N DEVI N DEVI N DEVI Birthplan Aviation Aviation	ROLINP	K Phone: 25	PO BOX ill Devil Hills, 2-449-5318		4102	NOV - 9	2020 OF
	6 ME: Sea Oats Roof S: 1401 VA DARE	rrl n kill de'	VIL HILLS				BUILDING D: 11/05/2020 ES: 05/04/2021
APPLICANT:	Sea Oats Villas Prop Touch Property Mgm 2600 NORTH Croata Kill Devil Hillsl, NC 2 252-441-8857	it. in HWY	Signature (OWNER:	Touch Prope 2600 NORTI	erty Mgmt. H Croatan HWY Isl, NC 27948	ners C/O Signature
GENERAL BUIL	DING INTERMEDIAT	673 Old W	harf Road NC 27981	REMODELING,	INC.	License: 3250 Expires: 01/0	
PARCEL:							
PIN:	988411654107	00		Parcel Number:	028116	6999	
Address:	1401 VA DARI	ETRLN KILLD	EVIL HILLS				
		*		Zonii	-		COMMON
Addition:				Block	k: 0	Lot(s):	PROPERTY
Legal Desc	ription:						
		Paid	Due				
FEES:			\$0.00				
FEES: Building Permit Fee	Fee - Minimum	\$150.00	φ0.00				

PROJECT DESCRIPTION: Replace membrane roof

2 -

BP2020-266 PROJECT NAME: Sea Oats Roof SITE ADDRESS: 1401 VA DARE TRL N KILL DEVIL HILLS

BUILDING

ISSUED: 11/05/2020

EXPIRES: 05/04/2021

DETAILS Permit Name Value CAMA PERMIT N CAMA EXEMPTION N ZONING DISTRICT OIR PURPOSE Commercial Repair/Remodel VE FLOOD ZONE 11 **BASE FLOOD ELEVATION FINAL ELEVATION** N CERTIFICATE CONSTRUCTION COST 65333.00 CONSTRUCTION TYPE V OCCUPANCY TYPE Residential

REQUIRED INSPECTIONS

Zoning Final

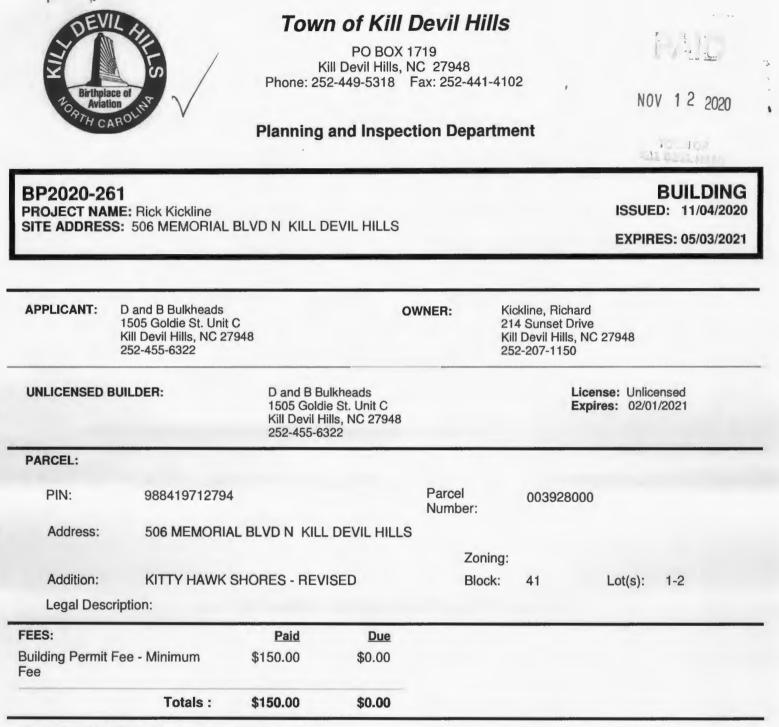
Final

CONDITIONS

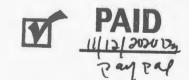
* This permit becomes null and void if work or construction authorized is not commenced within 6 months or if construction or work is suspended for a period of 12 months at any time after work has started.

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 statellocal law regulating construction or the performance of construction.

Issued By: Contractor or Authorized Agent: Date:



PROJECT DESCRIPTION: Replace 3 house pilings



BP2020-261 **PROJECT NAME:** Rick Kickline SITE ADDRESS: 506 MEMORIAL BLVD N KILL DEVIL HILLS

BUILDING

ISSUED: 11/04/2020

EXPIRES: 05/03/2021

DETAILS

Permit	
Name	Value
CAMA PERMIT	N
CAMA EXEMPTION	Ν
ZONING DISTRICT	RL
PURPOSE	Residential Repair/Remodel
FLOOD ZONE	Х
FINAL ELEVATION CERTIFICATE	Ν
CONSTRUCTION COST	1200.00
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.

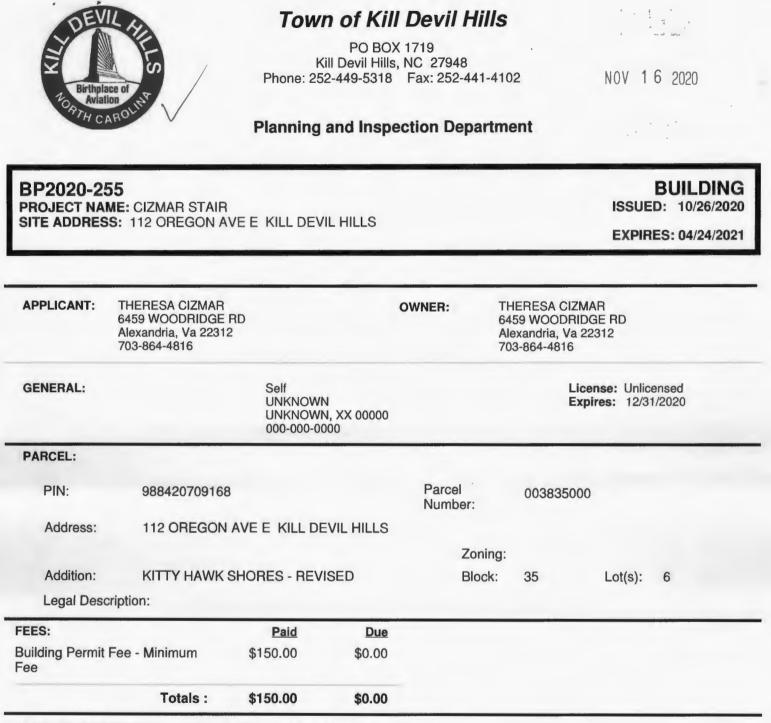
Must call for a piling inspection before installing the pilings.

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: ______

Date: 11 / 04 / 2020



PROJECT DESCRIPTION: REBUILD STAIR AND RAILINGS



BP2020-255 PROJECT NAME: CIZMAR STAIR SITE ADDRESS: 112 OREGON AVE E KILL DEVIL HILLS

BUILDING

ISSUED: 10/26/2020

EXPIRES: 04/24/2021

DETAILS

Permit	
Name	Value
CAMA PERMIT	N
CAMA EXEMPTION	Ν
ZONING DISTRICT	С
PURPOSE	Residential Repair/Remodel
FRONT YARD SETBACK	15
SIDE YARD SETBACK	6
REAR YARD SETBACK	20% Depth >30
FLOOD ZONE	Х
FINAL ELEVATION CERTIFICATE	Ν
CONSTRUCTION COST	1700.00
CONSTRUCTION TYPE	V
OCCUPANCY TYPE	One & Two Family Dwelling

REQUIRED INSPECTIONS

Zoning Final

. . .

Final

CONDITIONS

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

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

* Zoning Final Inspection is required.

* Stairs to be rebuilt in existing location, no change to footprint.



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

BP2020-270 PROJECT NAME: Gary Wise SITE ADDRESS: 102 SUTTON AVE KILL DEVIL HILLS

BUILDING

ISSUED: 11/24/2020

EXPIRES: 05/23/2021

	D and B Bulkheads 1505 Goldie St. Unit C Kill Devil Hills, NC 27948 252-455-6322			OWNER: Wise, Gary 102 Sutton St. Kill Devil Hills, NC 27948 757-621-9015			
UNLICENSED BU	JILDER:		e St. Unit C ills, NC 27948			.icense: Unlicensed Expires: 02/01/2021	
PARCEL:							
PIN:	988419710408	3		Parcel Number:	0039360	000	
Address:	102 SUTTON	AVE KILL DEVI	L HILLS				
				Zoni	ng:		
Addition:	KITTY HAWK	SHORES - REV	ISED	Block	k: 41	Lot(s): 11	
Legal Descri	iption:						
FEES:		Paid	Due				
Building Permit F Fee	ee - Minimum	\$150.00	\$0.00				
	Totals :	\$150.00	\$0.00				

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PAID Je 11/25/2000 Ry Pel

BP2020-270

PROJECT NAME: Gary Wise SITE ADDRESS: 102 SUTTON AVE KILL DEVIL HILLS

BUILDING ISSUED: 11/24/2020

EXPIRES: 05/23/2021

DETAILS

Permit	
Name	Value
CAMA PERMIT	N
CAMA EXEMPTION	Ν
ZONING DISTRICT	RL
PURPOSE	Residential Repair/Remodel
FLOOD ZONE	Х
FINAL ELEVATION CERTIFICATE	Ν
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.

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. Marty Shaw

Issued By:

Contractor or Authorized Agent: ______ Dan and ronowitz

Date: 11 / 24 / 2020

Birthplac Birthplac Aviation	ROLINA	K Phone: 25	PO BO III Devil Hills 2-449-5318	I Devil H X 1719 5, NC 27948 Fax: 252-44 ection Dep	41-4102		-	7 2020
	5 IE: Weatherford Stair S: 906 DURHAM ST		L HILLS		RAID WITH CASYA			BUILDING D: 11/16/2020 ES: 05/15/2021
APPLICANT:	SUSAN WEATHERFO 906 W DURHAM ST. Kill Devil Hills, NC 279 252-441-3225			OWNER:	906 V Kill D	AN WEATH W DURHAN Devil Hills, N 441-3225	AST.	
CONTRACTOR:	Cressel Customs LLC 965 Washington Street Manteo, NC 27954 252-722-1340							
BUILDING:							ense: 0000 pires: 02/28	
PARCEL:								
PIN:	988405086381			Parcel Number:		001388000	D	
Address:	906 DURHAM S	T W KILL DEV	VIL HILLS	-				
Addition:	AVALON BEACI	ANNEY 2 8	3		oning: ock: (0	Lot(s):	683
Legal Descr			0	DI			201(0).	
FEES:		Paid	Due					
Building Permit F	Fee - Minimum	\$150.00	\$0.00					
Fee								

PROJECT DESCRIPTION: rebuild stairs, new decking and new rails back to existing footprint

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right where

BP2020-265

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PROJECT NAME: Weatherford Stair Replacement SITE ADDRESS: 906 DURHAM ST W KILL DEVIL HILLS ISSUED: 11/16/2020

EXPIRES: 05/15/2021

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
FLOOD ZONE	Х
FINAL ELEVATION CERTIFICATE	Ν
CONSTRUCTION COST	4500.00
CONSTRUCTION TYPE	V
SURVEYOR NAME AND NUMBER	William S Jones L-2532
OCCUPANCY TYPE	One & Two Family Dwelling

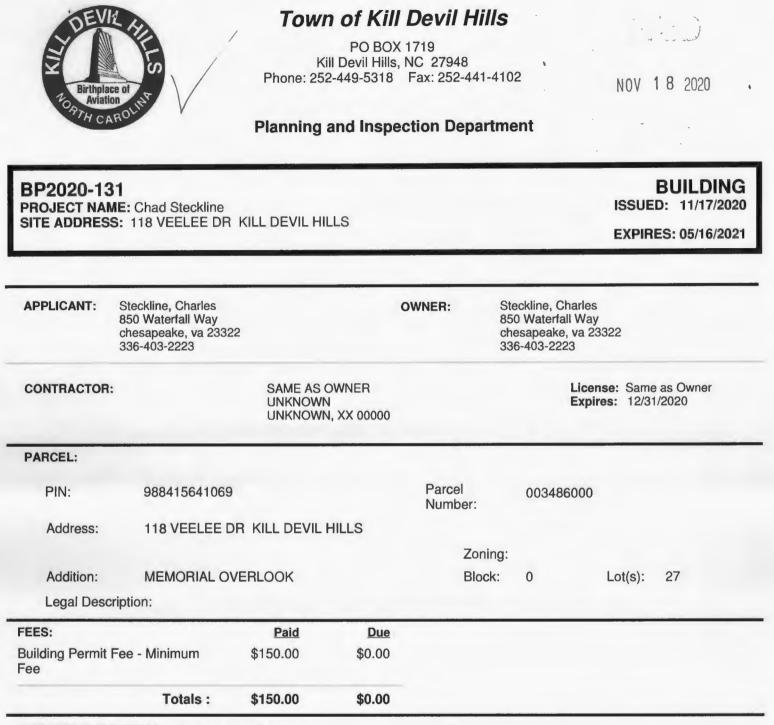
REQUIRED INSPECTIONS

Zoning Final

Final

CONDITIONS

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



PROJECT DESCRIPTION: Add deck and steps



BP2020-131 PROJECT NAME: Chad Steckline SITE ADDRESS: 118 VEELEE DR KILL DEVIL HILLS

EXPIRES: 05/16/2021

DETAILS

Permit		
Name	Value	
CAMA PERMIT	Ν	
CAMA EXEMPTION	Ν	
ZONING DISTRICT	RL	
PURPOSE	Residential Repair/Remodel	
FRONT YARD SETBACK	30	
SIDE YARD SETBACK	8	
REAR YARD SETBACK	20% Depth >30	
HEALTH DEPARTMENT PERMIT #	29659	
FLOOD ZONE	Х	
FINAL ELEVATION CERTIFICATE	Ν	
CONSTRUCTION COST	4500.00	
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 r work is suspended for a period of 12 months at any time after work has started.
	As-built survey will be required prior to Certificate of Occupancy or Certificate of Compliance.
*	Must comply with Wind Borne Debris requirements as defined in NCBC R301.2.1.2 and NCBC 1609.2.
*	Construction must meet all aspect of Chapter 153 Zoning including lot coverage and setbacks.
*	Zoning Final Inspection is required.

DEV	LA	Tow	n of Kill	Devil Hill	s		
KIK	LES /	K Phone: 25	PO BOX III Devil Hills, I 2-449-5318		102 `		5 N N
ZORTH C	ton RA				ż	NOV 1	7 2020 .
I'H CI	AROU	Planning	and Inspec	ction Depart	ment		C 197 Maria
in coolers	69 ME: Burger King Roo S: 1513 CROATAN			n walk			BUILDING ED: 11/17/2020 RES: 05/16/2021
SITE ADDRES	3. 1913 CROATAN	TIWE S RILL D					
APPLICANT:	Genco Properties of 1073 Dana Crt. Antioch, IL 60002	NC LLC	c	DWNER:	Genco Prop 1073 Dana Antioch, IL		3
CONTRACTOR	: Aria Construction an PO Box 321 CRESWELL, NC 279 252-796-7737		C				
BUILDING-UNL	IMITED:	PO Box 32	L, NC 27928	elopment, Inc		License: 7892 Expires: 01/0	
PARCEL:							
PIN:	989309053227	7		Parcel Number:	00825	52000	
Address:	1513 CROATA	N HWY S KILL	DEVIL HILLS	1			
				Zonin	-		0.55
Addition:	OCEAN ACRE	S INC		Block	0	Lot(s):	SEE COMMENT
Legal Desc	cription:						
FEES:		Paid	Due				
		\$150.00	\$0.00				
Building Permit Fee	Fee - Minimum	ψ100.00					

PROJECT DESCRIPTION: add roof over existing built in walk in coolers at rear of Burger King Restuarant

4

BP2020-269

PROJECT NAME: Burger King Roof Addition over existing built in walk in coolers **SITE ADDRESS:** 1513 CROATAN HWY S KILL DEVIL HILLS

BUILDING

ISSUED: 11/17/2020

EXPIRES: 05/16/2021

DETAILS

Permit	
Name	Value
CAMA PERMIT	Ν
CAMA EXEMPTION	Ν
ZONING DISTRICT	С
PURPOSE	Commercial Repair/Remodel
FRONT YARD SETBACK	30
SIDE YARD SETBACK	10
STREET SIDE SETBACK	15
FLOOD ZONE	Х
FINAL ELEVATION CERTIFICATE	Ν
CONSTRUCTION COST	16000.00
LOT COVERAGE	59.74
CONSTRUCTION TYPE	Ш .
SURVEYOR NAME AND NUMBER	William S Jones L-2532
OCCUPANCY TYPE	Business

REQUIRED INSPECTIONS

Zoning Final

Framing

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.

