zonin		Lot(s): 0	
PIN:	1700 CROATA	N HWY N KILL	DEVIL HILL		g:		
PIN:	1700 CROATA	N HWY N KILL	DEVIL HILL	S			
PARCEL:	988410374122	2		Parcel Number:	002739	000	
BUILDING-UNL	IMITED:		RDON DRIVE VA 23114	ION COMPANY 5, SUITE 200		License: 6934 Expires:	
APPLICANT:	VENTURE CONSTR 151 LE GORDON DF Midlothian, VA 23114 804-379-3610	RIVE, SUITE 200	NY	OWNER:	OLIVOLA, MA NANCY O W/ P O BOX 364 KILL DEVIL F	ALTON	
SITE ADDRES	S. 1700 CROATAN	HWY N KILL D		in , in the second		EXPIRES: 10/03/2	020
	ME: Lumber Liquidat S: 1700 CROATAN					ISSUED: 04/06/2	020
MC2020-0	62					MECHANIC	
RTHCF	ROU	Planning	and Inspe	ction Depart	ment	TOTAN CS	
Y Birthpla Zogy	ion S)		ill Devil Hills, 2-449-5318	NC 27948 Fax: 252-441-4	102	APR - 6 2020	
			PO BOX	1719	3		
YDE		014/	n of Vill	Devil Hill	0		
VDEV	-	-					

PROJECT DESCRIPTION: Gas piping

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Page 1 of 2 Doc ID: 5347ebad5dd1146d9d4a020af590d473d74f4696

RAND-6-2020

MC2020-062 PROJECT NAME: Lumber Liquidators SITE ADDRESS: 1700 CROATAN HWY N KILL DEVIL HILLS

por se

EXPIRES: 10/03/2020

		DETAILS	
Permit			
Name	Value		
PURPOSE	Commercial Repair/Remodel		
CONSTRUCTION COST	950.00		
FLOOD ZONE	AE		
BASE FLOOD ELEVATION	9		
NATURAL GAS SIGNOFF	Ν		
	REQU	IRED INSPECTIONS	
		Final	
Rough In This permit becomes null a pr work is suspended for a pe	nd void if work or constru	CONDITIONS	nenced within 6 months or if construction
This permit becomes null a or work is suspended for a per hereby certify that I hav All provisions of Laws a specified herein or not. The provisions of any oth	nd void if work or constru- riod of 12 months at any ne read and examined and Ordinances gover The granting of a perr ner state/local law reg	CONDITIONS action authorized is not comm time after work has started. I this application and kno ning this type of work w mit does not presume to	ow the same to be true and correction in the same to be true and corre
This permit becomes null a or work is suspended for a per l hereby certify that I hav All provisions of Laws a specified herein or not. The provisions of any oth	nd void if work or constru- riod of 12 months at any e read and examined nd Ordinances gover The granting of a perr	CONDITIONS action authorized is not comm time after work has started. I this application and kno ning this type of work w mit does not presume to	ow the same to be true and correc ill be complied with whether give authority to violate or cancel

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Page 2 of 2 Doc ID: 5347ebad5dd1146d9d4a020af590d473d74f4696

Eliritplac Aviatio	HILLS .	K	PO BOX (ill Devil Hills, 1 (2-449-5318)	1719 NC 27948		A	PAID PR - 6 2020
20 AVIAND	ROLIN	Planning	and Inspec	ction Depa	rtment	K	Todah Cr Devil Mills
	0 IE: McDonalds Ren 5: 1619 CROATAN		evil Hills			ISSU	DING JOINT ED: 03/23/2020 RES: 09/19/2020
APPLICANT:	FRANCHISE REALT TANDEM ADM P.O.BOX 709 ELIZABETH CITY, N		c	OWNER:	FRANCHISE TANDEM AL P O BOX 70 ELIZABETH	M	7
CONTRACTOR:	FREEMAN & ASSO 225 TRYON ROAD RALEIGH, NC 2760						994,994,994,994,994,994,994,994,994,994
BUILDING UNLI	MITED:	FREEMAN 225 TRYO RALEIGH,		S		License: 5004 Expires:	0
PARCEL:							
PIN:	989313044858	3		Parcel Number:	008238	8000	
Address:	1619 CROATA	N HWY S KILL	DEVIL HILLS				
			•	Zoni	ing:		
Addition:	OCEAN ACRE	S INC		Bloc	ж: 0	Lot(s):	11-19 & 44- 51
Legal Descr	iption:						
FEES:		Paid	Due		,		·
Building Permit F Fee	ee - Minimum	\$1 50.00	\$0.00				
A Real and an owner of the second s	Totals :	\$150.00	\$0.00				

PAID

Printed by : Marty Shaw on: 03/23/2020 11:30 AM

Page 1 of 3

DISCONTONE: McDonalds Remodel SITE ADDRESS: 1619 CROATAN HWY S KILL DEVIL HILLS.

4

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BUILDING JOINT ISSUED: 03/23/2020

EXPIRES: 09/19/2020

	Ð	ETAILS	
Permit			
lame	Value		
ONING DISTRICT	С		
RONT YARD SETBACK	30		
DE YARD SETBACK	10		
AMA PERMIT	N		
AMA EXEMPTION	N		
LOOD ZONE	AE		
ASE FLOOD ELEVATION	9		
UBSTANTIAL MPROVEMENT	NO		
CONSTRUCTION COST	65000.00		
NGINEER AND LICENSE	Dilip Khatri 044027		
ULVERT	Ň		
RIVEWAY INVERT 2	2 M		
CCUPANCY TYPE	Business		
	REQUIRE	D INSPECTIONS	
n-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
0	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.

Printed by : Marty Shaw on: 03/23/2020 11:30 AM

Page 2 of 3

BJ2020-070 PROJECT NAME: McDonalds Remodel SITE ADDRESS: 1619 CROATAN HWY S KILL DEVIL HILLS

-

BUILDING JOINT ISSUED: 03/23/2020

EXPIRES: 09/19/2020

I hereby certify that I have read and examined this application and know the All provisions of Laws and Ordinances governing this type of work will be co specified herein or not. The granting of a permit does not presume to give a	omplied	with whether
the provisions of any other state/local law regulating construction or the per		
Issued By: MAR		
	Date:	3-25-2020

5WA ancherects 336-322-0691

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Page 3 of 3



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

MC2020-061 PROJECT NAME: 2NCKDH SITE ADDRESS: 801 Virginia Dare Tr. S. Kill Devil Hills

MECHANICAL ISSUED: 04/02/2020

EXPIRES: 09/29/2020

	Totals :	\$150.00	\$0.00				
Mechanical Per	mit Fee	\$150.00	\$0.00				
EES:		Paid	Due				
Legal Desc	cription:						
Addition:	Baum Beach			Blo	ck:	Lot(s): 2	
					ning:		
Address:	801 Virginia D	are Tr. S. Kill De	evil Hills				
PIN:	98830899341	5		Parcel Number:	00814500	1	
PARCEL:							
MECHANICAL:		NORTH BE P.O. Box 18 Kitty Hawk, 252-491-28	NC 27949	ES		cense: 33023 pires: 12/31/2020	
APPLICANT:	NORTH BEACH SE P.O. Box 181 Kitty Hawk, NC 2794 252-491-2878		C	OWNER:	2NC KDH LLC 1350St. Mortiz I Wilmington, DE		

PROJECT DESCRIPTION: Replace mid-level HVAC system

Printed by : Cray on: 04/02/2020 02:35 PM

Page 1 of 2



MC2020-064

Town of Kill Devil Hills

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

PAD

APR - 8 2020

Planning and Inspection Department

MECHANICAL ISSUED: 04/08/2020

EXPIRES: 10/05/2020

PROJECT NAME		
SITE ADDRESS:	1805 BELL AVE	KILL DEVIL HILLS

APPLICANT:	SEARS, PRESTON I P O BOX 13 KILL DEVIL HILLS, N			OWNER:	SEARS, PRE P O BOX 13 KILL DEVIL H	STON L JR	8
MECHANICAL:		R A HOY PO Box 263 Kitty Hawk, 252-261-20	NC 27949			License: 13056 Expires: 12/31	
PARCEL:							
PIN:	988316933210	•		Parcel Number:	008347	000	
Address:	1805 BELL AV	E KILL DEVIL H	HILLS				
				Zoni	ng:		
Addition:	LAKE DRIVE D	DEVELOPMENT		Block	<: 0	Lot(s):	103,105
Legal Desc	ription:						
EES:		Paid	Due				
Mechanical Peri	mit Fee	\$150.00	\$0.00				
	Totals :	\$150.00	\$0.00				

PROJECT DESCRIPTION: HVAC changeout

PAID Pripal 4-8-2020

Printed by : Marty Shaw on: 04/08/2020 09:02 AM

Page 1 of 2

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Town of Kill Devil Hills

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

APR - 8 2020

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Planning and Inspection Department

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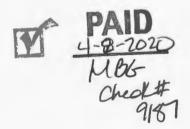
MC2020-063 PROJECT NAME: SITE ADDRESS: 521 CANAL DR KILL DEVIL HILLS

MECHANICAL ISSUED: 04/07/2020

EXPIRES: 10/04/2020

APPLICANT:	Aidoock, Clifton & El 521 Canal DR Kill Devil Hillsl, NC 2			OWNER:	Aidoock, Clift 521 Canal D Kill Devil Hills	R	
MECHANICAL:		DELTA T 162 Yaupo Kitty Hawk, 252-261-04	NC 27949			License: 2329 Expires: 12/3	-
PARCEL:							
PIN:	988414248047	7		Parcel Number:	003322	000	
Address:	521 CANAL D	R KILL DEVIL H	IILLS				
				Zoni	ing:		
Addition:	FIRST FLIGH	VILLAGE SEC	1	Bloc	:k: 0	Lot(s):	34 & PT 35
Legal Desc	ription:						
EES:		Paid	Due				
Mechanical Perr	nit Fee	\$150.00	\$0.00				
	Totals :	\$150.00	\$0.00				

PROJECT DESCRIPTION: HVAC replacement



Printed by : Marty Shaw on: 04/07/2020 08:49 AM

Page 1 of 2

MC2020-063 **PROJECT NAME:** SITE ADDRESS: 521 CANAL DR KILL DEVIL HILLS

EXPIRES: 10/04/2020

		DETAILS		
Permit				
Name	Value			
PURPOSE	Residential Repair/Remodel			
CONSTRUCTION COST	3700.00			
CONSTRUCTION TYPE	V			
FLOOD ZONE	AE			
BASE FLOOD ELEVATION	8			
NATURAL GAS SIGNOFF	N			
OCCUPANCY TYPE	One & Two Family Dwelling			

REQUIRED INSPECTIONS

Final

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CONDITIONS

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

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. Marty Shaw

Issued By:

Contractor or Authorized Agent:

Printed by : Marty Shaw on: 04/07/2020 08:49 AM

Date: 04 / 07 / 2020

Page 2 of 2

Town of Kill Devil Hills

102 Town Hall Drive PO BOX 1719 Kill Devil Hills, NC 27948 Phone: 252-449-5318 Fax: 252-441-4102 www.kdhnc.com

Kill Devil Hills Planning and Inspection Department

FDP2020-206	FLOOD DEVELOPMENT
PROJECT NAME:	ISSUED: 04/07/2020
SITE ADDRESS: 521 CANAL DR KILL DEVIL HILLS	

				PAR	ENT PERMIT #: MC2020-06
APPLICANT:	Aidoock, Clifton & Ellen 521 Canal DR Kill Devil Hillsl, NC 27948		OWNER:	Aidoock, Clifton 8 521 Canal DR Kill Devil Hillsl, No	
MECHANICAL:		DELTA T 162 Yaupon Tr. Kitty Hawk, NC 27 252-261-0404	7949		nse: 23299 ires: 12/31/2020
PARCEL:					
PIN:	988414248047		Parcel Number:	003322000	
Address:	521 CANAL DR KI	LL DEVIL HILLS			
			Zo	oning:	
Addition:	FIRST FLIGHT VIL	LAGE SEC 1	Bl	ock: 0	Lot(s): 34 & PT 35
Legal Desc	ription:				
FEES:		Paid	Due		
	Totals :				
PROJECT DESC	RIPTION: HVAC replac	ement			
		DE	TAILS		
		REQUIRE	DINSPECTION	S	
Final					

CONDITIONS

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Page 1 of 2

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

1. All Special Flood Hazard Areas limit the use of enclosures below the lowest floor for parking, building access and limited storage only. 2. In the VE Zone, there shall be no alteration of the sand dunes which would increase potential flood damage.

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

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

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

Applicant Signature

04 / 07 / 2020

Date

Printed by : Marty Shaw on: 04/07/2020 08:50 AM

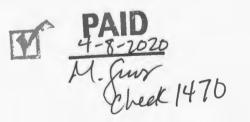
Aviati	LE OF STATE	к	PO BOX ill Devil Hills,		. 1		- 8 2020
PORTH CR	ROLIT	Planning	and Inspe	ection Departr	nent	TC LL 1	NON OF EVAL MALLS
MC2020-00 PROJECT NAI SITE ADDRES		ILN KILL DEV	VIL HILLS			ISSUE	CHANICAL D: 04/08/2020 RES: 10/05/2020
APPLICANT:	The Heirs of Mary T Co 9014 Waldelock PL Mechanicsville, VA 231				The Heirs of Mar 9014 Waldelock Mechanicsville, \	PL	
H3, CLASS 1:		P.O. Box 14 Nags Head		G AND COOLING		ense: 1264 bires: 12/3	
		441-1740					
PARCEL:		441-1740					
PARCEL: PIN:	9884115713810			Parcel Number:	028088000)	
	9884115713810 1701 VA DARE	6	EVIL HILLS		028088000)	
PIN: Address:		6	EVIL HILLS		ı:)	
PIN:		6	EVIL HILLS	Number:	ı:) Lot(s):	UNIT 2C LT 17-19
PIN: Address:	1701 VA DARE	6	EVIL HILLS	Number: Zoning	ı:		
PIN: Address: Addition:	1701 VA DARE	6	EVIL HILLS Due	Number: Zoning	ı:		
PIN: Address: Addition: Legal Desc	1701 VA DARE	6 TRLN KILL D		Number: Zoning	ı:		

PROJECT DESCRIPTION: HVAC changout

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Printed by : Marty Shaw on: 04/08/2020 11:55 AM



Page 1 of 2

MC2020-066 **PROJECT NAME:** SITE ADDRESS: 1701 VA DARE TRL N KILL DEVIL HILLS

EXPIRES: 10/05/2020

		DETAILS
Permit		
Name	Value	
PURPOSE	Residential Repair/Remodel	
CONSTRUCTION COST	6215.00	
CONSTRUCTION TYPE	V	
FLOOD ZONE	VE	
BASE FLOOD ELEVATION	14	
NATURAL GAS SIGNOFF	N	
OCCUPANCY TYPE	Residential	

Final

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CONDITIONS

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

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. Marty Shaw

Issued By:

Contractor or Authorized Agent	Tom	McDonala	l
Contractor or Authorized Agent		1 100 0110000	

Date: 04 / 08 / 2020

Printed by : Marty Shaw on: 04/08/2020 11:55 AM

Page 2 of 2



102 Town Hall Drive PO BOX 1719 Kill Devil Hills, NC 27948 Phone: 252-449-5318 Fax: 252-441-4102 www.kdhnc.com

Kill Devil Hills Planning and Inspection Department

FDP2020- PROJECT NA SITE ADDRES		VIL HILLS	FLOOD DEVELOPMENT ISSUED: 04/08/2020
			PARENT PERMIT #: MC2020-066
APPLICANT:	The Heirs of Mary T Cox	OWNER:	The Heirs of Mary T Cox

FING AND COOLING Parcel Number:		ense: 1264 pires: 12/3	
	028088000		
	028088000		
	02000000	0	
S			
Zoning:			
Block:	С	Lot(s):	UNIT 2C LT 17-19
<u>e</u>			
NLS			
NSPECTIONS			
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	e NLS	P NILS NSPECTIONS	P NILS NSPECTIONS

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Page 1 of 2

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* 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.

In the VE Zone, there shall be no alteration of the sand dunes which would increase potential flood damage.
 In the VE Zone, there shall be no fill used for stuctual support.