DEVIL
Birthplace of Aviation
TO AViation AVIATION AVIATION

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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NOV 18 2020

BP2020-268

PROJECT NAME: James and Sandra Richardson SITE ADDRESS: 538 Walker St. W. KILL DEVIL HILLS BUILDING ISSUED: 11/17/2020

EXPIRES: 05/16/2021

5 M	Radford, Jeff 17 W. Archdale St. Kill Devil Hills, NC 27 252-207-2910	7948	0	WNER:	Richardson, J 538 W. Walke Kill Devil Hills 804-380-9216	er Street , NC 27948	
BUILDER:			Archdale St. illsl, NC 27948			License: 345 Expires:	
PARCEL:							
PIN:	987520901788	3		Parcel Number:	000716	002	
Address:	538 Walker St	W. KILL DEVIL	. HILLS				
				Zonir	ng:		
Addition:	VIRGINIA DAR	RE SHORES		Block	c: 71	Lot(s):	39&40
Legal Descrip	otion:						
FEES:		Paid	Due				
Building Permit Fe Fee	e - Minimum	\$150.00	\$0.00				
	Totals :	\$150.00	\$0.00				

PROJECT DESCRIPTION: Replace rails, steps, and deck surface



BP2020-268

PROJECT NAME: James and Sandra Richardson **SITE ADDRESS:** 538 Walker St. W. KILL DEVIL HILLS BUILDING ISSUED: 11/17/2020

EXPIRES: 05/16/2021

		DETAILS	
Permit			
Name	Value		
CAMA PERMIT	N		
CAMA EXEMPTION	N		
ZONING DISTRICT	RL		
PURPOSE	Residential Repair/Remodel		
FRONT YARD SETBACK	15		
SIDE YARD SETBACK	6		
REAR YARD SETBACK	20% Depth >30		
STREET SIDE SETBACK	7.5		
FLOOD ZONE	Х		
FINAL ELEVATION CERTIFICATE	Ν		
CONSTRUCTION COST	7500.00		
OCCUPANCY TYPE	One & Two Family Dwelling		

REQUIRED INSPECTIONS

Final

CONDITIONS

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

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

Marty Shaw

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:

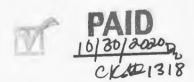
All alf

11 / 17 / 2020 Date:

Printed by : Marty Shaw on: 11/17/2020 09:11 AM

ZO Birthpla ZO AVIA	Ce of AROLINP	K Phone: 25	PO BO) ill Devil Hills 2-449-5318	I Devil Hil (1719 , NC 27948 Fax: 252-441-	4102	00	T 3 0 2020
	19 ME: Steve Horn IS: 1408 FIRST ST W	/ KILL DEVIL H	HILLS				BUILDING UED: 10/22/2020 PIRES: 04/20/2021
APPLICANT:	Brown and Sons 118 Par Four GRANDY, NC 27939 252-457-5185			OWNER:	Horne, Stev 134 S. Abir ARLINGTO 703-731-00	ngdon St. N, VA 22204	
BUILDING:		Brown and 118 Par Fo GRANDY, 252-457-51	ur NC 27939			License: 12 Expires: 0	
PARCEL:	· · · · · · · · · · · · · · · · · · ·						· · · · · · · · · · · · · · · · · · ·
PIN:	988417117631			Parcel Number:	00404	16044	
Address:	1408 FIRST ST	W KILL DEVI	HILLS				
				Zoni	ng:		
Addition:	WRIGHT WOO	DS		Bloc	k: 0	Lot(s): 44
Legal Desc	cription:					_	
FEES:		Paid	Due				
Pier/Bulkhead		\$150.00	\$0.00				

PROJECT DESCRIPTION: Add pier, deck



-

BP2020-249 PROJECT NAME: Steve Horn SITE ADDRESS: 1408 FIRST ST W KILL DEVIL HILLS

ISSUED: 10/22/2020

EXPIRES: 04/20/2021

DETAILO	DET	AILS
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Permit	
Name	Value
CAMA PERMIT	Ν
CAMA EXEMPTION	Ν
ZONING DISTRICT	RL
PURPOSE	Residential Accessory
FLOOD ZONE	AE
BASE FLOOD ELEVATION	5
FINAL ELEVATION CERTIFICATE	Ν
CONSTRUCTION COST	8865.96
OCCUPANCY TYPE	One & Two Family Dwelling

REQUIRED INSPECTIONS

Zoning Final

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Final

CONDITIONS

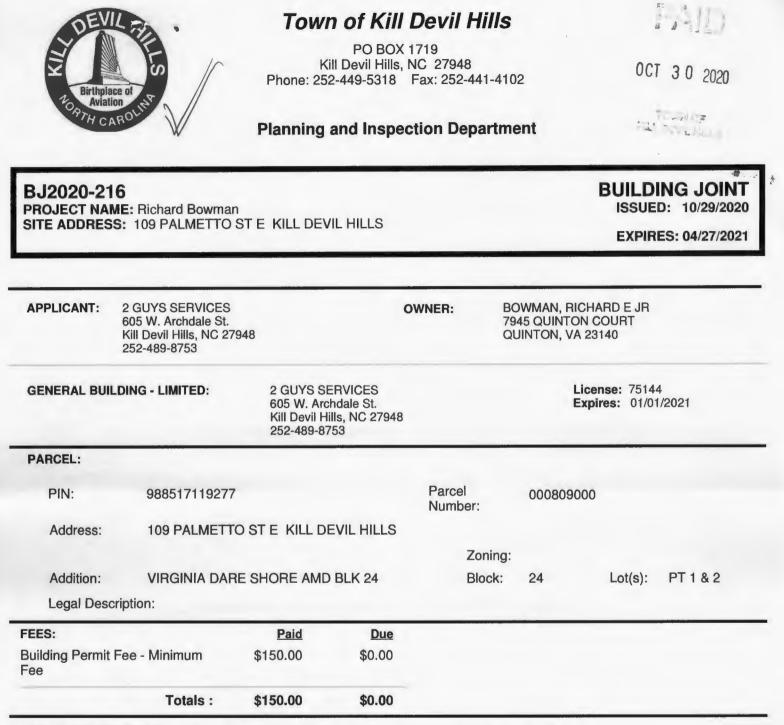
* This permit becomes null and void if work or construction authorized is not commenced within 6 months or if construction or work is suspended for a period of 12 months at any time after work has started.

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: Steven Brown

Date: 10 / 29 / 2020



PROJECT DESCRIPTION: Enclose front porch for heated space/extend existing dining room

BUILDING JOINT

ISSUED: 10/29/2020

EXPIRES: 04/27/2021

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
HEALTH DEPARTMENT PERMIT #	30076
# PARKING SPACES/BEDROOM	3
CAMA PERMIT	Ν
CAMA EXEMPTION	Ν
FLOOD ZONE	Х
SUBSTANTIAL IMPROVEMENT	NO
PURPOSE	Residential Addition
CONSTRUCTION TYPE	V
CONSTRUCTION COST	18000.00
LIVING SPACE (SQFT)	120
CULVERT	Ν
DRIVEWAY INVERT 2	Ν
OCCUPANCY TYPE	One & Two Family Dwelling

REQUIRED INSPECTIONS

Framing Rough In Insulation

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Final

Zoning Final

CONDITIONS

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

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

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

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BB2020 26	0					ís.	BUILDING
BP2020-26 PROJECT NAM SITE ADDRESS	E: Sunsatations ext 1504 CROATAN	erior repair HWY S KILL D	EVIL HILLS				ED: 11/04/2020 RES: 05/03/2021
APPLICANT:	SUNSATION REALT 353 Village Road Virginia Beach, VA23 757-822-8412		0	WNER:	SUNSATION 353 Village R Virginia Beacl 757-822-8412	oad h, VA 23451	
CONTRACTOR:	EDS Stucco 1201 7th Avenue Kill Devil Hills, NC 27	948	C	ONTRACTOR:	EDS Stucco 1201 7th Ave Kill Devil Hills		
UNLICENSED - F	REMODELING:	EDS Stucc 1201 7th A Kill Devil H				License: 1234 Expires:	5
PARCEL:							
PIN:	989309050012			Parcel Number:	0123730	000	
Address:	1504 CROATA	N HWY S KILL	DEVIL HILLS				
Addition:	OCEAN ACRES	S TRACT 3 SEC	01	Zonin Block		Lot(s):	26& LT 1 DIELS COMM
Legal Descr	iption:						
FEES:		Paid	Due				
Building Permit F Fee	ee - Minimum	\$150.00	\$0.00				
	Totals :	\$150.00	\$0.00				

PROJECT DESCRIPTION: repair stucco and wall damage from car impact.

BP2020-260

PROJECT NAME: Sunsatations exterior repair SITE ADDRESS: 1504 CROATAN HWY S KILL DEVIL HILLS BUILDING ISSUED: 11/04/2020

EXPIRES: 05/03/2021

		DETAILS
Permit		
Name	Value	
CAMA PERMIT	Ν	
CAMA EXEMPTION	N	
ZONING DISTRICT	С	
PURPOSE	Commercial Repair/Remodel	
FLOOD ZONE	Х	
FINAL ELEVATION CERTIFICATE	Ν	
CONSTRUCTION COST	2500.00	
SURVEYOR NAME AND NUMBER	Mark Kasten	
OCCUPANCY TYPE	Business	

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: Date: 1/4/2020 **Contractor or Authorized Agent:**

THE DEVIL HILL	
Birthplace of Aviation Print CAROLING	V

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

BP2020-259

PROJECT NAME: Creecy Girder Repair SITE ADDRESS: 3119 VA DARE TRL N KILL DEVIL HILLS BUILDING

ISSUED: 11/03/2020

EXPIRES: 05/02/2021

APPLICANT:	CREECY, WILLIAM 3602 HARDING DR CHESAPEAKE, VA	IVE		OWNER:	CREECY, W 3602 HARDI CHESAPEAI		
GENERAL:		Self UNKNOWI UNKNOWI 000-000-00	N, XX 00000			License: Unlice Expires: 12/31/	
PARCEL:							
PIN:	98851314224	2		Parcel Number:	000105	6000	
Address:	3119 VA DAR	E TRL N KILL D	EVIL HILLS				
				Zon	ing:		
Addition:				Bloc	sk: 7	Lot(s):	8
Legal Descr	iption:						
FEES:		Paid	Due				
Building Permit F Fee	ee - Minimum	\$150.00	\$0.00				
	Totals :	\$150.00	\$0.00				

PROJECT DESCRIPTION: repair section of girder under house

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NOV - 4 2020

TO SECTOR

BP2020-259

PROJECT NAME: Creecy Girder Repair SITE ADDRESS: 3119 VA DARE TRL N KILL DEVIL HILLS BUILDING

ISSUED: 11/03/2020

EXPIRES: 05/02/2021

	C
Permit	
Name	Value
CAMA PERMIT	Ν
CAMA EXEMPTION	N
ZONING DISTRICT	OIR
PURPOSE	Residential Repair/Remodel
FLOOD ZONE	VE
BASE FLOOD ELEVATION	10
FINAL ELEVATION CERTIFICATE	Ν
CONSTRUCTION COST	2500.00
SURVEYOR NAME AND NUMBER	Fredrick House 24740
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.



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

BJ2020-227

PROJECT NAME: Douglas and Mikki Styons SITE ADDRESS: 208 ARCHDALE ST W KILL DEVIL HILLS **BUILDING JOINT**

ISSUED: 11/02/2020

EXPIRES: 05/01/2021

APPLICANT:	FORREST SEAL L PO Box 2333 KITTY HAWK, NC 252-599-2521				HARRIS, RICH, M DOUGLAS S 302 REMELE C KILL DEVIL HIL	OURT
GENERAL, UN	LIMITED:	FORREST PO Box 233 KITTY HAV 252-599-25	33 VK, NC 27949			cense: 57289 pires: 01/01/2021
PARCEL:						
PIN:	98851702804	11		Parcel Number:	00049900	0
Address:	208 ARCHDA	ALE ST W KILL D	EVIL HILLS			
				Zoning	g:	
Addition:	VIRGINIA DA	RE SHORES		Block:	30	Lot(s): 7-9
Legal Des	cription:					
FEES:		Paid	Due	BUILDING AREA	.:	
T-Pole		\$50.00	\$0.00	Covered Porche	es/Decks	222 SQFT
Res. Building P	ermit Fee	\$1,201.50	\$0.00	Residential Hea	ted Space	1602 sq. Ft.
Covered Porch	Residential	\$166.50	\$0.00	(.75)		
	Totals :	\$1,418.00	\$0.00	# of Temporary	Poles	1 EA

PROJECT DESCRIPTION: Proposed 3 bedroom single family dwelling

Town of Kill Devil Hills Water Charges

Water Tap #: T2465

NOV - 3 2020

Printed by : CTHUMAN on: 11/02/2020 12:32 PM

BJ2020-227

PROJECT NAME: Douglas and Mikki Styons SITE ADDRESS: 208 ARCHDALE ST W KILL DEVIL HILLS BUILDING JOINT ISSUED: 11/02/2020

EXPIRES: 05/01/2021

DETAILS

Permit	
Name	Value
ZONING DISTRICT	RL
FRONT YARD SETBACK	15
REAR YARD SETBACK	20% Depth >30
SIDE YARD SETBACK	6
HEALTH DEPARTMENT PERMIT #	30130
# PARKING SPACES/BEDROOM	3
CAMA PERMIT	N
CAMA EXEMPTION	Ν
FLOOD ZONE	Х
SUBSTANTIAL IMPROVEMENT	YES
PURPOSE	Residential New
CONSTRUCTION TYPE	V
CONSTRUCTION COST	300000.00
LOT COVERAGE	33.30
LIVING SPACE (SQFT)	1529
COVERED PORCHES/DECKS (SQFT)	222
STORAGE (SQFT)	73
TOTAL SQUARE FOOTAGE	1824
SURVEYOR NAME AND NUMBER	Styons Surveying Services
ENGINEER AND LICENSE NUMBER	Mike O'Steen 032628
CULVERT	Ν
DRIVEWAY INVERT 2	Ν
OCCUPANCY TYPE	One & Two Family Dwelling

Birthplace of Aviation	STITTE S	ł Phone: 25	PO BO Kill Devil Hills 52-449-5318	I Devil Hill X 1719 s, NC 27948 Fax: 252-441-4 ection Depart	4102		5 2020	ł
BP2020-262 PROJECT NAME: SITE ADDRESS: 2	Ray Bass 2104 NEW BERN	I ST KILL DEV	IL HILLS				BUILDI ED: 11/04/ RES: 05/03/	2020
PC 670 nag	anuelson and Dao Box 448 05 S. Croatan Hwy gs head, nc 27959 2-261-2212			OWNER:	BASS, THOM 604 YEOPIN EDENTON, I	ROAD		
RESIDENTIAL, LIMI	TED:	PO Box 44 6705 S. Ci	roatan Hwy. , nc 27959			License: 7980 Expires: 01/0		
PARCEL:								
PIN:	988517214045			Parcel Number:	001684	000		
Address:	2104 NEW BEI	RN ST KILL DE	EVIL HILLS					
				Zonin	g:			
Addition:	AVALON BEAG	СН		Block	: 0	Lot(s):	28	
Legal Description	on:							
FEES:		Paid	Due					
Building Permit Fee	- Minimum	\$150.00	\$0.00					
Fee								

PROJECT DESCRIPTION: Replace 7 house pilings



BP2020-262 PROJECT NAME: Ray Bass SITE ADDRESS: 2104 NEW BERN ST KILL DEVIL HILLS

BUILDING

ISSUED: 11/04/2020

EXPIRES: 05/03/2021

DETAILS Permit Name Value CAMA PERMIT N CAMA EXEMPTION N RL ZONING DISTRICT PURPOSE Residential Repair/Remodel 30153 HEALTH DEPARTMENT PERMIT # FLOOD ZONE X **FINAL ELEVATION** N CERTIFICATE CONSTRUCTION COST 10580.00 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.

* Must call for a piling inspection before installing the pilings.

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

Issued By:

Contractor or Authorized Agent:

Date: 11 / 04 / 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

NOV - 6 2020

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BP2020-264

PROJECT NAME: Stephen Dalton SITE ADDRESS: 713 FIRST ST W KILL DEVIL HILLS

BUILDING ISSUED: 11/05/2020

EXPIRES: 05/04/2021

APPLICANT:	ACS Construction PO Box 1894 kitty hawk, nc 27949 252-489-0415			OWNER:	Dalton, Step 713 W. First Kill Devil Hil 704-813-156	Street Is, NC 27948	
GENERAL:		ACS Const PO Box 18 kitty hawk, 252-489-04	94 nc 27949			License: 12345 Expires: 11/30/	-
PARCEL:							
PIN:	988413145089			Parcel Number:	02754	6085	
Address:	713 FIRST ST	W KILL DEVIL	HILLS				
				Zonir	ng:		
Addition:				Block	c: 0	Lot(s):	85
Legal Desc	cription:						
FEES:		Paid	Due	BUILDING ARE	A:		
Covered Porch	Residential	\$189.75	\$0.00	Covered Porch	nes/Decks	253 5	SQFT
	Totals :	\$189.75	\$0.00				

PROJECT DESCRIPTION: Change existing deck into a screen porch within existing footprint

1 11/4 # 1063

BP2020-264

PROJECT NAME: Stephen Dalton SITE ADDRESS: 713 FIRST ST W KILL DEVIL HILLS BUILDING ISSUED: 11/05/2020

EXPIRES: 05/04/2021

DETAILS

Value
N
Ν
RL
Residential Repair/Remodel
30
10
20% Depth >30
Х
N
15632.00
253
V
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.
1.0	The second se

* Zoning Final Inspection is required.

P DEVIL P DEVIL P DEVIL Birthplace Aviation P DEVIL	STILL'S	K Phone: 25	PO BOX III Devil Hills, 2-449-5318		-4102	NOV - 5	2020
BP2020-263 PROJECT NAMI SITE ADDRESS	Martin and Leea 1705 WRIGHTS	nn Teasdale VILLE BLVD KIL	L DEVIL HIL	LS			BUILDING ED: 11/04/2020 RES: 05/03/2021
	Emanuelson and Da PO Box 448 6705 S. Croatan Hw nags head, nc 27959 252-261-2212	у.		OWNER:	Teasdale, N 3317 Raym Kill Devil Hil		
RESIDENTIAL, LI	MITED:	Emanuelso PO Box 44 6705 S. Crinnags head, 252-261-22	8 batan Hwy. nc 27959			License: 7980 Expires: 01/0	
PARCEL:							
PIN:	989313047952	2		Parcel Number:	00826	3000	
Address:	1705 WRIGHT	SVILLE BLVD	KILL DEVIL H	IILLS			
				Zoni	ng:		
Addition:	OCEAN ACRE	S INC		Bloc	k: 0	Lot(s):	85-86
Legal Descri	ption:						
FEES:		Paid	Due				
Building Permit F	ee - Minimum	\$150.00	\$0.00				
Fee							

PROJECT DESCRIPTION: Replace house pilings



PROJECT NAME: Martin and Leeann Teasdale SITE ADDRESS: 1705 WRIGHTSVILLE BLVD KILL DEVIL HILLS BUILDING ISSUED: 11/04/2020

EXPIRES: 05/03/2021

DETAILS

Permit		
Name	Value	
CAMA PERMIT	Ν	
CAMA EXEMPTION	N	
ZONING DISTRICT	С	
PURPOSE	Residential Repair/Remodel	
HEALTH DEPARTMENT PERMIT #	30183	
FLOOD ZONE	Х	
FINAL ELEVATION CERTIFICATE	Ν	
CONSTRUCTION COST	10800.00	
OCCUPANCY TYPE	One & Two Family Dwelling	

REQUIRED INSPECTIONS

Zoning Final

Final

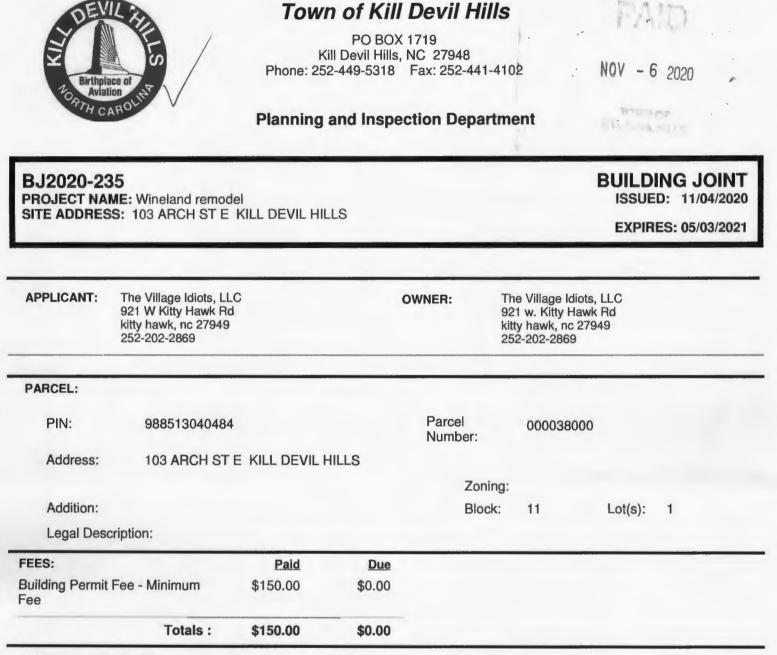
CONDITIONS

* 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.

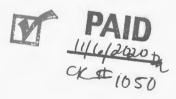
* Must inspect pilings before they are installed.

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

Issued By:		
Contractor or Authorized Agent:	Themas	Date: 11 / 04 / 2020



PROJECT DESCRIPTION: Install cedar shakes, build chase and install gas fireplace



BJ2020-235 PROJECT NAME: Wineland remodel SITE ADDRESS: 103 ARCH ST E KILL DEVIL HILLS

ISSUED: 11/04/2020

EXPIRES: 05/03/2021

	DETAILS	
Permit		
Name	Value	
ZONING DISTRICT	С	
CAMA PERMIT	Ν	
CAMA EXEMPTION	Ν	
FLOOD ZONE	х	
SUBSTANTIAL MPROVEMENT	NO	
PURPOSE	Residential Repair/Remodel	
CONSTRUCTION TYPE	V	
CONSTRUCTION COST	15000.00	
CULVERT	Ν	
DRIVEWAY INVERT 2	Ν	
OCCUPANCY TYPE	One & Two Family Dwelling	

REQUIRED INSPECTIONS

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.



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

BJ2020-238

PROJECT NAME: Carol and David Mowers SITE ADDRESS: 1002 SUFFOLK ST KILL DEVIL HILLS BUILDING JOINT ISSUED: 11/12/2020

EXPIRES: 05/11/2021

	Mowers, CAROL W 1002 SUFFOLK STF KILL DEVIL HILLS, 441-6525	REET		OWNER:		ROL W DLK STREET HILLS, NC 2794	8
CONTRACTOR:	X	SAME AS O UNKNOWN UNKNOWN				License: Same Expires: 12/31	
PARCEL:							
PIN:	98740899926	9		Parcel Number:	001163	3000	
Address:	1002 SUFFOL	K ST KILL DEV	IL HILLS				
				Zoni	ing:		
Addition:	AVALON BEA	CH ANNEX 2 &	3	Bloc	k: 0	Lot(s):	965
Legal Descri	ption:						
FEES:		Paid	Due				
Building Permit Fe Fee	ee - Minimum	\$150.00	\$0.00				
	Totals :	\$150.00	\$0.00	ana			

PROJECT DESCRIPTION: Add 12.8 X 15.4 storage under house

t I

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BJ2020-238

PROJECT NAME: Carol and David Mowers SITE ADDRESS: 1002 SUFFOLK ST KILL DEVIL HILLS **BUILDING JOINT**

ISSUED: 11/12/2020

EXPIRES: 05/11/2021

DETAILS

Permit	
Name	Value
ZONING DISTRICT	RL
FRONT YARD SETBACK	15
REAR YARD SETBACK	20% Depth >30
SIDE YARD SETBACK	6
HEALTH DEPARTMENT PERMIT #	29851
# PARKING SPACES/BEDROOM	3
CAMA PERMIT	Ν
CAMA EXEMPTION	N
FLOOD ZONE	х
SUBSTANTIAL IMPROVEMENT	NO
PURPOSE	Residential Addition
CONSTRUCTION COST	4000.00
SURVEYOR NAME AND NUMBER	Seaboard Surveying
CULVERT	Ν
DRIVEWAY INVERT 2	N
OCCUPANCY TYPE	One & Two Family Dwelling

REQUIRED INSPECTIONS

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

CONDITIONS

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

* 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.

Birthplac	LS I I I I I I I I I I I I I I I I I I I			K 1719 , NC 27948 Fax: 252-441-4	-102	NOV - 9 2020	
TORTH CA	ROLL	Planning	and Inspe	ection Depart	ment		
	IE: Babb House R	aise and Remode E KILL DEVIL HI				BUILDING JC ISSUED: 11/06 EXPIRES: 05/05	/2020
APPLICANT:	BABB, ROBERT 722 Jones St SUFFOLK, VA 234	34			BABB, ROBER 722 Jones St SUFFOLK, VA		
CONTRACTOR:	FORREST SEAL L PO Box 2333 KITTY HAWK, NC 252-599-2521						
GENERAL, UNL	IMITED:	FORREST PO Box 23 KITTY HAV 252-599-25	33 NK, NC 27949	9		cense: 57289 cpires: 01/01/2021	
PARCEL:							
PIN:	9884104598	98		Parcel Number:	00312500	00	
Address:	109 FIRST S	TE KILL DEVIL I	HILLS				
				Zoning	g:		
Addition:	W R DEATO	N - DELRAY BEA	СН	Block:	2	Lot(s): 10	
Legal Desci	ription:						
EES:		Paid	Due	BUILDING AREA	A:		
pen Deck Fee		\$150.00	\$0.00	Open Decks		1 EA	
Res. Building Pe	rmit Fee	\$717.90	\$0.00	Resdiential Unh	neated (.40)	636 Sq. Ft	
ool/Hot Tub		\$200.00	\$0.00	Residential Hea		618 sq. Ft.	
		\$1,067.90	\$0.00	~ (.75)			

PROJECT DESCRIPTION: raise existing structure adding new garage, storage and rec room on ground floor, add pool to rear yard

DEV

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PROJECT NAME: Babb House Raise and Remodel **SITE ADDRESS:** 109 FIRST ST E KILL DEVIL HILLS

BUILDING JOINT ISSUED: 11/06/2020

EXPIRES: 05/05/2021

	DETAILS	
Permit		
Name	Value	
ZONING DISTRICT	RL	
FRONT YARD SETBACK	30	
REAR YARD SETBACK	30	
SIDE YARD SETBACK	10	
HEALTH DEPARTMENT PERMIT #	30145	
# PARKING SPACES/BEDROOM	4	
CAMA PERMIT	N	
CAMA EXEMPTION	N	
FLOOD ZONE	x	
BASE FLOOD ELEVATION	8	
Proposed First Floor Elevation	8.70	
SUBSTANTIAL IMPROVEMENT	NO	
PURPOSE	Residential Addition	
CONSTRUCTION TYPE	V	
CONSTRUCTION COST	100000.00	
LOT COVERAGE	36.10	
LIVING SPACE (SQFT)	618	
STORAGE (SQFT)	636	
TOTAL SQUARE FOOTAGE	1254	
SURVEYOR NAME AND NUMBER	Ray Meekins L-2592	
ENGINEER AND LICENSE NUMBER	Mike Osteen 032628	
CULVERT	N	
DRIVEWAY INVERT 2	Y	
OCCUPANCY TYPE	One & Two Family Dwelling	



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

Planning and Inspection Department

BJ2020-237

PROJECT NAME: OBX Cottages SITE ADDRESS: 601 West Palmetto Street Kill Devil Hills

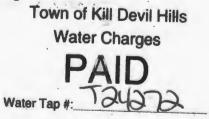
BUILDING JOINT

ISSUED: 11/12/2020

EXPIRES: 05/11/2021

APPLICANT: Sandy Botton 400 DaVinci kitty hawk, no 757-448-816	c 27949		OWNER: OBX COTTA 200 EAST E nags head, 252-207-54	LACKMAN ST nc 27959
GENERAL BUILDING-LIMITE	D: SANDY BC 400 DaVine kitty hawk, 757-448-81	nc 27949	ES	License: 67524 Expires: 01/01/2021
PARCEL:				
PIN: 987408	995940		Parcel Number:	
Address: 601 We	est Palmetto Street Kill	Devil Hills		
			Zoning:	
Addition:			Block:	Lot(s):
Legal Description: Lot	t 10R, Block 76, Virginia	Dare Shore	s Subdivision	
FEES:	Paid	Due	BUILDING AREA:	
Covered Porch Residential	\$56.25	\$0.00	Covered Porches/Decks	75 SQFT
Land Disturbing	\$100.00	\$0.00	Open Decks	1 EA
	\$150.00	\$0.00	Resdiential Unheated (.40)	76 Sq. Ft
Open Deck Fee	¢1 270 CE	\$0.00	Residential Heated Space	1799 sq. Ft.
	\$1,379.65			
Open Deck Fee Res. Building Permit Fee T-Pole	\$1,379.65 \$50.00	\$0.00	(.75)	

PROJECT DESCRIPTION: Proposed 3 bedroom single family dwelling



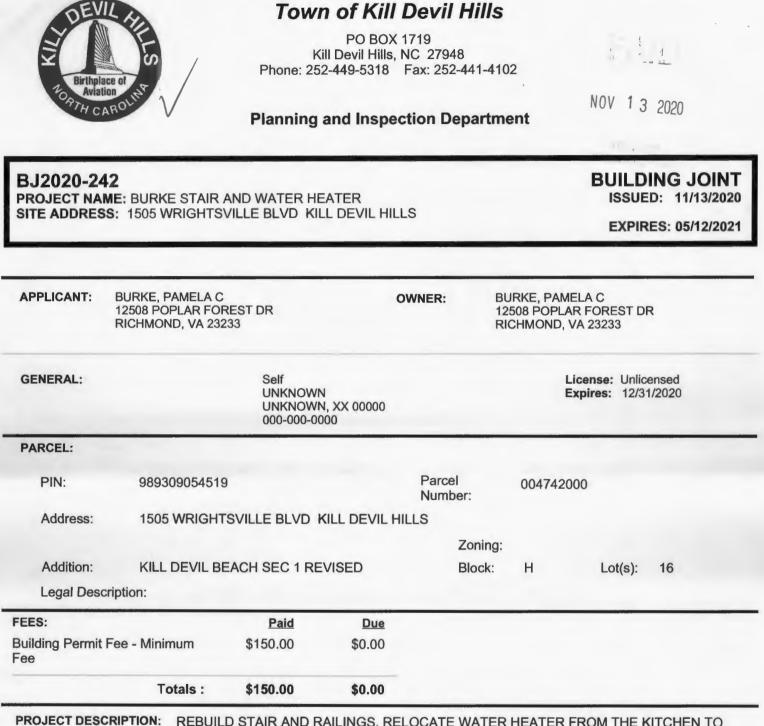
BJ2020-237 PROJECT NAME: OBX Cottages SITE ADDRESS: 601 West Palmetto Street Kill Devil Hills

BUILDING JOINT ISSUED: 11/12/2020

EXPIRES: 05/11/2021

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
HEALTH DEPARTMENT PERMIT #	30089
# PARKING SPACES/BEDROOM	3
CAMA PERMIT	N
CAMA EXEMPTION	Ν
FLOOD ZONE	Х
SUBSTANTIAL IMPROVEMENT	YES
PURPOSE	Residential New
CONSTRUCTION TYPE	V
CONSTRUCTION COST	210000.00
LOT COVERAGE	39.80
LIVING SPACE (SQFT)	1799
COVERED PORCHES/DECKS (SQFT)	75
STORAGE (SQFT)	76
OPEN DECK (SQFT)	116
TOTAL SQUARE FOOTAGE	2066
SURVEYOR NAME AND NUMBER	Seaboard
ENGINEER AND LICENSE NUMBER	Mike Osteen 032628
CULVERT	N
DRIVEWAY INVERT 2	Ν
OCCUPANCY TYPE	One & Two Family Dwelling



ROJECT DESCRIPTION: REBUILD STAIR AND RAILINGS, RELOCATE WATER HEATER FROM THE KITCHEN TO THE STORAGE ROOM BELOW

PROJECT NAME: BURKE STAIR AND WATER HEATER SITE ADDRESS: 1505 WRIGHTSVILLE BLVD KILL DEVIL HILLS

BUILDING JOINT

ISSUED: 11/13/2020

EXPIRES: 05/12/2021

Permit	
Name	Value
ZONING DISTRICT	С
FRONT YARD SETBACK	30
REAR YARD SETBACK	20% Depth >30
SIDE YARD SETBACK	8
CAMA PERMIT	N
CAMA EXEMPTION	N
FLOOD ZONE	Х
BASE FLOOD ELEVATION	8.1
SUBSTANTIAL IMPROVEMENT	NO
PURPOSE	Residential Repair/Remodel
CONSTRUCTION TYPE	V
CONSTRUCTION COST	2500.00
CULVERT	N
DRIVEWAY INVERT 2	N
OCCUPANCY TYPE	One & Two Family Dwelling

REQUIRED INSPECTIONS

 Rough In
 Zoning Final

 Final
 CONDITIONS

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

* Water heater shall be elevated



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

Planning and Inspection Department

BJ2020-219

PROJECT NAME: SAGA New 4 Bedroom House **SITE ADDRESS:** 1305 First St W Kill Devil Hills **BUILDING JOINT**

ISSUED: 11/13/2020

EXPIRES: 05/12/2021

APPLICANT:	Water Oak Resider PO Box 90 Kill Devil Hills, NC 2 252-441-9003			OWNER:	Water Oak Resi PO Box 90 Kill Devil Hills, N 252-441-9003	
CONTRACTOR	SAGA CONSTRUC 1314 S Croatan Hw Kill Devil Hills, NC 2 252-441-9003	y, Suite 301				
GENERAL BUI	LDING - LIMITED:	1314 S Cro PO Box 90	ills, NC 27948	uite 301		ense: 62306 pires: 12/31/2020
PARCEL:						
PIN:	98841312959	5		Parcel Number:		
Address:	1305 First St	W Kill Devil Hills				
				Zon	ing:	
Addition:				Bloc	sk:	Lot(s):
Legal Desc	ription: Lot 65, W	later Oak Resider	ntial Commu	inity		
FEES:		Paid	Due	BUILDING AR	EA:	
Pool/Hot Tub		\$200.00	\$0.00	Resdiential U	nheated (.40)	433 Sq. Ft
Res. Building Pe	ermit Fee	\$2,249.20	\$0.00	Residential H	eated Space	2768 sq. Ft.
T-Pole		\$50.00	\$0.00	(.75)		
· · · · · · · · · · · · · · · · · · ·	Totals :	\$2,499.20	\$0.00	- # of Tempora	ry Poles	1 EA

Water Charges

PAID Water Tap #: TZ4265

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PROJECT NAME: SAGA New 4 Bedroom House SITE ADDRESS: 1305 First St W Kill Devil Hills

EXPIRES: 05/12/2021

	DETAILS	
Permit		
Name	Value	
ZONING DISTRICT	RL	
FRONT YARD SETBACK	30	
REAR YARD SETBACK	20% Depth >30	
SIDE YARD SETBACK	10	
STREET SIDE SETBACK	15	
# PARKING SPACES/BEDROOM	4	
CAMA PERMIT	N	
CAMA EXEMPTION	N	
FLOOD ZONE	X	
BASE FLOOD ELEVATION	8	
Proposed First Floor Elevation	8.50	
SUBSTANTIAL IMPROVEMENT	NO	
PURPOSE	Residential New	
CONSTRUCTION TYPE	V	` .
CONSTRUCTION COST	300000.00	
LOT COVERAGE	39.95	
LIVING SPACE (SQFT)	2195	
GARAGE (SQFT)	433	
TOTAL SQUARE FOOTAGE	2628	
SURVEYOR NAME AND NUMBER	Michael Robinson - 18994	
ENGINEER AND LICENSE NUMBER	Frederick House 24740	
CULVERT	N	
DRIVEWAY INVERT 2	N	
OCCUPANCY TYPE	One & Two Family Dwelling	



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

Planning and Inspection Department

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TOWN OF

BJ2020-218

PROJECT NAME: Water Oak Residential LLC SITE ADDRESS: 1303 West First Street Kill Devil Hills BUILDING JOINT ISSUED: 11/12/2020

EXPIRES: 11/04/2021

APPLICANT:	SAGA CONSTRUC 1314 S Croatan Hy PO Box 90 Kill Devil Hills, NC 2 252-441-9003	vy, Suite 301		PO Box 90	Residential, LLC ls, NC 27948 03
GENERAL BUI	LDING - LIMITED:	1314 S Cro PO Box 90	ills, NC 27948	uite 301	License: 62306 Expires: 12/31/2020
PARCEL:					
PIN:	9884172204	18		Parcel Number:	
Address:	1303 West Fi	rst Street Kill Dev	/il Hills		
				Zoning:	
Addition:				Block:	Lot(s):
Legal Desc	cription: Lot 63, P	hase 1, Water Oa	k Residentia	al Community S/D	
FEES:		Paid	Due	BUILDING AREA:	
Covered Porch	Residential	\$249.75	\$0.00	Residential Heated Space	2075 sq. Ft.
Res. Building P	ermit Fee	\$1,748.65	\$0.00	(.75)	
T-Pole		\$50.00	\$0.00	# of Temporary Poles	1 EA
Pool/Hot Tub		\$200.00	\$0.00	Covered Porches/Decks	333 SQFT
	I	\$100.00	\$0.00	Resdiential Unheated (.40)	481 Sq. Ft
Land Disturbing		and the later of the later of the second state and the second state of the second stat	and a second s	ψη ₂	

PROJECT DESCRIPTION: Proposed 4 bedroom single family dwelling

Town of Kill Devil Hills Water Charges PAID Water Tap #: 724266

PROJECT NAME: Water Oak Residential LLC SITE ADDRESS: 1303 West First Street Kill Devil Hills BUILDING JOINT ISSUED: 11/12/2020

EXPIRES: 11/04/2021

	DE	ETAILS	
Permit			
Name	Value		
ZONING DISTRICT	RL		
FRONT YARD SETBACK	30		
REAR YARD SETBACK	20% Depth >30		
SIDE YARD SETBACK	10		
STREET SIDE SETBACK	15		
HEALTH DEPARTMENT PERMIT #	KDHWWTP		
# PARKING SPACES/BEDROOM	4		
CAMA PERMIT	N		
CAMA EXEMPTION	Ν		
FLOOD ZONE	х		
SUBSTANTIAL IMPROVEMENT	YES		
PURPOSE	Residential New V 20000.00 2075	- DD	
CONSTRUCTION TYPE	V	00	
CONSTRUCTION COST	(20000.00)200,0		
LIVING SPACE (SQFT)	2075		
COVERED PORCHES/DECKS (SQFT)	333		
GARAGE (SQFT)	481		
TOTAL SQUARE FOOTAGE	2889		
SURVEYOR NAME AND NUMBER	Michael Robinson		
ENGINEER AND LICENSE NUMBER	Frederick House 24740		
CULVERT	Ν		
ROLL OUT CAN	1		
DRIVEWAY INVERT 2	Y		
OCCUPANCY TYPE	One & Two Family Dwelling		



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

NOV 20 2020

Planning and Inspection Department

BJ2020-247 PROJECT NAME: Jeffrey Cruden SITE ADDRESS: 2908 BAY DR KILL DEVIL HILLS

BUILDING JOINT

ISSUED: 11/17/2020

EXPIRES: 05/16/2021

APPLICANT:	LYN SMALL, INC. 113 Ballast Rock Dr. Powels Point, NC 279 252-491-8562	66	C	WNER:	Cruden, Jeffr 2908 Bay Dri Kill Devil Hills 919-427-964	ve s, NC 27948	
ENERAL BUILI	DING - INTERMEDIATE	113 Ballast	Rock Dr. int, NC 27966			License: 27960 Expires: 12/31	
PARCEL:					1		
PIN:	987520814322			Parcel Number:	029612	003	
Address:	2908 BAY DR	KILL DEVIL HIL	LS				
				Zoni	ng:		
Addition:	VIRGINIA DAR	E SHORES RE	VISED	Bloc	k: 88	Lot(s):	13&14
Legal Des	cription:						
FEES:		Paid	Due			1. X.	
Pier/Bulkhead		\$150.00	\$0.00				
	Totals :	\$150.00	\$0.00				

PROJECT DESCRIPTION: Replace boat lift and pilings

-

PROJECT NAME: Jeffrey Cruden SITE ADDRESS: 2908 BAY DR KILL DEVIL HILLS **BUILDING JOINT**

ISSUED: 11/17/2020

EXPIRES: 05/16/2021

		DETAILS		
Permit				
Name	Value	_		
ZONING DISTRICT	RL			
FRONT YARD SETBACK	30			
REAR YARD SETBACK	CAMA			
SIDE YARD SETBACK	10			
CAMA PERMIT	Υ			
CAMA EXEMPTION	N			
FLOOD ZONE	AE			
BASE FLOOD ELEVATION	5			
SUBSTANTIAL IMPROVEMENT	NO			
PURPOSE	Residential Repair/Remodel			
CONSTRUCTION COST	13000.00			
CULVERT	Ν			
DRIVEWAY INVERT 2	Ν			
OCCUPANCY TYPE	One & Two Family Dwelling			

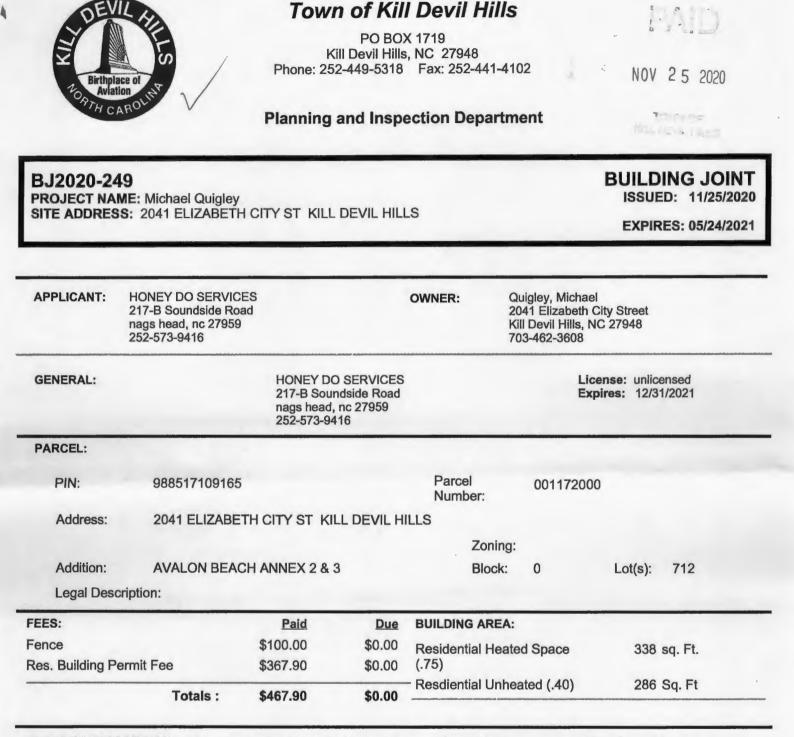
In-Slab Plumbing Slab/Foundation/Piling Framing Rough In

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.