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

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

Tom McDonald

Applicant Signature

04/08/2020

Date

Printed by : Marty Shaw on: 04/08/2020 11:56 AM

Page 2 of 2



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

BAID

<u>.</u>

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APR - 8 2020

1 * 13 × 13

	65 ME: AMBROSE HVA S: 700 F7 FIRST S		HILLS			ISSUE	CHANICAL D: 04/08/2020 ES: 10/05/2020
APPLICANT:	AMBROSE, JANET I 6806 FOREST PARI NEW MARKET, MD	COURT				IANET K T PARK COUR ET, MD 21774	т
H3, CLASS 1:		P.O. Box 14		G AND COOLING		License: 1264 Expires: 12/3	
PARCEL:							
PIN:	988413140426	577		Parcel Number:	008075	607	
Address:	700 F7 FIRST	ST W KILL DE	/IL HILLS				
				Zoning	g:		
Addition:				Block:	0	Lot(s):	UT 7 BLDG F
Legal Desc	cription:						
FEES:		Paid	Due				
Mechanical Peri	mit Fee	\$150.00	\$0.00				
	Totals :	\$150.00	\$0.00				

PROJECT DESCRIPTION: HVAC CHANGE OUT

PAID 4-8-2020 M. Gurr Check # 147D

Printed by : Jordan Blythe on: 04/08/2020 11:44 AM

Page 1 of 2

MC2020-065 PROJECT NAME: AMBROSE HVAC SITE ADDRESS: 700 F7 FIRST ST W KILL DEVIL HILLS

EXPIRES: 10/05/2020

		DETAILS	
Permit			
Name	Value		
PURPOSE	Residential Repair/Remodel		
CONSTRUCTION COST	5701.00		
CONSTRUCTION TYPE	V		
FLOOD ZONE	AE		
BASE FLOOD ELEVATION	9.00		
NATURAL GAS SIGNOFF	N		
OCCUPANCY TYPE	Residential		

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. Marty Shaw

Issued By:

Contractor or Authorized Agent: Tom McDonold

04 / 08 / 2020

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Page 2 of 2



102 Town Hall Drive PO BOX 1719 Kill Devil Hills, NC 27948 Phone: 252-449-5318 Fax: 252-441-4102 www.kdhnc.com

Kill Devil Hills Planning and Inspection Department

FDP2020-208	FLOOD DEVELOPMENT
PROJECT NAME: AMBROSE HVAC	ISSUED: 04/08/2020
SITE ADDRESS: 700 F7 FIRST ST W KILL DEVIL HILLS	

						PARENT PER	MIT #: MC2020-065
APPLICANT:	AMBROSE, JANET K 6806 FOREST PARK COU NEW MARKET, MD 21774			OWNER:		, JANET K EST PARK COUI KET, MD 21774	т
H3, CLASS 1:		OUTER BANH P.O. Box 1413 Nags Head, N 441-1740	5	G AND COOLING		License: 1264 Expires: 12/3	
PARCEL:							
PIN:	98841314042677			Parcel Number:	00807	5607	
Address:	700 F7 FIRST ST V	V KILL DEVIL	HILLS				
				Zonin	g:		
Addition:				Block	. 0	Lot(s):	UT 7 BLDG F
Legal Desc	cription:						
FEES:		Paid	Due				
	Totals :						
PROJECT DESC	CRIPTION: HVAC CHAN	IGE OUT					
			DETAIL	S			

REQUIRED INSPECTIONS

Final

CONDITIONS

Printed by : Jordan Blythe on: 04/08/2020 11:44 AM

Page 1 of 2

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

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

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

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

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

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

Tom McDonald

Applicant Signature

04/08/2020

Date

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NO RTH C	THE S	Ki Phone: 25	PO BO III Devil Hills 2-449-5318	s, NC 27948 Fax: 252-441-	4102		APR - 9 2020
	V	Planning	and Inspe	ection Depar	tment		TOTAL
	67 ME: Smith HVAC S: 439 EDEN ST ST	W KILL DEVIL	. HILLS			ISS	ECHANICAL UED: 04/09/2020 PIRES: 10/06/2020
APPLICANT:	SMITH, WILLIAM R DAVID E SMITH 439 W EDEN STREE KILL DEVIL HILLS, N			OWNER:	SMITH, WIL DAVID E SI 439 W EDE KILL DEVIL	MITH	7948
CONTRACTOR	: OUTER BANKS HEA P.O. Box 1415 Nags Head, NC 2795 441-1740		ING				
H3, CLASS 1:		P.O. Box 14		NG AND COOLING	G	License: 1 Expires: 1	
PARCEL:							
PIN:	987520909495			Parcel Number:	00064	2000	
Address:	439 EDEN ST	ST W KILL DEV	/IL HILLS				
م المالية م				Zoni	-	L atta	s): 1-2
Addition: Legal Desc	VIRGINIA DAF			Bloc	k: 51	Lot(s	b). 1-∠
FEES:		Paid	Due				
Mechanical Per	mit Fee	\$150.00	\$0.00				
	Totals :	\$150.00	\$0.00	NAMES OF			



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Page 1 of 2

Des 10. 1-00400E-01-7410---00-00010004000-001

MC2020-067 PROJECT NAME: Smith HVAC SITE ADDRESS: 439 EDEN ST ST W KILL DEVIL HILLS

MECHANICAL ISSUED: 04/09/2020

EXPIRES: 10/06/2020

Permit	
Name	Value
PURPOSE	Residential Repair/Remodel
CONSTRUCTION COST	5939.00
FLOOD ZONE	AE
BASE FLOOD ELEVATION	8.3
NATURAL GAS SIGNOFF	N
OCCUPANCY TYPE	One & Two Family Dwelling

REQUIRED INSPECTIONS

Final

CONDITIONS

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Issued By:

Contractor or Authorized Agent:

Marty Shaw

Tom McDonald Date:

04 / 09 / 2020

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Page 2 of 2

Des ID. 1-004005-057410---00-00010004000400--01



PROJECT NAME: Steve Howell

SITE ADDRESS: 2006 SMITHFIELD ST KILL DEVIL HILLS

MC2020-068

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

APR 1 7 2020

PAID

TUTHOF

MECHANICAL ISSUED: 04/14/2020 1. .

EXPIRES: 10/11/2020

APPLICANT:	ARMSTRONG 3978 Albermar Columbia, NC 252-394-5316	le Curch rd.		C	WNER:	172 Mar	vell, Steve Tuscarara Ct. hteo, NC 2795 -908-0198		
MECHANICAL	H-3:			NG AND SON marle Curch rd. NC 27925 16				nse: 22510 res: 12/31	
PARCEL:									
PIN:	98840518	85989			Parcel Number:		001419000		
Address:	2006 SM	ITHFIELD	ST KILL DI	EVIL HILLS					
					Zoni	ing:			
Addition:	AVALON	BEACH A	NNEX 2 & 3	3	Bloc	k:	0	Lot(s):	1279 & 128
Legal Desc	cription:								
FEES:			Paid	Due					
Mechanical Peri	mit Fee	\$	150.00	\$0.00					
	Totals	s: \$	150.00	\$0.00					
PROJECT DESC	RIPTION: HV	AC							
				DETAILS	6				
Permit									
Name		Value						-	-
CONSTRUCTI		8000.00					TTT -	PA	ID
FLOOD ZONE		X						4/17/20	2004
NATURAL GAS	S SIGNOFF	N					(化井 23	925

Des ID. 00-4-04-7-0-6-06-E-04E-76400-404664-

MC2020-068 **PROJECT NAME: Steve Howell** SITE ADDRESS: 2006 SMITHFIELD ST KILL DEVIL HILLS

EXPIRES: 10/11/2020

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: Charles Thuman

Contractor or Authorized Agent:

Lori B Armstrong

Date: 04 / 14 / 2020

Printed by : CTHUMAN on: 04/14/2020 12:19 PM

Page 2 of 2

Dec 10, 00-4-04-7-0-6-06-5-04 5-7-400-4004-6-0404-

Y DEVI	HIL		PO BO		lls		
Z Birthplac	N N N	K Phone: 25	ill Devil Hills 2-449-5318	, NC 27948 Fax: 252-441	-4102	APR	1 7 2020
TORTH CA	ROLL	Planning	and Inspe	ection Depa	rtment		4 X 4
MC2020-06 PROJECT NAM SITE ADDRESS	59 IE: Jolly roger new n 5: 1836 VA DARE T	nini split RL N KILL DE\	/IL HILLS			ISSUE	CHANICAL D: 04/15/2020 ES: 10/12/2020
APPLICANT:	CHELLO INC P O BOX 2517 KILL DEVIL HILLS, N	C 27948		OWNER:	CHELLO INC P O BOX 251 KILL DEVIL F		8
CONTRACTOR:	American Refrigeratio P.O. Box 835 nags head, nc 27959 252-305-5320	'n					
MECHANICAL:		American F P.O. Box 83 nags head, 252-305-53	nc 27959			License: 2903 Expires: 12/3	
PARCEL:							
PIN:	988406389793			Parcel Number:	002863	000	
Address:	1836 VA DARE	TRL N KILL D	EVIL HILLS				
				Zon	ing:		
Addition:	Croatan Shores	Amended		Bloc	ck: G	Lot(s):	1,2,20,21
Legal Desci	ription:						
FEES:		Paid	Due				
Mechanical Pern	nit Fee	\$150.00	\$0.00				
	Totals :	\$150.00	\$0.00				



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Page 1 of 2

Daa ID. 0400k04kE4-0-007-0700070-E0404-040k04-44

MC2020-069

PROJECT NAME: Jolly roger new mini split SITE ADDRESS: 1836 VA DARE TRL N KILL DEVIL HILLS

MECHANICAL ISSUED: 04/15/2020

EXPIRES: 10/12/2020

	DETAILS
Permit	
Name	Value
PURPOSE	Commercial Repair/Remodel
CONSTRUCTION COST	2800.00
FLOOD ZONE	AE
BASE FLOOD ELEVATION	8.3
NATURAL GAS SIGNOFF	N
OCCUPANCY TYPE	Business
	REQUIRED INSPECTIONS
Final	
and the second sec	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. Marty Shaw

Issued By:

Contractor or Authorized Agent: Poul Smith

04 / 15 / 2020 Date:

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Page 2 of 2

DaalD. 000604651-0-007-0700070-50404-040601-44



PROJECT NAME: Martin Teasdale SITE ADDRESS: 3317 RAYMOND AVE KILL DEVIL HILLS

MC2020-071

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

APR 17 2020

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TENED

MECHANICAL ISSUED: 04/16/2020

EXPIRES: 10/13/2020

	R A Hoy Heating 8 PO Box 235 kitty hawk, nc 279 252-261-2008			OWNER:	Teasdale, Ma 3317 Raymor Kill Devil Hills	nd Ave.
MECHANICAL:		R A HOY PO Box 26 Kitty Hawk, 252-261-20	NC 27949			License: 13056 Expires: 12/31/2020
PARCEL:						
PIN:	9885090512	288		Parcel Number:	0000780	000
Address:	3317 RAYM	OND AVE KILL D	EVIL HILLS			
				Zonii	ng:	
Addition:	ORVILLE BI	EACH BLK 2		Block	c: 2	Lot(s): 23
Legal Descrip	otion:					
FEES:		Paid	Due			
Mechanical Permi	it Fee	\$150.00	\$0.00			
	Totals :	\$150.00	\$0.00			
PROJECT DESCR	IPTION: Lowe	r level HVAC				
			DETAIL	.S		
Permit						
Name	,	Value				DAID
PURPOSE		Residential Repair/Remodel			W	4/16/2070 Du
CONSTRUCTIO		5900.00			Indiraci	Paupal
	,	VE				1-11. 9
FLOOD ZONE						

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Page 1 of 2

Dee 10. 04-10100-00400-6-00-7-0-0740074077047407

MC2020-071 **PROJECT NAME:** Martin Teasdale SITE ADDRESS: 3317 RAYMOND AVE KILL DEVIL HILLS

EXPIRES: 10/13/2020

REQUIRED INSPECTIONS

Final

CONDITIONS

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

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

	_	
Issued	Byr-	
Issued	BV:	

MARCEY BAUM

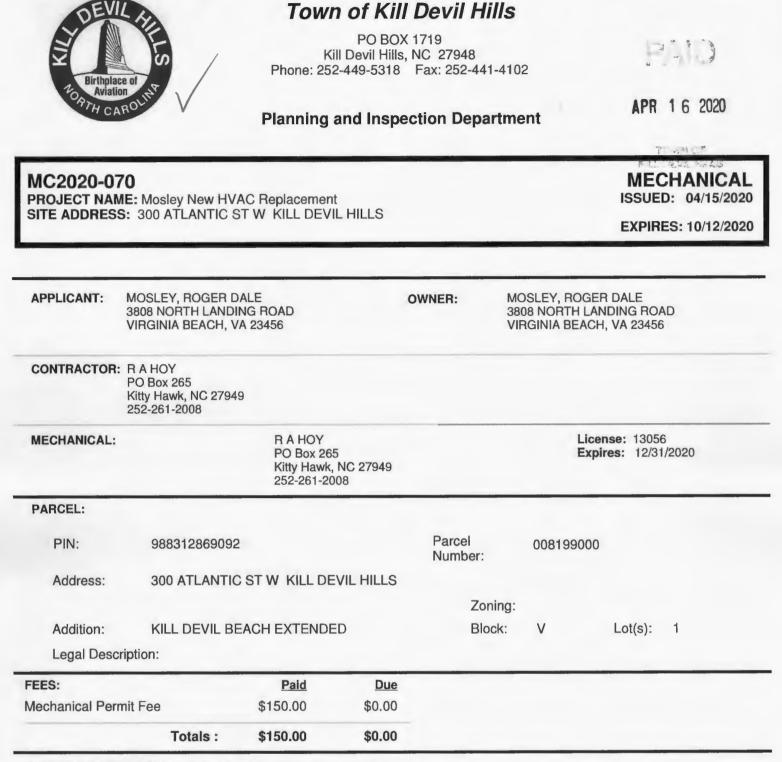
Date: 04 / 16 / 2020

Contractor or Authorized Agent:

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Page 2 of 2

Daalo, 04-40400-00400-6-00-7-0-074007407407407



PROJECT DESCRIPTION: 2.5 ton hvac system for existing house

1



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Page 1 of 2

Das 10. 0##01001E-L0110-006EL0-000E010-07L1EL-1

MC2020-070

1 - A - A - A

PROJECT NAME: Mosley New HVAC Replacement SITE ADDRESS: 300 ATLANTIC ST W KILL DEVIL HILLS

MECHANICAL ISSUED: 04/15/2020

EXPIRES: 10/12/2020

	1	DETAILS
Permit		
Name	Value	
PURPOSE	Residential Repair/Remodel	
CONSTRUCTION COST	7536.00	
FLOOD ZONE	AE	
BASE FLOOD ELEVATION	9	
NATURAL GAS SIGNOFF	N	
OCCUPANCY TYPE	One & Two Family Dwelling	
	REQUIR	ED INSPECTIONS
Final		
	CO	NDITIONS
This permit becomes null and or work is suspended for a perio		on authorized is not commenced within 6 months or if construction ne after work has started.
All provisions of Laws and specified herein or not. The the provisions of any othe	d Ordinances governing of a permit	his application and know the same to be true and correct. ng this type of work will be complied with whether t does not presume to give authority to violate or cancel lating construction or the performance of construction.
Contractor or Authorized	Agent MARCE	Date: 04/15/2020

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Page 2 of 2

Daa 10. 044010015-50110-005560-0005010-075455-1



Town of Kill Devil Hills

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

Planning and Inspection Department

PROJECT NA	ME: Farlow HVAC		5			ISSU	CHANICAL ED: 04/23/2020 RES: 10/20/2020
APPLICANT:	4713 HARLEQUIN \	NAY		OWNER:	4713 HARL	EQUIN WAY	
CONTRACTOR	P.O. Box 707						
MECHANICAL,	H-3, I:	P.O. Box 70	07	COOLING			
PARCEL:							
PIN:	98752080942	7		Parcel Number:	00195	4000	
Address:	2507 BAY DR	KILL DEVIL HIL	LS				
				Zon	ing:		
Addition:	VIRGINIA DA	RE SHORES		Bloc	ck: 79	Lot(s):	: 1
Legal Desc	cription:						
FEES:	· · · · · · · · · · · · · · · · · · ·	Paid	Due				
PROJECT NAME: Farlow HVAC ISSUED: SITE ADDRESS: 2507 BAY DR KILL DEVIL HILLS EXPIRES APPLICANT: FARLOW, JEFFREY C EXPIRES 4713 HARLEQUIN WAY OWNER: FARLOW, JEFFREY C 4713 HARLEQUIN WAY CHESAPEAKE, VA 23321 OWNER: FARLOW, JEFFREY C 4713 HARLEQUIN WAY CHESAPEAKE, VA 23321 OWNER: FARLOW, JEFFREY C CONTRACTOR: MASTER HEATING AND COOLING CHESAPEAKE, VA 23321 MECHANICAL, H-3, I: MASTER HEATING AND COOLING License: 18066 PLO: Box 707 Kitty Hawk, NC 27949 255-0095 String: 001954000 PARCEL: PIN: 987520809427 Parcel PIN: 987520809427 Parcel 001954000 Number: Zoning: Lot(s): Legal Description:							
	Tatala	¢150.00	00.00	•			

PROJECT DESCRIPTION: New 2.5 Ton HVAC



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Page 1 of 2

Daal 10. dat -E0d 4 de040-040E1 00E040-4d070004007E04

MC2020-074

PROJECT NAME: Farlow HVAC SITE ADDRESS: 2507 BAY DR KILL DEVIL HILLS

MECHANICAL ISSUED: 04/23/2020

EXPIRES: 10/20/2020

		DETAILS
Permit		
Name	Value	
PURPOSE	Residential Repair/Remodel	
CONSTRUCTION COST	6250.00	
FLOOD ZONE	AE	
BASE FLOOD ELEVATION	8.3	
NATURAL GAS SIGNOFF	Ν	
OCCUPANCY TYPE	One & Two Family Dwelling	
	REQUI	RED INSPECTIONS
Final		
	C	ONDITIONS
This permit becomes null and work is suspended for a perio		tion authorized is not commenced within 6 months or if construction me after work has started.