Page 2 of 3



PROJECT DESCRIPTION: Construct a garage under house, change storage to game room, add bathroom to gameroom, add fence

PROJECT NAME: Michael Quigley SITE ADDRESS: 2041 ELIZABETH CITY ST KILL DEVIL HILLS

BUILDING JOINT

ISSUED: 11/25/2020

EXPIRES: 05/24/2021

DETAILS

Permit	
Name	Value
ZONING DISTRICT	RL
FRONT YARD SETBACK	15
REAR YARD SETBACK	20% Depth >30
SIDE YARD SETBACK	6
HEALTH DEPARTMENT PERMIT #	30191
# PARKING SPACES/BEDROOM	3
CAMA PERMIT	N
CAMA EXEMPTION	N
FLOOD ZONE	Х
SUBSTANTIAL IMPROVEMENT	NO
PURPOSE	Residential Repair/Remodel
CONSTRUCTION TYPE	V
CONSTRUCTION COST	15900.00
LIVING SPACE (SQFT)	338
GARAGE (SQFT)	286
TOTAL SQUARE FOOTAGE	624
SURVEYOR NAME AND NUMBER	William Jones
CULVERT	N
DRIVEWAY INVERT 2	N
OCCUPANCY TYPE	One & Two Family Dwelling

REQUIRED INSPECTIONS

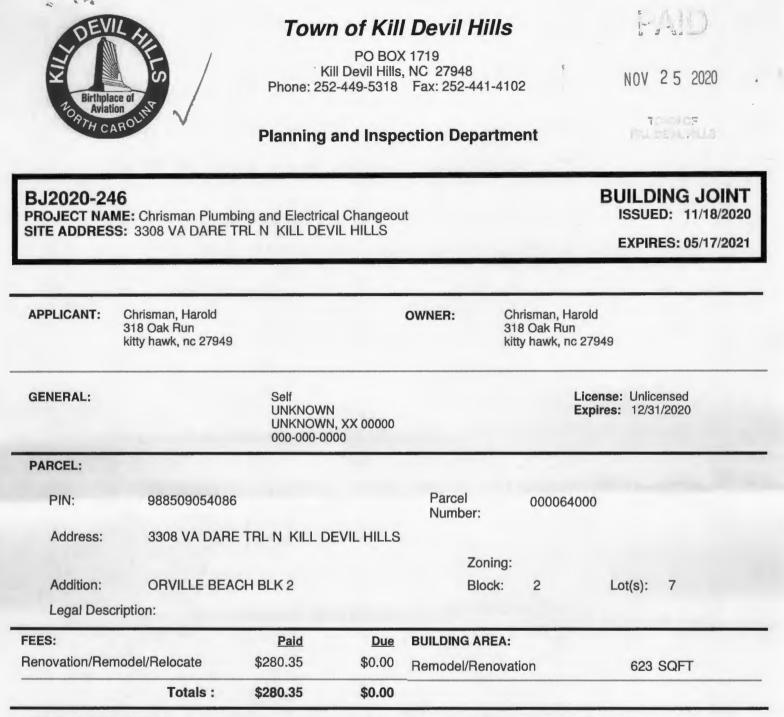
In-Slab Plumbing	
Framing	
Rough In	

Insulation

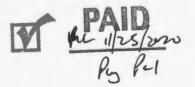
Final

Zoning Final

CONDITIONS



PROJECT DESCRIPTION: Repair/replace insulation, plumbing and electrical throughout existing residence.



PROJECT NAME: Chrisman Plumbing and Electrical Changeout SITE ADDRESS: 3308 VA DARE TRL N KILL DEVIL HILLS

ISSUED: 11/18/2020

BUILDING JOINT

EXPIRES: 05/17/2021

	D	ETAILS
Permit		
Name	Value	
ZONING DISTRICT	С	
REAR YARD SETBACK	20% Depth >30	
CAMA PERMIT	N	
CAMA EXEMPTION	Ν	
FLOOD ZONE	Х	
SUBSTANTIAL IMPROVEMENT	NO	
PURPOSE	Residential Repair/Remodel	
CONSTRUCTION COST	7000.00	
CULVERT	N	
DRIVEWAY INVERT 2	N	
OCCUPANCY TYPE	One & Two Family Dwelling	
	REQUIRE	ED INSPECTIONS
Rough In		Final

Insulation

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:		
Contractor or Authorized Agent:	Hardd Bryan Chrisman	

Date: 11/22/2020

Printed by : Marty Shaw on: 11/18/2020 09:10 AM

Birthplace Aviation	STT ST	K Phone: 25	PO BOX ill Devil Hills, 2-449-5318		4102		V 25 2020
TH CAP	401	Planning	and Inspe	ction Depar	tment		Lang rolly
	E: Bodner Bathroo : 1817 SEA SWE		/IL HILLS			ISSUE	ING JOINT ED: 11/25/2020 RES: 05/24/2021
	BODNER, JACK 121 Old Duck Road kitty hawk, nc 27949		(OWNER:	BODNER, J 121 Old Duo kitty hawk, r	ck Road	
	TODD COYLE CON PO Box 1094 kitty hawk, nc 27949 252-261-9728						
GENERAL:		TODD CO PO Box 10 kitty hawk, 252-261-97	nc 27949	JCTION		License: 6083 Expires: 01/0	
PARCEL:							
PIN:	98840906996	4		Parcel Number:	00238	0000	
Address:	1817 SEA SW	EPT RD KILL D	EVIL HILLS				
				Zoni	ng:		
Addition:	SEA HOLLY F	RIDGE		Block	k: C	Lot(s):	7
Legal Descri	ption:						
FEES:		Paid	Due				
Building Permit F Fee	ee - Minimum	\$150.00	\$0.00				
And the second state of th	Totals :	\$150.00	\$0.00				

PROJECT DESCRIPTION: add 30 sq ft unheated bathroom to ground floor, house under construction

PROJECT NAME: Bodner Bathroom addition SITE ADDRESS: 1817 SEA SWEPT RD KILL DEVIL HILLS **BUILDING JOINT**

ISSUED: 11/25/2020

EXPIRES: 05/24/2021

	DE	TAILS		
Permit				
Name	Value			
ZONING DISTRICT	RL			
FRONT YARD SETBACK	30			
REAR YARD SETBACK	20% Depth >30			
SIDE YARD SETBACK	8			
STREET SIDE SETBACK	15			
CAMA PERMIT	Ν			
CAMA EXEMPTION	Ν			
FLOOD ZONE	Х			
SUBSTANTIAL IMPROVEMENT	NO			
PURPOSE	Residential Addition			
CONSTRUCTION COST	4000.00			
SURVEYOR NAME AND NUMBER	Jamie E Furr L-4692			
CULVERT	Ν			
DRIVEWAY INVERT 2	Ν			
OCCUPANCY TYPE	One & Two Family Dwelling			

REQUIRED INSPECTIONS

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

CONDITIONS

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

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

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



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

Planning and Inspection Department

BJ2020-245

PROJECT NAME: HIPPIE HOUSE REMODEL SITE ADDRESS: 1903 CROATAN HWY S KILL DEVIL HILLS **BUILDING JOINT**

ISSUED: 11/16/2020

EXPIRES: 05/15/2021

1 4	BERALD PONTES 903 S. CROATAN (ill Devil Hills, NC 2 52-722-1321		c	WNER:	GERALD PO 1903 S. CRO Kill Devil Hills 252-722-132	ATAN HWY s, NC 27948	
GENERAL BUILDI	NG INTERMEDIAT	1508 Capta	ry Homes OBX, ains Ln. ills, NC 27948	LLC		License: 73029 Expires: 12/31	
PARCEL:							
PIN:	98931304806	7		Parcel Number:	004950	000	
Address:	1903 CROAT	AN HWY S KILL	DEVIL HILLS				
				Zonin	ig:		
Addition:	LAKE DRIVE	DEVELOPMENT	SEC 2	Block	: 0	Lot(s):	22
Legal Descrip	tion:						
FEES:		Paid	Due				
Building Permit Fe Fee	e - Minimum	\$150.00	\$0.00				
	Totals :	\$150.00	\$0.00				

FLOOR AND UNDER DECK, REMOVE UNPERMITTED, UNINSPECTED STORAGE BUILDING FROM EAST OF STRUCTURE, REMOVE ALL UNPERMITTED ELECTRICAL

MACHINE, INSTALL NEW DRAIN LINE AND ADDRESS NONCOMPLIANT DEAD END, REMOVE DOOR AT TOP FLOOR AND INSTALL CASED OPENING, OPEN DRYWALL ON TOP FLOOR FOR ELECTRICAL INSPECTION, ELECTRICAL EVALUATION AND CHANGES PER NC LICENSED TRADESMAN, EVALUATION OF REAR DECK BEAM AND REPAIR PER

WORK, INCLUDING SECOND RANGE FROM TOP FLOOR, REMOVE REAR EXTERIOR STAIR, REBUILD FRONT EXTERIOR STAIR TO 2018 NCBC, REMOVE OUTDOOR WASHING

ENGINEER

NOV 17 2020

BJ2020-245 PROJECT NAME: HIPPIE HOUSE REMODEL SITE ADDRESS: 1903 CROATAN HWY S KILL DEVIL HILLS	BUILDING JOINT ISSUED: 11/16/2020 EXPIRES: 05/15/2021
Ground floor is only permitted as store front and storage, no bedrooms or bathroo Second and third floor are only permitted as a single family dwelling, creating a mixe	oms are permitted. ed use structure.
I hereby certify that I have read and examined this application and know All provisions of Laws and Ordinances governing this type of work will specified herein or not. The granting of a permit does not presume to g the provisions of any other state/local law regulating construction or the Marky Shaw Issued By:	I be complied with whether give authority to violate or cancel he performance of construction.
contractor or Authorized Agent:	Date:

z

Z Birthplace Aviation	S S		PO BOX (ill Devil Hills, 52-449-5318		¥102	NOV 1	8 2020 ,
TORTH CAR	ROLL	Planning	and Inspe	ection Depart	ment	•••	
	3 E: Small house rais	se and demo po	rtions of exist	ling			ING JOINT ED: 11/18/2020
residence SITE ADDRESS	: 1700 BAY DR K	ILL DEVIL HILL	S			EXPIR	RES: 05/17/2021
	Small, Priscilla E. P O BOX 426 KILL DEVIL HILLS, 1 252-449-5565	NC 27948		OWNER:	Small, Priscill P O BOX 426 KILL DEVIL H 252-449-5565	ILLS, NC 279	48
	HADDON HOMES, I PO Box 1868 Nags Head, NC 279 267-2287						
CONTRACTOR:		PO Box 18	HOMES, INC. 368 d, NC 27959			License: 5556 Expires: 01/0	
PARCEL:							
PIN:	988413046916	3		Parcel Number:	002554	000	
Address:	1700 BAY DR	KILL DEVIL HI	LLS				
				Zonin	-		0 79 DT
Addition:	CROATAN SH	IORES INC SEC	01	Block	:: 0	Lot(s):	6-7& PT. BAY VIEW
Legal Descri	ption:						
FEES:		Paid	Due				
Building Permit F Fee	ee - Minimum	\$150.00	\$0.00				
CONTRACTOR OF A DESCRIPTION OF A DESCRIP	Totals :	\$150.00	\$0.00				

PROJECT DESCRIPTION: demo part of existing home as required for lift and lift house after installation of girders and pilings

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PROJECT NAME: Small house raise and demo portions of existing residence SITE ADDRESS: 1700 BAY DR KILL DEVIL HILLS

BUILDING JOINT ISSUED: 11/18/2020

EXPIRES: 05/17/2021

	DETAILS	
Permit		
Name	Value	
ZONING DISTRICT	RL	
FRONT YARD SETBACK	30	
REAR YARD SETBACK	CAMA	
SIDE YARD SETBACK	10	
# PARKING SPACES/BEDROOM	4	
CAMA PERMIT	Ν	
CAMA EXEMPTION	Ν	
FLOOD ZONE	AE	
BASE FLOOD ELEVATION	5	
SUBSTANTIAL IMPROVEMENT	NO	
PURPOSE	Residential Repair/Remodel	
CONSTRUCTION COST	65000.00	
LOT COVERAGE	20.40	
SURVEYOR NAME AND NUMBER	Doug Styons L-3227	
CULVERT	Ν	
DRIVEWAY INVERT 2	Ν	
OCCUPANCY TYPE	One & Two Family Dwelling	

REQUIRED INSPECTIONS

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

CONDITIONS

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

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



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

Planning and Inspection Department

BJ2020-244

PROJECT NAME: OBX Cottages LLC SITE ADDRESS: 538 EDEN ST ST W KILL DEVIL HILLS

BUILDING JOINT

ISSUED: 11/19/2020

EXPIRES: 05/18/2021

LICANT: Sandy Bottom Homes OW 400 DaVinci Lane kitty hawk, nc 27949 757-448-8162			OWNER: OBX COTTAGES LLC 200 EAST BLACKMAN ST nags head, nc 27959 252-207-5475			
IMITED:	400 DaVinci I kitty hawk, no	Lane 27949	ËS		ense: 67524 ires: 01/01/2021	
7520905491			Parcel Number:	000725032		
38 EDEN ST ST V	KILL DEVI	L HILLS				
			Zoning:			
RGINIA DARE SI	HORES	`	Block:	73	Lot(s): 31-40	
	Paid	Due	BUILDING AREA:			
itial	\$56.25	\$0.00	Covered Porches	s/Decks	75 SQFT	
		\$0.00	Open Decks		1 EA	
			Resdiential Unhe	eated (.40)	26 Sq. Ft	
				ed Space	1775 sq. Ft.	
	1	Terr 2 au des Madellins, eine gestjongerijk-ginder		Poles	1 EA	
Totals : \$1,	697.90	\$0.00	# OF Temporary T	UICS		
N: Proposed 4 t	edroom singl	le family dv	welling			
			us unganded			
		Ť	own of Kill Devi	Hills		
20 *			Water Charge	25		
	aVinci Lane awk, nc 27949 8-8162 IMITED: 37520905491 38 EDEN ST ST V IRGINIA DARE SH ntial \$ se \$1, Totals : \$1,	AVinci Lane avk, nc 27949 8-8162 IMITED: SANDY BOT 400 DaVinci I kitty hawk, nc 757-448-8162 37520905491 38 EDEN ST ST W KILL DEVII IRGINIA DARE SHORES Paid ntial \$56.25 \$100.00 \$150.00 ee \$1,341.65 \$50.00 Totals : \$1,697.90	AVinci Lane wk, nc 27949 #8-8162 IMITED: SANDY BOTTOM HOME 400 DaVinci Lane kitty hawk, nc 27949 757-448-8162 87520905491 38 EDEN ST ST W KILL DEVIL HILLS IRGINIA DARE SHORES Intial \$56.25 \$100.00 \$0.00 \$150.00 \$0.00 \$50.00 \$0.00 \$50.00 \$0.00 \$50.00 \$0.00 \$1341.65 \$0.00 \$50.00 \$0.00 \$100.00 \$0.00 \$50.00 \$0.00 \$100.00 \$0.00 \$100.00 \$0.00 \$100.00 \$0.00 \$50.00 \$0.00 \$1,341.65 \$0.00 \$1,697.90 \$0.00 N: Proposed 4 bedroom single family dy	AVinci Lane 2 INITED: SANDY BOTTOM HOMES 400 DaVinci Lane 400 DaVinci Lane kitty hawk, nc 27949 757-448-8162 B7520905491 Parcel B8 EDEN ST ST W KILL DEVIL HILLS Zoning: B8 EDEN ST ST W KILL DEVIL HILLS Zoning: Broker Block: Intial \$56.25 \$0.00 \$100.00 \$0.00 Open Decks \$150.00 \$0.00 Residential Unher Residential Heat \$50.00 \$0.00 \$150.00 \$0.00 # of Temporary F N: Proposed 4 bedroom single family dwelling Town of Kill Devi	Winci Lane 200 EAST BLAC iwk, nc 27949 nags head, nc 27 iB-8662 252-207-5475 IMITED: SANDY BOTTOM HOMES Lice 400 DaVinci Lane kitty hawk, nc 27949 Exp 757-448-8162 Parcel 000725032 B7520905491 Parcel 000725032 B8 EDEN ST ST W KILL DEVIL HILLS Zoning: IRGINIA DARE SHORES Block: 73 Paid Due BUILDING AREA: ntial \$56.25 \$0.00 Covered Porches/Decks \$100.00 \$0.00 Qpen Decks \$150.00 \$1,341.65 \$0.00 Residential Unheated (.40) we \$1,341.65 \$0.00 \$1,697.90 \$0.00 # of Temporary Poles N: Proposed 4 bedroom single family dwelling Town of Kill Devil Hills Town of Kill Devil Hills	

Water Tap #:

T24317

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PROJECT NAME: OBX Cottages LLC SITE ADDRESS: 538 EDEN ST ST W KILL DEVIL HILLS