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

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Issued By:

Contractor or Authorized Agent:

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Page 2 of 2

Daa 10. dat and 1 dhata after 100000 -120700000000000

04 / 23 / 2020

Date:



PROJECT NAME: Haas Mechanical

SITE ADDRESS: 511 LANDING DR W KILL DEVIL HILLS

MC2020-072

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Town of Kill Devil Hills

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

APR 2 2 2020

31-14-17 N-1-17

Planning and Inspection Department

MECHANICAL ISSUED: 04/21/2020

EXPIRES: 10/18/2020

APPLICANT:	HAAS, ELIZABETH 511 WEST LANDING Kill Devil Hillsl, NC 27		(OWNER:	HAAS, ELIZ/ 511 WEST L Kill Devil Hills	ANDING DR	
CONTRACTOR:	R A HOY PO Box 265 Kitty Hawk, NC 2794 252-261-2008	9					
MECHANICAL:		R A HOY PO Box 263 Kitty Hawk, 252-261-20	NC 27949			License: 13056 Expires: 12/31/2020	D
PARCEL:							
PIN:	988414239345			Parcel Number:	003596	6000	
Address:	511 LANDING	DR W KILL DE	VIL HILLS				
				Zoni	ng:		
Addition:	LANDING SEC	TION 3, THE		Bloc	k: 0	Lot(s): 80	
Legal Desci	ription:						
FEES:		Paid	Due				
Mechanical Pern	nit Fee	\$150.00	\$0.00				
	Totals :	\$150.00	\$0.00				

PROJECT DESCRIPTION: replace lower level duct work



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Page 1 of 2

Daa 10. 04544 00000 - 440 - 1 - 404 744 - 0700740 - 50 - 5 44-

MC2020-072

2

PROJECT NAME: Haas Mechanical SITE ADDRESS: 511 LANDING DR W KILL DEVIL HILLS

MECHANICAL ISSUED: 04/21/2020

EXPIRES: 10/18/2020

		DETAILS
Permit		
Name	Value	
PURPOSE	Residential Repair/Remodel	
CONSTRUCTION COST	2769.00	
FLOOD ZONE	AE	
BASE FLOOD ELEVATION	9	
NATURAL GAS SIGNOFF	Ν	
OCCUPANCY TYPE	One & Two Family Dwelling	

REQUIRED INSPECTIONS

Final

CONDITIONS

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Issued By:

MARCEY BAUM **Contractor or Authorized Agent:**

04 / 21 / 2020 Date:

Dee ID. 04544 -0000- 40-46 -01744 -070074055045 444

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Page 2 of 2

Post H CA	E OLINA BOLINA BOLINA	Ki Phone: 25	PO BOX II Devil Hills, 2-449-5318		-4102		APR	2 7 2020
	73 IE: Hedgepeth Mini S: 1617 PRINCESS			LS			MEC	CHANICAL D: 04/23/2020 ES: 10/20/2020
APPLICANT:	HEDGEPETH, LEWI 1617 Princess Anne Kill Devil Hillsl, NC 2	dr.		OWNER:	HEDGEPI 1617 Princ Kill Devil I	cess Ann	ie dr.	
CONTRACTOR:	R A HOY PO Box 265 Kitty Hawk, NC 2794 252-261-2008	9						
MECHANICAL:		R A HOY PO Box 26 Kitty Hawk, 252-261-20	NC 27949				ise: 13056 res: 12/31	
PARCEL:								
PIN:	988410466520)		Parcel Number:	0031	04000		
Address:	1617 PRINCE	SS ANNE DR K	ILL DEVIL H	ILLS				
				Zor	ning:			
Addition:		- DELRAY BEA	СН	Blo	ck: 1		Lot(s):	PT 17
Legal Desci	ription:							
FEES:		Paid	Due					
Mechanical Pern		\$150.00	\$0.00	-				
	Totals :	\$150.00	\$0.00					

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Page 1 of 2

MC2020-073

PROJECT NAME: Hedgepeth Mini Split, new HVAC SITE ADDRESS: 1617 PRINCESS ANNE DR KILL DEVIL HILLS

MECHANICAL ISSUED: 04/23/2020

EXPIRES: 10/20/2020

DETAILS Permit Value Name PURPOSE Residential Repair/Remodel CONSTRUCTION COST 20261.00 AE FLOOD ZONE BASE FLOOD ELEVATION 8.3 NATURAL GAS SIGNOFF N OCCUPANCY TYPE One & Two Family Dwelling REQUIRED INSPECTIONS

Final

CONDITIONS

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

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

Issued By:

Contractor or Authorized Agent: _

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Page 2 of 2

Date:



Town of Kill Devil Hills

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

APR 2 9 2020

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Planning and Inspection Department

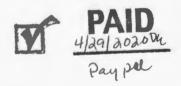
3

MC2020-081 PROJECT NAME: Kissel HVAC SITE ADDRESS: 204 s va dare trl KILL DEVIL HILLS MECHANICAL ISSUED: 04/28/2020

EXPIRES: 10/25/2020

APPLICANT:	MR. GEORGE P KISSEL 730 brighton way new hope, pa 00000		c	WNER:	MR. GEORG 730 brighton new hope, pa	way	
MECHANICAL:		ALL SEASONS HEATING & COOLING P.O. Box 244 Point Harbor, NC 27964 491-9232			License: 19091 Expires: 12/31/2020		
PARCEL:							
PIN:	988420803494			Parcel Number:	003774	002	
Address:	204 s va dare tri k		ILLS				
				Zonir	ng:		
Addition:	MOHAMAD A AFI	FY DIVISION	I	Block	: 0	Lot(s): 2A	
Legal Desc	ription:						
FEES:		Paid	Due				
Mechanical Perr	mit Fee	\$150.00	\$0.00				
	Totals :	\$150.00	\$0.00				

PROJECT DESCRIPTION: Replace downstairs 3 ton split system. Replace upstairs 2 ton split system



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Page 1 of 2

DealD. -4-6-6--4000074-4040-4040-4-40-0040040-4-

MC2020-081

PROJECT NAME: Kissel HVAC SITE ADDRESS: 204 s va dare tri KILL DEVIL HILLS MECHANICAL ISSUED: 04/28/2020

EXPIRES: 10/25/2020

Permit	
Name	Value
PURPOSE	Residential Repair/Remodel
CONSTRUCTION COST	13750.00
CONSTRUCTION TYPE	V
FLOOD ZONE	AE
BASE FLOOD ELEVATION	8
NATURAL GAS SIGNOFF	Ν
OCCUPANCY TYPE	One & Two Family Dwelling

REQUIRED INSPECTIONS

Final

CONDITIONS

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

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

Lee Ve

Issued By:

Contractor or Authorized Agent: _

Charles Thuman

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Page 2 of 2

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Date: 04 / 28 / 2020



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

APR 2 9 2020

	30 ME: Douglas Hockaday S: 1605 CROATAN HW	MECHANICAL ISSUED: 04/28/2020 EXPIRES: 10/25/2020			
APPLICANT:	ALL SEASONS HEATING P.O. Box 244 Point Harbor, NC 27964 491-9232	& COOLING	OWNER:	DOUGLAS HOCKADAY 735 BELLWOOD RD HAMPTON, VA 23666 757-880-6319	
MECHANICAL:		ALL SEASONS H P.O. Box 244 Point Harbor, NC 491-9232	EATING & COOLING 27964	License: 19091 Expires: 12/31/20	020
PARCEL:	988410455969		Parcel		

	Totals :	\$150.00	\$0.00				
Mechanical Permit	t Fee	\$150.00	\$0.00				
FEES:		Paid	Due				
Legal Descrip	tion:						
Addition:	DELRAY BEA	CH RESUBDIV		Block:	3	Lot(s):	19
				Zoning:			
Address:	1605 CROATA	N HWY N KILL	DEVIL HILLS				
PIN:	988410455965	9		Number:	003136019		

PROJECT DESCRIPTION: HVAC

		DETAILS	
Permit			
Name	Value		
PURPOSE	Residential Repair/Remodel		PAID
CONSTRUCTION COST	11175.00		4/29/2020
FLOOD ZONE	AE		4/29/2020 R Pay pay
BASE FLOOD ELEVATION	9		<i>L</i> • <i>I</i>
NATURAL GAS SIGNOFF	Ν		

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Page 1 of 2

Dee ID: 2004040000422554005500242240040420074526

MC2020-080 PROJECT NAME: Douglas Hockaday SITE ADDRESS: 1605 CROATAN HWY N KILL DEVIL HILLS MECHANICAL ISSUED: 04/28/2020

EXPIRES: 10/25/2020

REQUIRED INSPECTIONS

Final

CONDITIONS

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

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

Issued By:

Contractor or Authorized Agent:

Lee Vie

Charles Thuman

Date: 04 / 28 / 2020

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Page 2 of 2

Dee 10. -0040400004---- E400550044-400404-0074E-0



PROJECT NAME: Logan McNear SITE ADDRESS: 111 CARLOW AVE KILL DEVIL HILLS

MC2020-079

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

APR 2 9 2020

: And

MECHANICAL ISSUED: 04/28/2020

EXPIRES: 10/25/2020

	Totals :	\$150.00	\$0.00					
Mechanical Per	mit Fee	\$150.00	\$0.00					
EES:		Paid	Due					
Legal Desc	cription:							
Addition:	KITTY HAWK	SHORES - REVI	SED	Bloc	k: 41	Lot(s):	18	
				Zoni	ng:			
Address:	111 CARLOW	AVE KILL DEVI	IL HILLS					
PIN:	988419711646	1		Parcel Number:	0039420	000		
PARCEL:								
MECHANICAL H-3 CLASS 1:		PO BOX 31	HARCO AIR PO BOX 3156 KITTY HAWK, NC 27949 207-1371				cense: 30194 pires: 12/31/2020	
ELECTRICAL -	LIMITED:	136 SCHOO	Cooper Barnes OLHOUSE RD Ilsl, NC 27948 62			License: 29254 Expires: 04/26		
APPLICANT:	Lawrence Cooper Ba 136 SCHOOLHOUSI Kill Devil Hillsl, NC 27 252-202-4162	OV	OWNER: McNear, Logan 430 Lark St. YORK HAVEN, PA 17370					

PROJECT DESCRIPTION: HVAC



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Page 1 of 2

MC2020-079

PROJECT NAME: Logan McNear SITE ADDRESS: 111 CARLOW AVE KILL DEVIL HILLS MECHANICAL ISSUED: 04/28/2020

EXPIRES: 10/25/2020

	DETAILS
Permit	
Name	Value
PURPOSE	Residential Repair/Remodel
CONSTRUCTION COST	7500.00
FLOOD ZONE	AE
BASE FLOOD ELEVATION	8
NATURAL GAS SIGNOFF	Ν
	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.

Rife

Charles Thuman Issued By:

Contractor or Authorized Agent: _

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Page 2 of 2

Date: 04 / 28 / 2020



Town of Kill Devil Hills

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

APR 2 9 2020

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Planning and Inspection Department

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MC2020-078 PROJECT NAME: Alfred Ringler SITE ADDRESS: 1221 VA DARE TRL S KILL DEVIL HILLS EXPIRES: 10/25/2020 EXPIRES: 10/25/2020

R A Hoy Heating & Air PO Box 235 **APPLICANT:** Ringler, Alfred **OWNER:** 2029 Glen Cove Rd. kitty hawk, nc 27949 252-261-2008 DARLINGTON, MD 21034 **MECHANICAL: RAHOY** License: 13056 PO Box 265 Expires: 12/31/2020 Kitty Hawk, NC 27949 252-261-2008 PARCEL: Parcel PIN: 989309073323C1 028961000 Number: 1221 VA DARE TRL S KILL DEVIL HILLS Address: Zoning: UNIT C-1 LT Addition: Block: 5 Lot(s): 11-12 Legal Description: FEES: Paid Due **Mechanical Permit Fee** \$150.00 \$0.00 Totals : \$150.00 \$0.00 PROJECT DESCRIPTION: HVAC

DETAILS Permit Value Name Value PURPOSE Residential Repair/Remodel CONSTRUCTION COST 5852.00 FLOOD ZONE VE BASE FLOOD ELEVATION 11 NATURAL GAS SIGNOFF N

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Page 1 of 2

4/29/2020M Pay Pal MC2020-078 PROJECT NAME: Alfred Ringler SITE ADDRESS: 1221 VA DARE TRL S KILL DEVIL HILLS

~

EXPIRES: 10/25/2020

REQUIRED INSPECTIONS

Final

CONDITIONS

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

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

Charles Thuman Issued By:

Contractor or Authorized Agent:

MARCEY BAUM

Date: 04 / 28 / 2020

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Page 2 of 2



Town of Kill Devil Hills

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

APR 29 2020

Planning and Inspection Department

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MC2020-075 MECHANICAL PROJECT NAME: Barron HVAC Changeout ISSUED: 04/27/2020 SITE ADDRESS: 117 CHARLOTTE ST KILL DEVIL HILLS EXPIRES: 10/24/2020 BARRON, BARBARA JEAN APPLICANT: **OWNER:** BARRON, BARBARA JEAN P O BOX 912 P O BOX 912 GUNNISON, CO 81230 GUNNISON, CO 81230 CONTRACTOR: NORRIS MECHANICAL P.O. Box 217 HARBINGER, NC 27941 252-491-2673 **PLUMBING, MECHANICAL:** NORRIS MECHANICAL License: 11100 Expires: 12/31/2020 P.O. Box 217 HARBINGER, NC 27941 252-491-2673 PARCEL: Parcel PIN: 988406390746 001896000 Number: Address: 117 CHARLOTTE ST KILL DEVIL HILLS Zoning: **AVALON BEACH ANNEX 1** Addition: Block: 0 Lot(s): 453 Legal Description: FEES: Paid Due Mechanical Permit Fee \$150.00 \$0.00 Totals : \$0.00 \$150.00

PROJECT DESCRIPTION: Replace 2.5 Ton HVAC with same

PAID 4/29/2020 DL Pay PAL

Des ID. 044-46407-440546040046-00464605-0040000

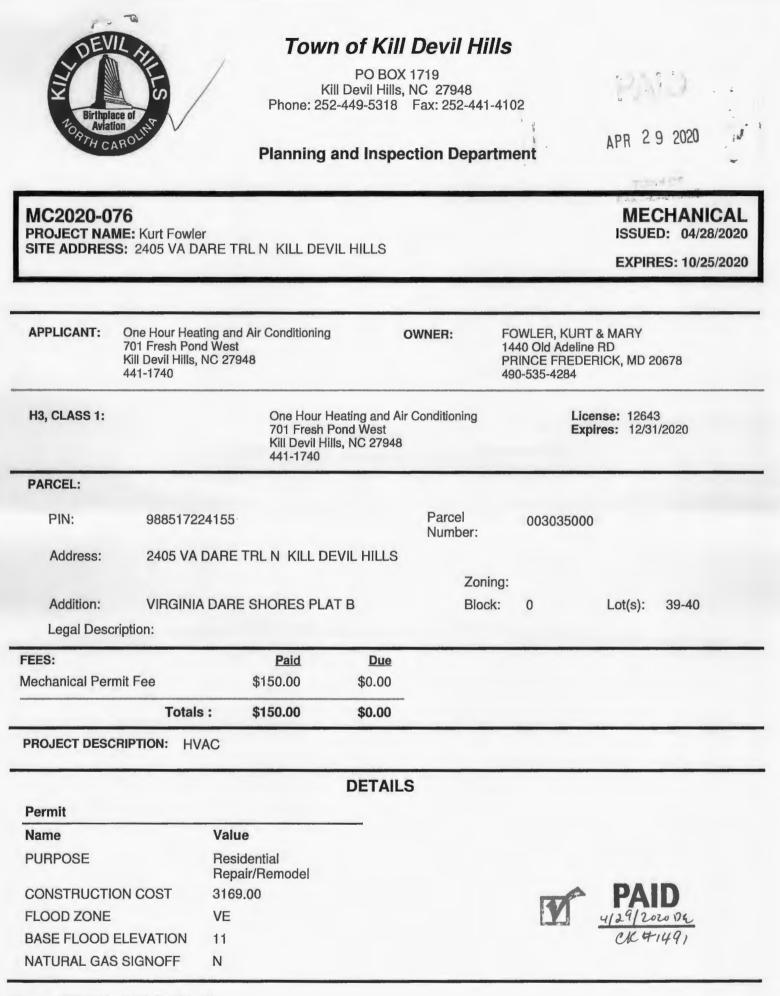
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Page 1 of 2

MC2020-075 PROJECT NAME: Barron HVAC Changeout SITE ADDRESS: 117 CHARLOTTE ST KILL DEVIL HILLS

EXPIRES: 10/24/2020

		DETAILS	
Permit			
Name	Value		
PURPOSE	Residential Repair/Remodel		
CONSTRUCTION COST	5700.00		
FLOOD ZONE	AE		
BASE FLOOD ELEVATION	9		
NATURAL GAS SIGNOFF	Ν		
OCCUPANCY TYPE	One & Two Fami Dwelling	ly	
	REC	QUIRED INSPECTIONS	
Final			
		CONDITIONS	
This permit becomes null and	l void if work or cons	struction authorized is not com	menced within 6 months or if construction
II provisions of Laws and	Ordinances dov	verning this type of work	now the same to be true and correct.
pecified herein or not. Th ne provisions of any othe אל	d Ordinances gov le granting of a p	verning this type of work the ermit does not presume the regulating construction o	now the same to be true and correct. will be complied with whether o give authority to violate or cancel r the performance of construction.
specified herein or not. Th he provisions of any othe ${\cal W}$ ssued By:	d Ordinances gov le granting of a p r state/local law larty Shaw	verning this type of work the ermit does not presume to be the second s	will be complied with whether o give authority to violate or cancel
pecified herein or not. Th he provisions of any othe ໗ ssued By:	d Ordinances gov le granting of a p r state/local law larty Shaw	verning this type of work the ermit does not presume the regulating construction o	will be complied with whether o give authority to violate or cancel r the performance of construction. 04 / 28 / 2020
pecified herein or not. The provisions of any othe ssued By:	d Ordinances gov le granting of a p larty Shaw	verning this type of work the ermit does not presume the regulating construction o	will be complied with whether o give authority to violate or cancel r the performance of construction.
pecified herein or not. The provisions of any othe ssued By:	d Ordinances gov le granting of a p larty Shaw	Verning this type of work to bermit does not presume to regulating construction o Hersey Norris	will be complied with whether o give authority to violate or cancel r the performance of construction. 04 / 28 / 2020 Date:
specified herein or not. Th he provisions of any othe	d Ordinances gov le granting of a p larty Shaw	Verning this type of work to bermit does not presume to regulating construction o Hersey Norris	will be complied with whether o give authority to violate or cancel r the performance of construction. 04 / 28 / 2020