BUILDING JOINT

ISSUED: 11/19/2020

EXPIRES: 05/18/2021

	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	
HEALTH DEPARTMENT PERMIT #	30224	
# PARKING SPACES/BEDROOM	4	
CAMA PERMIT	N	
CAMA EXEMPTION	N	
FLOOD ZONE	x	
SUBSTANTIAL IMPROVEMENT	YES	
PURPOSE	Residential New	
CONSTRUCTION TYPE	V	
CONSTRUCTION COST	210000.00	
LOT COVERAGE	39.80	
LIVING SPACE (SQFT)	1775	
COVERED PORCHES/DECKS (SQFT)	75	
STORAGE (SQFT)	26	
OPEN DECK (SQFT)	116	
TOTAL SQUARE FOOTAGE	1992	
SURVEYOR NAME AND NUMBER	Seaboard Surveying	
ENGINEER AND LICENSE NUMBER	Mike Osteen 032628	
CULVERT	N	
ROLL OUT CAN	1	
DRIVEWAY INVERT 2	Y	
OCCUPANCY TYPE	One & Two Family Dwelling	

Page 1 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

BJ2020-220

APPLICANT:

PROJECT NAME: Sandy Bottom Homes New House **SITE ADDRESS:** 607 Palmetto St W Kill Devil Hills

OBX COTTAGES LLC

nags head, nc 27959

400 DaVinci Lane kitty hawk, nc 27949

252-207-5475

CONTRACTOR: Sandy Bottom Homes

200 EAST BLACKMAN ST

OWNER: OBX COTTAGES LLC 200 EAST BLACKMAN ST nags head, nc 27959 252-207-5475

A t

GENERAL BUILDING-LIMITED	D: SANDY BC 400 DaVino kitty hawk, 757-448-81	nc 27949		icense: 67524 xpires: 01/01/2021
PARCEL:				
PIN: 9874089	995737		Parcel Number:	
Address: 607 Pair	metto St W Kill Devil H	ills		
			Zoning:	
Addition:			Block:	Lot(s):
	12r, Block 76 Virginia [Dare Shores		Lot(s):
	12r, Block 76 Virginia I <u>Paid</u>	Dare Shores		Lot(s):
Legal Description: Lot				Lot(s): 192 SQFT
Legal Description: Lot	Paid	Due	BUILDING AREA: Covered Porches/Decks	
Legal Description: Lot FEES: Covered Porch Residential	<u>Paid</u> \$144.00	<u>Due</u> \$0.00	BUILDING AREA: Covered Porches/Decks Open Decks	192 SQFT 1 EA
Legal Description: Lot FEES: Covered Porch Residential Land Disturbing	<u>Paid</u> \$144.00 \$100.00	<u>Due</u> \$0.00 \$0.00	BUILDING AREA: Covered Porches/Decks Open Decks Resdiential Unheated (.40)	192 SQFT 1 EA 73 Sq. Ft
Legal Description: Lot FEES: Covered Porch Residential Land Disturbing Open Deck Fee	<u>Paid</u> \$144.00 \$100.00 \$150.00	<u>Due</u> \$0.00 \$0.00 \$0.00	BUILDING AREA: Covered Porches/Decks Open Decks	192 SQFT 1 EA

PROJECT DESCRIPTION: New 3 Bedroom 3 bath SFD

Town of Kill Devil Hills Water Charges PAID

NOV - 3 2020



BUILDING JOINT

ISSUED: 11/02/2020

EXPIRES: 05/01/2021

PROJECT NAME: Sandy Bottom Homes New House SITE ADDRESS: 607 Palmetto St W Kill Devil Hills

BUILDING JOINT ISSUED: 11/02/2020

EXPIRES: 05/01/2021

		DETAILS
Permit		
Name	Value	
ZONING DISTRICT	RL	
FRONT YARD SETBACK	30	
REAR YARD SETBACK	20% Depth >30	
SIDE YARD SETBACK	10	
HEALTH DEPARTMENT PERMIT #	30090	
# PARKING SPACES/BEDROOM	3	
CAMA PERMIT	N	
CAMA EXEMPTION	N	
FLOOD ZONE	AE	
BASE FLOOD ELEVATION	4.0	
SUBSTANTIAL IMPROVEMENT	NO	
PURPOSE	Residential New	
CONSTRUCTION TYPE	V	
CONSTRUCTION COST	210000.00	
LOT COVERAGE	38.50	
LIVING SPACE (SQFT)	1644	
COVERED PORCHES/DECKS (SQFT)	192	
STORAGE (SQFT)	73	
OPEN DECK (SQFT)	66	
TOTAL SQUARE FOOTAGE	1975	
SURVEYOR NAME AND NUMBER	Ray Meekins L-2592	
ENGINEER AND LICENSE NUMBER	Mike Osteen 032628	
CULVERT	Ν	
ROLL OUT CAN	1	
DRIVEWAY INVERT 2	Υ	
OCCUPANCY TYPE	One & Two Family Dwelling	



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

NOV - 3 2020

Planning and Inspection Department

BJ2020-228

PROJECT NAME: Herbert Drier SITE ADDRESS: 225 BURNS DR KILL DEVIL HILLS BUILDING JOINT ISSUED: 11/03/2020

EXPIRES: 05/02/2021

APPLICANT:	Drier, Herbert 215 Golf Aire Blvd. WINTER HAVEN, F 863-326-5514	FL 33884		OWNER:	Drier, Herbe 215 Golf Air WINTER H. 863-326-55	re Blvd. AVEN, FL 33884	4
CONTRACTOR:		SAME AS O UNKNOWN UNKNOWN				License: San Expires: 12/	
PARCEL:							
PIN:	98831694328	36		Parcel Number:	00840	08000	
Address:	225 BURNS	DR KILL DEVIL H	HILLS				
				Zoni	ng:		
Addition:	OCEAN ACR	ES TRACT 3 SEC	01	Bloc	k: B	Lot(s):	25
Legal Desc	ription:						
FEES:		Paid	Due	BUILDING ARE	EA:		
Res. Building Pe	ermit Fee	\$1,419.80	\$0.00	Residential He	eated Space	1236	sq. Ft.
Covered Porch F	Residential	\$81.00	\$0.00	(.75)			
Open Deck Fee		\$150.00	\$0.00	Covered Porc	hes/Decks	108	SQFT
T-Pole		\$50.00	\$0.00	Open Decks		1	EA
	Totals :	\$1 700 90	\$0.00	- # of Temporar	y Poles	1	EA
	Totals :	\$1,700.80	\$0.00	Resdiential Ur	heated (.40) 1232	Sq. Ft

PROJECT DESCRIPTION: Proposed 3 bedroom single family dwelling

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

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PROJECT NAME: Herbert Drier SITE ADDRESS: 225 BURNS DR KILL DEVIL HILLS ISSUED: 11/03/2020

EXPIRES: 05/02/2021

DETAILS

Permit	
Name	Value
ZONING DISTRICT	RL
FRONT YARD SETBACK	30
REAR YARD SETBACK	20% Depth >30
SIDE YARD SETBACK	10
STREET SIDE SETBACK	15
HEALTH DEPARTMENT PERMIT #	KDHWWTP
# PARKING SPACES/BEDROOM	3
CAMA PERMIT	Υ
CAMA EXEMPTION	Ν
FLOOD ZONE	Х
SUBSTANTIAL IMPROVEMENT	YES
PURPOSE	Residential New
CONSTRUCTION TYPE	V
CONSTRUCTION COST	155000.00
LOT COVERAGE	29.40
LIVING SPACE (SQFT)	1236
COVERED PORCHES/DECKS (SQFT)	108
GARAGE (SQFT)	385
STORAGE (SQFT)	847
OPEN DECK (SQFT)	112
TOTAL SQUARE FOOTAGE	2688
SURVEYOR NAME AND NUMBER	Timmons Group
ARCHITECT NAME AND LICENSE NUMBER	Barrett Crook 027540
CULVERT	N
ROLL OUT CAN	1
DRIVEWAY INVERT 2	Y
OCCUPANCY TYPE	One & Two Family Dwelling



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

NOV - 3 2020

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Planning and Inspection Department

BJ2020-222

PROJECT NAME: SAGA New 4 Bedroom House SITE ADDRESS: 707 Zen Lane Kill Devil Hills

BUILDING JOINT ISSUED: 11/02/2020

EXPIRES: 05/01/2021

4

APPLICANT:	Water Oak Residential, PO Box 90 Kill Devil Hills, NC 2794 252-441-9003			OWNER:	Water Oak Resid PO Box 90 Kill Devil Hills, N 252-441-9003	
CONTRACTOR:	SAGA CONSTRUCTION UNKNOWN UNKNOWN, XX 00000 252-441-9003	N				
GENERAL BUIL	DING - LIMITED:	1314 S Cro PO Box 90	ills, NC 27948	ite 301		ense: 62306 pires: 12/31/2020
PARCEL:						
PIN:	988417221327			Parcel Number:		
Address:	707 Zen Lane Ki	I Devil Hills				
				Zoni	ng:	
Addition:				Bloc	k:	Lot(s):
Legal Descr	ription: Lot 60, Wate	Oak Reside	ntial Commu	nity		
FEES:		Paid	Due	BUILDING ARE	EA:	
Covered Porch F	Residential	\$126.00	\$0.00	Covered Porc	hes/Decks	168 SQFT
Land Disturbing		\$100.00	\$0.00	Resdiential U	heated (.40)	478 Sq. Ft
Res. Building Pe	rmit Fee \$	1,703.20	\$0.00	Residential He		2016 sq. Ft.
T-Pole		\$50.00	\$0.00	(.75)		
	Totals : \$	1,979.20	\$0.00	# of Temporar	v Poles	1 EA

PROJECT DESCRIPTION: New 4 Bedroom 3 bath single family dwelling Town of Kill Devil Hills

T 242los

Water Charges

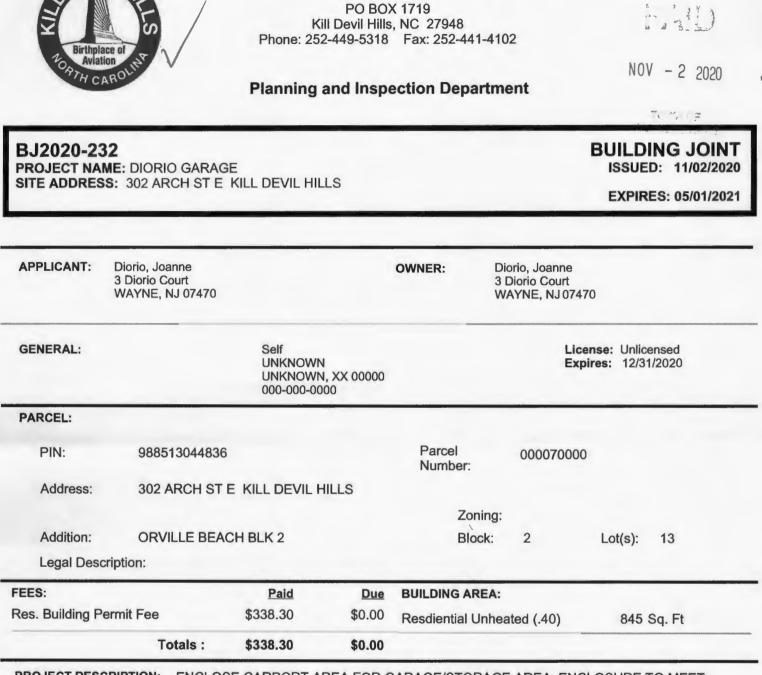
Water Tap #:

PROJECT NAME: SAGA New 4 Bedroom House SITE ADDRESS: 707 Zen Lane Kill Devil Hills

BUILDING JOINT ISSUED: 11/02/2020

EXPIRES: 05/01/2021

	E	DETAIL
Permit		
Name	Value	_
ZONING DISTRICT	RL	
FRONT YARD SETBACK	30	
REAR YARD SETBACK	20% Depth >30	
SIDE YARD SETBACK	8	
# PARKING SPACES/BEDROOM	4	
CAMA PERMIT	N	
CAMA EXEMPTION	N	
FLOOD ZONE	Х	
BASE FLOOD ELEVATION	8	
SUBSTANTIAL IMPROVEMENT	NO	
PURPOSE	Residential New	
CONSTRUCTION COST	200000.00	
LOT COVERAGE	38.40	
LIVING SPACE (SQFT)	2016	
COVERED PORCHES/DECKS (SQFT)	168	
GARAGE (SQFT)	478	
TOTAL SQUARE FOOTAGE	2662	
SURVEYOR NAME AND NUMBER	Michael Robinson 18994	
ENGINEER AND LICENSE NUMBER	Frederick House 24740	
CULVERT	Ν	
ROLL OUT CAN	1	
DRIVEWAY INVERT 2	Υ	
OCCUPANCY TYPE	One & Two Family Dwelling	



PROJECT DESCRIPTION: ENCLOSE CARPORT AREA FOR GARAGE/STORAGE AREA, ENCLOSURE TO MEET SETBACKS

K 11/2/000 Mak # 144

BJ2020-232 PROJECT NAME: DIORIO GARAGE SITE ADDRESS: 302 ARCH ST E KILL DEVIL HILLS

EXPIRES: 05/01/2021

DETAILS

Permit	
Name	Value
ZONING DISTRICT	С
FRONT YARD SETBACK	30
REAR YARD SETBACK	20% Depth >30
SIDE YARD SETBACK	8
CAMA PERMIT	Ν
CAMA EXEMPTION	N
FLOOD ZONE	Х
SUBSTANTIAL IMPROVEMENT	NO
PURPOSE	Residential Addition
CONSTRUCTION TYPE	V
CONSTRUCTION COST	3000.00
CULVERT	N
DRIVEWAY INVERT 2	N
OCCUPANCY TYPE	One & Two Family Dwelling

REQUIRED INSPECTIONS

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

CONDITIONS

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

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

* Zoning Final Inspection is required.

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



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

NOV - 6 2020

Planning and Inspection Department

BJ2020-207

PROJECT NAME: Doug Penland SITE ADDRESS: 1201 CLAM SHELL DR KILL DEVIL HILLS

BUILDING JOINT

ISSUED: 11/05/2020

EXPIRES: 05/04/2021

APPLICANT:	C & T CONTRACTIN 1700 Bell Ave. Kill Devil Hills, NC 2 252-202-9943		o	WNER:	PENLAND, T P O BOX 173 KILL DEVIL H		8
BUILDING LIMI	TED:	1700 Bell A	ills, NC 27948			License: 4536 Expires: 01/01	-
PARCEL:							
PIN:	98840906354	9		Parcel Number:	0025270	000	
Address:	1201 CLAM S	HELL DR KILL (DEVIL HILLS				
				Zonir	ng:		
Addition:	CROATAN SH	IORES INC SEC	1	Block	: 19	Lot(s):	15
Legal Desc	ription:						
FEES:		Paid	Due				
Building Permit I Fee	Fee - Minimum	\$150.00	\$0.00				
	Totals :	\$150.00	\$0.00				

PROJECT DESCRIPTION:

Enclose existing porch/install windows/new siding and flooring/replace decking/rails/treads and risers/add required HVAC and electrical

BJ2020-207 PROJECT NAME: Doug Penland SITE ADDRESS: 1201 CLAM SHELL DR KILL DEVIL HILLS

BUILDING JOINT ISSUED: 11/05/2020

EXPIRES: 05/04/2021

DETAILS

Name	Value	
ZONING DISTRICT	RL	
FRONT YARD SETBACK	30	
REAR YARD SETBACK	20% Depth >30	
HEALTH DEPARTMENT PERMIT #	30061	
# PARKING SPACES/BEDROOM	3	
CAMA PERMIT	Ν	
CAMA EXEMPTION	Ν	
FLOOD ZONE	х	
SUBSTANTIAL IMPROVEMENT	NO	
PURPOSE	Residential Repair/Remodel	
CONSTRUCTION TYPE	V	
CONSTRUCTION COST	26000.00	
LIVING SPACE (SQFT)	168	
CULVERT	Ν	
DRIVEWAY INVERT 2	Ν	
OCCUPANCY TYPE	One & Two Family Dwelling	

REQUIRED INSPECTIONS

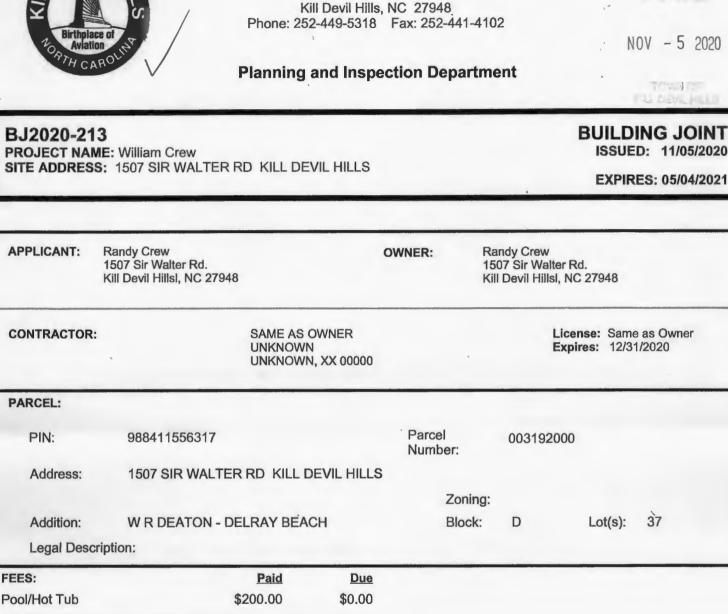
In-Slab Plumbing	Insulation
Slab/Foundation/Piling	Final
Framing	Zoning Final
Rough In	

CONDITIONS

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

* 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.



\$0.00

Town of Kill Devil Hills

PO BOX 1719

PROJECT DESCRIPTION: Pool, pool deck and fence

Totals :

\$200.00



NOV - 5 2020

E.C.T

BJ2020-213 PROJECT NAME: William Crew

Dormit

SITE ADDRESS: 1507 SIR WALTER RD KILL DEVIL HILLS

BUILDING JOINT

ISSUED: 11/05/2020

EXPIRES: 05/04/2021

DETAILS

Permit	
Name	Value
ZONING DISTRICT	RL
FRONT YARD SETBACK	30
REAR YARD SETBACK	20% Depth >30
SIDE YARD SETBACK	8
CAMA PERMIT	N
CAMA EXEMPTION	N
FLOOD ZONE	х
SUBSTANTIAL IMPROVEMENT	NO
PURPOSE	Residential Accessory
CONSTRUCTION COST	28000.00
CULVERT	N
DRIVEWAY INVERT 2	N
OCCUPANCY TYPE	One & Two Family Dwelling

REQUIRED INSPECTIONS

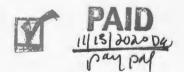
In-Slab Plumbing	Insulation
Slab/Foundation/Piling	Final
Framing	Zoning Final
Rough In	

CONDITIONS

* This permit becomes null and void if work or construction authorized is not commenced within 6 months or if construction or work is suspended for a period of 12 months at any time after work has started.
* 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.
* Maximum lot coverage is 40%.

NO BIRTIPLE	L's	K Phone: 25	n of Kill L PO BOX 1 (ill Devil Hills, N i2-449-5318 F and Inspect	719 IC 27948 Fax: 252-441-4	102 NOV 1 6 2020	·) 編
	11 ME: Bailets Pool SS: 904 MEMORIAL	BLVD S KILL [DEVIL HILLS		BUILDING ISSUED: 1 EXPIRES: 0	1/13/2020
APPLICANT:	Bailets, Jason 109 White Birch Rd SUNBURY, PA 1780	1	01		Bailets, Jason 109 White Birch Rd SUNBURY, PA 17801	
GENERAL:		PO Box 29	lills, NC 27948		License: 61128 Expires: 12/19/2020	
PARCEL:				0 0 0		
PARCEL:				Parcel	004211001	
PIN:	988308889680)		Number:	004211001	
) AL BLVD S KILL	DEVIL HILLS		004211001	
PIN: Address:	904 MEMORIA	AL BLVD S KILL	DEVIL HILLS	Zonin	:	
PIN: Address: Addition:	904 MEMORIA KILL DEVIL HI	AL BLVD S KILL	_ DEVIL HILLS		:	
PIN: Address:	904 MEMORIA KILL DEVIL HI	AL BLVD S KILL	DEVIL HILLS	Zonin	:	
PIN: Address: Addition: Legal Desc FEES:	904 MEMORIA KILL DEVIL HI	AL BLVD S KILL ILLS SEC 1 <u>Paid</u>	Due	Zonin	:	
PIN: Address: Addition:	904 MEMORIA KILL DEVIL HI	AL BLVD S KILL		Zonin	:	

PROJECT DESCRIPTION: Install inground pool and barrier, relocate septic



BJ2020-241

Dormit

PROJECT NAME: Bailets Pool SITE ADDRESS: 904 MEMORIAL BLVD S KILL DEVIL HILLS

BUILDING JOINT

ISSUED: 11/13/2020

EXPIRES: 05/12/2021

DETAILS

Name	Value
ZONING DISTRICT	С
FRONT YARD SETBACK	30
REAR YARD SETBACK	20% Depth >30
SIDE YARD SETBACK	10
CAMA PERMIT	N
CAMA EXEMPTION	N
FLOOD ZONE	Х
SUBSTANTIAL IMPROVEMENT	NO
PURPOSE	Residential Accessory
CONSTRUCTION COST	42000.00
LOT COVERAGE	65.00
SURVEYOR NAME AND NUMBER	Michael Robinson
CULVERT	N
DRIVEWAY INVERT 2	Ν
OCCUPANCY TYPE	One & Two Family Dwelling

REQUIRED INSPECTIONS

Pool Bonding

Zoning Final

Final

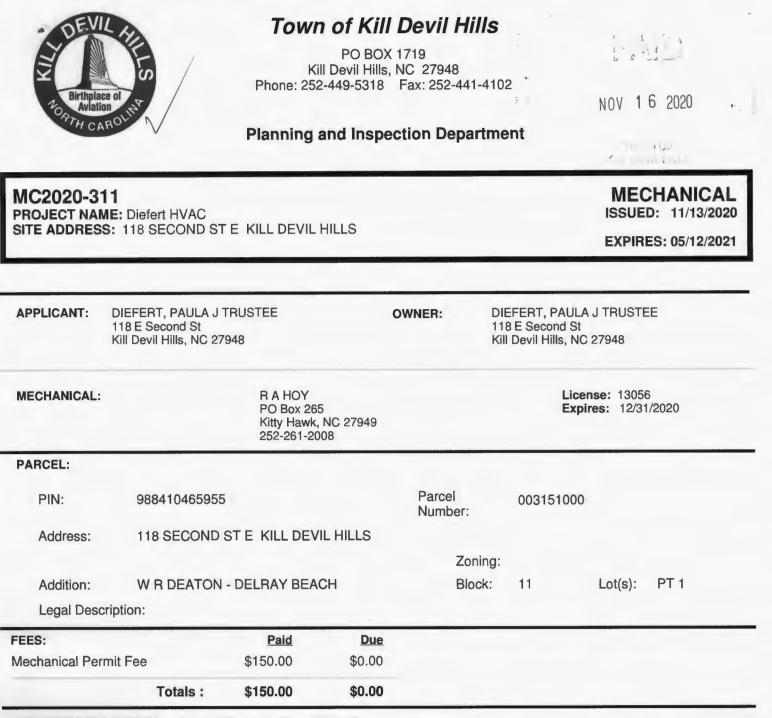
CONDITIONS

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

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

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

* Zoning Final Inspection is required.



PROJECT DESCRIPTION: C/O 2.5 Ton & 1.5Ton HVAC Systems



MC2020-311 PROJECT NAME: Diefert HVAC SITE ADDRESS: 118 SECOND ST E KILL DEVIL HILLS MECHANICAL ISSUED: 11/13/2020

EXPIRES: 05/12/2021

		DETAILS		
Permit				
Name	Value			
PURPOSE	Residential Repair/Remodel			
CONSTRUCTION COST	11952.00			
CONSTRUCTION TYPE	V			
FLOOD ZONE	Х			
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.

charles Thuman Issued By:

Contractor or Authorized Agent

MARCEY BAUM

11 / 13 / 2020 Date:

DEV	L HII	Tow		Devil Hi	lls		
HIT AVIS	Lee of S		PO BO (ill Devil Hills) 2-449-5318		-4102	NO	V 17 2020
TORTH C	AROLI	Planning	and Inspe	ection Depar	tment	,	70 - 075
MC2020-3 PROJECT NA SITE ADDRES		ILL DEVIL HILLS	S			ISSUE	CHANICAL D: 11/16/2020 ES: 05/15/2021
APPLICANT:	Piazza, Michael & Cy	ynthia		OWNER:	11424 Shell		
	11424 Shell Harbor CHESTERFIELD, V/ 640-2357				CHESTERFI 640-2357	ELD, VA 23030	
MECHANICAL	CHESTERFIELD, V/ 640-2357	A 23838 DUSTY RH INC P.O. Box 4	44 , NC 27949	ING AND AIR CO	640-2357		
	CHESTERFIELD, V/ 640-2357	A 23838 DUSTY RH INC P.O. Box 4 Kitty Hawk,	44 , NC 27949	ING AND AIR CO	640-2357	License: 2169	
MECHANICAL	CHESTERFIELD, V/ 640-2357	A 23838 DUSTY RH INC P.O. Box 4 Kitty Hawk, 252-202-68	44 , NC 27949	ING AND AIR CO Parcel Number:	640-2357	License: 2169 Expires: 12/31	
MECHANICAL PARCEL:	CHESTERFIELD, V/ 640-2357 H-3: 987408983707	A 23838 DUSTY RH INC P.O. Box 4 Kitty Hawk, 252-202-68	44 , NC 27949 352	Parcel	640-2357 DNDITIONING	License: 2169 Expires: 12/31	
MECHANICAL PARCEL: PIN:	CHESTERFIELD, V/ 640-2357 H-3: 987408983707	A 23838 DUSTY RH INC P.O. Box 4 Kitty Hawk, 252-202-68	44 , NC 27949 352	Parcel	640-2357 ONDITIONING 001982	License: 2169 Expires: 12/31	
MECHANICAL PARCEL: PIN:	CHESTERFIELD, V/ 640-2357 H-3: 987408983707 2050 BAY DR	A 23838 DUSTY RH INC P.O. Box 4 Kitty Hawk, 252-202-68	44 , NC 27949 352 .LS	Parcel Number:	640-2357 DNDITIONING 001982 ng:	License: 2169 Expires: 12/31	
MECHANICAL PARCEL: PIN: Address:	CHESTERFIELD, V/ 640-2357 H-3: 987408983707 2050 BAY DR AVALON BEAC	A 23838 DUSTY RH INC P.O. Box 44 Kitty Hawk, 252-202-66	44 , NC 27949 352 .LS	Parcel Number: Zoni	640-2357 DNDITIONING 001982 ng:	License: 2169 Expires: 12/31	1/2020
MECHANICAL PARCEL: PIN: Address: Addition: Legal Desc	CHESTERFIELD, V/ 640-2357 H-3: 987408983707 2050 BAY DR AVALON BEAC	A 23838 DUSTY RH INC P.O. Box 4 Kitty Hawk, 252-202-68 KILL DEVIL HIL CH ANNEX 2 & 3 Paid	44 , NC 27949 352 LS 3 <u>Due</u>	Parcel Number: Zoni	640-2357 DNDITIONING 001982 ng:	License: 2169 Expires: 12/31	1/2020
MECHANICAL PARCEL: PIN: Address: Addition:	CHESTERFIELD, V/ 640-2357 H-3: 987408983707 2050 BAY DR AVALON BEAC	A 23838 DUSTY RH INC P.O. Box 44 Kitty Hawk, 252-202-66	44 , NC 27949 352 LLS 3	Parcel Number: Zoni	640-2357 DNDITIONING 001982 ng:	License: 2169 Expires: 12/31	1/2020





M PAID 11/1 2020 CK #2839



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

MC2020-310

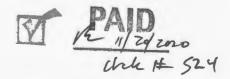
PROJECT NAME: HERNANDEZ HVAC SITE ADDRESS: 309 INDIAN DR KILL DEVIL HILLS MECHANICAL

ISSUED: 11/13/2020

EXPIRES: 05/12/2021

APPLICANT:	SORTO, OSCAR 309 Indian Drive Kill Devil Hills, NC 27	948	C	WNER:	SORTO, OSC 309 Indian Dr Kill Devil Hills	rive
H-3, CLASS I:				.N		License: 22994 Expires: 12/31/2020
PARCEL:						
PIN:	988410361385			Parcel Number:	028819	000
Address:	309 INDIAN DI	R KILL DEVIL H	IILLS			
				Zoni	ng:	
Addition:	HIGH VIEW - I	HEDRICKS ADD		Bloc	k: F	Lot(s): 5
Legal Descr	iption:					
EES:		Paid	Due			
Mechanical Pern	nit Fee	\$150.00	\$0.00			
	Totals :	\$150.00	\$0.00			

PROJECT DESCRIPTION: HVAC CHANGE OUT



MC2020-310 PROJECT NAME: HERNANDEZ HVAC SITE ADDRESS: 309 INDIAN DR KILL DEVIL HILLS

EXPIRES: 05/12/2021

		DETAILS		
Permit				
Name	Value			
PURPOSE	Residential Repair/Remodel			
CONSTRUCTION COST	5000.00			
CONSTRUCTION TYPE	V			
FLOOD ZONE	Х			
BASE FLOOD ELEVATION	8.00			
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 exam All provisions of Laws and Ordinances go specified herein or not. The granting of a the provisions of any other state/local law Jordon Blyt	overning this type of work permit does not presume v regulating construction	will be complied with whether to give authority to violate or cancel
Contractor or Authorized Agent:	Dour	Date: 11 / 19 / 2020

Addition: Legal Des FEES: Mechanical Pe	· · · · · · · · · · · · · · · · · · ·	<u>Paid</u> \$150.00	<u>Due</u> \$0.00					
Addition:	cription:							
	KILL DEVIL BE	ACH SEC 1 RE	VISED		Block:	Н	Lot(s):	16
•					Zoning:			
Address:	1505 WRIGHT	SVILLE BLVD		HILLS				
PIN:	989309054519	1		Parce		004742000)	
PARCEL:								
GENERAL:		Self UNKNOWI UNKNOWI 000-000-00	N, XX 00000				ense: Unlica ires: 12/3 ⁻	
APPLICANT:	BURKE, PAMELA C 12508 POPLAR FOR RICHMOND, VA 232			OWNER:	12	IRKE, PAMEL 508 POPLAR CHMOND, VA	FOREST DR	2
	ME: BURKE HVAC SS: 1505 WRIGHTS	/ILLE BLVD KIL	L DEVIL HI	LLS			ISSUE	CHANICA D: 11/18/20 ES: 05/17/20
TH C	AROL	Planning	and Inspe	ection De	epartme	ent	TC.	
Birthpl Zo Avia	ace of the AROLINE	Phone: 25	2-449-5318	Fax: 252	-441-410	2	NOV 1	8 2020
E I			PO BO III Devil Hills	K 1719			e	

NT . 5

MC2020-316 PROJECT NAME: BURKE HVAC SITE ADDRESS: 1505 WRIGHTSVILLE BLVD KILL DEVIL HILLS

MECHANICAL ISSUED: 11/18/2020

EXPIRES: 05/17/2021

DETAILS

Permit	
Name	Value
PURPOSE	Residential Repair/Remodel
CONSTRUCTION COST	1500.00
CONSTRUCTION TYPE	V
FLOOD ZONE	Х
BASE FLOOD ELEVATION	8.00
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.

* Licensed tradesman shall sign off on installation prior to issuance of C.C.

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: ____ Date: _///18/20 M1 SK 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

NOV 17 2020

£ ; - .

Planning and Inspection Department

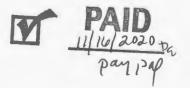
MC2020-315 PROJECT NAME: SITE ADDRESS: 807 CROATAN HWY S KILL DEVIL HILLS

MECHANICAL ISSUED: 11/16/2020

EXPIRES: 05/15/2021

APPLICANT:	HARVEY, PHILLIP S 3707 VIRGINIA ROA TYNER, NC 27980		o	WNER:	HARVEY, PH 3707 VIRGIN TYNER, NC 2	IA ROAD	
MECHANICAL	, H-2, H-3:	P.O. Box 13	HEATING AND 32 ilis, NC 27948	COOLING		L icense: 34340 E xpires: 12/31/	
PARCEL:							
PIN:	988308884594			Parcel Number:	008237	000	
Address:	807 CROATAN	HWY S KILL	EVIL HILLS				
				Zonii	ng:		
Addition:	KILL DEVIL HI	LLS REALTY CO	ORP	Block	k: 2	Lot(s):	4,6,7
Legal Des	cription:						
EES:		Paid	Due				
Mechanical Per	rmit Fee	\$150.00	\$0.00				
	Totals :	\$150.00	\$0.00				

PROJECT DESCRIPTION: HVAC replacement



EXPIRES: 05/15/2021

		DETAILS	
Permit			
Name	Value		
PURPOSE	Commercial Repair/Remodel		
CONSTRUCTION COST	7250.00		
CONSTRUCTION TYPE	V		
FLOOD ZONE	X		
NATURAL GAS SIGNOFF	N		
OCCUPANCY TYPE	Business		

REQUIRED INSPECTIONS

Final

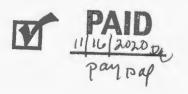
CONDITIONS

* 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.

All provisions of Laws and Ordinances governing	application and know the same to be true and correct. this type of work will be complied with whether bes not presume to give authority to violate or cancel
the provisions of any other state/local law regulati	ng construction or the performance of construction.
Issued By: Marity Shaw	
Contractor or Authorized Agent:	Date: 11 / 16 / 2020

ZORTH CR		Ki Phone: 25/	PO BOX 1 II Devil Hills, N 2-449-5318		1102	د ۱۰۰۰ NOV 1	
MC2020-3 PROJECT NAM SITE ADDRES		RLN KILL DEV	/IL HILLS			ISSUE	CHANICAL D: 11/16/2020 RES: 05/15/2021
APPLICANT:	Willard Moody 4201 Manchester Road PORTSMOUTH, VA 23		0	WNER:	Willard Moo 4201 Manch PORTSMO		
MECHANICAL,	H-2, H-3:	P.O. Box 1:	HEATING AND 32 IIs, NC 27948	COOLING		License: 3434 Expires: 12/3	
PARCEL:							
PIN:	988518208884			Parcel Number:	00231	8000	
Address:	2052 VA DARE	TRL N KILL D	EVIL HILLS				
				Zonin	ig:		
Addition:	MILES CLARK			Block	.: 0	Lot(s):	6
Legal Desc	cription:						
FEES:		Paid	Due				
	and Frank	\$150.00	\$0.00				
Mechanical Per	mit ree	<i><i>ϕ</i></i>					

PROJECT DESCRIPTION: HVAC replacement



MC2020-314 **PROJECT NAME:** SITE ADDRESS: 2052 VA DARE TRL N KILL DEVIL HILLS

MECHANICAI ISSUED: 11/16/2020

EXPIRES: 05/15/2021

		DETAILS	
Permit			
Name	Value		
PURPOSE	Residential Repair/Remodel		
CONSTRUCTION COST	6250.00		
CONSTRUCTION TYPE	V		
FLOOD ZONE	AO		
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.

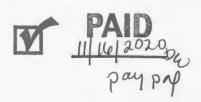
I hereby certify that I have read and examined this application and know the same to be true and correct. All provisions of Laws and Ordinances governing this type of work will be complied with whether specified herein or not. The granting of a permit does not presume to give authority to violate or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

Marty Shaw Issued By:

Contractor or Authorized Agent:

Date: 11 / 16 / 2020

TO Birthplace Aviation	of the state	Ki Phone: 252	PO BOX II Devil Hills, I 2-449-5318		102	NOV 1	7 2020
MC2020-31 PROJECT NAM SITE ADDRESS		ILL DEVIL HILLS	5			ISSUE	CHANICAL ED: 11/16/2020 RES: 05/15/2021
	JOHNSON, SUSAN 10615 GOLDENEYE FAIRFAX, VA 22032		c		JOHNSON, 10615 GOLI FAIRFAX, V	DENEYE LN	
MECHANICAL, H	I-2, H-3:	P.O. Box 13	HEATING ANE 32 IIs, NC 27948	COOLING		License: 3434 Expires: 12/3	
PARCEL:							
PIN:	987408988273	3		Parcel Number:	00200	5000	
Address:	2021 BAY DR	KILL DEVIL HIL	LS				
				Zoning			
Addition:		CH ANNEX 2 & 3	6	Block:	0	Lot(s):	1035
Legal Descri	ption:						
FEES:		Paid	Due				
Mechanical Perm	It Fee	\$150.00 \$150.00	\$0.00				
	Totals :						



MC2020-313 PROJECT NAME: SITE ADDRESS: 2021 BAY DR KILL DEVIL HILLS

EXPIRES: 05/15/2021

	1	DETAILS		
Permit		_		
Name	Value			
PURPOSE	Residential Repair/Remodel			
CONSTRUCTION COST	5950.00			
CONSTRUCTION TYPE	V			
FLOOD ZONE	Х			
NATURAL GAS SIGNOFF	N			
OCCUPANCY TYPE	One & Two Family Dwelling			

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:

Date: 11 / 16 / 2020

	nue ommercial			120	PAID.
		DETAILS	5		
C/O HV	AC System				
tals :	\$150.00	\$0.00			
	\$150.00	\$0.00			
			90 100		
Init G La	ke Drive Industria	I Park Building		lock:	Lot(s):
				-	
Lake D	orive Kill Devil Hil	s			
693641	716		Parcel Number	:	
	57190 Than Hatteras, N	nes Dr C 27943			License: 17825 Expires: 12/31/2021
e Dr Unit	1	0	WNER:	306 W L	Y STOKES LLC ake Dr Unit 1 I Hills, NC 27948
ake Driv	ve Kill Devil Hills				EXPIRES: 05/22/2021
Stokes H	HVAC				MECHANICAL ISSUED: 11/23/2020
	Planning	and Inspec	tion Dep	artment	10000000 KUL 22 A.15-19
				41-4102	NOV 2 5 2020
	10111			inis	
	Ake Driv STOKES e Dr Unit ills, NC 2 1693641 V Lake D Jnit G La otals : C/O HV	Ki Phone: 252 Planning a Stokes HVAC Lake Drive Kill Devil Hills STOKES LLC e Dr Unit 1 ills, NC 27948 Callahan, D 57190 Thar Hatteras, Nr 252-986-27 Callahan, D 57190 Thar Hatteras, Nr 252-986-27 Callahan, D 57190 Thar Hatteras, Nr 252-986-27 Collabar Value	PO BOX 1 Kill Devil Hills, M Phone: 252-449-5318 Planning and Inspect Stokes HVAC .ake Drive Kill Devil Hills STOKES LLC e Dr Unit 1 ills, NC 27948 Callahan, Darrin 57190 Thames Dr Hatteras, NC 27943 252-986-2783 Callahan, Darrin 57190 Thames Dr Hatteras, NC 27943 252-986-2783 Colored Colored Color	PO BOX 1719 Kill Devil Hills, NC 27948 Phone: 252-449-5318 Fax: 252-44 Planning and Inspection Dep Stokes HVAC .ake Drive Kill Devil Hills STOKES LLC e Dr Unit 1 ills, NC 27948 Callahan, Darrin 57190 Thames Dr Hatteras, NC 27943 252-986-2783 IG93641716 V Lake Drive Kill Devil Hills V Lake Drive Kill Devil Hills V Lake Drive Kill Devil Hills Z Init G Lake Drive Industrial Park Buildings 1&3 Paid Due \$150.00 \$0.00 totals : \$150.00 \$0.00 C/O HVAC System Value	Kill Devil Hills, NC 27948 Phone: 252-449-5318 Fax: 252-441-4102 Planning and Inspection Department Stokes HVAC