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Page 1 of 2

MC2020-076 PROJECT NAME: Kurt Fowler SITE ADDRESS: 2405 VA DARE TRL N KILL DEVIL HILLS

EXPIRES: 10/25/2020

REQUIRED INSPECTIONS

Final

CONDITIONS

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

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

Charles Thuman Issued By:

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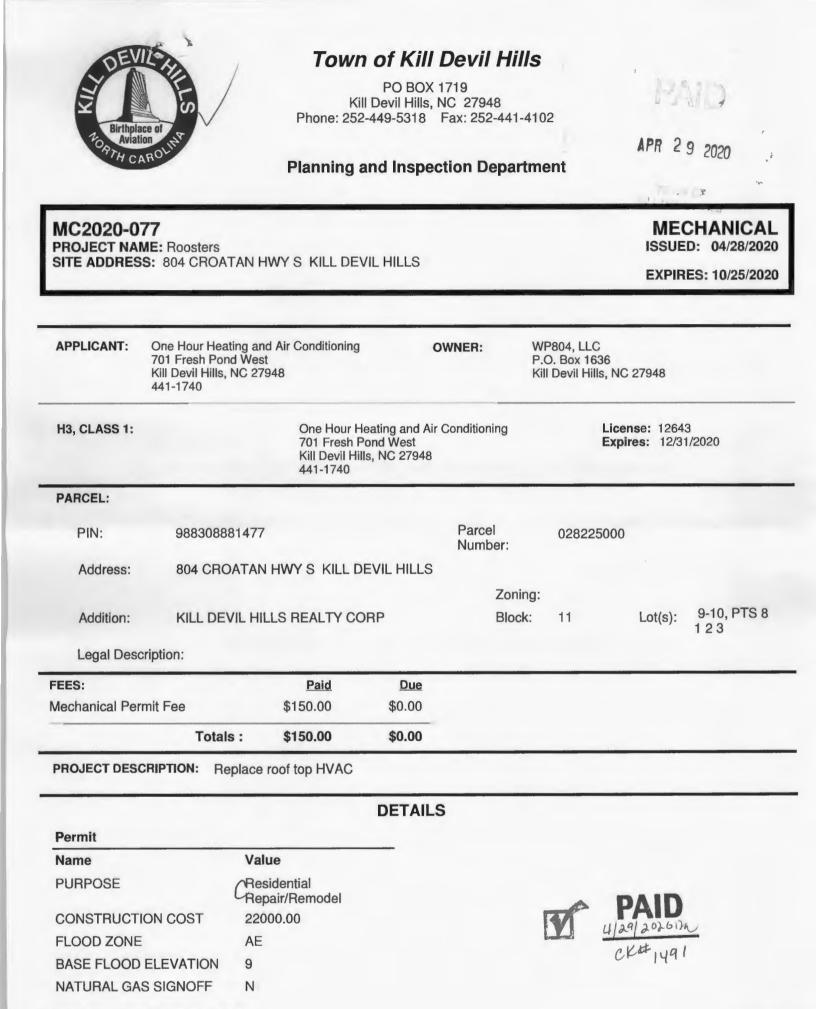
Tom McDonald

Date: 04 / 28 / 2020

Contractor or Authorized Agent:

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Page 2 of 2



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Page 1 of 2

Des ID. 45-14004-104504-044-440046457-45064-0000

MC2020-077

PROJECT NAME: Roosters SITE ADDRESS: 804 CROATAN HWY S KILL DEVIL HILLS

Charles Thuman

EXPIRES: 10/25/2020

REQUIRED INSPECTIONS

Final

CONDITIONS

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

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

Issued By:

Contractor or Authorized Agent:

Tom McDonald

Date: 04 / 28 / 2020

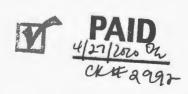
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Page 2 of 2

Des ID. 45-44004-404504-044-440046457-45064-0000

Birlhplace Aviation	STILL'S	k Phone: 25	n of Kill I PO BOX 1 (ill Devil Hills, N 2-449-5318 F and Inspec	719 IC 27948 Fax: 252-441-4	102	APR	27 202	20
	4 E: Coldwell Banker : 2503 CROATAN H	WYN KILLD	EVIL HILLS					SIG D: 04/21/202 ES: 10/18/202
	ADLIGHT SIGNS 600 West Boundry Stre Kill Devil Hills, NC 2794 252-449-2800	et 8	01		Jones, Gor 2503 N Cro Kill Devil H 252-202-18	ills, NC 2		
CONTRACTOR:			Boundry Street ills, NC 27948				se: LEGA es: 12/31	CY UNKNOW! /2030
PARCEL:								
PIN:	988517114857			Parcel Number:	00044	44000		
Address:	2503 CROATAN	HWY N KILL	DEVIL HILLS					
//00/000.				Zoning	g:			
				Block	21		Lot(s):	10-20
Addition:	VIRGINIA DARE	SHORES						
		SHORES						
Addition: Legal Descrij FEES:		SHORES Paid	Due					
Addition:			<u>Due</u> \$0.00					

PROJECT DESCRIPTION: Replace panel in free-standing sign and replace two signs on building



SG2020-014

PROJECT NAME: Coldwell Banker SITE ADDRESS: 2503 CROATAN HWY N KILL DEVIL HILLS SIGN ISSUED: 04/21/2020

EXPIRES: 10/18/2020

DETAILS

Permit	
Name	Value
# OF SIGNS	3
SIGN - FREE STANDING PERMITTED (SQFT)	64.00
SIGN - FREE STANDING PROPOSED (SQ FT)	63.00
SIGN - WALL PERMITTED (SQFT)	182.00
SIGN- WALL PROPOSED (SQ FT)	34.52
ZONING DISTRICT	С
PURPOSE	Commercial Accessory
CONSTRUCTION COST	3599.75
FLOOD ZONE	AE

REQUIRED INSPECTIONS

Final

CONDITIONS

* 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.

* 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.

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

* Zoning Final Inspection is required.

SG2020-014 PROJECT NAME: Coldwell Banker SITE ADDRESS: 2503 CROATAN HWY N KILL DEVIL HILLS SIGN ISSUED: 04/21/2020

EXPIRES: 10/18/2020

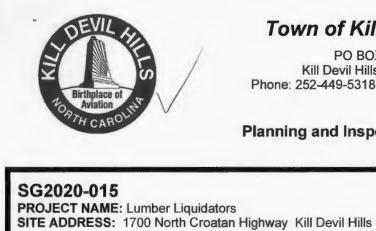
I hereby certify that I have read and examined this application and know the same to be true and correct. All provisions of Laws and Ordinances governing this type of work will be complied with whether specified herein or not. The granting of a permit does not presume to give authority to violate or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

issued By: Charles Thuman

Contractor or Authorized Agent:

Pamela smith

Date: 04 / 22 / 2020



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

SIGN ISSUED: 04/27/2020

EXPIRES: 10/24/2020

APPLICANT:	600 West Boundry Street		600 West Boundry Street Kill Devil Hills, NC 27948			WNER:	OLIVOLA, MARK NANCY O WALTON P O BOX 364 KILL DEVIL HILLS, NC 27948			
CONTRACTOR:		ADLIGHT 5 600 West E Kill Devil H 252-449-28	Boundry Street ills, NC 27948			License: LEGACY UNKNOWN Expires: 12/31/2030				
PARCEL:										
PIN:	988410374122			Parcel Number:	00273	39000				
Address:	1700 North Croa	atan Highway I	Kill Devil Hills							
				Zonin	g:					
Addition:	HEDRICKS AD	DITION - CRO	ATAN SH	Block	: 0	Lot(s): 0				
Legal Descr	ription:									
FEES:		Paid	Due							
Sign Permit Fee		\$100.00	\$0.00		r					
	Totals :	\$100.00	\$0.00							
PROJECT DESC	RIPTION: Replace	sign faces on b	uilding			PINIS				
					2					
					T a La	APR 28 2020				
						3 1				
						to MCF GLL DEVIL MALS				

ţ.

PROJECT NAME: Lumber Liquidators SITE ADDRESS: 1700 North Croatan Highway Kill Devil Hills SIGN ISSUED: 04/27/2020

EXPIRES: 10/24/2020

DETAILS

Permit	
Name	Value
# OF SIGNS	1
SIGN - WALL PERMITTED (SQFT)	50.00
SIGN- WALL PROPOSED (SQ FT)	50.00
ZONING DISTRICT	С
PURPOSE	Commercial Accessory
CONSTRUCTION COST	3000.00
FLOOD ZONE	AE

REQUIRED INSPECTIONS

Final

CONDITIONS

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

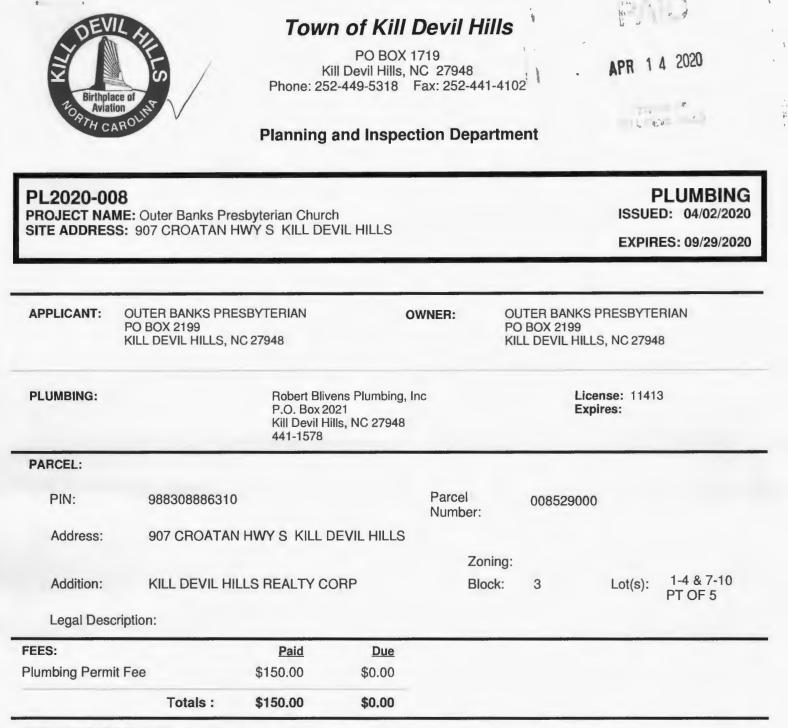
No exposed neon, argon, krypton or similar gas lighting allowed except as permitted in Section 153.077(B)(10).

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

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: och weth Contractor or Authorized Agent: Date:



PROJECT DESCRIPTION: Install new backflow preventer.



PROJECT NAME: Outer Banks Presbyterian Church **SITE ADDRESS:** 907 CROATAN HWY S KILL DEVIL HILLS

EXPIRES: 09/29/2020

DETAILS

Permit	
Name	Value
PURPOSE	Commercial Repair/Remodel
CONSTRUCTION COST	300.00
CONSTRUCTION TYPE	III
FLOOD ZONE	AE
BASE FLOOD ELEVATION	9
OCCUPANCY TYPE	Assembly

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.

* Call Public Services for final inspection.

Contractor or Authorized Agent:

Neau!

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:

Robert Blivens

Date: 04 / 03 / 2020

DEVIL	- Ala	Tow	n of Kil	I Devil Hill	S		
Ĭ.	ST			X 1719 5, NC 27948 Fax: 252-441-4	102	Jones Frank)
20 Aviation	OLINP V	Planning	and Insp	ection Depart	ment	APR 15	2020
						TOWN	
PL2020-009 PROJECT NAM SITE ADDRESS		I KILL DEVIL HI	LLS			ISSUE	PLUMBING ED: 04/13/2020 RES: 10/10/2020
	JUDY IHLE 1522 Ketch Ln. KILL DEVIL HILLS, I	NC 27948		OWNER:	JUDY IHLE 1522 Ketch KILL DEVIL		48
	Seahawk Plumbing 105 Teal Ct Grandy, NC 27939 252-216-7569						
PLUMBING CLAS	3S I:	Seahawk F 105 Teal C Grandy, NO 252-216-75	t C 27939			License: 3297 Expires: 12/3	
PARCEL:							
PIN:	988413149116	6		Parcel Number:	02698	35000	
Address:	1522 KETCH I	LN KILL DEVIL	HILLS	7			
Addition:	FIRST FLIGHT	TVLG PH A SEC	3	Zonin Block	-	Lot(s):	60
Legal Descri	ption:					.,	
FEES:		Paid	Due				
Plumbing Permit	Fee	\$150.00	\$0.00				
-							

PROJECT DESCRIPTION: Replace water service line from meter to house



PL2020-009 PROJECT NAME: Ihle Plumbing SITE ADDRESS: 1522 KETCH LN KILL DEVIL HILLS

PLUMBING ISSUED: 04/13/2020

EXPIRES: 10/10/2020

DETAILS

Permit	
Name	Value
PURPOSE	Residential Repair/Remodel
CONSTRUCTION COST	1400.00
CONSTRUCTION TYPE	V
FLOOD ZONE	AE
BASE FLOOD ELEVATION	8

REQUIRED INSPECTIONS

Rough In

Downait

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.

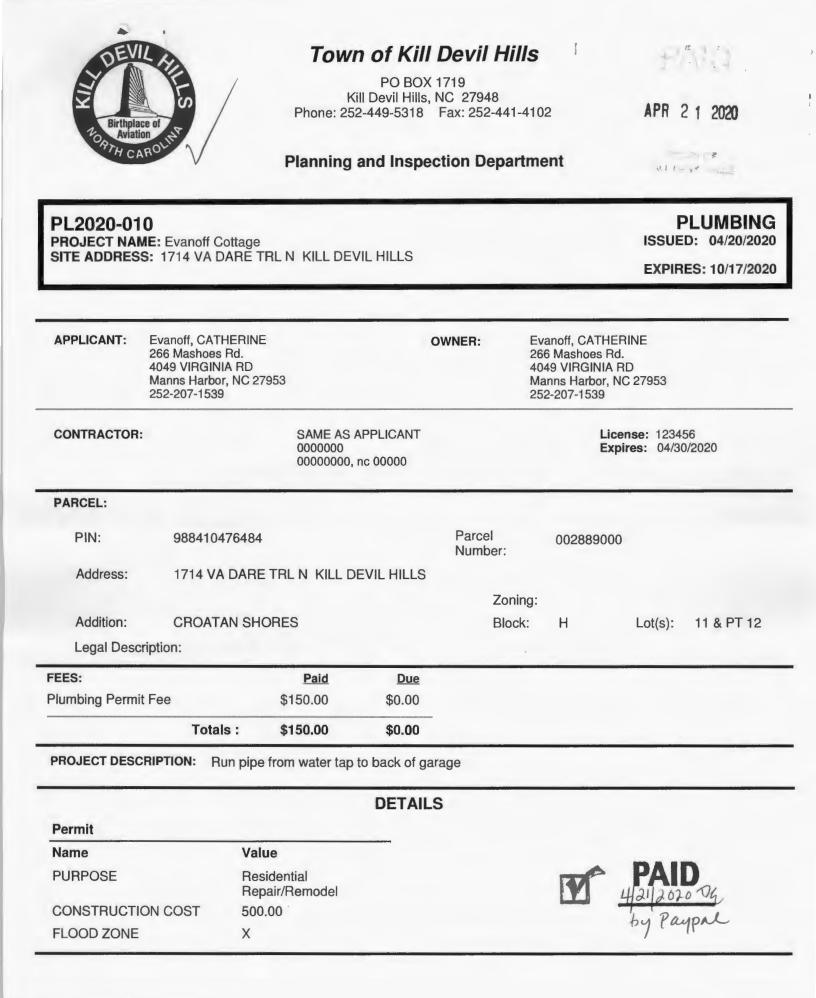
Issued By: Charles Thuman

Contractor or Authorized Agent:

Kenny Russell III

Date: 04 / 13 / 2020

Printed by : CTHUMAN on: 04/13/2020 10:45 AM



PL2020-010	
PROJECT NAME: Evanoff Cottage	
SITE ADDRESS: 1714 VA DARE TRL N KILL	DEVIL HILLS

EXPIRES: 10/17/2020

REQUIRED INSPECTIONS

Final

CONDITIONS

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Issued By: Charles Thuman

Rough In

Contractor or Authorized Agent:

Cathin WEnd

Date: 04 / 20 / 2020

DEVIL	in the	Tow	n of Kill	Devil Hil	ls		
Birthplace	ST	K Phone: 25	PO BOX ill Devil Hills, I 2-449-5318		4102		
TORTH CAP	OLINY	Planning	and Inspec	ction Depar	tment	APR - 1 2020	P
EL2020-021 PROJECT NAM SITE ADDRESS		TRLN KILL DE ^V	VIL HILLS			ELECTRI ISSUED: 03/3 EXPIRES: 09/2	1/2020
	Hill, William 15261 Larkspur LN DUMFRIES, VA 220	25	c	OWNER:	Hill, William 15261 Larks DUMFRIES,		
ELECTRICAL-UN	LIMITED:	PO Box 12	ills, NC 27948	SERVICES		License: 26395 Expires: 09/29/2020	
PARCEL:							
PIN:	98840648554	0		Parcel Number:	002796	011	
Address:	1817 VA DAR	E TRL N KILL D	EVIL HILLS				
				Zoni	ng:		
Addition:	Croatan Shore	es Amended		Block	<: D	Lot(s): 11	
Legal Descri	ption:						
FEES:		Paid	Due				
Electrical Permit I	ee	\$150.00	\$0.00				