NATURAL GAS SIGNOFF

Ν

MC2020-319 PROJECT NAME: Totally Stokes HVAC SITE ADDRESS: 306 W Lake Drive Kill Devil Hills MECHANICAL ISSUED: 11/23/2020

EXPIRES: 05/22/2021

REQUIRED INSPECTIONS

Final

-

CONDITIONS

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Issued By: Charles Thuman

Contractor or Authorized Agent:

ment

Date: 11 / 23 / 2020

Port H CA	ROLINA	Ki Phone: 25	PO BO III Devil Hills 2-449-5318	I Devil Hil X 1719 5, NC 27948 Fax: 252-441- ection Depar	[}] 4102	PAID NOV 23 2020 TOWN OF KELL DEVIL HILLS	\$ -5
MC2020-31 PROJECT NAM SITE ADDRESS	7 IE: Owsley HVAC 5: 339 AYCOCK ST	r w kill devil	. HILLS			MECHANIC ISSUED: 11/20/2 EXPIRES: 05/19/2	2020
APPLICANT:	OWSLEY, CHARLES 213 Graham Dr Newport News, VA 2			OWNER:	OWSLEY, Cl 213 Graham Newport New	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			License: 13056 Expires: 12/31/2020	bathminnen-ingener
PARCEL:							
PIN:	988517003955	5		Parcel Number:	000598	000	
Address:	339 AYCOCK	ST W KILL DEV	/IL HILLS				
				Zoni	ng:		
Addition:	VIRGINIA DAR	RE SHORES		Bloc	k: 47	Lot(s): 1-2	
Legal Descr	ription:						
FEES:		Paid	Due				
	nit Fee	\$150.00	\$0.00				
Mechanical Pern							

PROJECT DESCRIPTION: 2.5 ton hvac changeout



MC2020-317 PROJECT NAME: Owsley HVAC SITE ADDRESS: 339 AYCOCK ST W KILL DEVIL HILLS

MECHANICAL

ISSUED: 11/20/2020

EXPIRES: 05/19/2021

		DETAILS
Permit		
Name	Value	
PURPOSE	Residential Repair/Remodel	
CONSTRUCTION COST	7111.00	
FLOOD ZONE	Х	
NATURAL GAS SIGNOFF	N	
OCCUPANCY TYPE	One & Two Family Dwelling	

REQUIRED INSPECTIONS

Final

CONDITIONS

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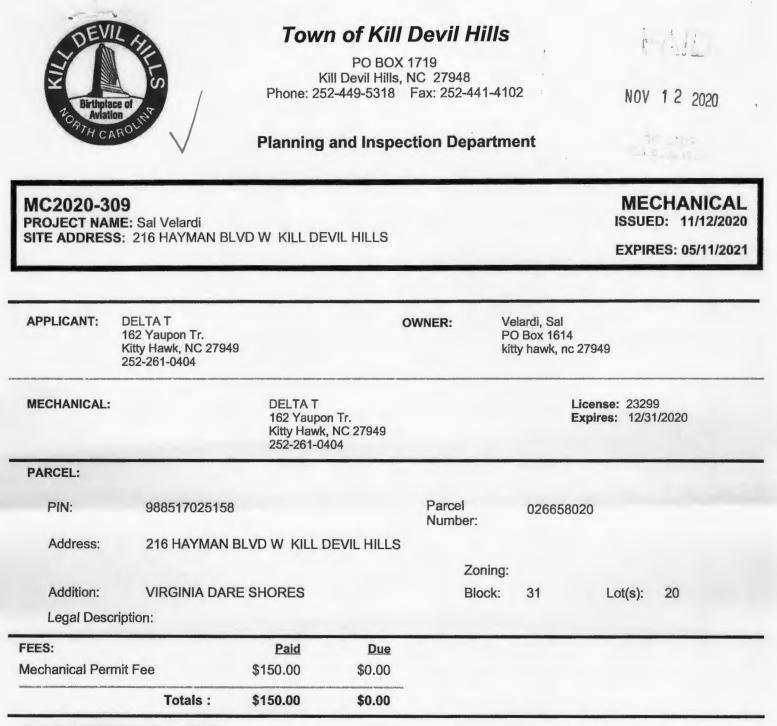
I hereby certify that I have read and examined this application and know the same to be true and correct. All provisions of Laws and Ordinances governing this type of work will be complied with whether specified herein or not. The granting of a permit does not presume to give authority to violate or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

Marty Shaw Issued By: _

Contractor or Authorized Agent:

Jackyn Slater

Date: 11 / 20 / 2020



PROJECT DESCRIPTION: HVAC



MC2020-309 PROJECT NAME: Sal Velardi SITE ADDRESS: 216 HAYMAN BLVD W KILL DEVIL HILLS

1 105 h

MECHANICAL ISSUED: 11/12/2020

EXPIRES: 05/11/2021

DETAILS

Permit	
Name	Value
PURPOSE	Residential Repair/Remodel
CONSTRUCTION COST	5500.00
FLOOD ZONE	Х
NATURAL GAS SIGNOFF	N
OCCUPANCY TYPE	One & Two Family Dwelling

REQUIRED INSPECTIONS

Final

Diamon 14

CONDITIONS

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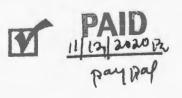
Issued By: Date: 11/12/20 Contractor or Authorized Agent:

Birthplace of Aviation Aviatio Aviation Aviation Aviation Aviation Aviation Aviation	Ki Phone: 252	PO BOX 1 PO BOX 1 II Devil Hills, N 2-449-5318 and Inspec	1719 NC 27948 Fax: 252-441	-4102	NOV 1 2 2020 MECH/ ISSUED:	ANICAL
PROJECT NAME: SITE ADDRESS: 700 H3 FIR	ST ST W KILL DEVIL	. HILLS			EXPIRES:	
APPLICANT: OSMON, CARI 700 WEST FIR Kill Devil Hillsl, 252-305-0460	IST ST H-3	o	WNER:	OSMON, CAF 700 WEST FI Kill Devil Hills 252-305-0460	RST ST H-3 I, NC 27948	
PARCEL:						
PIN: 98841314	40426AV		Parcel Number:	008075	087	
Address: 700 H3 F	IRST ST W KILL DE	/IL HILLS				
Addition:			Zoni Bloc	-	Lot(s): UT H	3 BLDG
Legal Description:						
FEES: Mechanical Permit Fee Totals	Paid \$150.00 s : \$150.00	<u>Due</u> \$0.00 \$0.00				
	AC replacement					
- <u></u>		DETAILS	5			
Permit						
Name	Value					
PURPOSE	Residential Repair/Remodel					
CONSTRUCTION COST	5205.00				DAID	
CONSTRUCTION TYPE	V			N	CK FLP2Y	Da
FLOOD ZONE	AE			المسالسة	an those	
BASE FLOOD ELEVATION	4				Opmany	
NATURAL GAS SIGNOFF	N					

OCCUPANCY TYPE

Residential

EY DEVI	FILL		PO BO	I Devil Hi x 1719 s, NC 27948	lls	i		
Birthplac Zo. Aviatio	te of R	Phone: 25	2-449-5318	Fax: 252-441	-4102	NO	V 1 2 2020	
TORTH CA	ROLL	Planning	and Insp	ection Depar	rtment		76 J. 162 1 42/14/507	**
MC2020-30 PROJECT NAM SITE ADDRESS		E KILL DEVIL H	ILLS				MECHAN SSUED: 11/0 EXPIRES: 05/0	9/2020
APPLICANT:	R A Hoy Heating & A PO Box 235 kitty hawk, nc 27949 252-261-2008	ir		OWNER:	Madej, Jos 2415 Mila Heathsville	eph Rd. e, Va 22473		
MECHANICAL:		R A HOY PO Box 26 Kitty Hawk 252-261-20	NC 27949			License: Expires:	13056 12/31/2020	
PARCEL:	1 m 1 m							_
PIN:	988513043390)		Parcel Number:	0000	20000		
Address:	202 HELGA S	TE KILL DEVIL	HILLS					
				Zoni	ng:			
Addition:		CH AMENDED	BLK 4	Bloc	k: 4	Lo	ot(s): 6	
Legal Desc	ription:							
FEES:		Paid	Due					
Mechanical Perr	nit Fee	\$150.00	\$0.00					



MC2020-305 PROJECT NAME: Ilva Madej SITE ADDRESS: 202 HELGA ST E KILL DEVIL HILLS

MECHANICAL ISSUED: 11/09/2020

EXPIRES: 05/08/2021

DETAILS

Permit	
Name	Value
PURPOSE	Residential Repair/Remodel
CONSTRUCTION COST	10834.00
FLOOD ZONE	х
NATURAL GAS SIGNOFF	N
OCCUPANCY TYPE	One & Two Family Dwelling

REQUIRED INSPECTIONS

Final

CONDITIONS

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Issued By:

Contractor or Authorized Agent:

MARCEY BAUM

Date: 11 / 09 / 2020

Birthplace Aviation	S OLIMP	K Phone: 25	PO BOX ill Devil Hills, 2-449-5318		102		NOV 12 2020	•
MC2020-307 PROJECT NAME SITE ADDRESS:		RE KILL DEVIL	- HILLS				MECHANI ISSUED: 11/1 EXPIRES: 05/1	2/2020
F	FURNER, BILL PO BOX 132 SEABOARD, NC 278	76			TURNER, I PO BOX 13 SEABOAR	32	7876	
MECHANICAL:		R A HOY PO Box 26 Kitty Hawk 252-261-20	NC 27949				se: 13056 es: 12/31/2020	
PARCEL:								
PIN:	988415541907			Parcel Number:	00345	58000		
Address:	100 LANDING	DR E KILL DE	/IL HILLS					
				Zoning				
Addition:				Block:	0		Lot(s): 1	
Legal Descrip	otion:							_
F EES: Mechanical Permi	-	Paid	Due					
Machanical Parmi	t Fee	\$150.00	\$0.00					
Mechanical Fermi	Totals :		\$0.00					

PAID HI 12/2020 PM pay par MC2020-307 PROJECT NAME: SITE ADDRESS: 100 LANDING DR E KILL DEVIL HILLS MECHANICAL ISSUED: 11/12/2020

EXPIRES: 05/11/2021

DETAILS

Permit	
Name	Value
PURPOSE	Residential Repair/Remodel
CONSTRUCTION COST	6706.00
CONSTRUCTION TYPE	V
FLOOD ZONE	Х
NATURAL GAS SIGNOFF	Ν
OCCUPANCY TYPE	One & Two Family Dwelling

REQUIRED INSPECTIONS

Final

CONDITIONS

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Issued By:

Contractor or Authorized Agent:

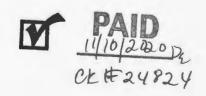
Marty Shaw

MARCEY BAUM

11 / 12 / 2020 Date:

Y DEV	HIL		PO BOX 1		5	P	ND		
Birthpla 20. Aviat			Kill Devil Hills, NC 27948 Phone: 252-449-5318 Fax: 252-441-4102				NOV 1 0 2020		
PORTH C	AROLI	Planning	and Inspec	tion Departr	nent	TC KLL	h of R. Hills		
	06 ME: Tire Choice SS: 3114 CROATAN	I HWY N KILL DI	EVIL HILLS			ISSUE	CHANICAL D: 11/10/2020 ES: 05/09/2021		
APPLICANT:	MASTER HEATING P.O. Box 707 Kitty Hawk, NC 279 255-0095		0		Krahenbill As 133 Nixon Be Edenton, NC 252-220-437	ach Road 27932			
MECHANICAL,	, H-3, I:	MASTER H P.O. Box 70 Kitty Hawk, 255-0095		COOLING		License: 1806 Expires: 12/3			
PARCEL:									
PIN:	98851303143	9		Parcel Number:	028719	000			
Address:	3114 CROAT	AN HWY N KILL	DEVIL HILLS						
Addition:	MOOR SHOR	ES TWO		Zoning Block:	j: 0	lot(s):	175,176,177		
Legal Dese				DIOCK.	U	20((3).	110,110,111		
FEES:		Paid	Due						
Mechanical Per	mit Fee	\$150.00	\$0.00						
Woonanioarr of	Totals :	\$150.00	\$0.00						
PROJECT DES	CRIPTION: HVAC								

Permit	
Name	Value
PURPOSE	Commercial Repair/Remodel
CONSTRUCTION COST	7500.00
FLOOD ZONE	Х
NATURAL GAS SIGNOFF	N
OCCUPANCY TYPE	Business



MC2020-306 **PROJECT NAME:** Tire Choice SITE ADDRESS: 3114 CROATAN HWY N KILL DEVIL HILLS

MECHANICA ISSUED: 11/10/2020

EXPIRES: 05/09/2021

Date:

REQUIRED INSPECTIONS

Final

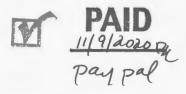
CONDITIONS

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Port H CP	CEE OF INP	K Phone: 25	PO BOX ill Devil Hills, I 2-449-5318		102	NOV -	9 2020
	04 ME: Harold Chrisma S: 3308 VA DARE		VIL HILLS			ISSUE	CHANICAL ED: 11/06/2020 RES: 05/05/2021
APPLICANT:	AIR-O-SMITH 330 North Dogwood Southern Shores, NG 252-261-5238	Trail C 27949	c	OWNER:	Chrisman, H 318 Oak Rur kitty hawk, n	n	
H-3, CLASS I:		AIR-O-SMI 330 North Southern S 252-261-52	Dogwood Trail hores, NC 279	49		License: 3007 Expires: 12/3	-
PARCEL:							
PIN:	988509054086	5		Parcel Number:	000064	4000	
Address:	3308 VA DAR	ETRLN KILLD	EVIL HILLS				
				Zonin	g:		
Addition:	ORVILLE BEA	CH BLK 2		Block	: 2	Lot(s):	7
Legal Desc	ription:						
		Paid	Due				
FEES:	mit Eeo	\$150.00	\$0.00				
FEES: Mechanical Per							

PROJECT DESCRIPTION: HVAC



MC2020-304 **PROJECT NAME:** Harold Chrisman SITE ADDRESS: 3308 VA DARE TRL N KILL DEVIL HILLS

. 3

MECHANICAI ISSUED: 11/06/2020

EXPIRES: 05/05/2021

DETAILS

Permit	
Name	Value
PURPOSE	Residential Repair/Remodel
CONSTRUCTION COST	8000.00
FLOOD ZONE	Х
NATURAL GAS SIGNOFF	Ν
OCCUPANCY TYPE	One & Two Family Dwelling

REQUIRED INSPECTIONS

Final

CONDITIONS

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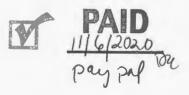
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Issued By: Charles Thuman

Contractor or Authorized Agent: Steve Smith

Date: 11 / 06 / 2020

Birthplac TO AVIATIO	STITLES	Ki Phone: 25	PO BOX II Devil Hills, 2-449-5318		4102		NOV - 6 2020	3
MC2020-27 PROJECT NAM SITE ADDRESS	8 IE: Christopher Lam S: 2907 VA DARE 1	npman FRLN KILL DEN	/IL HILLS				MECHANIC ISSUED: 09/29/ EXPIRES: 03/28/	2020
APPLICANT:	AIR HANDLERS OB 8788 Caratoke Hwy Harbinger, NC 27941 252-216-8945			OWNER:	Christophe 7110 Bull Prince Gee	Hill Rd		
MECHANICAL, H	1-3, I:	AIR HANDI 8788 Carat Harbinger, 252-216-89	oke Hwy NC 27941				se: 23577 es: 12/31/2020	
PARCEL:								
PIN:	988513137393	3		Parcel Number:	0008	22000		
Address:	2907 VA DAR	ETRL N KILL D	EVIL HILLS					
				Zonir	ng:			
Addition:	VIRGINIA DAF	RE SHORES PL/	AT B	Block	k: 0		Lot(s): 16	
Legal Descr	iption:							
		Paid	Due					
FEES:	1	\$150.00	\$0.00					
FEES: Mechanical Pern	nit Fee							



MC2020-278

PROJECT NAME: Christopher Lampman SITE ADDRESS: 2907 VA DARE TRL N KILL DEVIL HILLS

MECHANICA ISSUED: 09/29/2020

EXPIRES: 03/28/2021

DETAILS

Permit	
Name	Value
PURPOSE	Residential Repair/Remodel
CONSTRUCTION COST	5916.00
FLOOD ZONE	VE
BASE FLOOD ELEVATION	12
NATURAL GAS SIGNOFF	N
OCCUPANCY TYPE	One & Two Family Dwelling

REQUIRED INSPECTIONS

Final

CONDITIONS

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Marty Shaw **Issued By:**

Contractor or Authorized Agent:

Date: 09 / 29 / 2020

Addition: Legal Desc		Paid \$150.00 \$150.00	Due \$0.00 \$0.00	_				
Addition: Legal Desc FEES:								
Addition:	cription:							
Addition:								
	KITTY HAWK	SHORES - REV	ISED	Bloc	k: 49	Lot(s):	9 & PT 10	
Aug. 655.				Zoni	-			
Address:	104 LOWELL	AVE KILL DEVI	L HILLS					
PIN:	988415631315	5		Parcel Number:	0040140	00		
PARCEL:								
ELECTRICAL:		100 S Dog	hores, nc 279			icense: L-202 xpires:	220	
CONTRACTOR	BREDELL ELECTRI 100 S Dogwood Trai Southern Shores, nc 313-938-6585							
APPLICANT:	WALTHALL, EDWAF 5604 Granby St NORFOLK, VA 2350			OWNER:	WALTHALL, E 5604 Granby S NORFOLK, V/	St		
	31 ME: Walthall Sub Pa SS: 104 LOWELL AV		HILLS			ISSUE	ECTRICA D: 11/03/20 ES: 05/02/20)20
PORTH C	AROLIN	Planning	and Inspe	ection Depar	tment		TAL HALLS	
Z Birthpla		K Phone: 25	PO BOX ill Devil Hills, 2-449-5318		-4102	NOV 2	2 5 2020	
Ĕ,	DEVIL		n of Kill	Devil Hil	ls	La B		

PROJECT DESCRIPTION: adding sub panel off main panel, moving circuits to sub panel

The "ful zaro pay Pel

EL2020-081 **PROJECT NAME:** Walthall Sub Panel SITE ADDRESS: 104 LOWELL AVE KILL DEVIL HILLS

EXPIRES: 05/02/2021

DETAILS

Permit		
Name	Value	
ZONING DISTRICT	RL	
PURPOSE	Residential Repair/Remodel	
CONSTRUCTION COST	450.00	
FLOOD ZONE	х	
OCCUPANCY TYPE	One & Two Family Dwelling	

REQUIRED INSPECTIONS

Final

CONDITIONS

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Issued By:

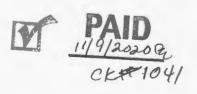
Contractor or Authorized Agent:

fart Pal

Date: 11 / 23 / 2020

Y DEV	HIL		PO BOX		S		AID
Republic Aviat	ace of the		Phone: 252-449-5318 Fax: 252-441-4102				- 9 2020
THC	AROL	Planning	and Inspec	ction Depart	ment		nako# Evolution
	33 ME: 101112, LLC SS: 302 LIVE OAK (CT KILL DEVIL F	IILLS			ISSUE	ECTRICAL D: 11/09/2020 ES: 05/08/2021
APPLICANT:	Schick Corp. 936 Corporate LN CHESAPEAKE, VA 757-548-1940	23320	c		101112, LLC 3122 Bay Dr Kill Devil Hills	, NC 27948	
ELECTRICAL -	UNLIMITED:	Schick Cor 936 Corpor CHESAPE 757-548-19	ate LN AKE, VA 23320			License: 2180 Expires:	4-U
PARCEL:							
PIN:	98841035242	2		Parcel Number:	003211	000	
Address:	302 LIVE OA	K CT KILL DEVIL	HILLS				
				Zoning	g:		
Addition:	FIRST FLIGH	T VILLAGE SEC	2	Block	0	Lot(s):	214
Legal Dese	cription:						
FEES:		Paid	Due				
Electrical Perm	it Fee	\$150.00	\$0.00				
	Totals :	\$150.00	\$0.00				

PROJECT DESCRIPTION: Install sub-panel for irrigation pump



EL2020-083 PROJECT NAME: 101112, LLC SITE ADDRESS: 302 LIVE OAK CT KILL DEVIL HILLS

ELECTRICAL ISSUED: 11/09/2020

EXPIRES: 05/08/2021

DETAILS

Permit	
Name	Value
ZONING DISTRICT	RL
PURPOSE	Residential Repair/Remodel
CONSTRUCTION COST	2404.15
FLOOD ZONE	Х
OCCUPANCY TYPE	One & Two Family Dwelling

REQUIRED INSPECTIONS

Final

CONDITIONS

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Issued By: Charles Thuman

Contractor or Authorized Agent: _ Robert Schick

_ Date: 11 / 09 / 2020

SY DEVIL	ALL O	k	PO BOX (ill Devil Hills,	NC 27948		1	and there
Birthplace of Aviation	That V	Phone: 25	2-449-5318	Fax: 252-441-4	102	NOV 1	6 2020 ,
TH CAR		Planning	and Inspec	ction Depart	ment		
EL2020-084 PROJECT NAME SITE ADDRESS:	:	R W KILL DEVIL	HILLS			ISSUE	ECTRICAL D: 11/16/2020 ES: 05/15/2021
1. V	VARD, JACK 221 ARTHUR COF VILLIAMSTON, NC 52-792-0658		C	OWNER:	WARD, JACK 1221 ARTHL WILLIAMSTC 252-792-0658	IR COREY RD N, NC 27892	
ELECTRICAL, LIM	ITED:	127 Broad	MICHAEL PER bay Dr ills, NC 27948	RLOT		License: 2133 Expires: 09/01	
PARCEL:							
PIN:	988405099965	5		Parcel Number:	0015250	000	
Address:	505 AVALON	DR W KILL DE	/IL HILLS				
				Zonin	g:		
Addition:	AVALON BEA	СН		Block	0	Lot(s):	157
Legal Descrip	tion:						
FEES:		Paid	Due				
Electrical Permit Fe	90	\$150.00	\$0.00				
	Totals :	\$150.00	\$0.00				

PROJECT DESCRIPTION: Temporary power pole

EL2020-084 PROJECT NAME:

SITE ADDRESS: 505 AVALON DR W KILL DEVIL HILLS

ELECTRICAL ISSUED: 11/16/2020

EXPIRES: 05/15/2021

DETAILS

Value
1
10416167
RL
Residential New
350.00
V
Х
One & Two Family Dwelling

REQUIRED INSPECTIONS

Final

CONDITIONS

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

Issued By:			
	Din	11	
Contractor or Authorized Agent:	Elm At	10	Date: 11-16-20

CONTRACTOR DATABASED IN CONTRACTOR DATABASED							
Fee	\$150.00	\$0.00					
	Paid	Due					
ription:	_						
	ORES INC SEC	1	Block	k: 19	Lot(s):	13	
			Zonii	ng:			
1812 SUNSET	AVE KILL DEV	IL HILLS					
98840906345	9		Parcel Number:	002525	5013		
IMITED:	Kill Devil H	ills, NC 27948					
Brown, Cindy 1812 Sunset Ave Kill Devil Hills, NC 2	7948		OWNER:	1812 Sunset	Ave		
E: Brown transfer		HILLS			ISSUE	D: 11/0	2/2020
ROLL	Planning	and Inspe	tment	70-504 (JF \$100-10-10-10-10-10-10-10-10-10-10-10-10-			
Birthplace of Aviation		Kill Devil Hills, NC 27948 Phone: 252-449-5318 Fax: 252-441-4102			NOV - 3	2020	- h
ALL	PO BOX 1719			ls	and the second s		
	9 IE: Brown transfer S: 1812 SUNSET A Brown, Cindy 1812 Sunset Ave Kill Devil Hills, NC 2 IMITED: 988409063455 1812 SUNSET	Phone: 25 Phone: 25 Phone: 25 Planning P E: Brown transfer switch S: 1812 SUNSET AVE KILL DEVIL Brown, Cindy 1812 SUNSET AVE KILL DEVIL MITED: LOWIRE PO Box 27 Kill Devil Hills, NC 27948 1812 SUNSET AVE KILL DEVI 988409063459 1812 SUNSET AVE KILL DEVI CROATAN SHORES INC SEC iption: Paid	PO BOX Kill Devil Hills, Phone: 252-449-5318 Planning and Inspe 9 E: Brown transfer switch S: 1812 SUNSET AVE KILL DEVIL HILLS Brown, Cindy 1812 Sunset Ave Kill Devil Hills, NC 27948 IMITED: LOWIRE PO Box 2751 Kill Devil Hills, NC 27948 988409063459 1812 SUNSET AVE KILL DEVIL HILLS OROATAN SHORES INC SEC 1 tiption: Paid Due	PO BOX 1719 Kill Devil Hills, NC 27948 Phone: 252-449-5318 Fax: 252-441- Planning and Inspection Depar Parcel NUTED: 988409063459 988409063459 988409063459 988409063459 Parcel Number: 1812 SUNSET AVE KILL DEVIL HILLS Parcel Number: 1812 SUNSET AVE KILL DEVIL HILLS	PO BOX 1719 Kill Devil Hills, NC 27948 Phone: 252-449-5318 Fax: 252-441-4102 Planning and Inspection Department Planning and Inspectio	PO BOX 1719 Kill Devil Hills, NC 27948 Phone: 252-449-5318 Fax: 252-441-4102 NOV - 3 Planning and Inspection Department Planning and Inspection Department ELC ISSUE EXPIRI Brown, Cindy 1812 SUNSET AVE KILL DEVIL HILLS Pown, Cindy 1812 Sunset Ave Kill Devil Hills, NC 27948 IMITED: LOWIRE PO BOX 2751 Kill Devil Hills, NC 27948 Parcel Number: 1812 SUNSET AVE KILL DEVIL HILLS Parcel Number: 1812 SUNSET AVE KILL DEVIL HILLS CROATAN SHORES INC SEC 1 Paid Due	PO BOX 1719 Kill Devil Hills, NC 27948 Phone: 252-449-5318 Fax: 252-441-4102 NOV - 3 2020 Planning and Inspection Department The second se

PROJECT DESCRIPTION: Remove damaged transfer switch

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EL2020-079

PROJECT NAME: Brown transfer switch SITE ADDRESS: 1812 SUNSET AVE KILL DEVIL HILLS ELECTRICAL ISSUED: 11/02/2020

EXPIRES: 05/01/2021

Permit	
Name	Value
ZONING DISTRICT	RL
PURPOSE	Residential Repair/Remodel
CONSTRUCTION COST	900.00
CONSTRUCTION TYPE	V
FLOOD ZONE	х
OCCUPANCY TYPE	One & Two Family Dwelling

REQUIRED INSPECTIONS

Final

CONDITIONS

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Charles Thuman Issued By:

Contractor or Authorized Agent: Edie Parsons

Date: 11 / 02 / 2020

Town of Kill Devil PO BOX 1719 Kill Devil Hills, NC 2794 Phone: 252-449-5318 Fax: 252- Planning and Inspection Devil			719 C 27948 ax: 252-441-4	4102	NOV -		
		Flamming	and inspect	ion Depart	ment	, 1: <u>-</u> , ,	4.7
EL2020-08 PROJECT NA SITE ADDRES		UTH ST KILL D	EVIL HILLS			ISSUE	ECTRICAL D: 11/04/2020 ES: 05/03/2021
APPLICANT:	Self, Robert 2018 Portsmouth St. Kill Devil Hillsl, NC 27 757-613-3066	948	ov	VNER:	Self, Robert 2018 Portsmo Kill Devil Hills 757-613-3066	I, NC 27948	
ELECTRICAL -	LIMITED:	Power Hom 919 N. Main MOORESV 704-582-32	n St. ILLE, NC 28115			License: 60946 Expires:	6
PARCEL:							
PIN:	988405081449			Parcel Number:	001086	000	
Address:	2018 PORTSM	OUTH ST KILL	DEVIL HILLS				
				Zonir	-		
Addition: Legal Desc	AVALON BEAC	CH ANNEX 2 & 3	3	Block	K: 0	Lot(s):	867
FEES:		Paid	Due				
Electrical Perm	it Fee	\$150.00	\$0.00				
	Totals :	\$150.00	\$0.00				
		to be seen of	por docian drav	winge			
PROJECT DES	CRIPTION: Add sola	r panels to roof	per design drav	wings.			

Permit	
Name	Value
ZONING DISTRICT	RL
CONSTRUCTION COST	44704.80
CONSTRUCTION TYPE	V
FLOOD ZONE	Х
OCCUPANCY TYPE	One & Two Family Dwelling



EL2020-082 PROJECT NAME: SITE ADDRESS: 2018 PORTSMOUTH ST KILL DEVIL HILLS ELECTRICAL ISSUED: 11/04/2020

EXPIRES: 05/03/2021

REQUIRED INSPECTIONS

Final

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CONDITIONS

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Marty Shaw Issued By:

Contractor or Authorized Agent:

Bryon D Sour

Date: _____11 / 04 / 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

DM2020-006 PROJECT NAME: Jack Ward SITE ADDRESS: 505 AVALON DR W KILL DEVIL HILLS DEMOLITION ISSUED: 11/17/2020

1330ED. 11/1//2020

EXPIRES: 05/16/2021

APPLICANT:	3923 SMI	SMITH ST nawk, nc 27949		OV	VNER:	WARD, JACK 1221 ARTHUR COREY RD WILLIAMSTON, NC 27892 252-792-0658		
GENERAL BUI	LDING-LIMI	TED:	3923 SMI	, nc 27949			License: 76610 Expires: 12/31	
PARCEL:								
PIN:	9884	05099965			Parcel Number:	00152	25000	
Address:	505	AVALON D	R W KILL DE	VIL HILLS				
					Zonin	g:		
Addition:	AVA	LON BEAC	н		Block	: 0	Lot(s):	157
Legal Desc	cription:							
FEES:			Paid	Due				
Demolition			\$100.00	\$0.00				
ner, felenderspelanen, schrieten felendersteren ginde spenne	T	otals :	\$100.00	\$0.00				
PROJECT DESC	CRIPTION:	Demo ho	use and drive	vay			s	
				DETAILS	1			÷
Permit					¢			: .
Name		Valu	ie			1	NOV 1 7 2020	1 1
ZONING DIST	RICT	RL						th.
FLOOD ZONE		Х					TO MICE	
CONSTRUCT	ON COST	700	0.00					

DM2020-006 PROJECT NAME: Jack Ward SITE ADDRESS: 505 AVALON DR W KILL DEVIL HILLS

DEMOLITION ISSUED: 11/17/2020

EXPIRES: 05/16/2021

REQUIRED INSPECTIONS

Final

CONDITIONS

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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

	4 IE: Dare Center 5: 1700 CROATAN H	IWY N KILL D	EVIL HILLS				SIGN ED: 11/12/2020 RES: 05/11/2021
APPLICANT:	ADLIGHT SIGNS 600 West Boundry Str Kill Devil Hills, NC 279 252-449-2800		01	WNER:	POBOX	WALTON	48
CONTRACTOR:		ADLIGHT 5 600 West E Kill Devil H 252-449-28	oundry Street Ils, NC 27948			License: LEG Expires: 12/3	ACY UNKNOWN 1/2030
PARCEL:							
PIN:	988410374122			Parcel Number:	0027	39000	
Address:	1700 CROATAN	HWYN KILL	DEVIL HILLS				
				Zoni	ng:		
Addition:	HEDRICKS ADD	DITION - CROA	TAN SH	Bloc	k: 0	Lot(s):	0
Legal Descr	ription:						
FEES:		Paid	Due				
Sign Permit Fee		\$100.00	\$0.00				
	Totals :	\$100.00	\$0.00				

NOV 1 9 2020

SG2020-034 PROJECT NAME: Dare Center SITE ADDRESS: 1700 CROATAN HWY N KILL DEVIL HILLS

ISSUED: 11/12/2020

EXPIRES: 05/11/2021

DETAILS

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ces

REQUIRED INSPECTIONS

Final

CONDITIONS

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

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

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

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

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

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

HOEVI HOEVI Birthplac Aviatio Aviatio	ROLINIP	Ki Phone: 25	PO BOX 1 II Devil Hills, 1 2-449-5318		4102	NOV -	9 2020 MCF	•
	7 IE: Doug Doughtie S: 1803 CROATAN HV	VY N KILL D	EVIL HILLS			IS	NING PERI SUED: 11/05/2 (PIRES: 05/04/2	2020
APPLICANT:	METRO RENTAL PO Box 77 Kill Devil Hills, NC 27948 252-480-3535	3	o	WNER:	PO BOX 3	ANKS THEAT 57 oro, NC 2785		
CONTRACTOR:		METRO RE PO Box 77 Kill Devil Hi 252-480-35	lls, NC 27948				LEGACY UNKNO 12/31/2020	WN
PARCEL:								
PIN:	988406386196			Parcel Number:	0027	36000		
Address:	1803 CROATAN H	HWY N KILL	DEVIL HILLS	1				
				Zonir	ng:			
Addition:	SUBDIVISION - N	IONE		Block	k: 0	Lot	(s): 0	
Legal Desci	ription:						- Annotation -	
FEES:		Paid	Due					
Tent Permit Fee		\$0.00	\$0.00					
	Totals :	\$0.00	\$0.00					



ZP2020-077 PROJECT NAME: Doug Doughtie SITE ADDRESS: 1803 CROATAN HWY N KILL DEVIL HILLS

ZONING PERMIT ISSUED: 11/05/2020

EXPIRES: 05/04/2021

DETAILS Permit Name Value ZONING DISTRICT C CAMA PERMIT N CAMA EXEMPTION N X FLOOD ZONE PURPOSE **Commercial Accessory** CULVERT N **DRIVEWAY INVERT 2** N

REQUIRED INSPECTIONS

Final

Zoning Final

CONDITIONS

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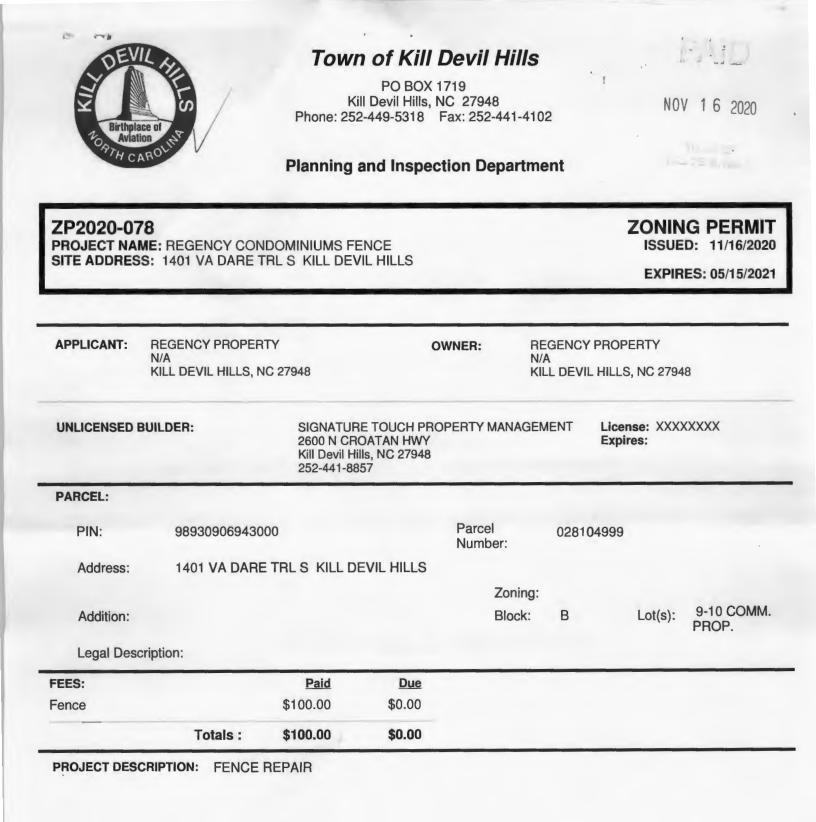
I hereby certify that I have read and examined this application and know the same to be true and correct. All provisions of Laws and Ordinances governing this type of work will be complied with whether specified herein or not. The granting of a permit does not presume to give authority to violate or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

Issued By: Donna Elliot

Contractor or Authorized Agent:

Atthe

Date: 11 / 09 / 2020





0

ZP2020-078 PROJECT NAME: REGENCY CONDOMINIUMS FENCE SITE ADDRESS: 1401 VA DARE TRL S KILL DEVIL HILLS

ZONING PERMIT ISSUED: 11/16/2020

EXPIRES: 05/15/2021

	DETAILS	
Permit		
Name	Value	
ZONING DISTRICT	OIR	
FRONT YARD SETBACK	30	
REAR YARD SETBACK	CAMA	
SIDE YARD SETBACK	12	
CAMA PERMIT	N	
CAMA EXEMPTION	Ν	
FLOOD ZONE	VE	
BASE FLOOD ELEVATION	10.00	
PURPOSE	Residential Accessory	
CONSTRUCTION COST	3500.00	
CULVERT	N	
DRIVEWAY INVERT 2	N	

REQUIRED INSPECTIONS

Final

Stringline

Zoning Final

CONDITIONS

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- * The developer shall be responsible for maintaining erosion and sediment control at the disturbed area.
- * All dune disturbance shall be minimal and kept West of the crest of the primary dune.

* Any disturbed soils shall be sprigged and inspected.