PROJECT DESCRIPTION: Meter base changout

EL2020-021 PROJECT NAME: William Hill SITE ADDRESS: 1817 VA DARE TRL N KILL DEVIL HILLS

EXPIRES: 09/27/2020

DETAILS

Fernin	
Name	Value
ZONING DISTRICT	OIR
PURPOSE	Residential Repair/Remodel
CONSTRUCTION COST	600.00
CONSTRUCTION TYPE	V
FLOOD ZONE	VE
BASE FLOOD ELEVATION	11
OCCUPANCY TYPE	One & Two Family Dwelling

REQUIRED INSPECTIONS

Final

Pormit

CONDITIONS

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Issued By:

Contractor or Authorized Agent:

Doniel Bryan Muthle

Date: 03 / 31 / 2020

DEVIL	F = 3	Tow	n of Kill	Devil H	lills		
Birlinlane of	5	к	PO BOX ill Devil Hills, 2-449-5318	1719 NC 27948		PATO	
Aviation Ariation		Planning	and Inspe	ction Dep	partment	APR 1 3 2020	
						1	
EL2020-022 PROJECT NAME: Ve	rizon Wireles	c				ELECTRICAL ISSUED: 04/06/2020	
SITE ADDRESS: RO			Kill Devil Hills		2	EXPIRES: 10/03/2020	
POB	N OF KILL DE\ ox 1719 evil Hills, NC 27			OWNER:	P O Box	DF KILL DEVIL HILLS 1719 I Hills, NC 27948	
ELECTRICAL-UNLIMIT	129 Brown JOHNSON	TSC Construction, LLC 129 Brown ST JOHNSON CITY, NY 13790 607-217-7001			License: 09127 Expires:		
PARCEL:							
1 11 4.	OW 2706 N	Croatan		Parcel Number			
Address: R	OW 2706 No	rth Croatan Hwy	Kill Devil Hi	lls			
A el eltat e una					oning:		
Addition: Legal Description:	Right of w	ay		В	lock:	Lot(s):	
FEES:		Paid	Due				
Electrical Permit Fee		\$150.00	\$0.00				
	Totals :	\$150.00	\$0.00				
PROJECT DESCRIPTIO	N: Install n	ew equipment, m	neter base ar	nd disconned	ction on new	pole in DOT ROW.	
			DETAIL	S			
Permit					-	PAID	
Name	Va	lue			SZ .	th 1/9/2020	
ZONING DISTRICT	С						
CONSTRUCTION CO	ST 10	00.00					
OCCUPANCY TYPE	Bu	siness					

EL2020-022	
PROJECT NAME: Verizon Wireless	
SITE ADDRESS: ROW 2706 North Croatan Hwy	Kill Devil Hills

- -

ELECTRICAL ISSUED: 04/06/2020

EXPIRES: 10/03/2020

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.
Marty Shaw
Issued By:

Contractor or Authorized Agent:

Jennifer Chotas

04 / 09 / 2020 Date:

Sound State	Phone: 2	PO BOX 171 Kill Devil Hills, NC 252-449-5318 Fax	9 27948 <: 252-441-41	APR 1 3 2020
E: Verizon V		lorth Kill Devil Hills		ELECTRICAL ISSUED: 04/06/2020 EXPIRES: 10/03/2020
P O Box 1719	9	OWN	P 1	FOWN OF KILL DEVIL HILLS P O BOX 1719 102 Town Hall Drive KILL DEVIL HILLS, NC 27948
ILIMITED:	129 Broy JOHNSC	wn ST N CITY, NY 13790		License: 09127 Expires:
Highway	y North	1	Number:	
ROW 19	920 Croatan Highway	North Kill Devil Hi		
ption: Rig	ht of way			(-).
	Paid	Due		
Fee	\$150.00	\$0.00		
Tota	ls : \$150.00	\$0.00		
RIPTION: In	stall new equipment,	meter base and dis	sconnection o	on new pole in DOT ROW.
		DETAILS		
				DAID
	Value		M	PAID A y/show
	C		hadan'	
N COST	10000.00			
	TOWN OF KI P O Box 1719 Kill Devil Hills NLIMITED: ROW 19 Highway ROW 19 Fee Tota RIPTION: Ir	Phone: 2 Phone: 2 Planning Planni	PO BOX 171 Kill Devil Hills, NC Phone: 252-449-5318 Fax Planning and Inspection S. E: Verizon Wireless E: ROW 1920 Croatan Highway North Kill Devil Hills TOWN OF KILL DEVIL HILLS P O Box 1719 Kill Devil Hills, NC 27948 NLIMITED: TSC Construction, LLC 129 Brown ST JOHNSON CITY, NY 13790 607-217-7001 ROW 1920 Croatan Highway North ROW 1920 Croatan Highway North Kill Devil Hill ption: Right of way Fee \$150.00 \$0.00 Totals : \$150.00 \$0.00 RIPTION: Install new equipment, meter base and dist DETAILS Value ICT C	Planning and Inspection Departm E: Verizon Wireless E: ROW 1920 Croatan Highway North Kill Devil Hills TOWN OF KILL DEVIL HILLS P O Box 1719 Kill Devil Hills, NC 27948 WLIMITED: TSC Construction, LLC 129 Brown ST JOHNSON CITY, NY 13790 607-217-7001 ROW 1920 Croatan Highway North ROW 1920 Croatan Highway North Kill Devil Hills Zoning Block: ption: Right of way Fee \$150.00 \$0.00 Totals : \$150.00 \$0.00 RIPTION: Install new equipment, meter base and disconnection of DETAILS Value ICT C

EL2020-023	
PROJECT NAME: Verizon Wireless	
SITE ADDRESS: ROW 1920 Croatan Highway North	Kill Devil Hills

ELECTRICAL ISSUED: 04/06/2020

EXPIRES: 10/03/2020

REQUIRED INSPECTIONS

Final

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CONDITIONS

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Issued By:

Contractor or Authorized Agent:

Jennifer Chotas

04 / 08 / 2020 Date:

Birthplace of Aviation TH CAROLINE		K Phone: 25	n of Kill D PO BOX 17 ill Devil Hills, NC 2-449-5318 Fa and Inspecti	19 3 27948 1x: 252-441	-4102	APR 13 2020
EL2020-024 PROJECT NAME: Ve SITE ADDRESS: RO			rth Kill Devil Hill	S		ELECTRICAL ISSUED: 04/06/2020 EXPIRES: 10/03/2020
POB	N OF KILL DEV lox 1719 avil Hills, NC 27		ow	NER:	P O Box	F KILL DEVIL HILLS 1719 Hills, NC 27948
ELECTRICAL-UNLIMIT	ED:	129 Brown	CITY, NY 13790			License: 09127 Expires:
PARCEL:						
1 11 1.	OW 3102 Cro lighway North			Parcel Number:		
Address: F	OW 3102 Cro	oatan Highway N	lorth Kill Devil H	lills		
				Zoni	ng:	
Addition: Legal Description:	right of wa	IV.		Bloc	k:	Lot(s):
FEES:		Paid	Due			and the second s
Electrical Permit Fee		\$150.00	\$0.00			
	Totals :	\$150.00	\$0.00			
PROJECT DESCRIPTIC	N: Install ne	ew equipment, m	leter base and d	isconnectio	n on new j	pole in DOT ROW.
Permit			DETAILS			DAID
Name	Val	lue			SV	4/5/2020
ZONING DISTRICT	С				tendersel)	11 /
CONSTRUCTION CO		00.00				
OCCUPANCY TYPE	Bu	siness				

EL2020-024	
PROJECT NAME: Verizon Wireless	
SITE ADDRESS: ROW 3102 Croatan Highway North Kill Devil Hills	

ELECTRICAL ISSUED: 04/06/2020

EXPIRES: 10/03/2020

REQUIRED INSPECTIONS

Final

· ·····

CONDITIONS

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Issued By:

Contractor or Authorized Agent:

Jennifer Chotas

Date: 04 / 09 / 2020

DEVIL	2		Town	of Kill		Hills		Ka Li d	
PO BOX 1719 Kill Devil Hills, NC 2 Phone: 252-449-5318 Fax:		NC 2794	8 -441-410	2	APR 1 7 2020				
20 Aviation Arth CAROL			Planning a	and Inspe	ction De	partmo	ent	11 1123	
EL2020-025 PROJECT NAME: (Colony	Bealty							ECTRICAL
SITE ADDRESS: 3	118 ĆF	ROATAN HW	Y N KILL DE	EVIL HILLS				EXPI	RES: 10/05/202
PO Kill	WIRE Box 27 Devil Hi 2-256-10	lls, NC 27948			OWNER:	P	ERRY, JAN O BOX 69 LL DEVIL	IES F 1 HILLS, NC 279	48
ELECTRICAL, LIMIT	ED:		LOWIRE PO Box 275 Kill Devil Hill 252-256-107	ls, NC 27948				License: 194 Expires: 10/0	
PARCEL:									
PIN:	98751	693976803			Parcel Numbe		000332	2003	
Address:	3118 (CROATAN H	WY N KILL I	DEVIL HILLS					
Addition:						Zoning: Block:	55	Lot(s):	UNIT 1 BLDG A
Legal Description	on:								
FEES: Electrical Permit Fee	9	\$	<u>Paid</u> 150.00	<u>Due</u> \$0.00					
	To	tals: \$	150.00	\$0.00					
PROJECT DESCRIPT	TION:	Remodel exis	sting space to	o include wir	ing, lights	and out	ets		
		· · · · · · · · · · · · · · · · · · ·		DETAIL	S				
Permit									
Name		Value							
ZONING DISTRICT		С							
PURPOSE		Comme Repair/F	rcial Remodel						
CONSTRUCTION O	COST	9000.00)					-	PAID
		AE						the set	

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Page 2 of 2

EL2020-025 **PROJECT NAME:** Colony Realty SITE ADDRESS: 3118 CROATAN HWY N KILL DEVIL HILLS

23 A

ELECTRICAL

EXPIRES: 10/05/2020

REQUIRED INSPECTIONS

Final

CONDITIONS

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Charles Thuman issued By:

Rough In

Contractor or Authorized Agent:

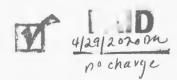
Edie Parsons

04 / 09 / 2020 Date:

ISSUED: 04/08/2020

P Birthplace P Birthplace Aviation	an Shirt	K Phone: 25	n of Kill PO BOX ill Devil Hills, I 2-449-5318 and Inspec	1719 NC 27948 Fax: 252-441	-4102	APR 2	NC#
	E: Town of Kill Devil : 1634 CROATAN H					ISSU	LECTRICAL ED: 04/28/2020 RES: 10/25/2020
	LOWIRE PO Box 2751 Kill Devil Hills, NC 279 252-256-1075	948	C	WNER:	P O BOX 1 102 Town H		
ELECTRICAL, LI	MITED:	LOWIRE PO Box 27 Kill Devil H 252-256-10	ills, NC 27948			License: 194 Expires: 10/	
PARCEL:							
PIN:	988410369451			Parcel Number:	00812	9000	
Address:	1634 CROATAN	HWYN KILL	DEVIL HILLS				
				Zoni	ng:		
Addition:	SUBDIVISION -	NONE		Bloc	k: 0	Lot(s):	0
Legal Descri	ption:						
FEES:		Paid	Due				
Electrical Permit	Fee	\$0.00	\$0.00				
	Totals :	\$0.00	\$0.00				

PROJECT DESCRIPTION: New sub panel and electrical wire clean-up for fire station back training area



. . 5

PROJECT NAME: Town of Kill Devil Hills Fire Department SITE ADDRESS: 1634 CROATAN HWY N KILL DEVIL HILLS

AE

9

EXPIRES: 10/25/2020

DETAILS Value **G&I** Public ZONING DISTRICT PURPOSE Commercial Repair/Remodel 635.00 CONSTRUCTION COST

FLOOD ZONE **BASE FLOOD ELEVATION**

REQUIRED INSPECTIONS

Final

Permit

Name

CONDITIONS

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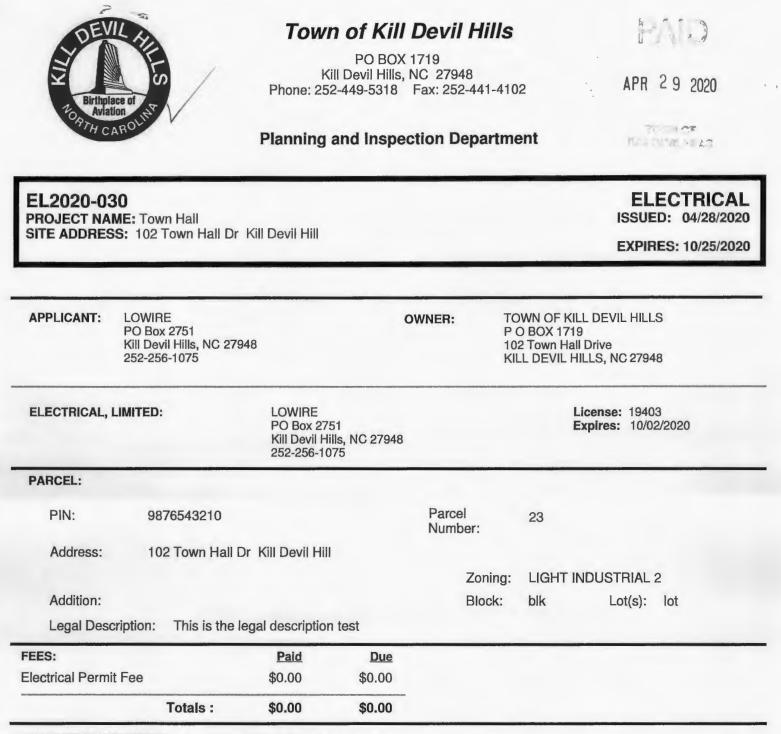
I hereby certify that I have read and examined this application and know the same to be true and correct. All provisions of Laws and Ordinances governing this type of work will be complied with whether specified herein or not. The granting of a permit does not presume to give authority to violate or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

lesued By:	Charles	Thuman
Issued By:	0710416	1 Futuritori

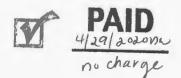
Contractor or Authorized Agent:

Edie Parsons

Date: 04 / 28 / 2020



PROJECT DESCRIPTION: Install outside electrical receptacle



2

EXPIRES: 10/25/2020

DETAILS

Permit	
Name	Value
ZONING DISTRICT	G&I Public
PURPOSE	Commercial Repair/Remodel
CONSTRUCTION COST	2027.00
FLOOD ZONE	AE
BASE FLOOD ELEVATION	9

REQUIRED INSPECTIONS

Final

Downait

CONDITIONS

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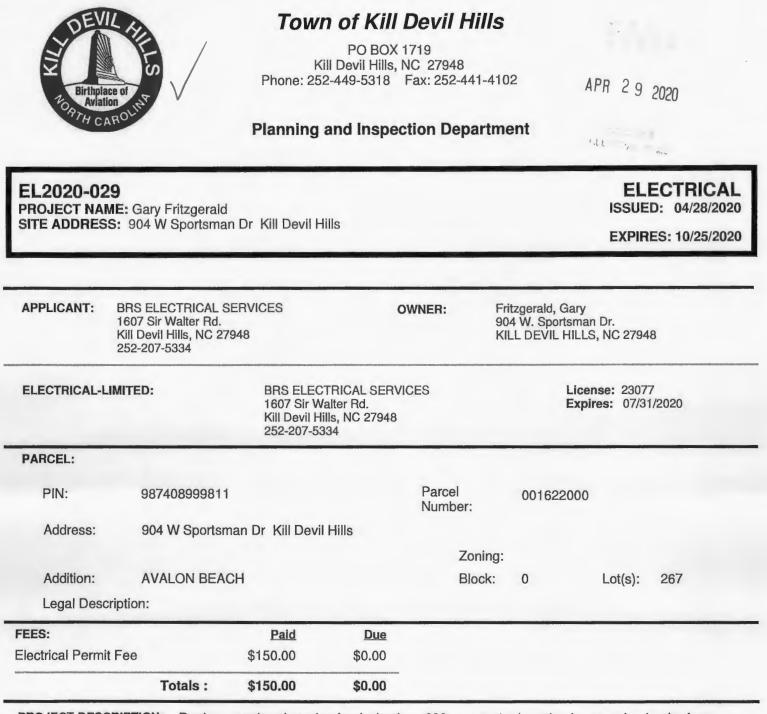
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Issued By:	Charles	Thuman

Contractor or Authorized Agent:

Edie Parsons

Date: 04 / 28 / 2020



PROJECT DESCRIPTION: Replace overhead service feeder/replace 200 amp meter base/replace service feeder from meter to panel

2

4

EXPIRES: 10/25/2020

DETAILS

1 office	
Name	Value
ZONING DISTRICT	RL
PURPOSE	Residential Repair/Remodel
CONSTRUCTION COST	1200.00
FLOOD ZONE	AE
BASE FLOOD ELEVATION	8

REQUIRED INSPECTIONS

Final

Permit

CONDITIONS

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ssued By:	Charles	Thuman	1
ssued By:		1100	

Contractor or Authorized Agent:

Bradley R Smith

Date: 4/28/20

Birthpla Birthpla Aviation Birthpla Bir	ROLL V	Pla	Ki none: 252	PO BOX 1 PO BOX 1 II Devil Hills, N 2-449-5318	719 NC 2794 Fax: 252	8 -441-410			APR :	2 7 2020 ECTRICAL D: 04/27/2020
PROJECT NAM			KILL DEV	IL HILLS						RES: 10/24/2020
APPLICANT:	STEPHEN MI 127 Broadbay Kill Devil Hills	ICHAEL PERLO / Dr , NC 27948	Т	0	WNER:	PC	ace Lan) Box 53 I Devil H 2-449-8	} Iills, NC	ngs LLC 27948	
ELECTRICAL, L	IMITED:	12	27 Broadb	MICHAEL PERI ay Dr Is, NC 27948	_OT				nse: 2133 res: 09/0	
PARCEL:										
PIN:	9893131	44114			Parcel		0051	51001		
Address:	2008 VA	DARE TRL S	KILL DE	EVIL HILLS						
						Zoning:				
Addition:	SUBDIV	ISION - NONE				Block:	0		Lot(s):	PARCEL A
Legal Desci	ription:									
FEES:		E	Paid	Due						
Electrical Permit	Fee	\$150	0.00	\$0.00						
	Tota	ls : \$150	0.00	\$0.00						
PROJECT DESC	RIPTION: C	hanging electri	cal servic	ce from overhe	ead to un	dergrou	nd and i	installir	ng CT cat	pinet outside
				DETAILS						
Permit										
Name		Value								
ZONING DISTF PURPOSE	RICT	C Commercia Repair/Ren				-	M	P	AID	
CONSTRUCTIO	ON COST	1500.00				L		4/2	AID 1/2020	E
BASE FLOOD	ELEVATION	AE						134	- Payp	Ц

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Des ID. 60100-ashoadabb01074ab010142400at7a0444b

EL2020-027 PROJECT NAME: Kill Devil Grill SITE ADDRESS: 2008 VA DARE TRL S KILL DEVIL HILLS

-3

ELECTRICAL ISSUED: 04/27/2020

EXPIRES: 10/24/2020

REQUIRED INSPECTIONS

Final

CONDITIONS

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Issued By: Charles Thuman

Contractor or Authorized Agent:

Stephen Michael Perlot

Date: 04 / 27 / 2020

EY DEVI	THE	1000	PO BOX	I Devil Hil (1719 5, NC 27948	ls		
Birthplac togTH CA	e of R			Fax: 252-441	4102	APR 17	2020
TH CA	ROL	Planning	and Inspe	ection Depar	tment	1	2 Ann an
DW2020-00 PROJECT NAM SITE ADDRESS)6 IE: Miller Driveway 5: 1413 VA DARE T	RLS KILL DE	/IL HILLS			DRI ISSUED: EXPIRES:	
APPLICANT:	P O BOX 1756 P O I			P O BOX 1756	ER, MAC EDWARD OX 1756 DEVIL HILLS, NC 27948		
CONTRACTOR:		SAME AS (UNKNOWN UNKNOWN				icense: Same as C xpires: 12/31/202	
PARCEL:							
PARCEL: PIN:	989309160182			Parcel Number:	0046790	00	
		TRL S KILL D	EVIL HILLS	Number:	0046790	000	
PIN:	1413 VA DARE			Number:	ng:		& PT 17
PIN: Address:	1413 VA DARE KILL DEVIL BE	TRL S KILL D		Number: Zoni	ng:		& PT 17
PIN: Address: Addition:	1413 VA DARE KILL DEVIL BE	TRL S KILL D		Number: Zoni	ng:		& PT 17

PROJECT DESCRIPTION: Driveway addition



DW2020-006 PROJECT NAME: Miller Driveway SITE ADDRESS: 1413 VA DARE TRL S KILL DEVIL HILLS

EXPIRES: 10/13/2020

DETAILS

Permit		
Name	Value	
DRIVEWAY INVERT 2	N	
CULVERT	N	
SURVEYOR NAME AND NUMBER	Marty Ba	Irnete
ZONING DISTRICT	OIR	
CONSTRUCTION COST		3,000.00 00
FLOOD ZONE	VE	
BASE FLOOD ELEVATION	11	
LOT COVERAGE	28.00	

REQUIRED INSPECTIONS

Zoning Final

-

Final

CONDITIONS

	permit becomes null and void if work or construction authorized is not commenced within 6 months or if construction is suspended for a period of 12 months at any time after work has started.
* NOT	ICE: Call Public Services Department (252) 480-4080 before pouring driveway!
* Cons	struction must meet all aspect of Chapter 153 Zoning including lot coverage and setbacks.
* Zonir	ng Final Inspection is required.
* Deve	elopment must meet all aspects of Chapter 151 Flood Damage Prevention Ordinance including use and elevation.
	S PROPERTY IS LOCATED IN A SPECIAL FLOOD HAZARD AREA. Special Flood Hazard Areas limit the use of enclosures below the lowest floor for parking, building access and limited e only.
	ne VE Zone, there shall be no alteration of the sand dunes which would increase potential flood damage. The VE Zone, there shall be no fill used for stuctual support.
	vation Certificate will be required at time of application, 21 days from the establishment of the lowest floor and at action completion.
	OPER MUST OBTAIN ALL THE NECCESSARY FEDERAL, STATE AND LOCAL PERMITS BEFORE THIS

* Proposed driveway shall be installed to meet all V-Zone standards. Installation of concrete shall no greater than 4 inches, frangible, and in 4x4 saw cut segments.

DW2020-006 **PROJECT NAME:** Miller Driveway SITE ADDRESS: 1413 VA DARE TRL S KILL DEVIL HILLS

DRIVEWAY ISSUED: 04/16/2020

EXPIRES: 10/13/2020

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. Cameron Ray

Issued By:

-.

Contractor or Authorized Agent: ____ Eldin Mol

04 / 16 / 2020 Date:

Printed by : Cray on: 04/16/2020 11:21 AM

Property Birthplac Birthplac Aviatio	STITLE S	K Phone: 25	PO BOX ill Devil Hills, I 2-449-5318		102	APR	1 7 2020
EL2020-020 PROJECT NAM SITE ADDRESS	6 IE: Jacobs Electrica S: 511 TELEGRAP	al H CT KILL DEV	IL HILLS			ISSUE	ECTRICAL ED: 04/15/2020 RES: 10/12/2020
APPLICANT:	JACOBS, JOHN 5301 FRANKLIN CIF WESTMINSTER, CA		c			IOHN NKLIN CIRCLE STER, CA 92683	
CONTRACTOR:	POP'S REPAIR P. O. Box 2380 Kill Devil Hillsl, NC 2 256-4400	7948					
H-1, H-2, H-3, CL	ASS I:	POP'S REF PO Box 113 Kill Devil Hi				License: 3414 Expires: 12/3	
PARCEL:							
PIN:	988418322237	7		Parcel Number:	00404	46018	
Address:	511 TELEGRA	PH CT KILL DE	VIL HILLS				
				Zoning			
Addition:	WRIGHT WOO	DDS		Block	0	Lot(s):	18
Legal Descr	iption:						
FEES:		Paid	Due				
Electrical Permit	Fee	\$150.00	\$0.00				
	Totals :	\$150.00	\$0.00				

PROJECT DESCRIPTION: new wiring for heat pump and 2 new circuits for septic system

PAID M

Dormit

EL2020-026 **PROJECT NAME:** Jacobs Electrical SITE ADDRESS: 511 TELEGRAPH CT KILL DEVIL HILLS

EXPIRES: 10/12/2020

DETAILS

Value
RL
Residential Repair/Remodel
2000.00
AE
9
One & Two Family Dwelling

REQUIRED INSPECTIONS

Final

CONDITIONS

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

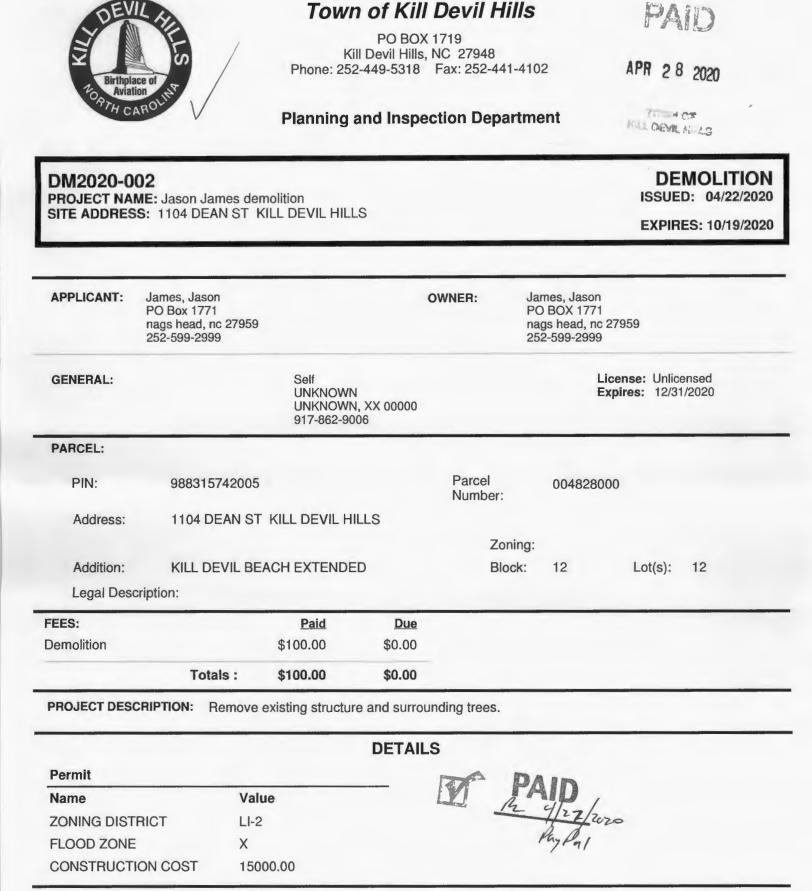
I hereby certify that I have read and examined this application and know the same to be true and correct. All provisions of Laws and Ordinances governing this type of work will be complied with whether specified herein or not. The granting of a permit does not presume to give authority to violate or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

Issued By:

Contractor or Authorized Agent:

Julia Scheer

Date: 04 / 15 / 2020



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Daa 10, 05044000077600040-44-405005700-4050-50-

DM2020-002

PROJECT NAME: Jason James demolition SITE ADDRESS: 1104 DEAN ST KILL DEVIL HILLS DEMOLITION ISSUED: 04/22/2020

EXPIRES: 10/19/2020

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.

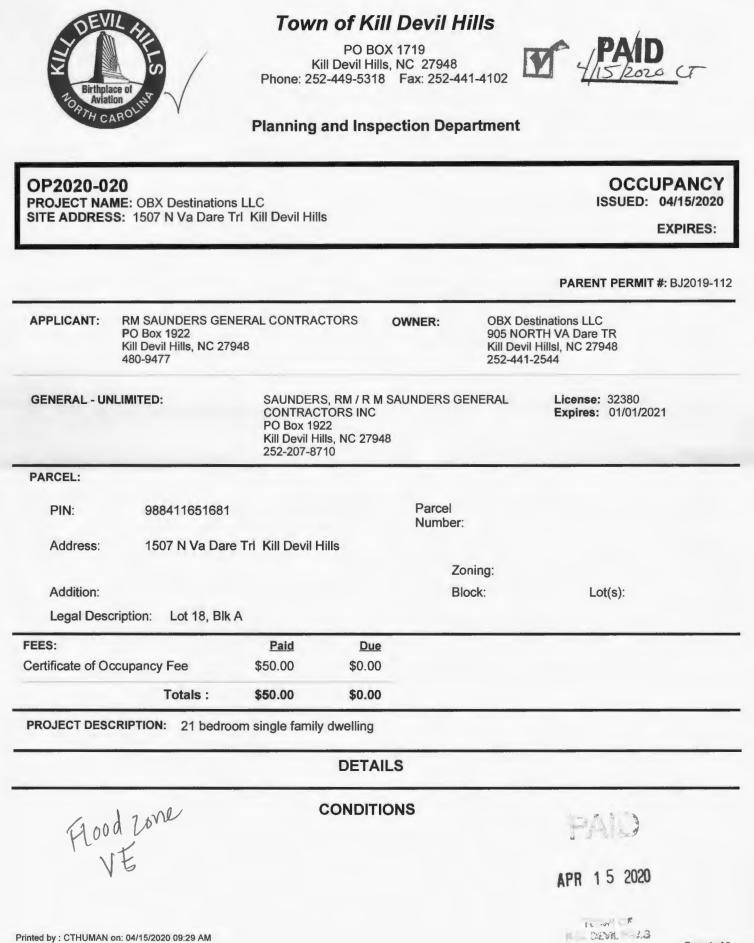
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Issued By:

Contractor or Authorized Agent:

for de

04 / 23 / 2020 Date:



Printed by : CTHUMAN on: 04/15/2020 09:29 AM

2 8

OP2020-020 PROJECT NAME: OBX Destinations LLC SITE ADDRESS: 1507 N Va Dare Trl Kill Devil Hills

2-8

OCCUPANCY ISSUED: 04/15/2020

EXPIRES:

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



Town of Kill Devil Hills

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

APR 2 0 2020

2010

Planning and Inspection Department

OP2020-021

PROJECT NAME: Patricia Schied SITE ADDRESS: 300 HELGA ST E KILL DEVIL HILLS

PARENT PERMIT #: BJ2018-095

OCCUPANCY

ISSUED:

EXPIRES:

APPLICANT:	Dunn Construction Ll 4800 Capri Terrrace Kitty Hawk, NC 2794 252-207-8964		0	WNER:	SCHIED, PA 6725 Hopewe SPRINGFIEL	ell Ave.
GENERAL BUI	LDING-UNLIMITED:	Dunn Cons 4800 Capri Kitty Hawk, 252-207-89	NC 27949			License: 70411 Expires: 02/01/2021
GENERAL BUI	LDING-UNLIMITED:	Dunn Cons 4800 Capri Kitty Hawk, 252-207-89	NC 27949			License: 70411 Expires: 02/01/2021
PARCEL:						
PIN:	988513046414			Parcel Number:	000088	000
Address:	300 HELGA ST	FE KILL DEVIL	HILLS			
				Zoni	ng:	
Addition:	ORVILLE BEA	CH BLK 5		Bloc	k: 5	Lot(s): 11
Legal Des	cription:					
EES:		Paid	Due			
Certificate of O	ccupancy Fee	\$50.00	\$0.00			
	sh Can	\$106.75	\$0.00			
Residential Tra						

PROJECT DESCRIPTION: Proposed 2 bedroom single family dwelling

OP2020-021 PROJECT NAME: Patricia Schied SITE ADDRESS: 300 HELGA ST E KILL DEVIL HILLS

DETAILS

Permit	
Name	Value
# OF TRASH CANS	1
PURPOSE	Residential New
ZONING DISTRICT	С
FLOOD ZONE	VE
BASE FLOOD ELEVATION	11
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.

Contractor or Authorized Agent:

Issued By:

Date: 4-20-20

7.23



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

OP2020-023

PROJECT NAME: Kies new SFD SITE ADDRESS: 503 VA DARE TRL S KILL DEVIL HILLS

OCCUPANCY

ISSUED: 04/28/2020

EXPIRES:

APPLICANT:	Kies, Kenneth & Kathl 6109 RD MCLEAN, VA 22101	een		OWNER:	Kies, Kenne 6109 RD MCLEAN, V	eth & Kathleen	
CONTRACTOR:	RM SAUNDERS GEN PO Box 1922 Kill Devil Hills, NC 279 480-9477		CTORS				
GENERAL BUIL	DING - UNLIMITED:	SAUNDER P.O. box 1 Kill Devil H 252-207-87	922 ills, NC 2794	3		License: 3238 Expires: 01/0	-
PARCEL:							
PIN:	988308990919			Parcel Number:	00423	32000	
Address:	503 VA DARE 1	RLS KILL DE	VIL HILLS				
				Zon	ing:		
Addition:	KILL DEVIL HIL	LS SEC 1		Bloc	k: 1	Lot(s):	1-2
Legal Desc	ription:						
EES:		Paid	Due				
ertificate of Oc	cupancy Fee	\$50.00	\$0.00				
	Totals :	\$50.00	\$0.00				

TK 103

Dormit

OP2020-023 PROJECT NAME: Kies new SFD SITE ADDRESS: 503 VA DARE TRL S KILL DEVIL HILLS

DETAILS

Value
Residential New
OIR
VE
11
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: 4-28-20



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

APR 2 7 2020

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OP2020-022

PROJECT NAME: Natures Walk - Phase 2 SITE ADDRESS: 900 Corrigan St. KILL DEVIL HILLS

EXPIRES:

OCCUPANCY

ISSUED: 04/27/2020

APPLICANT:	LONE CEDAR DEVELOPMENT, LLC 136 LONE CEDAR DR NAGS HEAD, NC 00000			OWNER:	136 LONE	DAR DEVELOPM CEDAR DR AD, NC 00000	ENT, LLC
GENERAL, UN	LIMITED:	281 Kilmar		CONSTRUCTIO	N LLC	License: 6236 Expires: 12/3	
PARCEL:							
PIN:	988311664286			Parcel Number:	0304	94000	
Address:	900 Corrigan S	t. KILL DEVIL H	HILLS				
				Zoni	ing:		
Addition:	KILL DEVIL HI	LLS REALTY CO	ORP	Bloc	k: 54	Lot(s):	5&6
Legal Desc	cription:						
FEES:		Paid	Due				
Certificate of O	ccupancy Fee	\$50.00	\$0.00				
	Totals :	\$50.00	\$0.00				

CONDITIONS

OP2020-022 PROJECT NAME: Natures Walk - Phase 2 SITE ADDRESS: 900 Corrigan St. KILL DEVIL HILLS

OCCUPANCY ISSUED: 04/27/2020

EXPIRES:

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

Issued By: Date: 4.27.20 Contractor or Authorized Agent: _



Town of Kill Devil Hills

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

Planning and Inspection Department

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APR 2 9 2020

4 - Est

OP2020-024

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

OCCUPANCY ISSUED: 04/29/2020

EXPIRES:

APPLICANT:	SOLES, FRANK 527 Chowan St Kill Devil Hills, NC 27 757-448-8162	948	C	OWNER:	527 Cho	I Hills, NC 27948	
CONTRACTOR	Sandy Bottom Home 400 DaVinci Lane kitty hawk, nc 27949 757-448-8162	S					
GENERAL BUIL	DING-LIMITED:	SANDY BC 400 DaVino kitty hawk, 757-448-81	nc 27949	3		License: 67524 Expires: 01/01/2021	
PARCEL:							
PIN:	987520905460)		Parcel Number:			
Address:	526 EDEN ST	REET W Kill De	vil Hills				
				Zoni	ng:		
Addition:				Bloc	k:	Lot(s):	
Legal Desc	ription: Lots 33 &	34, Block 73, Vir	ginia Dare Sh	ores			
FEES:		Paid	Due				
Certificate of Oc		\$50.00	\$0.00				
Residential Tras	h Can	\$106.75	\$0.00				
	Totals :	\$156.75	\$0.00				
PROJECT DESC	RIPTION: New 3 E	edroom 3 Bath	Single Family	Dwelling			
			DETAIL	3			
Permit							
	Va	ue					
Name							

OP2020-024 PROJECT NAME: Sandy Bottom Homes New House SITE ADDRESS: 526 EDEN STREET W Kill Devil Hills	OCCUPANCY ISSUED: 04/29/2020 EXPIRES:
CONDITIONS	
I hereby certify that I have read and examined this application and k All provisions of Laws and Ordinances governing this type of work specified herein or not. The granting of a permit does not presume to the provisions of any other state pocal law regulating construction of	will be complied with whether to give authority to violate or cancel
Issued By: Contractor or Authorized Agent:	Date: _ 니- 2 약- 20 20

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Town of Kill Devil Hills

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

Planning and Inspection Department

ZP2020-016

PROJECT NAME: Rooster Tent Permit SITE ADDRESS: 804 CROATAN HWY S KILL DEVIL HILLS **ZONING PERMIT**

ISSUED: 04/01/2020

EXPIRES: 09/28/2020

APPLICANT:	WP804, LLC P.O. Box 1636 Kill Devil Hills, NC 279	948	0	WNER:	WP804, LLC P.O. Box 163 Kill Devil Hills		
PARCEL:							
PIN:	988308881477			Parcel Number:	028225	000	
Address:	804 CROATAN	HWY S KILL D	DEVIL HILLS				
Addition:	KILL DEVIL HIL	LS REALTY CO	ORP	Zoni Bloc		Lot(s):	9-10, PTS 8 1 2 3
Legal Desc	ription:						
FEES:		Paid	Due				
Fent Permit Fee	9	\$0.00	\$0.00				
	Totals :	\$0.00	\$0.00				

PROJECT DESCRIPTION: Community Supper program tent



ZP2020-016 PROJECT NAME: Rooster Tent Permit SITE ADDRESS: 804 CROATAN HWY S KILL DEVIL HILLS

ZONING PERMIT ISSUED: 04/01/2020

EXPIRES: 09/28/2020

DETAILS Permit Value Name ZONING DISTRICT С FRONT YARD SETBACK 30 REAR YARD SETBACK 30 STREET SIDE SETBACK 15 CAMA PERMIT N CAMA EXEMPTION N PURPOSE **Commercial Accessory** CULVERT N **DRIVEWAY INVERT 2** N

REQUIRED INSPECTIONS

Final

- 23

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.

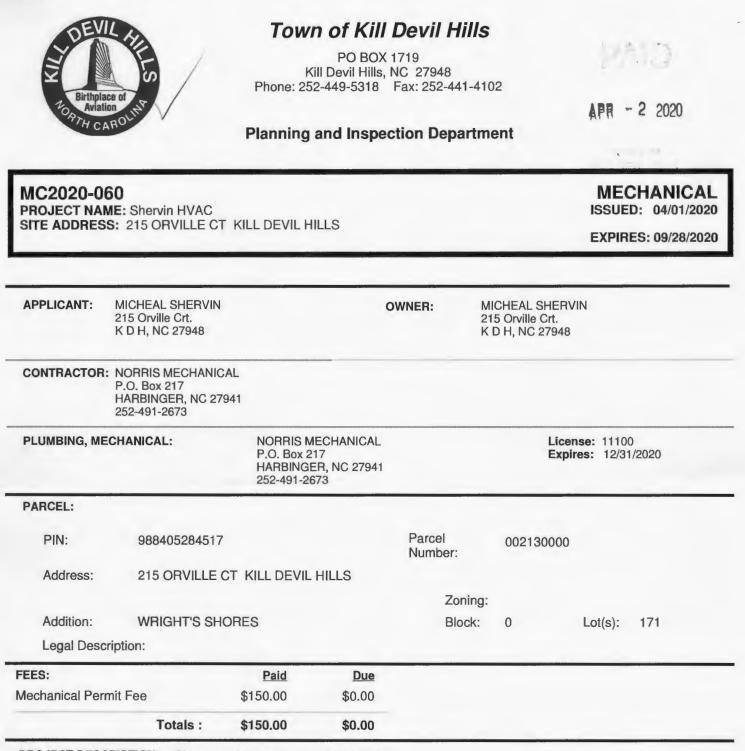
* NOTICE: Call Public Services Department (252) 480-4080 before pouring driveway!

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.

h Guns Issued By:

Contractor or Authorized Agent: Suzanne Woolard Date:

04 / 01 / 2020



PROJECT DESCRIPTION: Change out heat pump and air handler

- ----

MC2020-060 PROJECT NAME: Shervin HVAC SITE ADDRESS: 215 ORVILLE CT KILL DEVIL HILLS

MECHANICAL ISSUED: 04/01/2020

EXPIRES: 09/28/2020

	DETAILS	
Permit		
Name	Value	
PURPOSE	Residential Repair/Remodel	
CONSTRUCTION COST	8000.00	
CONSTRUCTION TYPE	V	
FLOOD ZONE	AE	
BASE FLOOD ELEVATION	8.3	
NATURAL GAS SIGNOFF	Ν	
OCCUPANCY TYPE	One & Two Family Dwelling	

REQUIRED INSPECTIONS

Final

CONDITIONS

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All provisions of Laws and Ordinand specified herein or not. The granting	es governing this type of wor of a permit does not presum	know the same to be true and correct. k will be complied with whether to give authority to violate or cancel or the performance of construction.
Contractor or Authorized Agent:	Hersey Norris	04 / 02 / 2020 Date:

TO Birthple Aviation	ace of the AROUTH P	k Phone: 25	PO BOX (ill Devil Hills, (2-449-5318)		4102	APR	- 6 2020
	ME: Russell Fence SS: 413 WILKINSON	N ST W KILL DE	EVIL HILLS			ISSU	NG PERMIT ED: 04/03/2020 RES: 09/30/2020
APPLICANT:	RUSSELL, KEVIN 413 W Wilkinson Str Kill Devil Hills, NC 2		(OWNER:	RUSSELL, H 413 W Wilkin Kill Devil Hill	KEVIN nson Street Is, NC 27948	
GENERAL:		Self UNKNOW UNKNOW 917-862-90	N, XX 00000			License: Unli Expires: 12/3	
PARCEL:							
PIN:	98752092322	1		Parcel Number:	00302	1000	
Address:	413 WILKINS	ON ST W KILL	DEVIL HILLS				
				Zonir	ng:		
Addition:	VIRGINIA DAR	RE SHORES		Block	:: 58	Lot(s):	12-14
Legal Desc	cription:						
FEES:		Paid	Due				
Fence		\$100.00	\$0.00				

PROJECT DESCRIPTION: Fence on west property line



1 1 . . .

ZP2020-017 **PROJECT NAME:** Russell Fence SITE ADDRESS: 413 WILKINSON ST W KILL DEVIL HILLS

ZONING PERMIT ISSUED: 04/03/2020

EXPIRES: 09/30/2020

DETAILS Permit Value Name 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 Х PURPOSE **Residential Accessory** CONSTRUCTION COST 2500.00 SURVEYOR NAME AND George W. Midgette L-2781 NUMBER 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.

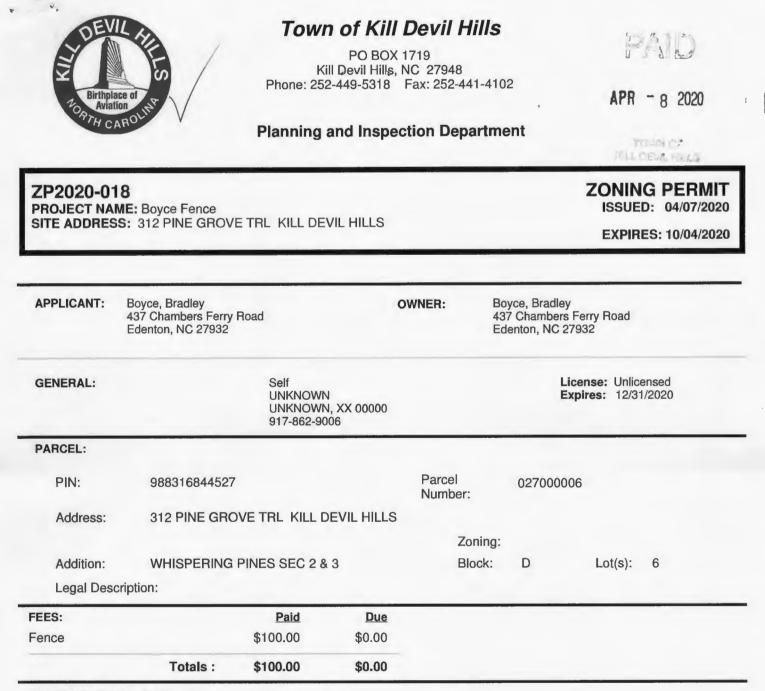
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Issued	Byr-	
issued	BV:	

Contractor or Authorized Agent:

Tammy Russell

04 / 06 / 2020 Date:



PROJECT DESCRIPTION: Fence around rear and side yard



ZP2020-018 PROJECT NAME: Boyce Fence SITE ADDRESS: 312 PINE GROVE TRL KILL DEVIL HILLS.

ZONING PERMIT ISSUED: 04/07/2020

EXPIRES: 10/04/2020

	DETAILS	
Permit		
Name	Value	
FRONT YARD SETBACK	30	
REAR YARD SETBACK	20% Depth >30	
SIDE YARD SETBACK	12	
CAMA PERMIT	Ν	
CAMA EXEMPTION	Ν	
FLOOD ZONE	Х	
PURPOSE	Residential Accessory	
CONSTRUCTION COST	500.00	
SURVEYOR NAME AND NUMBER	CP Lewis	
CULVERT	Ν	
DRIVEWAY INVERT 2	Ν	

REQUIRED INSPECTIONS

Stringline

Final

CONDITIONS

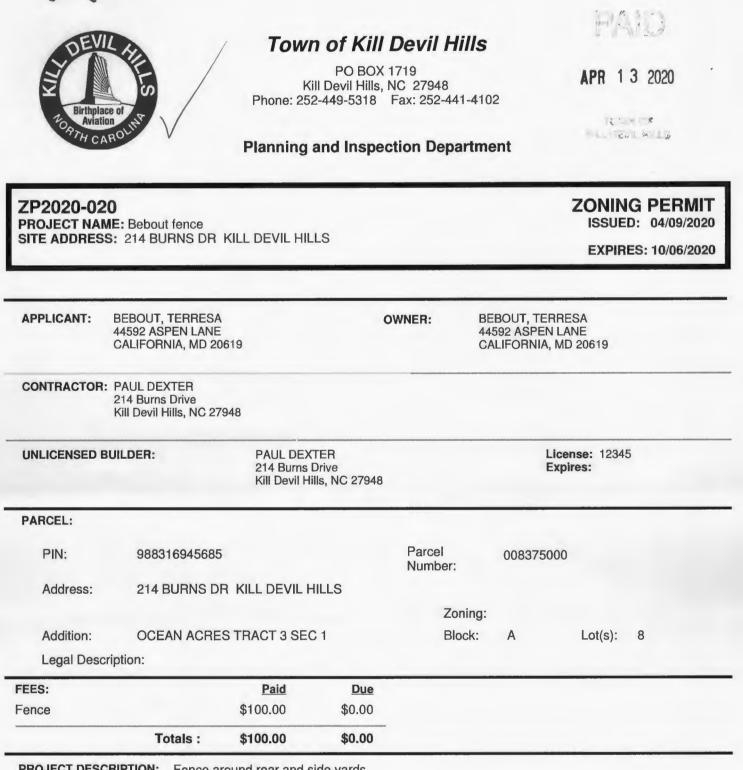
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specified herein or not. The granting of a permit does not presume to give authority to violate or cancel
the provisions of any other state/local law regulating construction or the performance of construction.
Ryan Lang
lesued By:

BundBr

Contractor or Authorized Agent:

Date: 04 / 07 / 2020



PROJECT DESCRIPTION: Fence around rear and side yards



ZP2020-020

PROJECT NAME: Bebout fence SITE ADDRESS: 214 BURNS DR KILL DEVIL HILLS

ZONING PERMI ISSUED: 04/09/2020

EXPIRES: 10/06/2020

	DETAILS	
Permit		
Name	Value	
ZONING DISTRICT	RL	
FRONT YARD SETBACK	30	
REAR YARD SETBACK	20% Depth >30	
SIDE YARD SETBACK	8	
CAMA PERMIT	Ν	
CAMA EXEMPTION	Ν	
FLOOD ZONE	Х	
CONSTRUCTION COST	1500.00	
SURVEYOR NAME AND NUMBER	M Douglas Styons L- 3227	
CULVERT	Ν	
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.

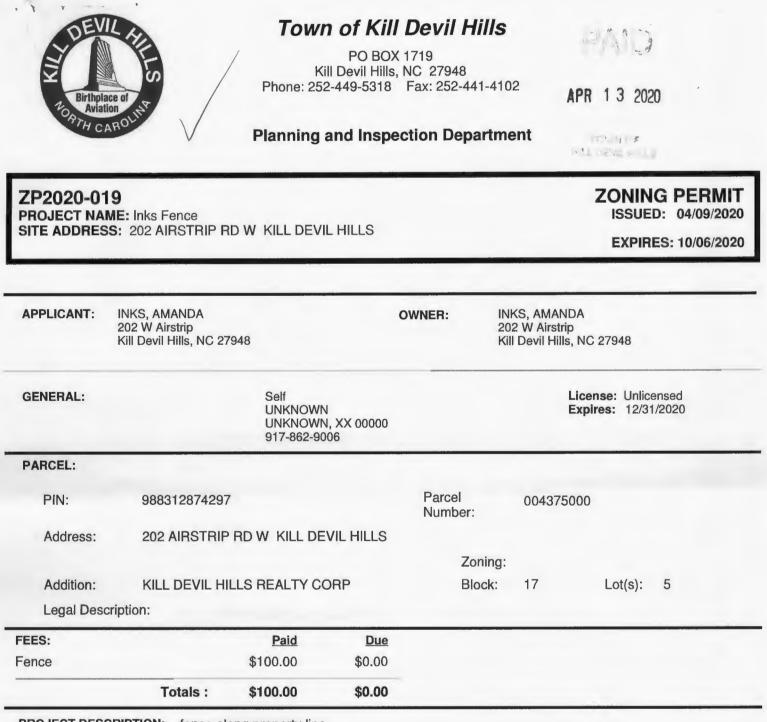
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Issued By:

Contractor or Authorized Agent: Paul Dexter 11

04/09/2020

Date:



PROJECT DESCRIPTION: fence along property line



ZP2020-019

1 1

Dennald

PROJECT NAME: Inks Fence SITE ADDRESS: 202 AIRSTRIP RD W KILL DEVIL HILLS

ZONING PERMIT

ISSUED: 04/09/2020

EXPIRES: 10/06/2020

DETAILS

Permit	
Name	Value
CAMA PERMIT	N
CAMA EXEMPTION	N
ZONING DISTRICT	RL
PURPOSE	Residential Accessory
FRONT YARD SETBACK	30
SIDE YARD SETBACK	10
REAR YARD SETBACK	30
HEALTH DEPARTMENT PERMIT #	29572
FLOOD ZONE	AE
BASE FLOOD ELEVATION	9
FINAL ELEVATION CERTIFICATE	N
CONSTRUCTION COST	2000.00
LOT COVERAGE	24.60
SURVEYOR NAME AND NUMBER	Jamie E Furr L-4692
OCCUPANCY TYPE	One & Two Family Dwelling

REQUIRED INSPECTIONS

Stringline

Final

CONDITIONS

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

ZP2020-019 **PROJECT NAME:** Inks Fence SITE ADDRESS: 202 AIRSTRIP RD W KILL DEVIL HILLS

EXPIRES: 10/06/2020

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.

3 4

Issued By: ______ Ryan Lang Contractor or Authorized Agent: ______ Amanda InKs

Date: 04 / 09 / 2020

Birliplace of Aviation PTH CAROLINE			BOX 1719 Hills, NC 2794 318 Fax: 252	48 2-441-4102	τ e	PATO APR 14 2020
ZP2020-021 PROJECT NAME: Willian SITE ADDRESS: 529 Pa		W Kill Devil Hills				ZONING PERMIT ISSUED: 04/14/2020 EXPIRES: 10/11/2020
	Chad almetto St /IL HILLS, NC 2	7948	OWNER:	529 W	ns, Chad Palmetto S EVIL HILLS	t , NC 27948
UNLICENSED BUILDER:		Brad Banks 267 Highway 158 Elizabeth City, NC 2 252-202-6215	7909		Licer Expir	nse: 00000 es:
PARCEL:						
	408997993		Parce Numb			
Address: 529	Palmetto Stree	et W Kill Devil Hills		_		
Addition:				Zoning:		
	Lot 10R Block	75		Block:		Lot(s):
FEES:			ue			
Fence		\$100.00 \$0.				
		\$100.00 \$0.	00C510004124 8100141418			000
PROJECT DESCRIPTION:		d side and front yard		A	luff	000-
		DET	AILS	1/1	<u> </u>	
Permit						
Name	Value					
ZONING DISTRICT	RL			DAIR		
CAMA PERMIT	Ν		M	4/14/200		
CAMA EXEMPTION	Ν			Paypa	DE .	
FLOOD ZONE	AE			raypa	C	
CULVERT	N					
DRIVEWAY INVERT 2	Ν					

Printed by : CTHUMAN on: 04/14/2020 08:28 AM

ZP2020-021 PROJECT NAME: Williams Fence SITE ADDRESS: 529 Palmetto Street W Kill Devil Hills

EXPIRES: 10/11/2020

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.

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

Charles Thuman

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.

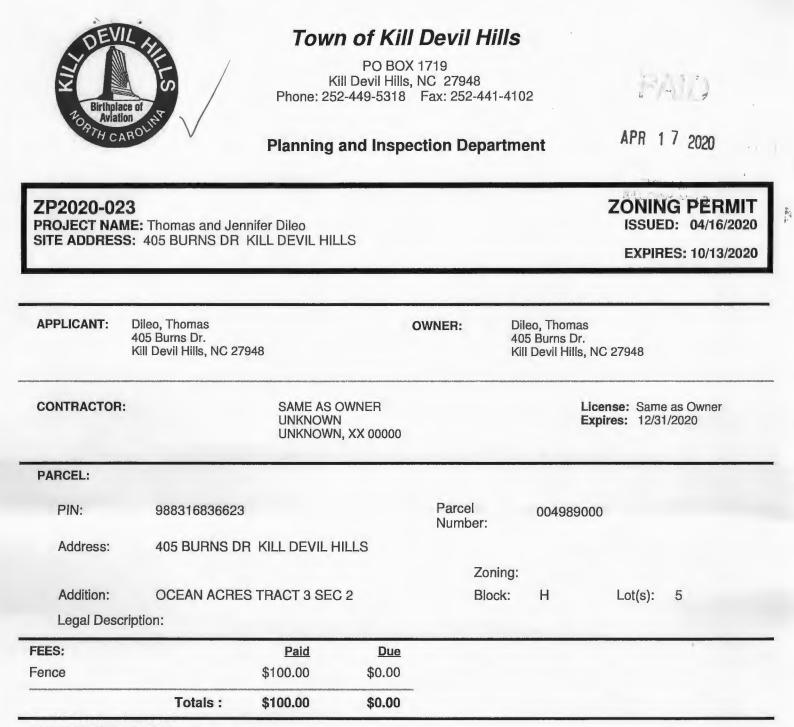
Issued By:

Contractor or Authorized Agent:

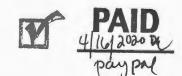
Brad Banks

Date: 04 / 14 / 2020

Printed by : CTHUMAN on: 04/14/2020 08:28 AM



PROJECT DESCRIPTION: Fence



ZP2020-023

PROJECT NAME: Thomas and Jennifer Dileo SITE ADDRESS: 405 BURNS DR KILL DEVIL HILLS ZONING PERMIT ISSUED: 04/16/2020

EXPIRES: 10/13/2020

DETAILS

Permit	
Name	Value
ZONING DISTRICT	RL
FRONT YARD SETBACK	30
REAR YARD SETBACK	20% Depth >30
SIDE YARD SETBACK	10
CAMA PERMIT	Ν
CAMA EXEMPTION	Ν
FLOOD ZONE	Х
PURPOSE	Residential Accessory
CONSTRUCTION COST	3000.00
CULVERT	N
DRIVEWAY INVERT 2	N

REQUIRED INSPECTIONS

Final

Zoning Final

CONDITIONS

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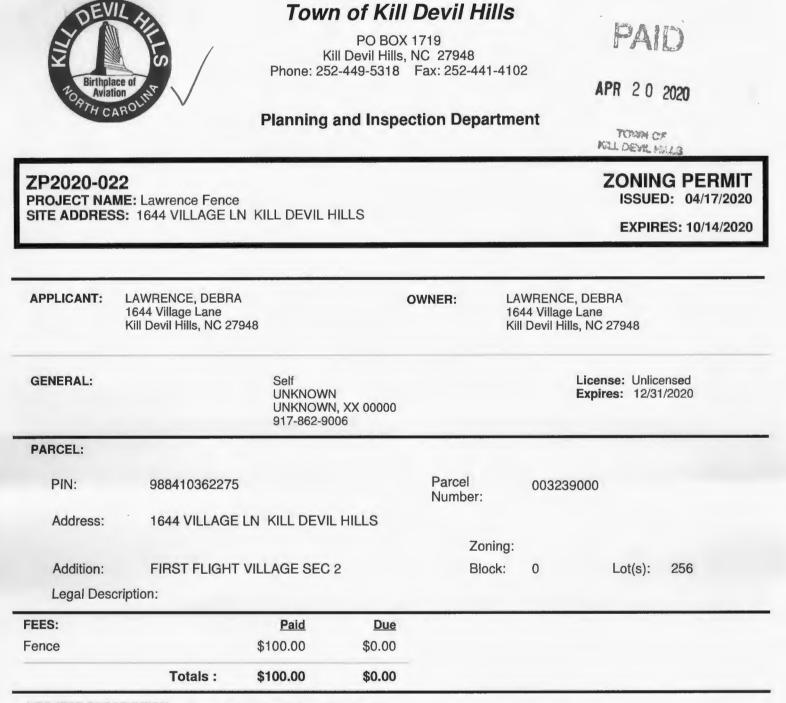
* Call for a string line inspection before installing the fence.

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. *Comeron Roy*

Issued By:

Date: 04 / 16 / 2020

Contractor or Authorized Agent: _



PROJECT DESCRIPTION: fence around rear and side yards



ZP2020-022

Permit

PROJECT NAME: Lawrence Fence SITE ADDRESS: 1644 VILLAGE LN KILL DEVIL HILLS

ZONING PERMIT

ISSUED: 04/17/2020

EXPIRES: 10/14/2020

DETAILS

remit	
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	9
PURPOSE	Residential Accessory
CONSTRUCTION COST	1800.00
SURVEYOR NAME AND NUMBER	Robert C Cummins
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.

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

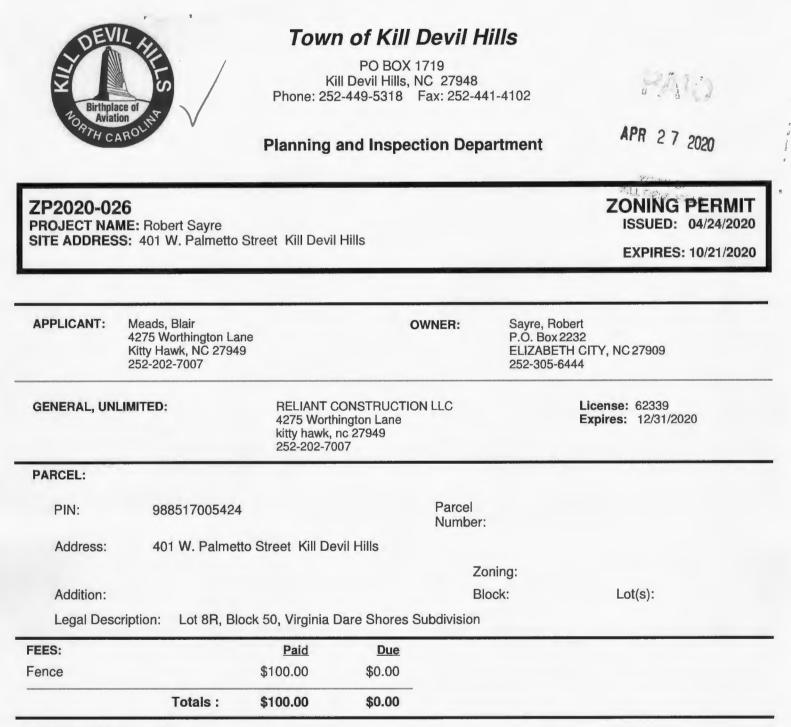
I hereby certify that I have read and examined this application and know the same to be true and correct. All provisions of Laws and Ordinances governing this type of work will be complied with whether specified herein or not. The granting of a permit does not presume to give authority to violate or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

Issued	By:	
	-	

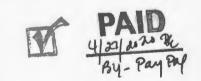
Contractor or Authorized Agent:

Allen Lawrence

04 / 17 / 2020 Date:



PROJECT DESCRIPTION: Fence



ZP2020-026 PROJECT NAME: Robert Sayre SITE ADDRESS: 401 W. Palmetto Street Kill Devil Hills

ISSUED: 04/24/2020

EXPIRES: 10/21/2020

DETAILS

Value
RL
30
20% Depth >30
6
7.5
N
N
AE
Residential Accessory
8500.00
Ν
Ν

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.	
* Zoning Final Inspection is required.	
* Call for a string line inspection before installing fence.	•
* Construction must meet all aspect of Chapter 153 Zoning including lot coverage and setbacks.	Ĩ

All provisions of Laws and Ordinance specified herein or not. The granting of	s governing this type o of a permit does not pre law regulating constru	n and know the same to be true and correct. f work will be complied with whether sume to give authority to violate or cancel ction or the performance of construction.
Contractor or Authorized Agent:	Bh	Date: 04 / 24 / 2020

Printed by : Cray on: 04/24/2020 02:52 PM

ZP2020-026 PROJECT NAME: Robert Sayre SITE ADDRESS: 401 W. Palmetto Street Kill Devil Hills

ZONING PERMIT

ISSUED: 04/24/2020

EXPIRES: 10/21/2020



Town of Kill Devil Hills

102 Town Hall Drive PO BOX 1719 Kill Devil Hills, NC 27948 Phone: 252-449-5318 Fax: 252-441-4102 www.kdhnc.com

Kill Devil Hills Planning and Inspection Department

FDP2020-2 PROJECT NAI SITE ADDRES	242 ME: Robert Sayre S: 401 W. Palmetto Stre	eet Kill Devil Hills		FLOOD DEVELOPMENT ISSUED: 04/24/2020
				PARENT PERMIT #: ZP2020-026
APPLICANT:	Meads, Blair 4275 Worthington Lane Kitty Hawk, NC 27949 252-202-7007		OWNER:	Sayre, Robert P.O. Box 2232 ELIZABETH CITY, NC 27909 252-305-6444
GENERAL, UNI	LIMITED:	RELIANT CONSTRU 4275 Worthington La kitty hawk, nc 27949 252-202-7007		License: 62339 Expires: 12/31/2020
PARCEL:				
PIN:	988517005424		Parcel Number	n
Address:	401 W. Palmetto S	treet Kill Devil Hills		
			Z	loning:
Addition:			В	Block: Lot(s):
Legal Desc	cription: Lot 8R, Block	50, Virginia Dare Sho	res Subdivision	
FEES:		Paid D	le	
	Totals :			
PROJECT DESC	CRIPTION: Fence			
		DET	AILS	
		REQUIRED	NSPECTION	IS
Final				
		CONDI	TIONS	

FDP2020-242 PROJECT NAME: Robert Sayre SITE ADDRESS: 401 W. Palmetto Street Kill Devil Hills FLOOD DEVELOPMENT ISSUED: 04/24/2020

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

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

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

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

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

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

Applicant Signature

04 / 24 / 2020

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

ZP2020-024 PROJECT NAME: Magee Fence SITE ADDRESS: 411 MITCHELL CT KILL DEVIL HILLS ZONING PERMIT ISSUED: 04/21/2020

EXPIRES: 10/18/2020

APPLICANT:	MAGEE, JAMES F J 4513 DAVIDS MILL CHESAPEAKE, VA2	DRIVE	c	WNER:	MAGEE, JAN 4513 DAVIDS CHESAPEA	S MILL DRIVE	
CONTRACTOR	R: Holland Associates of 420 Haughton Road Edenton, NC 27932	of Edenton					
UNLICENSED	BUILDER:	Holland As 420 Haugh Edenton, N	sociates of Ede aton Road NC 27932	nton		License: 12345 Expires:	;
PARCEL:							
PIN:	988405280364	4		Parcel Number:	002111	000	
PIN: Address:		4 L CT KILL DEV	IL HILLS		002111	000	
			IL HILLS			000	
		L CT KILL DEV	IL HILLS	Number:	ng:	000 Lot(s):	151
Address:	411 MITCHEL WRIGHT'S SH	L CT KILL DEV	IL HILLS	Number: Zoni	ng:		151
Address: Addition:	411 MITCHEL WRIGHT'S SH	L CT KILL DEV	IL HILLS Due	Number: Zoni	ng:		151
Address: Addition: Legal Dese	411 MITCHEL WRIGHT'S SH	L CT KILL DEV		Number: Zoni	ng:		151

PROJECT DESCRIPTION: Fence around rear and side yard



the 1/20/2020

ZP2020-024 PROJECT NAME: Magee Fence SITE ADDRESS: 411 MITCHELL CT KILL DEVIL HILLS

ZONING PERMIT

ISSUED: 04/21/2020

EXPIRES: 10/18/2020

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	Ν
FLOOD ZONE	Х
PURPOSE	Residential Accessory
SURVEYOR NAME AND NUMBER	Ray Meekins L-2592
CULVERT	Ν
DRIVEWAY INVERT 2	Ν

REQUIRED INSPECTIONS

Stringline

Issued By:

Dormit

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.

Contractor or Authorized Agent:	Chad	Lawrence	Date:	04 / 21 / 2020
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

ZP2020-025 PROJECT NAME: Pierce Fence SITE ADDRESS: 908 CLAM SHELL DR KILL DEVIL HILLS

ZONING PERMIT ISSUED: 04/21/2020

1330ED. 04/21/2020

EXPIRES: 10/18/2020

APPLICANT:	Pierce, Ross 3904 Point Elizabeth CHESAPEAKE, VA 2		C	WNER:	Pierce, Ross 3904 Point El CHESAPEAK		
CONTRACTOR:	Holland Associates of 420 Haughton Road Edenton, NC 27932	f Edenton					
UNLICENSED B	UILDER:	Holland As 420 Haugh Edenton, N	sociates of Ede ton Road C 27932	nton		License: 12345 Expires:	
PARCEL:						and	
PIN:	988409078044	L		Parcel Number:	002363	000	
Address:	908 CLAM SH	ELL DR KILL DI	EVIL HILLS				
				Zonir	ng:		
Addition:	SEA HOLLY R	IDGE		Block	k: A	Lot(s):	3
Legal Desc	ription:						
		Paid	Due				
EES:		A100.00	\$0.00				
FEES: Fence		\$100.00	φ0,00				

PROJECT DESCRIPTION: Fence around rear and side yard

I man

EXPIRES: 10/18/2020

DETAILS

Fermit	
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	8.3
PURPOSE	Residential Accessory
SURVEYOR NAME AND NUMBER	Jamie Furr L-4692
CULVERT	N
DRIVEWAY INVERT 2	Ν

REQUIRED INSPECTIONS

Stringline

Dormit

Final

CONDITIONS

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Issued By:

Contractor or Authorized Agent: Chad Lawrence

Date: 04 / 21 / 2020

HELLOSIGN

Audit Trail

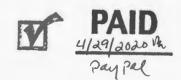
908 Clamshell Drive - Fence Permit
908 Clam Shell Permit.pdf and 1 other
717052b384a59401c45b754aef9ea734afdc1925
MM / DD / YYYY
Completed

Document History

O4 / 21 / 2020 Sent for signature to Ryan Lang (permits@l SENT 13:29:43 UTC Holland Associates (hollandfencing@gmail.	
SENT 13.29.43 UTC Holiand Associates (noliandiencing@gmail.	.com) from
permits@kdhnc.com	
IP: 75.170.103.242	
04 / 21 / 2020 Viewed by Ryan Lang (permits@kdhnc.com	2)
	")
VIEWED 13:29:44 UTC IP: 209.222.82.233	
O 04 / 21 / 2020 Viewed by Holland Associates (hollandfence)	ing@gmail.com)
VIEWED 13:37:50 UTC IP: 75.170.90.88	
04 / 21 / 2020 Signed by Holland Associates (hollandfenci	ing@gmail.com)
Signed by Holiand Associates (Holiandienci SIGNED 14:05:49 UTC IP: 75.170.90.88	ng@gmail.com)
Image: Marcine Constraints Odd / 28 / 2020 Signed by Ryan Lang (permits@kdhnc.com)
SIGNED 15:19:52 UTC IP: 204.84.167.13	
Of 04 / 28 / 2020 The document has been completed.	
COMPLETED 15:19:52 UTC	

Powered by THELLOSIGN





ZP2020-027

PROJECT NAME: Eder Celaj SITE ADDRESS: 328 BICKETT ST W KILL DEVIL HILLS ISSUED: 04/28/2020

EXPIRES: 10/25/2020

Permit	
Name	Value
ZONING DISTRICT	RL
CAMA PERMIT	N
CAMA EXEMPTION	Ν
FLOOD ZONE	AE
BASE FLOOD ELEVATION	8
PURPOSE	Residential Accesso
CONSTRUCTION COST	1600.00
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.

* Call for a string line inspection before installing the fence.

* 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: _____

Contractor or Authorized Agent:

Date: