

Manteo: (252) 475-5080 Northern Beach: (252) 475-5871

Frisco: (252) 475-5878

RESIDENTIAL BUILDING PERMIT

BUILDING PERMIT#: R-3302					11/30/2020
Parcel Number:	018915000				
Location:	231 SIR CHANDLER DR – COLINGTON				
Subdivision:	COLINGTON HAR				
Legal Description:	LOT: 116 BLK: SE				
Owner Name:	SOUTHWOOD M				
Owner Mail Address:	5031 PITZER RD	ROANOKE, VA	1 24014		
Owner Phone and email:	540-353-6886				
Contractor Name:	CSZ CONSTRUCT	ION INC			
Contractor Mail Address:	211 SIR CHANDL	ER DR, KILL D	EVILS HILLS, NC 27948		
Contractor Phone:	252-581-0107	Contrac	ctor NC License#: 81403		
BUILDING INFORMATION					
Proposed Construction Use:	SINGLE FAMILY D	WELLING NEV	N		
Proposed Construction Type:	SFD		Cost of Construction:	\$12,5000	
Finished Square Footage:	1305		CAMA Permit#:	NA	
Unfinished Square Footage:	204		Septic Permit#:	30223	
Stories:	0.0		Septic Permit Date:	11/12/2020	
Building Height:	0		Survey/Site Plan:	YES	
Total Rooms:	4		Water Tap#:	NA	
Footing Type:	PILING		Water Type:	Central Water	
Exterior Finish:	VINYL SIDING		Flood Zone:	X	
Proposed Finished Floor	0.0		Base Flood Elevation:	8.0	
Elevation:	9.9		Lot/Ground Elevation:	9.9	
Bedrooms:	3		Baths/half baths:	2.00/1	
Comments: Any deviation from or site plan requires prior appr		PERMIT FEE			\$1,060.35
		FLOOD DEVE	LOPMENT BLDG PERMIT	96	75.00
			ERS RECOVERY FEE	90	10.00
		RESIDENTIAL	LZONING APPROVAL		100.00
		TOTAL FEES:			\$1,245.35
Applicant Signature: NO 5	ignature Re	guilled at	this the csz constructi	ON INC	
	Kevin Clo				
Inspector Signature:	Kevin Ub	UN	AYT		



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RESIDENTIAL BUILDING PERMIT

11/30/2020 **BUILDING PERMIT#: R-3304** Parcel Number: 030735000 Location: 215 WATERSEDGE DR - COLINGTON Subdivision: WATERSEDGE SUB SEC B Legal Description: LOT: 78 BLK: SEC: B Owner Name: DOROTHY T FALZON Owner Mail Address: PO BOX 1322 KILL DEVIL HILLS, NC 27948 Owner Phone and email: Contractor Name: SIMPLESIDE CONSTRUCTION INC Contractor Mail Address: 308 W HELGA ST, KILL DEVIL HILLS, NC 27948 Contractor Phone: 2525648307 Contractor NC License#: 78583 **BUILDING INFORMATION Proposed Construction Use:** SINGLE FAMILY DWELLING NEW **Proposed Construction Type:** Cost of Construction: SFD \$300,000 Finished Square Footage: 2257 CAMA Permit#: NA **Unfinished Square Footage:** 928 Septic Permit#: 29883 8/11/2020 Stories: 0.0 Septic Permit Date: **Building Height:** 0 Survey/Site Plan: YES Total Rooms: Water Tap#: NA Footing Type: PILING Water Type: Central Water **Exterior Finish:** VINYL SIDING Flood Zone: AE Base Flood Elevation: 8.0 Proposed Finished Floor 14 Elevation: Lot/Ground Elevation: 5.3 Bedrooms: 3 Baths/half baths: 2.00/1 Comments: Any deviation from the building plan PERMIT FEE \$2,063.95 or site plan requires prior approval. SINGLE FAMILY NEW CONSTRUCTION FLOOD DEVELOPMENT BLDG PERMIT 75.00 HOME OWNERS RECOVERY FEE 10.00 RESIDENTIAL ZONING APPROVAL 100.00 **TOTAL FEES:** \$2,248.95 Applicant Signature: NO SIGNATURE REQUIRED AT THIS TIME SIMPLESIDE CONSTRUCTION INC

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RESIDENTIAL BUILDING PERMIT

BUILDING PERMIT#: R-3148

11/04/2020

Parcel Number:

019606001

Location:

213 E SIR WALTER RALEIGH DR - COLINGTON

Subdivision:

COLINGTON HARBOR SEC K

Legal Description:

LOT: 138 BLK: SEC: K

Owner Name:

HAROLD GENE HENRY

Owner Mail Address:

5009 YOUNG ST VIRGINIA BEACH, VA 23455

Owner Phone and email:

Contractor Name:

DREAM BUILDERS CONSTRUCTION AND DEVELOPM

Contractor Mail Address:

PO BOX 33, KILL DEVIL HILLS, NC 27948

Contractor Phone:

252-573-8910

Contractor NC License#: 75296

BUILDING INFORMATION

Proposed Construction Use:

SINGLE FAMILY DWELLING NEW

Proposed Construction Type:

SFD

Cost of Construction:

\$315,000

Finished Square Footage:

1816

CAMA Permit#:

2020-36

Unfinished Square Footage:

309

Septic Permit#:

30050

Stories:

0.0

Septic Permit Date:

10/06/2020

Building Height:

0

Survey/Site Plan: Water Tap#:

YES 53081

Total Rooms:

0

Water Type:

Central Water

Footing Type: **Exterior Finish:**

VINYL SIDING

Flood Zone:

AE

Proposed Finished Floor

9.2

Base Flood Elevation: Lot/Ground Elevation: 8.0 3.0

0.00/0

Elevation: **Bedrooms:**

0

Baths/half baths:

Comments: Any deviation from the building plan

or site plan requires prior approval.

PERMIT FEE

\$1,485.60

FLOOD DEVELOPMENT BLDG PERMIT HOME OWNERS RECOVERY FEE

RESIDENTIAL ZONING APPROVAL

75.00 10.00 100.00

TOTAL FEES:

\$1,670.60

Applicant Signature:

DocuSigned by: ali amini 9BD8D4CCD2EF4E1...

DREAM BUILDERS CONSTRUCTION AND

11/4/2020

DEVELOPM

ALD

Inspector Signature:

benin clark 86B049CC4E074D5..

11/4/2020

471



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\$2,066.00

RESIDENTIAL BUILDING PERMIT

11/05/2020 **BUILDING PERMIT#: R-3154** Parcel Number: 018782032 Location: 282 SUNRISE CROSSING DR - COLINGTON Subdivision: SUNRISE CROSSING Legal Description: LOT: 23 BLK: SEC: Owner Name: RICHARD SABOL Owner Mail Address: 110 W GREY EAGLE ST STE 203 NAGS HEAD, NC 27959 Owner Phone and email: Contractor Name: ACS OBX LLC 405 WEST BRIDGE LANE, NAGS HEAD, NC 27959 Contractor Mail Address: Contractor Phone: 252-441-3176 Contractor NC License#: 80229 **BUILDING INFORMATION Proposed Construction Use:** SINGLE FAMILY DWELLING NEW **Cost of Construction:** \$450,000 **Proposed Construction Type:** SFD CAMA Permit#: **Finished Square Footage:** 1996 NA 29953 **Unfinished Square Footage:** 960 Septic Permit#: 0.0 0908/2020 Stories: Septic Permit Date: **Building Height:** 0 Survey/Site Plan: YES 5 NA Total Rooms: Water Tap#: PILING Central Water Footing Type: Water Type: Exterior Finish: OTHER Flood Zone: AE Base Flood Elevation: 8.0 **Proposed Finished Floor** NA Elevation: Lot/Ground Elevation: 7.0 Bedrooms: 4 Baths/half baths: 0.00/1Comments: Any deviation from the building plan \$1,881.00 PERMIT FEE or site plan requires prior approval. FLOOD DEVELOPMENT BLDG PERMIT 75.00 HOME OWNERS RECOVERY FEE 10.00 RESIDENTIAL ZONING APPROVAL 100.00

TOTAL FEES:

Applicant Signature: NO SIGNATURE REQUIRED AT THIS TIME ACS OBX LLC



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RESIDENTIAL BUILDING PERMIT

BUILDING PERMIT#: R-3165				11/05/2020
Parcel Number: Location: Subdivision: Legal Description:	018697064 117 COLINGTON POINTE DR 205-C – COLINGTON COLINGTON POINTE LOT: UNIT 205-C BLK: SEC:			
Owner Name: Owner Mail Address: Owner Phone and email:	COLINGTON POINTE LLC PO BOX 1922 KILL DEVIL HILLS, NC 27948 252-207-8710			
Contractor Name:		GENERAL CONTRACTOR INC		
Contractor Mail Address: Contractor Phone:	2522078710	(ILL DEVIL HILLS, NC 27948 Contractor NC License#: 32380		
	23220/6/10	CONTRACTOR NC LICENSER. 32360		
BUILDING INFORMATION				
Proposed Construction Use:	DUPLEX NEW			
Proposed Construction Type:	DUP	Cost of Construction:	\$200,000	
Finished Square Footage:	1600	CAMA Permit#:	NA	
Unfinished Square Footage:	272	Septic Permit#:	30086	
Stories:	3.0	Septic Permit Date:	10/14/2020	
Building Height:	0	Survey/Site Plan:	YES	
Total Rooms:	4	Water Tap#:	NA	
Footing Type:	PILING	Water Type:	Central Water	
Exterior Finish:	LAP SIDING	Flood Zone:	AE	
Proposed Finished Floor	9	Base Flood Elevation:	8.0	
Elevation:		Lot/Ground Elevation:	5	
Bedrooms:	3	Baths/half baths:	3.00/1	
Comments: Any deviation from or site plan requires prior appr		PERMIT FEE		\$1,308.80
over planted and plant app.		FLOOD DEVELOPMENT BLDG PERMIT	125	75.00
		HOME OWNERS RECOVERY FEE	1,	10.00
		RESIDENTIAL ZONING APPROVAL		100.00
		TOTAL FEES:		\$1,493.80
Applicant Signature: NO SIG	NATURE REQUIRED	AT THIS TIME RM SAUNDERS G	ENERAL CONTRAC	TOR INC

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RESIDENTIAL BUILDING PERMIT

11/05/2020 **BUILDING PERMIT#: R-3159** Parcel Number: 018697063 Location: 117 COLINGTON POINTE DR 205-B - COLINGTON Subdivision: COLINGTON POINTE LOT: UNIT 205-B BLK: SEC: Legal Description: COLINGTON POINTE LLC Owner Name: Owner Mail Address: PO BOX 1922 KILL DEVIL HILLS, NC 27948 Owner Phone and email: 252-207-8710 RM SAUNDERS GENERAL CONTRACTOR INC. Contractor Name: Contractor Mail Address: PO BOX 1922, KILL DEVIL HILLS, NC 27948 Contractor Phone: 2522078710 Contractor NC License#: 32380 **BUILDING INFORMATION Proposed Construction Use: DUPLEX NEW** Proposed Construction Type: Cost of Construction: \$200,000 DUP Finished Square Footage: 1600 CAMA Permit#: NA 30086 **Unfinished Square Footage:** 272 Septic Permit#: Stories: 3.0 Septic Permit Date: 10/14/2020 **Building Height:** 0 Survey/Site Plan: YES 4 Total Rooms: Water Tap#: NA **Footing Type:** Water Type: Central Water LAP SIDING Flood Zone: AE **Exterior Finish:** Base Flood Elevation: 8.0 **Proposed Finished Floor** 9 Elevation: Lot/Ground Elevation: 5 Bedrooms: 3 Baths/half baths: 3.00/1 Comments: Any deviation from the building plan PERMIT FEE \$1,308.80 or site plan requires prior approval. FLOOD DEVELOPMENT BLDG PERMIT 75.00 125 HOME OWNERS RECOVERY FEE 10.00 RESIDENTIAL ZONING APPROVAL 100.00 \$1,493.80 **TOTAL FEES:** Applicant Signature: NO SIGNATURE REQUIRED RM SAUNDERS GENERAL CONTRACTOR INC.

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RESIDENTIAL BUILDING PERMIT

11/05/2020 **BUILDING PERMIT#: R-3156** Parcel Number: 018697062 117 COLINGTON POINTE DR 205-A - COLINGTON Location: Subdivision: **COLINGTON POINTE** LOT: UNIT 205-A BLK: SEC: **Legal Description:** Owner Name: COLINGTON POINTE LLC Owner Mail Address: PO BOX 1922 KILL DEVIL HILLS, NC 27948 Owner Phone and email: 252-207-8710 RM SAUNDERS GENERAL CONTRACTOR INC Contractor Name: Contractor Mail Address: PO BOX 1922, KILL DEVIL HILLS, NC 27948 Contractor Phone: 2522078710 Contractor NC License#: 32380 **BUILDING INFORMATION DUPLEX NEW** Proposed Construction Use: \$200,000 Cost of Construction: Proposed Construction Type: MULT Finished Square Footage: 1600 CAMA Permit#: NA Septic Permit#: 30086 Unfinished Square Footage: 272 Septic Permit Date: 10/14/2020 Stories: 0.0 YES **Building Height:** 0 Survey/Site Plan: NA 4 Water Tap#: **Total Rooms:** Footing Type: Water Type: Central Water Flood Zone: AE **Exterior Finish:** LAP SIDING Base Flood Elevation: 8.0 Proposed Finished Floor Elevation: Lot/Ground Elevation: 5 Bedrooms: 3 Baths/half baths: 3.00/1 \$1,308.80 Comments: Any deviation from the building plan PERMIT FEE or site plan requires prior approval. FLOOD DEVELOPMENT BLDG PERMIT 75.00 125 HOME OWNERS RECOVERY FEE 10.00 100.00 RESIDENTIAL ZONING APPROVAL \$1,493.80 **TOTAL FEES:** Applicant Signature: NO SIGNATURE REQUIRED AT THIS TIME RM SAUNDERS GENERAL CONTRACTOR INC

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RESIDENTIAL BUILDING PERMIT

BUILDING PERMIT#: ACC-324	10			11/16/2020
Parcel Number: Location:	019585000 812 COLINGTON D			
Subdivision: Legal Description:	COLINGTON HARBOR SEC K LOT: 114 BLK: SEC: K			
Owner Name: Owner Mail Address: Owner Phone and email:	DANA M BREASHEARS 812 COLINGTON DR KILL DEVIL HILLS, NC 27948			
Contractor Name: Contractor Mail Address: Contractor Phone: BUILDING INFORMATION	JIMBO WARD 4826 N CROATAN 252-202-6490	HWY KITTY HAWK Contractor NC License#: 23201		
Proposed Construction Use:	REPAIR , repair/rep	place exterior deck 196'sq ft		
Proposed Construction Type:		Cost of Construction:	\$17,000	
Finished Square Footage:	0	CAMA Permit#:		
Unfinished Square Footage:	0	Septic Permit#:		
Stories:	0	Septic Permit Date:		
Building Height:	0	Survey/Site Plan:		
Total Rooms:	0	Water Tap#:		
Footing Type:		Water Type:		
Exterior Finish:		Flood Zone:		
Proposed Finished Floor		Base Flood Elevation:	0.0	
Elevation:		Lot/Ground Elevation:		
Bedrooms:	0	Baths/half baths:	0/0	
Comments: Any deviation from or site plan requires prior appr		PERMIT FEE		\$150.00
	3	TOTAL FEES:		\$150.00
Applicant Signature:		JIMBO WARD		
Inspector Signature:		AYT		



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Frisco: (252) 475-5878

RESIDENTIAL BUILDING PERMIT

11/02/2020 **BUILDING PERMIT#: R-3131** Parcel Number: 019845000 225 BROADBAY DR - COLINGTON Location: Subdivision: COLINGTON HARBOR SEC M Legal Description: LOT: 92 BLK: SEC: M Owner Name: MICHAEL R CONNELL 6432 COLCHESTER RD FAIRFAX, VA 22039 Owner Mail Address: Owner Phone and email: SANDERLING CONSTRUCTION INC. Contractor Name: Contractor Mail Address: 517 ELM CT, KILL DEVIL HILLS, NC 27948 **Contractor Phone:** Contractor NC License#: 47372 **BUILDING INFORMATION RESIDENTIAL ADDITION** Proposed Construction Use: SFD Cost of Construction: \$23,500 **Proposed Construction Type:** 2020-33 Finished Square Footage: 156 CAMA Permit#: **Unfinished Square Footage:** 84 Septic Permit#: 30067 10/9/2020 Stories: 0.0 Septic Permit Date: **Building Height:** 0 Survey/Site Plan: 0 Total Rooms: Water Tap#: NA **Footing Type:** Water Type: **Exterior Finish:** Flood Zone: Base Flood Elevation: 0.0 Proposed Finished Floor 13 Elevation: Lot/Ground Elevation: 5 Bedrooms: 0 Baths/half baths: 0.00/0 \$151.00 Comments: Any deviation from the building plan PERMIT FEE or site plan requires prior approval. FLOOD DEVELOPMENT BLDG PERMIT 75.00 HOME OWNERS RECOVERY FEE 10.00 **TOTAL FEES:** \$236.00 Applicant Signature: NO SIGNATURE REQUIRED AT THIS TIME SANDERLING CONSTRUCTION INC

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Frisco: (252) 475-5878

RESIDENTIAL BUILDING PERMIT

BUILDING PERMIT#: REMID	-3133			11/02/2020		
Parcel Number: Location: Subdivision: Legal Description:	COLINGTON HAP	027063000 125 SIR RICHARD WEST DR – COLINGTON COLINGTON HARBOR SEC R LOT: 56 BLK: SEC: R				
Owner Name: Owner Mail Address: Owner Phone and email:		BENJAMIN LEE DISHAROON 8403 BALLANFRAE CT RICHMOND, VA 23229				
Contractor Name: Contractor Mail Address: Contractor Phone:	BENJAMIN LEE D 8403 BALLANFRA 804-514-8425	OISHAROON AE CT, RICHMOND, VA 23229 Contractor NC License#:				
BUILDING INFORMATION						
Proposed Construction Use:	REMODEL RES O	R COM , ADDING 196 SQ FT OF COVEREI	DPOARCH			
Proposed Construction Type:	SFD	Cost of Construction:	\$11,000			
Finished Square Footage:	0	CAMA Permit#:	NA			
Unfinished Square Footage:	196	Septic Permit#:	30118			
Stories:	0.0	Septic Permit Date:	10/20/20			
Building Height:	0	Survey/Site Plan:	YES			
Total Rooms:	0	Water Tap#:	NA			
Footing Type:		Water Type:	Central Water			
Exterior Finish:		Flood Zone:	AE			
Proposed Finished Floor	12	Base Flood Elevation:	0.0			
Elevation:	12	Lot/Ground Elevation:	4			
Bedrooms:	0	Baths/half baths:	0.00/0			
Comments: Any deviation fro or site plan requires prior ap		PERMIT FEE		\$150.00		
		TOTAL FEES:		\$150.00		
Applicant Signature: NO SI	GNATURE REQUIRED	BENJAMIN LEE	DISHAROON			

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ACCESSORY PERMIT

ACCESSORY PERMIT#: ACC-	150		11/04/2020
Parcel Number: Location: Subdivision: Legal Description:	019870000 328 EAGLE DR – COLINGTON COLINGTON HARBOR SEC M LOT: 118 BLK: SEC: M		
Owner Name: Owner Mail Address: Owner Phone and email:	ANDREW S BAILEY 8201 NOTRE DAME DR RICHMOND, VA 23228		
Contractor Name: Contractor Mail Address: Contractor Phone: ACCESSORY INFORMATION	JR NELSON JONES 1508 CAPTAINS LANE, KILL DEVIL HILLS, NC 27948 2524417882 Contractor NC License#:		
Proposed Construction: Description of Work :	RESIDENTIAL - REPAIR, SFD repair replace windows and siding Cost of Construction: CAMA Permit#: Flood Zone: Base Flood Elevation: Lot/Ground Elevation:	\$27,000 0.0	,
Comments:	PERMIT FEE		\$150.00
	TOTAL FEES:		\$150.00
Applicant Signature: SHP	JONES JR NELSON JON 11/5/2020 ned by:	NES	
Inspector Signature:	Clark		

11/5/2020

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	DOCKS;PIER	S;BULKHDS, BOATLFTS	
DOCKS;PIERS;BULKHT	OS, BOATLFTS#: ACC-3153		11/05/2020
Parcel Number:	020463000		
Location:	526 HARBOUR VIEW	OR - COLINGTON	
Subdivision:	COLINGTON HARBOR	SEC S	
Legal Description:	LOT: 67 BLK: SEC: S		
Owner Name:	CARROLL E GARRISON		
Owner Mail Address Owner Contact Infor		N - WARRENTON, VA 20187	
Contractor Name:	EMANUELSON AND D	AD INC	
Contractor Mail Add	ress: PO BOX 448 - NAGS H	HEAD, NC 27959	
Contractor Phone:	252-261-2212		
Contractor NC Licens	se#: INVALID		
DETAILS	RESIDENTIAL		
		Cost of Job:	\$20,566
CAMA Permit	78772		
Lot/Ground elevation	(ft)	DOCKS;PIERS;BULKHDS BOATLFTS FEE:	\$250.00
The owner and builde construction and be of information on this possible shown on the submitted revoked for failure to Call Building Inspecto	er are responsible to comply with a certain to comply with all zoning re ermit is correct. That he is owner of ted plans and specifications that h comply with applicable regulation or (24 Hours in advance) for inspec	tions at Dare County Offices Manteo O	rsonally inspect all pplicant certifies that the t all construction shall be as ix months and may be
Beach Office 252.475 Applicant Signature:	.5871 or Frisco Office 252.475.587 NO SIGNATURE REQUIRED AT TI		D DAD INC
Inspector Signature:	KEVIN CLARK	AYT	



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REPAIR

REPAIR#: ACC-3197		11/10/2020
Parcel Number:	004139000	
Location:	113 ST CLAIR RD KILL DEVIL HILLS	
Subdivision:	BAUM BAY HARBOR SECS 1-4	
Legal Description:	LOT: 7 BLK: SEC: 2	
Owner Name:	DAVID E OLDS	
Owner Mail Address:	11637 EXPLORER DR - MIDLOTHIAN, VA 23114	
Owner Contact Information		
Contractor Name:	SURFSIDE CONSTRUCTION	
Contractor Mail Address:	115 SAINT CLAIR RD - KILL DEVIL HILLS, NC 27948	
Contractor Phone:	252-548-9253	
Contractor NC License#:	NA	
DETAILS	RESIDENTIAL	

Cost of Job:

\$27,750

REPAIR FEE:

\$150.00

Comments: REPLACE EXISTING BACK DECK / SAME FOOTPRINT REPLACE GIRDERS, JOIST, BAND, DECKING, HANDRAILS

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

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

Applicant Signature:	NO SIGNATURE REQUIRED AT THIS TIME	SURFSIDE CONSTRUCTION SURFSIDECONSTRUCTIONLLC@GMAIL.COM
Inspector Signature:	KEVIN CLARK	AYT

area -- 10/20/2020



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ACCESSORY PERMIT

ACCESSORY PERMIT#: ACC-3	3225				11/13/2020
Parcel Number: Location: Subdivision: Legal Description:	020449000 111 VIRGINIA DARE CT – COLINGTON COLINGTON HARBOR SEC S LOT: 53A BLK: SEC: S				
Owner Name: Owner Mail Address: Owner Phone and email:	WALTER L LIVERN 110 VIRGINIA DA	MAN RE CT KILL DEVIL HI	LLS, NC 27948		
Contractor Name: Contractor Mail Address: Contractor Phone: ACCESSORY INFORMATION	WALTER LIVERMA , 252-216-6788	AN (OWNER) Contractor NO	C License#:		
Proposed Construction: Description of Work		CAM Flood Base		\$25,000 78754 0.0	
Comments:		PERMIT FEE			\$250.00
		TOTAL FEES:			\$250.00
Applicant Signature: NO SIG	SNATURE REQUIRED		WALTER L LIVER	MAN	
Inspector Signature: KEVIN	CLARK		AYT		



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MECHANICAL PROJECT

	1412	CIPITONE! NOILO!	
MECHANICAL PROJECT#: MI	ECH-3151		11/05/2020
Parcel Number:	029308017		
Location:	7001 MARTINS PO	INT RD - MARTIN'S POINT	
Subdivision:	MARTIN'S PT BLK 1	SEC 2	
Legal Description:	LOT: 17 BLK: 1 SEC	2	
Owner Name: Owner Mail Address: Owner Contact Information:		INI INT RD - KITTY HAWK, NC 27949	
Contractor Name: Contractor Mail Address: Contractor Phone: Contractor NC License#:		AND AIR CONDITIONING INC Y HAWK, NC 27949	
DETAILS	RESIDENTIAL		
UNITS: Electrical Contractor ID:	1.00 22222-L	Cost of Job:	\$14,976
Units	0	MECHANICAL PROJECT FEE:	\$150.00
Comments: COMPLETE DUC	T REPLACEMENT		

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

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

Applicant Signature:	NO SIGNATURE REQUIRED AT THIS TIME	R A HOY HEATING AND AIR CONDITIONING INC marceyb@rahoy.com
Inspector Signature:	KEVIN CLARKI	AYT



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ACCESSORY PERMIT

ACCESSORY PERMIT#: ACC-3	224	11/13/2020		
Parcel Number: Location: Subdivision: Legal Description:	027757029 3057 CREEK RD — MARTIN'S POINT MARTIN'S POINT SECTION 3 LOT: 25 BLK: 1 SEC: 3			
Owner Name: Owner Mail Address: Owner Phone and email:	SEAN MICHAEL BREEN 3057 CREEK RD KITTY HAWK, NC 2	7949		
Contractor Name: Contractor Mail Address: Contractor Phone: ACCESSORY INFORMATION	D&B BULKHEADS 1105 SWORD FISH WAY, KITTY HA 252-455-6322 Contractor	NWK, NC 27954 NC License#:		
Proposed Construction: Description of Work	RESIDENTIAL - DOCKS;PIERS;BULKH	DS, BOATLFTS,		
i	CA Flo Ba:	st of Construction: MA Permit#: ood Zone: se Flood Elevation: t/Ground Elevation:	\$15,000 78716 0.0	
Comments:	PERMIT FEE			\$250.00
	TOTAL FEES:			\$250.00
Applicant Signature: NO SIG	NATURE REQUIRED AT THIS TIME	N-24100		
Inspector Signature: KEVIN	CLARK	AYT		



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	DOCKS;PIERS;BUI	KHDS, BOATLFTS	
DOCKS;PIERS;BULKHDS, BOA	TLFTS#: ACC-3195		11/10/2020
Parcel Number:	018644000		
Location:	COLINGTON RD - COLINGT	ON	
Subdivision:	SUBDIVISION - NONE		
Legal Description:	LOT: BLK: SEC:		
Owner Name:	NIGEL BLACKMORE		
Owner Mail Address: Owner Contact Information:	9495 BABCOCK BLVD - ALL	ISON PARK, PA 15101	
Contractor Name:	AFFORDABLE BILL'S		
Contractor Mail Address:	300 WEST ALBEMARLE DR	- NAGS HEAD, NC 27959	
Contractor Phone:	252-573-9336		
Contractor NC License#:	NA		
DETAILS	RESIDENTIAL		
		Cost of Job:	\$18,700
CAMA Permit	78776		
Lot/Ground elevation (ft)		DOCKS;PIERS;BULKHDS, BOATLFTS FEE:	\$250.00
Comments: INSTALL 6X40 W. ELECTRIC CONNECTION	ALKWAY WITH 12X16 DECK ANI	0 4X16 LOWER DECK. INSTALL 10,000	OLB BOATLIFE, NO
construction and be certain to information on this permit is shown on the submitted plan	o comply with all zoning regulat correct. That he is owner or dul	ulations and laws, and should perso ions and building setbacks. The appl y authorized agent of owner. That all erstands this permit is valid for six n laws.	icant certifies that the I construction shall be as
Call Building Inspector (24 Ho Beach Office 252.475.5871 or		at Dare County Offices Manteo Offic	e 252.475.5870, Northern
Applicant Signature: NO Signature	GNATURE REQUIRED AT THIS TI	ME AFFORDABLE BILL'S	

AYT



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

Frisco: (252) 475-5878

	DOCKS;PIERS;BULKHDS, BO	AILFIS	
DOCKS;PIERS;BULKHDS, BOA	TLFTS#: ACC-3194		11/10/2020
Parcel Number:	019767000		
Location:	312 SOUNDVIEW DR - COLINGTON		
Subdivision:	COLINGTON HARBOR SEC M		
Legal Description:	LOT: 6 BLK: SEC: M		
Owner Name:	WALTER T III SMITH		
Owner Mail Address: Owner Contact Information:	312 SOUNDVIEW DR - KILL DEVIL HIL	LS, NC 27948	
Contractor Name:	AFFORDABLE BILL'S		
Contractor Mail Address:	300 WEST ALBEMARLE DR - NAGS HI	EAD, NC 27959	
Contractor Phone:	252-573-9336		
Contractor NC License#:	NA .		
DETAILS	RESIDENTIAL		
	C	ost of Job:	\$13,200
CAMA Permit	78777		
Lot/Ground elevation (ft)		OCKS;PIERS;BULKHDS, OATLFTS FEE:	\$250.00
Comments: INSTALL A 4X20 CONNECTION	WALKWAY FROM BULKHEAD TO BOATLIFT	PILINGS, INSTALL 12,000	BOATLIFT, NO ELECTRIC
construction and be certain t information on this permit is shown on the submitted plan	sponsible to comply with all regulations are comply with all zoning regulations and be correct. That he is owner or duly authorizes and specifications that he understands the with applicable regulations and laws.	uilding setbacks. The applied agent of owner. That al	icant certifies that the I construction shall be as
Call Building Inspector (24 Ho Beach Office 252.475.5871 or	urs in advance) for inspections at Dare Co Frisco Office 252.475.5878	unty Offices Manteo Offic	e 252.475.5870, Northern
Applicant Signature: NO SI	GNATURE REQUIRED AT THIS TIME	AFFORDABLE BILL'S	

AYT



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

ACCESSORY PERMIT

ACCESSORY PERMIT#: REPA	IR-3276	11/24/2020
Parcel Number: Location: Subdivision: Legal Description:		
Owner Name: Owner Mail Address: Owner Phone and email:	VIRGINIA LUANN TAYLOR 1151 HARBOUR VIEW DR KILL DEVIL HILLS, NC 27948	
Contractor Name: Contractor Mail Address: Contractor Phone: ACCESSORY INFORMATION	EMANUELSON AND DAD INC PO BOX 448, NAGS HEAD, NC 27959 252-261-2212 Contractor NC License#: 79801	
Proposed Construction:	RESIDENTIAL - REPAIR, SFD	
Description of Work :	Install 2 new deck piles and 1 house piling Cost of Construction: \$2,400 CAMA Permit#: Flood Zone:	
	Base Flood Elevation: 0.0 Lot/Ground Elevation:	
Comments:	PERMIT FEE	\$150.00
	TOTAL FEES:	\$150.00
Applicant Signature: NO SIG	SNATURE REQUIRED AT THIS TIME EMANUELSON AND DAD INC	
Inspector Signature: KEVIN	CLARK AYT	



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

ACCESSORY PERMIT

ACCESSORY PERMIT#: REPA	IR-3300				11/30/2020			
Parcel Number: Location: Subdivision: Legal Description:	COLINGTON HARBO	020330000 139 SIR RICHARD WEST DR – COLINGTON COLINGTON HARBOR SEC R LOT: 63 BLK: SEC: R						
Owner Name: Owner Mail Address: Owner Phone and email:		SOUTHWOOD MANAGEMENT, INC 5031 PITZER RD ROANOKE, VA 24014 540-353-6886						
Contractor Name: Contractor Mail Address: Contractor Phone: ACCESSORY INFORMATION	FRANK ZAPPULLA J 111 PRINCESS COU 252-305-1366							
Proposed Construction: Description of Work	RESIDENTIAL - DOCI	\$5,000						
	PILING		CAMA Permit#: Flood Zone: Base Flood Elevation: Lot/Ground Elevation:	77919 AE 8.0				
Comments:	Ę	PERMIT FEE			\$250.00			
		TOTAL FEES:			\$250.00			
Applicant Signature: NO Signature	GNATURE REQUIRED AT	THIS TIME	FRANK ZAPPULLA	A JR				
Inspector Signature: KEVIN	CLARK		AYT					



Manteo: (252) 475-5870

Northern Beach: (252) 475-5871

Frisco: (252) 475-5878

MECHANICAL PROJECT

MECHANICAL PROJECT#	: MECH-3251		11/19/2020
Parcel Number:	018788217		
Location:	117 SHEDDERS WALK - COLING	TON	
Subdivision:	BAY CLIFF		
Legal Description:	LOT: 217 BLK: SEC:		
Owner Name:	MICHAEL JAMES ALLEN		
Owner Mail Address: Owner Contact Informa	9380 FALLING WATER DR - BRI tion:	STOW, VA 20136	
Contractor Name:	OBHC INC DBA ONE HOUR HEA	TING & AIR COND	
Contractor Mail Address	s: PO BOX 2600 - KILL DEVIL HILL	S, NC 27948	
Contractor Phone:	252-441-1740		
Contractor NC License#:	: L12643		
DETAILS	RESIDENTIAL		
UNITS:	1.00	Cost of Job:	\$4,929
Electrical Contractor ID:	32935		
Units	1	MECHANICAL PROJECT FEE	: \$150.00
Comments. Net Ence IIV	AC WITH 14 SEER 1 1.2 TON GOODMAN	ANTI VIOLEN & TIETT Y OWN	ł
construction and be certainformation on this permishown on the submitted	re responsible to comply with all regulations ain to comply with all zoning regulations nit is correct. That he is owner or duly aut plans and specifications that he understamply with applicable regulations and laws	and building setbacks. The appli horized agent of owner. That all ands this permit is valid for six m	cant certifies that the construction shall be as
	4 Hours in advance) for inspections at Da 71 or Frisco Office 252.475.5878	re County Offices Manteo Office	e 252.475.5870, Northern
Applicant Signature: N	IO SIGNATURE REQUIRED AT THIS TIME	OBHC INC DBA ONE HO	OUR HEATING & AIR
Inspector Signature: K	EVIN CLARK	AYT	



Kitty Hawk Building Permit Report

11/01/2020 - 11/30/2020

t Total Fees	\$75.00	\$145.00	\$2,110.00	\$180.00	\$1,555.00	,7 \$2,365.00	\$130.00	94,265.00	00 \$551.00	0 \$1,682.00	0 \$280.00	8 \$540.00
Project Cost	3,675	20,000	250,000	25,000	200,000	248,957	14,500	650,000	900'09	200,000	45,000	37,278
Residential/ Commercial	Residential	Residential	Residential	Residential	Residential	Residential	Residential	Residential	Residential	Residential	Residential	Residential
Description	Remove rails on mid-level deck; Replace with new rails using 2×2 pickets 4° on center.	Replace bulkhead	New SFR 3 bedrooms 3.5 baths and elevator - 2448 heated sq ft; 1287 sq ft of garage; 180 unheated sq ft; 731 sq ft of covered porch	Replacing siding and roofing	Remove & replace windows, kitchen, baths, flooring, trim, HVAC; Add 2 dormers on top floor; Create new 10 x 24 living/game room	New SFR 3 bedrooms 3.5 bath - 2265 heated sq ft; 631 sq ft of decks -Pool will be built at a later date and will require a new permit to be issued.	Refurbish existing deck - No change in footprint	New SFR 4 bedrooms, 3 full baths 2 half baths Residential and pool - 2498 heated sq ft; 38 unheated sq ft: 570 sq ft of deck	Add elevator & shaft east side; Close deck space for entry	Raise house and add 2nd floor; Add bedroom and 1.5 bath - 1404 additional heated sq ft; 96 unheated sq ft; 364 sq ft deck	Repair siding and handrails	Interior restoration work including new cabinetry, electrical, plumbing, new vinyl flooring, trim, painting and cleaning.
Owner Name Permit Type	Building	Building	Building	Building	Building	Building	Building	Building	Building	Building	Building	Building
Owner Name	James F & Beverly Samuels	Zachariah M & Patricia A Myers	Heiko W Sunkler & Michelle L Herron	Lawrence E & Carolyn A Oueen	Stephen L & Michelle R Jones	Charles C & Lesley L Hughes	Eileen P Stone	David P & Kellie P Voros	Margaret J Quinn & Ann M Wellham	GEORGE FITCHETT	Marie G Forbes & Terri Lynn Stoots	Lauren S Riddick, Penelope S Raby & W
Parcel Address	987507599403 3915 PARKER ST	986510468964 4113 Pineway Drive	986511652841 4029 TARKLE RIDGE DR	987606296459 5009 N VA DARE TRL	987606288263 205 E BENNETT ST	987508873811 3726 HALLETT ST	987605290675 5025 LINDBERGH AVE	987614449234 4321 LINDBERGH AVE	987612776458 105 FIRST FLIGHT RUN	987512961747 3628 POSEIDON ST	300 APOLLO CT	987606286942 4924 N VA DARE TRL
Pin Number	987507599403	986510468964	986511652841	987606296459	987606288263	987508873811	987605290675	987614449234	987612776458	987512961747	987511760889 300 APOLLO CT	987606286942
Permit #	20444	20446	20447	20448	20449	20450	20451	20452	20453	20438	20439	20440

\$195.00	\$535.00	\$110.00	\$85.00	\$140.00	\$260.00	\$130.00	\$155.00	\$40.00	\$315.00	\$45.00	\$50.00	\$200.00	\$50.00	\$96.00
27,553	61,800	10,150	5,500	12,000	19,300	7,375	20,000	370	62,600	009	2,885	5,200	000′9	4,400
Residential	Residential	Residential	Residential	Residential	Residential	Residential	Residential	Residential	Residential	Residential	Residential	Commercial	Residential	Residential
Replace rear deck surface & railings; Replace front side deck & railings	Replace siding & windows; Remodel bathroom; Replace railings, decking boards and posts with 6 x 6; Add 183 sq ft of deck/walkway	Remove and replace existing bench seats, decking and joists for 1st floor deck; Replace handrails and posts on top deck and install bench seats.	Connect front & back decks on 2nd floor; Replace 1 piling & add one 6 x 6; Replace decking under existing 3rd floor	Extend driveway and add 12 x 24 utility building	Remodel kitchen and replace 5 windows	Add 10 x 12 deck	Remove and replace handrails, stairs and decking - No change in footprint	Install temp pole for new SFR	Install 20 ground mounted solar panelts, mounted modules, grid tied with a 6.40 KW;	Run gas line for gas range	HVAC change out of a 2.5 ton system	HVAC change out of one 4 ton and three 12.5 ton roof top units; New mechanical units to be furnished by Walgreens	HVAC change out of a 2 ton system	Install a ductless mini-split system for sunroom - 17 SEER 12,000 BTU system
Building	Building	Building	Building	Building	Building	Building	Building	Electrical	Electrical	Fuel Piping	Mechanical	Mechanical	Mechanical	Mechanical
Robert Building Adamson	331 Properties LLC	Charles E & Diane Linderman	Kyle Edward & Kelly Joyner	7 & &	& & a h Fede	David Belote Faith Belote	Scott G & Kristine M Thomas	Tracey N Stephen P Scudieri	S	James W & Margaret B Caldwell	RONALD PAUL DENTON	BERMUDA GREENS ASSOCIATES INC pull	- 0 s	Banks .C; Att: / M
986514348871 3847 IVY LN	987512971094 3639 POSEIDON ST	987512866940 3648 GOOSANDER ST	987512757503 3611 MEETING TWAIN	986607579979 5133 THE WOODS RD	98750769129405 208 W KITTY HAWK RD	987606372840 4806 N VA DARE TRL	987610451736 4521 LINDBERGH AVE	987507596856 3935 PARKER ST	987512850886 3621 RABBIT HOLLOW	986511559226 4000 TARKLE RIDGE DR	987605294857 5025 N VA DARE TRL	987717017167 5312 N VA DARE TRL	98761831835705 2405 NEPTUNE WAY	987609264077 4628 SEASCAPE DR
20441	20459	20461	20462	20463	20464	20465	20467	20460	20349	20434	20436	20443	20456	20457

Total Records: 28

NUMBER OF RESIDENTIAL PERMITS - 27 TOTAL VALUE OF RESIDENTIAL PERMITS - \$2,004,123.00

TOTAL NUMBER OF COMMERCIAL PERMITS - 1 TOTAL VALUE OF COMMERCIAL PERMITS - \$5,200.00

12/1/2020



Town of Kitty Hawk, NC 101 Veterans Memorial Drive Kitty Hawk, NC 27949 Phone: (252) 261-3552

PERMIT

Permit NO. 20444

Permit Type: Residential Work Classification: [Permit Type] Permit Status: Pending

Issue Date: 11/05/2020

Expires: 05/04/2021

Main Permit: Main Permit

2 1 2 1 1 2 1		200		0.1.0.1.1		
Project Address		Zoning		Subdivision TED WOOD KITTY HAWK TERR ADD PIN		
3915 Parker Street		BR-2				
Lot		Block				
16		C		987507599403		
Flood Zone		Constuction	Туре	Building Code		
X		Repair/Repla	ace	BLDG2018		
Owner Information		Address	S	Phone		
James F & Beverly San	nuels	3915 Parker				
		Kitty Hawk N	C 27949	September -		
Applicant Information		Address	4	Phone		
Sea Thru Construction	- Scott Woolard, Ji	r. P O Box 247 Kitty Hawk, N	Comments.	252-491-6964		
			***************************************	Construction Cost:	3675.00	
				Unheated Sq. Feet	.00	
Contractor(s)	Phone	Contractor Type	License Number	_ Total Sq. Feet:	.00	
Sea Thru Construction Inc.	(252)491-6964	General	57130			
Building Comments:				Description of Work: rails on mid-level dec with new rails using 2 pickets 4' on center.	k; Replace	
Permit Cost - \$75.00						
Planning Conditions:						
Flood Zone - X; Elevation -	LES=8; Map# - 37209	987500K; Effective - 06	6/19/2020			
The work authorized by this Governing Building Constru Any change in the work as	uction in the State of N	North Carolina and ordin	nances adopted by the To	wk Zoning Restrictions and wown of Kitty Hawk.	ith the Laws	
Owner / Applicant	/ Contractor /	Agent		Date		
Building Official				Date	-	



Building Official

Town of Kitty Hawk, NC 101 Veterans Memorial Drive Kitty Hawk, NC 27949 Phone: (252) 261-3552

PERMIT

Permit NO. 20446

Permit Type: Residential Work Classification: [Permit Type] Permit Status: Pending

Date

Issue Date: 11/05/2020

Expires: 05/04/2021

Main Permit: Main Permit

Project Address 4113 Pineway Drive Lot 53 Flood Zone AE Owner Information Zachariah M & Patrici	a A Myers	Zoning VR-1 Block Constuction Bulkhead/Re Address 54 Aubrey C Charles Tow	etaining Wall	Subdivision KITTY HAWK LANDING SEC 3 PIN 986510468964 Building Code BLDG2018 Phone Phone 704-418-8667		
Applicant Information D & B Bulkheads Inc.		Address	Street, Ste B			
Contractor(s)	Phone	Contractor Type	License Number	Construction Cost: Unheated Sq. Feet Total Sq. Feet:	20000.00 .00 .00	
D & B Bulkheads Building Comments Permit Cost - \$145.00 Planning Conditions		General	00000	Description of Work: Replace bulkhead		
The work authorized by the Governing Building Constant Any change in the work at	nis permit is to be perfo	ormed in accordance wit North Carolina and ordin	th the applicable Kitty Hanances adopted by the To	wk Zoning Restrictions and wown of Kitty Hawk.	vith the Laws	
Owner / Applican	t / Contractor /	Agent		Date		



Town of Kitty Hawk, NC 101 Veterans Memorial Drive

Kitty Hawk, NC 27949 Phone: (252) 261-3552 PERMIT

Permit NO. 20447

Permit Type: Residential Work Classification: [Permit Type]

Permit Status: Pending

Issue Date: 11/05/2020

Expires: 05/04/2021

250000.00

2198.00

2448.00

Main Permit: Main Permit

Project Address
4029 Tarkle Ridge Road
Lot
28
Flood Zone
AE
Owner Information

Heiko W Sunkler & Michelle L Herron

Applicant Information

Heiko Sunkler

Zoning
VR-1
Block

Constuction Type New Single-Family Home

Address P O Box 451

Kitty Hawk NC 27949

Address

108 Pan Ridge Court Point Harbor, NC 27964 Subdivision

KITTY HAWK LANDING SEC 5

PIN

986511652841

Building Code BLDG2018

Phone

252-202-7838

Phone

252-202-7838

Contractor(s)	Phone	Contractor Type	License Number	Construction Cost: Unheated Sq. Feet Total Sq. Feet:
TBD	000-000-0000	Electrical	00000	
Owner	000-000-0000	General	00000	
TBD	000-000-0000	Fuel Piping	00000	
TBD	000-000-0000	Mechanical	00000	
TBD	000-000-0000	Plumbing	00000	

Building Comments:

Description of Work: New SFR 3 bedrooms 3.5 baths and elevator - 2448 heated sq ft; 1287 sq ft of garage; 180 unheated sq ft; 731 sq ft of covered porch

Permit Cost - \$2110.00

The following items are required: Duct Test due prior to Rough-In Inspection; Termite Affidavit due prior to Rough-In Inspection; Energy Certificate due prior to Pre-Final Inspection; Address posed on house (minimum 4" numbers) prior to Pre-Final Inspection; Complete Septic Permit due prior to Final Inspection;

Planning Conditions:

Flood Zone - VR-1; Elevation - 4' + LES=8' NAVD; Map# - 37209876500K; Effective - 06/19/2020;

The following items are required: Height Certificate due prior to Rough-In Inspection; Under Construction Elevation Certificate due prior to Rough-In Inspection; Non'Coversion agreement due prior to Rough-In Inspection; Finished Elevation Certificate due prior to Pre-Final Inspection; An As-Built Survey due prior to Final Inspection;

Minimum Setbacks - 25' Front & Rear; 10' Side;

Maximum Height - Not to exceed 35' from finished grade;



Town of Kitty Hawk, NC 101 Veterans Memorial Drive Kitty Hawk, NC 27949 Phone: (252) 261-3552

PERMIT

Permit NO. 20448 Permit Type: Residential Work Classification: [Permit Type] Permit Status: Pending

Issue Date: 11/06/2020

Expires: 05/05/2021 Main Permit: Main Permit

Building Official				Date	_	
Owner / Applicant / 0	Contractor /	Agent		Date		
The work authorized by this perr Governing Building Construction Any change in the work as spec	in the State of N	North Carolina and ordin	nances adopted by the To		vith the Laws	
Planning Conditions: Flood Zone - VE; Elevation - 11'	+1'=12'; Map# - :	3720987600K; Effective	e - 06/19/2020			
Permit Cost - \$180.00						
Building Comments:				Description of Work: siding and roofing	Replacing	
R. M. Saunders General (2 Contractor, Inc.	252)441-2544	General	32380			
Contractor(s)	none	Contractor Type	License Number	_ Total Sq. Feet:	.00	
				Construction Cost: Unheated Sq. Feet	25000.00	
TV W Guarder's General Cor		Kill Devil Hills		202 000 1004		
Applicant Information R M Saunders General Cor	tractor	Address P O Box 192	2	Phone 252-305-7334		
Lawrence E & Carolyll A Qu	deen	Greensboro		330-430-0737		
Owner Information Lawrence E & Carolyn A Qu	laan.	Address 214 Stauntor	o Deixo	Phone 336-430-6757		
VE		Repair/Repla	ace	BLDG2018		
Flood Zone		Constuction	Туре	Building Code		
Lot 12		Block 12		PIN 987606296459		
5009 N Virginia Dare Trail		BR-1		KITTY HAWK BEACH REV SEC		
Project Address		Zoning		Subdivision		



Town of Kitty Hawk, NC 101 Veterans Memorial Drive Kitty Hawk, NC 27949

Phone: (252) 261-3552

PERMIT

Permit NO. **20449**Permit Type: Commercial
Work Classification: [Permit Type]
Permit Status: Pending

Issue Date: 11/06/2020

Expires: 05/05/2021

Main Permit: Main Permit

Project Address	Zoning	Subdivision
205 E Bennett Street	BR-1	KITTY HAWK BEACH REV SEC A
Lot	Block	PIN
17 EPT 18	24	987606288263
Flood Zone	Constuction Type	Building Code
X	Remodeling	BLDG2018
Owner Information	Address	Phone
Stephen L & Michelle R Jones	5013 Martin's Point Road	
	Kitty Hawk NC 27949	
Applicant Information	Address	Phone
Coastal Contracting NC Inc - Matt Tapperro	7013 Martins Poin Road	252-480-5556
	Kitty Hawk, NC 27949	

Contractor(s)	Phone	Contractor Type	License Number	Construction Cost: Unheated Sq. Feet Total Sq. Feet:	200000.00 .00 .00
TBD	000-000-0000	Electrical	00000	_ lotal Sq. Feet.	.00
Coastal Construction of North Carolina, Inc.			25529		
TBD	000-000-0000	Mechanical	00000		
TBD	000-000-0000	Plumbing	00000		
Building Comments:				Description of Work: replace windows, kit flooring, trim, HVAC; dormers on top floor new 10 x 24 living/ga	chen, baths, ; Add 2 r; Create

Permit Cost - \$1555.00

Planning Conditions:

Flood Zone - X; - Elevation - RFPE=8' NAVD; Map# - 3720987600K; Effective - 06/19/2020

The work authorized by this permit is to be performed in accordance with the applicable Kitty Hawk Zoning Restrictions and with the Laws Governing Building Construction in the State of North Carolina and ordinances adopted by the Town of Kitty Hawk.

Any change in the work as specified is subject to prior approval of the Building Inspector.

Owner	1	Applicant	/ Contractor	1	Agent	Date
ta recessor						1
Building	g O	fficial				Date



Town of Kitty Hawk, NC

101 Veterans Memorial Drive Kitty Hawk, NC 27949 Phone: (252) 261-3552 PERMIT

Permit NO. 20450

Permit Type: Residential Work Classification: [Permit Type]

Permit Status: Pending

Issue Date: 11/09/2020

Expires: 05/08/2021

Main Permit: Main Permit

Project Address	Zoning	Subdivision
3726 Hallett Street	BR-1	HURDLE, PERRY, JOHNSON & WHITE
Lot	Block	PIN
142		987508873811
Flood Zone	Constuction Type	Building Code
X	New Single-Family Home	BLDG2018
Owner Information	Address	Phone
Charles C & Lesley L Hughes	2213 Childeric Road	
	Virginia Beach VA 23456	
Applicant Information	Address	Phone
Griggs & Co Homes Inc	148 Lucinda Lane	252-491-8450

Phone	Contractor Type	License Number	Construction Cost: Unheated Sq. Feet Total Sq. Feet:	248957.00 631.00 2265.00
000-000-0000	Electrical	00000		
000-000-0000	Fuel Piping	00000		
000-000-0000	Mechanical	00000		
000-000-0000	Plumbing	00000		
(252)491-8450	General	48170		
	000-000-0000 000-000-0000 000-000-0000	000-000-0000 Electrical 000-000-0000 Fuel Piping 000-000-0000 Mechanical 000-000-0000 Plumbing	000-000-0000 Electrical 00000 000-000-0000 Fuel Piping 00000 000-000-0000 Mechanical 00000 000-000-0000 Plumbing 00000	Phone Contractor Type License Number Unheated Sq. Feet 000-000-0000 Electrical 00000 000-000-0000 Fuel Piping 00000 000-000-0000 Mechanical 00000 000-000-0000 Plumbing 00000

Powells Point, NC 27966

Building Comments:

Description of Work: New SFR 3 bedrooms 3.5 bath - 2265 heated sq ft; 631 sq ft of decks -Pool will be built at a later date and will require a new permit to be issued.

Permit Cost - \$2365.00

The following items are required: Duct Test due prior to Rough-In Inspection; Termite Affidavit due prior to Rough-In Inspection; Energy Certificate due prior to Pre-Final Inspection; Address posted (minimum of 4" numbers) prior to Pre-Final Inspection; Complete Septic Permit due prior to Final Inspection;

Planning Conditions:

Flood Zone - X; Elevation - LES=8' NAVD; Map# - 3720987500K; Effective - 06/19/2020;

The following items are required: Height Certificate due prior to Rough-In Inspection; Finished Elevation Certificate due prior to Pre-Final Inspection; As-Built Survey due prior to Final Inspection;

Minimum Setbacks - 25' front & rear; 10' side;

Maximum height not to exceed 35' from finished grade - fill elevation to be no higher than RFPE of 8' or 6" above adjacent roadway - or fill amount required for septic system, whichever is higher. Fill height to be verified at Height Certificate;

Swimming Pool not permitted - Will require a new application and septic permit before installing;



Town of Kitty Hawk, NC 101 Veterans Memorial Drive Kitty Hawk, NC 27949 Phone: (252) 261-3552

PERMIT

Permit NO. 20451 Permit Type: Residential
Work Classification: [Permit Type]
Permit Status: Pending

Issue Date: 11/10/2020

Expires: 05/09/2021

Main Permit: Main Permit

5025 Lindbergh Avenue BR-1 Lot Block 20 22 Flood Zone Cons AO Repa Owner Information Addr Eileen P Stone 7458 West Applicant Information Addr Reigle Contracting LLC - Jason Reigle P O E		Block	rington Drive er OH 45069	Subdivision KITTY HAWK BEACH REV SEC A PIN 987605290675 Building Code BLDG2018 Phone 804-998-0091 Phone 252-455-1705		
				Construction Cost:	14500.00	
.			Tress tress	Unheated Sq. Feet	.00.	
Contractor(s)	Phone	Contractor Type	License Number	_ Total Sq. Feet:	.00	
Reigle Contracting LLC Building Comments: Permit Cost - \$130.00 Planning Conditions: Flood Zone - AO; Elevation - No Change In Footprint		General VD; Map# - 372098760	00000 0K; Effective - 06/19/202	Description of Work: existing deck - No ch footprint		
Governing Building Construction Any change in the work as s	ction in the State of	North Carolina and ording prior approval of the B	nances adopted by the To	wk Zoning Restrictions and wown of Kitty Hawk. Date	vith the Laws	
Building Official				Date	-	



Town of Kitty Hawk, NC 101 Veterans Memorial Drive Kitty Hawk, NC 27949

Phone: (252) 261-3552

PERMIT

Permit NO. **20452** Permit Type: Residential Work Classification: [Permit Type]

Permit Status: Pending

Issue Date: 11/10/2020

Expires: 05/09/2021

Main Permit: Main Permit

Project Address	Zoning	Subdivision
4321 Lindbergh Avenue	BR-1	KITTY HAWK BEACH REV SEC A
Lot	Block	PIN
22	29	987614449234
Flood Zone	Constuction Type	Building Code
AH	New Single-Family Home	BLDG2018
Owner Information	Address	Phone
David P & Kellie P Voros	402 Rivers Bend Circle	804-240-8384
	Chester VA 23836	
Applicant Information	Address	Phone
Kingdom House Construction - Jack Cook	P O Box 30	252-256-2557

Kill Devil Hills, NC 27948

				Construction Cost:	650000.00
	20.7			Unheated Sq. Feet	608.00
Contractor(s)	Phone	Contractor Type	License Number	_ Total Sq. Feet:	2498.00
Kingdom House Construction	252-256-2557	General	83752		
TBD	000-000-0000	Electrical	00000		
TBD	000-000-0000	Fuel Piping	00000		
TBD	000-000-0000	Mechanical	00000		
TBD	000-000-0000	Plumbing	00000		
Building Comments:				Description of Works bedrooms, 3 full bath baths and pool - 249 ft; 38 unheated sq ft; deck	ns 2 half 8 heated sq

Permit Cost - \$4265.00

The following items are required: Duct Test due prior to Rough-In Inspection; Termite Affidavit due prior to Rough-In Inspection; Energy Certificate due prior to Pre-Final Inspection; Address posted (minimum 4" numbers) prior to Pre-Final Inspection; Completed Septic Permit due prior to Final Inspection;

Planning Conditions:

Flood Zone - AH; Elevation - 10'+1'=11'; Map# - 3720987600; Effective - 06/19/2020;

The following items are required: Height Certificate due prior to Rough-In Inspection; Under Construction Elevation Certificate due prior to Rough-In Inspection; Finished Elevation Certificate due prior to Pre-Final Inspection; As-Built Survey due prior to Final Inspection;

Minimum Setbacks - 25' front & rear; 10' side;

Maximum height not to exceedc 35' from finished grade. Fill is limited to RFPE (elevation of 11' NAVD); Fill pad height required by Dare Co Environmental Health (18") or 6" above adjacent roadway elevation, whichever is highest - Fill height to be verified with Height Certificate;

Pool Minimum Setbacks - 25' front; 5' side & rear; Pool equipment must comply with setback requirements;

Lot Coverage not to exceed 30% or 3000 sq ft - Proposed lot coverage is 29.9%;



Town of Kitty Hawk, NC 101 Veterans Memorial Drive

Kitty Hawk, NC 27949 Phone: (252) 261-3552

PERMIT

Permit NO. 20453

Permit Type: Residential Work Classification: [Permit Type]

Permit Status: Pending

Issue Date: 11/12/2020

Expires: 05/11/2021

Main Permit: Main Permit

Subdivision **Project Address** Zoning FIRST FLIGHT RIDGE BR-1 105 First Flight Run PIN Block Lot 987612776458 82 **Building Code** Flood Zone Constuction Type BLDG2018 X Addition Address Phone Owner Information P O Box 3091 Margaret J Quinn & Ann M Wellham Swanton MD 21561 Address Phone Applicant Information William K Gibson P O Box 2022 252-207-2700 Kitty Hawk, NC 27949

Contractor(s)	Phone	Contractor Type	License Number	Construction Cost: Unheated Sq. Feet Total Sq. Feet:	60000.00 25.00 140.00
TBD	000-000-0000	Electrical	00000		
William K Gibson	252-207-2700	General	81900		
				Description of Work:	Add

Building Comments:

elevator & shaft east side; Close

deck space for entry

Permit Cost - \$551.00

The following items are required: Termite Affidavit due prior to Rough-In Inspection;

Planning Conditions:

Flood Zone - X; Elevation - LES=8' NAVD; Map# - 3720987500K; Effective - 06/19/2020;

The work authorized by this permit is to be performed in accordance with the applicable Kitty Hawk Zoning Restrictions and with the Laws Governing Building Construction in the State of North Carolina and ordinances adopted by the Town of Kitty Hawk. Any change in the work as specified is subject to prior approval of the Building Inspector.

Owner	1	Applicant	/ Contractor	1	Agent	Date
Building	n O	fficial				Date



Town of Kitty Hawk, NC 101 Veterans Memorial Drive Kitty Hawk, NC 27949 Phone: (252) 261-3552

PERMIT

Permit NO. 20438 Permit Type: Residential Work Classification: [Permit Type]

Permit Status: Pending

Issue Date: 11/02/2020

Expires: 05/01/2021

Main Permit: Main Permit

Subdivision Zoning **Project Address** BR-1 KITTY DUNES EAST EXTENDED 3628 Poseidon Street PIN Block Lot 987512961747 2 **Building Code Constuction Type** Flood Zone Remodeling **BLDG2018** X Phone Owner Information Address GEORGE FITCHETT 312 HARWICK DR

N. CHESTERFIELD VA 23236

Phone Address Applicant Information 252-489-9551

B & B Contractors - Jeff Ballard P O Box 2998

Kitty Hawk, NC 27949

Construction Cost: 200000.00 Unheated Sa Feet 1404 00

				Unneated 34. Feet	1404.00
Contractor(s)	Phone	Contractor Type	License Number	_ Total Sq. Feet:	460.00
TBD	000-000-0000	Fuel Piping	00000		
TBD	000-000-0000	Mechanical	00000		
TBD	000-000-0000	Plumbing	00000		
B & B Contractors	252-489-9551	General	60944		
Godfrey Electrical Service Inc.	252-202-1450	Electrical	08204-L		

Building Comments:

Description of Work: Raise house and add 2nd floor; Add bedroom and 1.5 bath - 1404 additional heated sq ft; 96 unheated sq ft; 364 sq ft deck

Permit Cost - \$1682.00

The following items are required: Duct Test prior to Rough-In Inspection; Termite Affidavit prior to Rough-In Inspection; Energy Certificate prior to Pre-Final Inspection; Address posted on house (minimum 4" numbers); Completed Septic Permit;

Planning Conditions:

Flood Zone - X; Elevation - LES=8' NAVD; Map# - 3720987500K; Effective - 06/19/2020

Setbacks - 25' Front/Rear; 10' Side

Maximum Lot Cover 30% or 3900 sq ft; Maximum Height - 35' from finished grade

The following items are required: Height Certificate prior to Rough-In Inspection; Finished Elevation Certificate prior to Pre-Final Inspection;

Bottom of lowest floor & all attendant utilities (HVAC, Water Heater, etc.) must be at or above RFPE 8' NAVD; Below BFE enclosures



Town of Kitty Hawk, NC 101 Veterans Memorial Drive Kitty Hawk, NC 27949 Phone: (252) 261-3552

PERMIT

Permit NO. 20439 Permit Type: Residential Work Classification: [Permit Type] Permit Status: Pending

Issue Date: 11/03/2020

Expires: 05/02/2021 Main Permit: Main Permit

Project Address		Zoning		Subdivision		
300 Apollo Court		BR-1		FIRST FLIGHT RIDGE		
Lot		Block		PIN 987511760889 Building Code BLDG2018 Phone		
52		2				
Flood Zone		Constuction	Type			
X		Repair/Repla				
Owner Information		Address				
Marie G Forbes & Terri	Lynn Stoots		w Ridge Lane	804-380-2095		
		Chesterfield	Va 23838			
Applicant Information		Address		Phone		
Coastal NC Holdings		P O Box 144 Kitty Hawk, N	18 To 18 18 18 18 18 18 18 18 18 18 18 18 18	252-573-9547		
		2224 0 1100	,,,, a, a, e, e		12000	
				Construction Cost:	45000.00	
2.8-1.00	Terminal .			Unheated Sq. Feet	.00	
Contractor(s)	Phone	Contractor Type	License Number	_ Total Sq. Feet:	.00	
Coastal NC Holdings, LLC	757-477-6867	General	79309			
Building Comments:				Description of Work: siding and handrails	Repair	
Permit Cost - \$280.00						
Planning Conditions:						
Flood Zone - X; Elevation -		# - 3720987500K; Effec	tive - 06/19/2020			
The work authorized by this Governing Building Constru Any change in the work as	uction in the State of	North Carolina and ordi	nances adopted by the To	wk Zoning Restrictions and vown of Kitty Hawk.	vith the Laws	
Owner / Applicant	/ Contractor	/ Agent		Date		
Building Official				Date	-	



Town of Kitty Hawk, NC 101 Veterans Memorial Drive Kitty Hawk, NC 27949

Phone: (252) 261-3552

PERMIT

Permit NO. 20440 Permit Type: Residential

Work Classification: [Permit Type]

Permit Status: Pending

Issue Date: 11/03/2020

Expires: 05/02/2021

Main Permit: Main Permit

Project Address	Zoning	Subdivision
4924 N Virginia Dare Trail	BR-1	KITTY HAWK BEACH REV SEC A
Lot	Block	PIN
5 SPT 4	23	987606286942
Flood Zone	Constuction Type	Building Code
VE	Remodeling	BLDG2018
Owner Information	Address	Phone
Lauren S Riddick, Penelope S Raby & W Mark Spence	110 Marsh Road	
	Washington NC 27889	
Applicant Information	Address	Phone
Granplan Restorations LLC	349-C Water Plant Road	252-473-3334
	Manteo, NC 27954	

Contractor(s)	Phone	Contractor Type	License Number	Construction Cost: Unheated Sq. Feet Total Sq. Feet:	37278.43 .00 .00
Granplan Restorations,	252-473-3334	General	72798		
TBD	000-000-0000	Electrical	00000		
TBD	000-000-0000	Plumbing	00000		
Building Comments:			Description of Work: restoration work incl cabinetry, electrical, new vinyl flooring, tr	uding new plumbing,	

and cleaning.

Permit Cost - \$540.00

Planning Conditions:

Flood Zone - VE; Elevation - 13'+1'=14'; Map# - 3720987600K; Effective - 06/19/2020

Value of House - \$144,600; 50% Cost of House - \$72,300; Cost of Work - \$37,278.43; Value Work Left in 12 Months - \$35,021.57

The work authorized by this permit is to be performed in accordance with the applicable Kitty Hawk Zoning Restrictions and with the Laws Governing Building Construction in the State of North Carolina and ordinances adopted by the Town of Kitty Hawk. Any change in the work as specified is subject to prior approval of the Building Inspector.

Owner	1	Applicant	/ Contractor	1	Agent	Date
Building	g 0	fficial				Date



Town of Kitty Hawk, NC 101 Veterans Memorial Drive Kitty Hawk, NC 27949 Phone: (252) 261-3552

PERMIT

Permit NO. 20441

Date

Permit Type: Residential Work Classification: [Permit Type]

Permit Status: Pending

Issue Date: 11/04/2020

Expires: 05/03/2021

Project Address 3847 Ivy Lane		Zoning VR-1		Subdivision KITTY HAWK LANDING SEC 4		
Lot		Block		PIN 986514348871		
5		. = . = - 1/2				
Flood Zone AE		Constuction Repair/Repla		Building Code BLDG2018		
Owner Information		Address		Phone		
Robert Adamson		3847 Ivy Lan	ie	623-215-3022		
		KItty Hawk N	IC 27949			
Applicant Information		Address		Phone		
Outer Banks Cottage Re	enovations Inc	P O Box 719	Carra F	252-207-7269		
and the second second		Kitty Hawk, N	NC 27949			
			(magazina)	Construction Cost:	27553.00	
				Unheated Sq. Feet	.00	
Contractor(s)	Phone	Contractor Type	License Number	_ Total Sq. Feet:	.00	
Outer Banks Cottage Renovations, Inc.	252-207-7269	General	79322			
Building Comments:				Description of Work: rear deck surface & r Replace front side de railings	ailings;	
Permit Cost - \$195.00						
Planning Conditions:						
Flood Zone - AE; Elevation	- 4' + LES=8' NAVD;	Map# - 3720986500K;	Effective - 06/19/2020;			
Value of House - \$194,400;	50% Cost of House	- \$97,200; Cost of Worl	k - \$27,553; Value Work I	_eft in 12 Months - \$69,647;		
The work authorized by this Governing Building Constru Any change in the work as s	ction in the State of	North Carolina and ordi	nances adopted by the To	wk Zoning Restrictions and vown of Kitty Hawk.	vith the Laws	
Owner / Applicant	/ Contractor	Agent		Date		



Town of Kitty Hawk, NC 101 Veterans Memorial Drive

Kitty Hawk, NC 27949 Phone: (252) 261-3552 PERMIT

Permit NO. **20459** Permit Type: Residential Work Classification: [Permit Type]

Permit Status: Pending

x 6; Add 183 sq ft of deck/walkway

Issue Date: 11/18/2020

Expires: 05/17/2021

Main Permit: Main Permit

Project Address Subdivision Zoning BR-1 KITTY DUNES EAST 3639 Poseidon Street Lot Block PIN 987512971094 7 Flood Zone **Constuction Type Building Code** X Remodeling BLDG2018 Owner Information Address Phone 5117 Old Forester Lane 331 Properties LLC Glen Allen VA 23060 Applicant Information Address Phone Gibbs Daughters NC LLC P O Box 2387 252-202-5991

Contractor(s)	Phone	Contractor Type	License Number	Construction Cost: Unheated Sq. Feet Total Sq. Feet:	61800.00 183.00 .00
Gibbs Daughters NC LLC	252-202-5991	General	76990		
Major League Plumbing	(252)202-9332	Plumbing	30619		
Grayhound Electric LLC	252-202-1211	Electrical	25915-L		
Building Comments:				Description of Work: siding & windows; Re bathroom; Replace ra decking boards and p	emodel ailings,

Manteo, NC 27954

Permit Cost - \$535.00

Planning Conditions:

Flood Zone - X; Elevation - LES=8' NAVD; Map# - 3720987500K; Effective - 06/19/2020;

The following item(s) are required: As-Built Survey due prior to Final Inspection

The work authorized by this permit is to be performed in accordance with the applicable Kitty Hawk Zoning Restrictions and with the Laws Governing Building Construction in the State of North Carolina and ordinances adopted by the Town of Kitty Hawk.

Any change in the work as specified is subject to prior approval of the Building Inspector.

Owner	1	Applicant	/ Contractor	1	Agent	Date	
Building	g O	fficial				Date	



Town of Kitty Hawk, NC

101 Veterans Memorial Drive Kitty Hawk, NC 27949 Phone: (252) 261-3552

PERMIT

Permit NO. 20461

Permit Type: Residential Work Classification: [Permit Type] Permit Status: Pending

Date

Issue Date: 11/18/2020

Expires: 05/17/2021

Building Comments: Permit Cost - \$110.00				floor deck; Replace h and posts on top dec install bench seats	andrails
Sea Country Homes OBX, LLC	(252)441-7882	General	70329	Description of Work: and replace existing seats, decking and jo	bench lists for 1st
Contractor(s)	Phone	Contractor Type	License Number	_ Total Sq. Feet:	.00
				Construction Cost: Unheated Sq. Feet	10150.00
,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		Kill Devil Hills			
Applicant Information Sea Country Homes OF	Applicant Information Sea Country Homes OBX LLC - Skip Jones		ns Lane	Phone 252-441-7882	
Charles E & Diane Lind	erman	4 Almy Drive Malvern PA 1			
X Owner Information		Repair/Repla Address	ice	BLDG2018 Phone	
27 Flood Zone		Constuction		987512866940 Building Code	
3648 Goosander Street Lot		BR-1 Block		KITTY DUNES EAST PIN	
		2.2		WITTH A DUNIED EAST	



PERMIT

Permit NO. 20462 Permit Type: Residential
Work Classification: [Permit Type]
Permit Status: Pending

Issue Date: 11/19/2020

Expires: 05/18/2021

Project Address		Zoning		Subdivision		
3611 Meeting Twain		BR-1		KITTY DUNES VILLAC	3E	
Lot		Block		PIN		
13 Flood Zone				987512757503		
		Constuction	Туре	Building Code		
X		Deck/Porch	10000	BLDG2018		
Owner Information		Address		Phone		
Kyle Edward & Kelly Joy	yner Mapp	4000 Devon	Drive	757-536-0659		
		Chesapeake	VA 23321			
Applicant Information		Address		Phone		
Outerbanks Deck & Fen	ice Co - Jay Perri	P O Box 173	4	252-261-9888		
		Kill Devil Hills	s, NC 27948			
				Construction Cost:	5500.00	
				Unheated Sq. Feet	.00	
Contractor(s)	Phone	Contractor Type	License Number	_ Total Sq. Feet:	.00	
Outerbanks Deck and Fence Co.	(252)261-9888	General	00000			
Building Comments:				Description of Work: Connect front & back decks on 2nd floor; Replace 1 piling & add one 6 x 6 Replace decking under existing 3rd floor		
Permit Cost - \$85.00						
Planning Conditions:						
Flood Zone - X; Elevation -	LES=8' NAVD; Map#	- 3720987500K; Effect	ive - 06/19/2020			
The work authorized by this Governing Building Constru Any change in the work as s	ction in the State of N	North Carolina and ordin	nances adopted by the To	wk Zoning Restrictions and wown of Kitty Hawk.	ith the Laws	
Owner / Applicant	/ Contractor /	Agent		Date		
Building Official				Date	-	



Town of Kitty Hawk, NC 101 Veterans Memorial Drive Kitty Hawk, NC 27949 Phone: (252) 261-3552

PERMIT

Permit NO. **20463**Permit Type: Residential
Work Classification: [Permit Type]
Permit Status: Pending

Date

Issue Date: 11/19/2020

Expires: 05/18/2021

Dunings Adduses		Zanina		Subdivision		
Project Address 5133 The Woods Roa	d	Zoning BR-1		KITTY HAWK WOOD	S REVISED	
Lot	u	Block		PIN	3 KEVIOLD	
5		DIOCK		986607579979		
Flood Zone		Constuction	Type	Building Code		
X		Accessory S		BLDG2018		
Owner Information		Address	0.00000	Phone		
Todd W & Vanessa L Riddick		5133 The Wo	oods Road	252-455-4392		
		Kitty Hawk N	C 27949			
Applicant Informatio	n	Address		Phone		
Todd W Riddick		5133 The Wo	oods Road	252-455-4392		
		Kitty Hawk, N	NC 27949			
				Construction Cost:	12000.00	
				Unheated Sq. Feet	.00	
Contractor(s)	Phone	Contractor Type	License Number	_ Total Sq. Feet:	.00	
Owner	000-000-0000	General	00000			
Building Comments	<u>u</u> .			Description of Work: driveway and add 12 building		
Permit Cost - \$140.00						
Planning Conditions	s:					
Flood Zone - X; Elevation		p# - 372098660K; Effec	tive - 06/19/2020;			
The following item(s) are	required: As-Built Surv	ey due prior to Final Ins	spection;			
Setbacks - 25' Front & Re	ear; 10' Sides - Utility B	uilding cannot encroach	n into rear or side yard se	tbacks;		
Existing Lot Coverage - 2	4.92% or 6,542 sq ft -	Proposed Lot Coverage	- Not Provided - Owner's	s responsibility not to exceed	1 30%;	
If bottom of shed floor is b	pelow 8' NAVD, a minin	num of 2 flood vents ins	stalled at no greater than	1' from grade for each enclose	sure;	
The work authorized by th Governing Building Const Any change in the work as	ruction in the State of	North Carolina and ordin	nances adopted by the To	wk Zoning Restrictions and vown of Kitty Hawk.	vith the Laws	
Owner / Applican	t / Contractor	/ Agent		Date	, 0	



Town of Kitty Hawk, NC 101 Veterans Memorial Drive Kitty Hawk, NC 27949 Phone: (252) 261-3552

PERMIT

Permit NO. 20464

Permit Type: Residential Work Classification: [Permit Type] Permit Status: Pending

Date

Issue Date: 11/19/2020

Expires: 05/18/2021

Project Address 208 W Kitty Hawk Road Lot Unit 208 Flood Zone X Owner Information Joshua F Mullen & Vanessa Ashleigh Fede Applicant Information Josh Mullen		Remodeling Address de 208 W Kitty I Kitty Hawk N Address 208 W Kitty I	BR-2 Block Constuction Type Remodeling Address 208 W Kitty Hawk Road Kitty Hawk NC 27949		Subdivision OCEAN WINDS CONDOMINIUMS PIN 98750769129405 Building Code BLDG2018 Phone 252-455-6022 Phone 252-455-6022	
Contractor(s)	Phone	Contractor Type	License Number	Construction Cost: Unheated Sq. Feet Total Sq. Feet:	19300.00 .00	
TBD	000-000-0000	Electrical	00000	- 1907/11/11/11		
Owner	000-000-0000	General	00000			
TBD	000-000-0000	Plumbing	00000			
Building Comments:				Description of Work: kitchen and replace \$		
Permit Cost - \$260.00						
Planning Conditions:		07000075004 55	0040/0000			
Flood Zone - X; Elevation -	LES=8' NAVD; Map#	7 - 3720987500K; Effect	live - 06/19/2020			
The work authorized by this Governing Building Constru Any change in the work as	uction in the State of	North Carolina and ordin	nances adopted by the To	wk Zoning Restrictions and wown of Kitty Hawk.	vith the Laws	
Owner / Applicant	/ Contractor	/ Agent		Date		



Town of Kitty Hawk, NC 101 Veterans Memorial Drive Kitty Hawk, NC 27949

Phone: (252) 261-3552

PERMIT

Permit NO. 20465

Permit Type: Residential Work Classification: [Permit Type]

Permit Status: Pending

Issue Date: 11/19/2020

Expires: 05/18/2021

Main Permit: Main Permit

Subdivision Project Address Zoning KITTY HAWK BEACH REV SEC A 4806 N Virginia Dare Trail BR-1 PIN Block Lot 987606372840 Flood Zone **Constuction Type Building Code** VE Addition BLDG2018 Owner Information Address Phone 179 Point Heron Dr 757-880-7141 David Belote Faith Belote Newport News VA 23606 Address Phone Applicant Information **Evans Homes LLC** 5121 Winsor Place 252-207-8127

				Construction Cost: Unheated Sq. Feet	7375.00 120.00
Contractor(s)	Phone	Contractor Type	License Number	_ Total Sq. Feet:	.00
Evans Homes, LLC	252-255-5552	General	49040		
					4.1.140

Kitty Hawk, NC 27949

Building Comments:

Description of Work: Add 10 x

12 deck

Permit Cost - \$130.00

The following items are required: Termite Affidavit due prior to Final Inspection;

Planning Conditions:

Flood Zone - VE; Elevation - 13'+1'=14'; Map# - 3720987600J; Effective 06/19/2020;

The following items are required: Finished Construction V-Zone Certificate due prior to Final Inspection; As-Built Survey due prior to Final Inspection;

Setbacks - 25' Front & Rear; 10' Side

There shall be no alteration of sand dunes which would increase potential flood damage; There shall be no fill used for structural support; No solid risers below 14' NAVD 88;

The work authorized by this permit is to be performed in accordance with the applicable Kitty Hawk Zoning Restrictions and with the Laws Governing Building Construction in the State of North Carolina and ordinances adopted by the Town of Kitty Hawk.

Any change in the work as specified is subject to prior approval of the Building Inspector.

Owner	1	Applicant	/ Contractor	1	Agent	Date	
Building	g O	fficial				Date	



Town of Kitty Hawk, NC 101 Veterans Memorial Drive Kitty Hawk, NC 27949 Phone: (252) 261-3552

PERMIT

Permit NO. 20467

Date

Permit Type: Residential
Work Classification: [Permit Type]
Permit Status: Pending

Issue Date: 11/24/2020

Expires: 05/23/2021

Project Address 4521 Lindbergh Avenue Lot 22 Flood Zone AH Owner Information Scott G & Kristine M Thomas Applicant Information lan Goblet		Zoning BR-1 Block 27 Constuction Type Repair/Replace Address 3594 Beeler Street Denver CO 80238 Address 115 W Mobile Road Harbinger, NC 27941		Subdivision KITTY HAWK BEACH REV SEC A PIN 987610451736 Building Code BLDG2018 Phone 720-298-2540 Phone 252-489-1374	
Contractor(s)	Phone	Contractor Type	License Number	Construction Cost: Unheated Sq. Feet Total Sq. Feet:	20000.00
lan Goblet	252-489-1374	General	00000	_ 101 0 41.7 0 0 11.	1
Building Comments	<u>5:</u>			Description of Work: and replace handrail decking - No change	s, stairs and
Permit Cost - \$155.00					
Planning Condition	<u>s:</u>				
Flood Zone - AH; Elevation	on - 9'+1'=10'; Map# - 3	37208987600K; Effective	e - 06/19/2020		
The work authorized by the Governing Building Constant Any change in the work a	truction in the State of	North Carolina and ordin	nances adopted by the T	wk Zoning Restrictions and vown of Kitty Hawk.	vith the Laws
Owner / Applicar	nt / Contractor	/ Agent		Date	-



PERMIT

Permit NO. **20460**Permit Type: Residential
Work Classification: [Permit Type]
Permit Status: Pending

Issue Date: 11/18/2020

Expires: 05/17/2021

Building Official				Date	-	
Owner / Applicant	/ Contractor /	Agent		Date		
The work authorized by this Governing Building Constru Any change in the work as s	ction in the State of N	North Carolina and ordi	nances adopted by the T	wk Zoning Restrictions and wi own of Kitty Hawk.	th the Laws	
Planning Conditions: Flood Zone - X; Elevation -		- 3720987500K; Effec	tive - 06/19/2020			
Permit Cost - \$40.00						
Building Comments:	(202)	Liodina	2,011 61 61 51	Description of Work: I temp pole for new SFF		
Bryan Oroson Electric	(252)441-3771	Electrical	24814-SP-SFD	_ ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		
Contractor(s)	Phone	Contractor Type	License Number	Construction Cost: Unheated Sq. Feet Total Sq. Feet:	370.00 .00	
, indiao ochonación oc	mpany 220	Kitty Hawk, N				
Applicant Information Andrus Construction Co		Address 4140 Thick F	Ridge Drive	Phone 252-261-7903		
		Kitty Hawk N	IC 27949			
Tracey N Stephen P Sc	udieri	3935 Parker	Street	Thone		
X Owner Information		Temp Pole Address		NEC2017 Phone		
Flood Zone		Constuction	т Туре	Building Code		
12B		С		987507596856		
Lot		Block		ADD PIN		
3935 Parker Street		BR-2		TED WOOD KITTY HA	WK TERR	
Project Address		Zoning		Subdivision		



Town of Kitty Hawk, NC 101 Veterans Memorial Drive

Kitty Hawk, NC 27949 Phone: (252) 261-3552 PERMIT

Permit NO. 20349
Permit Type: Residential

Work Classification: [Permit Type]

Permit Status: Pending

Issue Date: 11/02/2020

Expires: 05/01/2021

Main Permit: Main Permit

Subdivision **Project Address** Zoning KITTY DUNES VILLAGE 3621 Rabbit Hollow BR-1 PIN Lot Block 987512850886 **Constuction Type Building Code** Flood Zone **BLDG2018** Solar Panels Phone **Owner Information** Address 104 BOWERS DR SAMUEL THOMAS JENNINGS HORSEHEADS NY 14845 Phone Applicant Information Address

Powerhome Solar LLC 919 N Main Street 919-300-7976

Mooresville, NC 28115

Contractor(s)	Phone	Contractor Type	License Number	Construction Cost: Unheated Sq. Feet Total Sq. Feet:	.00 .00
Power Home Solar, LLC	704-800-6780	Electrical	26074-U		
Power Home Solar/ResComm Development LLC	704-635-2144	General	60946		

Building Comments:

Description of Work: Install 20 ground mounted solar panelts, mounted modules, grid tied with a 6.40 KW;

Permit Cost - \$315.00

Planning Conditions:

Flood Zone - X; Elevation - LES=8' NAVD; Map# - 3720987500K; Effective - 06/19/2020;

Setbacks - 25' front & rear; 10' side;

ALL ATTENDANT UTILITIES MUST BE ABOVE 8' NAVD;

If can be field verified that the solar arry does not encroach setbacks then, an As-Built Survey may be waived.

The work authorized by this permit is to be performed in accordance with the applicable Kitty Hawk Zoning Restrictions and with the Laws Governing Building Construction in the State of North Carolina and ordinances adopted by the Town of Kitty Hawk.

Any change in the work as specified is subject to prior approval of the Building Inspector.

Owner	1	Applicant	/ Contractor	1	Agent	Date	
Building	9 O	fficial				Date	



PERMIT

Permit NO. 20434
Permit Type: Residential
Work Classification: [Permit Type]
Permit Status: Pending

Issue Date: 11/02/2020

Expires: 05/01/2021

Building Official				Date		
Owner / Applicant	/ Contractor /	Agent		Date		
The work authorized by this Governing Building Construct Any change in the work as s	ction in the State of N	North Carolina and ordin	nances adopted by the To	wk Zoning Restrictions and wi own of Kitty Hawk.	th the Laws	
Planning Conditions: Flood Zone - AE; Elevation -	- 4' + LES=8' NAVD;	Map#-3720986500K; E	iffective - 06/19/2020			
Permit Cost - \$45.00						
Building Comments:				Description of Work: I line for gas range	Run gas	
Outer Banks LP Gas & Appliance	(252)473-3200	Fuel Piping	21896			
Contractor(s)	Phone	Contractor Type	License Number	_ Total Sq. Feet:	.00	
				Construction Cost: Unheated Sq. Feet	.00	
		Kill Devil Hills	s, NC 27948			
Outer Banks LP Gas & Appliance - Ted Moseley		538 Parkwoo	d Drive	252-305-1905		
Applicant Information		Address		Phone		
James W & Margaret B	Caldwell	4000 Tarkle I Kitty Hawk N				
Owner Information	0.11	Address	Dida - Dalisa	Phone		
AE		Fuel Piping	1,400	PIN 986511559226 Building Code FUEL2018		
65 Flood Zone		Constuction	Type			
4000 Tarkle Ridge Road Lot		VR-1 Block				
Project Address		Zoning		Subdivision KITTY HAWK LANDING SEC 5		



PERMIT

Permit NO. **20436**Permit Type: Residential
Work Classification: [Permit Type]
Permit Status: Pending

Issue Date: 10/29/2020

Expires: 04/27/2021

Project Address		Zoning		Subdivision		
5025 N Virginia Dare Tra	ail	BC-1		KITTY HAWK BEACH REV SEC A PIN		
Lot		Block				
				987605294857		
Flood Zone		Constuction		Building Code		
VE		Repair/Repla	ace	MECH2018		
Owner Information		Address		Phone		
RONALD PAUL DENTO	N	4 INGRAM E				
		HEATHSVIL	LE VA 22473			
Applicant Information		Address		Phone		
Dusty Rhoads HVAC Inc		3822 Elijah E		252-261-5892		
		Kitty Hawk, N	NC 27949			
				Construction Cost:	5885.00	
				Unheated Sq. Feet	.00	
Contractor(s)	Phone	Contractor Type	License Number	_ Total Sq. Feet:	.00	
TBD	000-000-0000	Electrical	00000			
Dusty Rhoads HVAC, Inc.	(252)261-5892	Mechanical	21691			
Building Comments:				Description of Work: change out of a 2.5 to		
Permit Cost - \$50.00					7 2 100	
Planning Conditions:						
Flood Zone - VE; Elevation	- 11'+1'=12'; Map# -	3720987600K; Effective	e - 06/19/2020			
The work authorized by this Governing Building Construc Any change in the work as s	ction in the State of I	North Carolina and ordin	nances adopted by the T	wk Zoning Restrictions and w own of Kitty Hawk.	ith the Laws	
Owner / Applicant	/ Contractor /	Agent		Date	2	
Building Official				Date	7	



PERMIT

Permit NO. **20443**Permit Type: Commercial
Work Classification: [Permit Type]
Permit Status: Pending

furnished by Walgreens

Issue Date: 11/04/2020

Expires: 05/03/2021

Main Permit: Main Permit

	Greenville, NC 27834	
American Facility Solutions - John White	102 D Staton Court	252-752-9165
Applicant Information	Address	Phone
	HARRISBURG PA 17105	
BERMUDA GREENS ASSOCIATES INC null	PO BOX 3165	
Owner Information	Address	Phone
X	Commercial - Remodel/Repair	MECH2018
Flood Zone	Constuction Type	Building Code
A		987717017167
Lot	Block	PIN
5312 N Virginia Dare Trail	BC-2	BERMUDA GREENS
Project Address	Zoning	Subdivision

Contractor(s)	Phone	Contractor Type	License Number	Construction Cost: Unheated Sq. Feet _ Total Sq. Feet:	.00 .00
1 American Facility Solutions LLC	252-752-9165	Electrical	31648		
1 American Facility Solutions LLC	252-752-9165	Mechanical	30305		
Building Comments:				Description of Work: change out of one 4 to three 12.5 ton roof to New mechanical units	on and o units;

Permit Cost - \$200.00

Planning Conditions:

Flood Zone - X; Elevation - LES =8' NAVD; Map# - 3720987700K; Effective - 06/19/2020

The work authorized by this permit is to be performed in accordance with the applicable Kitty Hawk Zoning Restrictions and with the Laws Governing Building Construction in the State of North Carolina and ordinances adopted by the Town of Kitty Hawk.

Any change in the work as specified is subject to prior approval of the Building Inspector.

Owner / Applicant	/ Contractor / Agent	Date	
Building Official		Date	_



Town of Kitty Hawk, NC 101 Veterans Memorial Drive Kitty Hawk, NC 27949 Phone: (252) 261-3552

PERMIT

Permit NO. 20456 Permit Type: Residential Work Classification: [Permit Type] Permit Status: Pending

Date

Issue Date: 11/16/2020

Expires: 05/15/2021

Project Address		Zoning		Subdivision	
2405 Neptune Way		BR-2		SANDPIPER CAY CO	NDOS PH 23
Lot		Block		PIN	
Unit 2405 Bldg2400				98761831835705	
Flood Zone		Constuction	т Туре	Building Code	
X		Repair/Repla	ace	MECH2018	
Owner Information		Address		Phone	
Charles H Knight C/O Je	an-Louise Dixon	P O Box 750			
		Avon NC 279	915		
Applicant Information		Address		Phone	
American Refrigeration &	& Heat Pump LLC	P O Box 835		252-715-3335	
		Nags Head,	NC 27959		
	4 - 4 - 4 - 4 - 4 - 4 - 4 - 4 - 4 - 4 -			Construction Cost:	6000.00
				Unheated Sq. Feet	.00
Contractor(s)	Phone	Contractor Type	License Number	_ Total Sq. Feet:	.00
Hask Electric, LLC	252-455-0353	Electrical	14104		
American Refrigeration					
& Heat Pump Repair	(252) 715-3335	Mechanical	15578		
L.L.C.					
Building Comments:				Description of Work: change out of a 2 ton	
Permit Cost - \$50,00					
Planning Conditions:					
Flood Zone - X; Elevation - L	ES=8' NAVD; Map#	- 3720987600K; Effect	tive - 06/19/2020		
The work authorized by this Governing Building Construction Any change in the work as s	tion in the State of N	lorth Carolina and ordin	nances adopted by the To	wk Zoning Restrictions and wown of Kitty Hawk.	ith the Laws
Owner / Applicant	/ Contractor /	Agent		Date	-



PERMIT

Permit NO. **20457**Permit Type; Residential
Work Classification: [Permit Type]
Permit Status: Pending

Issue Date: 11/16/2020

Expires: 05/15/2021

Main Permit: Main Permit

1

Project Address	Zoning	Subdivision
4628 Seascape Drive	BR-1	SEA SCAPE SEC
Lot	Block	PIN
338		987609264077
Flood Zone	Constuction Type	Building Code
X	Mechanical	MECH2018
Owner Information	Address	Phone
Outer Banks Blue LLC; Att: timothy M Cafferty	P O Box 1220	252-255-1220
	Kitty Hawk NC 27949	
Applicant Information	Address	Phone
Atlantic Heating & Cooling LTD	P O Box 132	252-441-7642
	Kill Devil Hills, NC 27948	

Contractor(s)	Phone	Contractor Type	License Number	Construction Cost: Unheated Sq. Feet Total Sq. Feet:	.00 .00
TBD	000-000-0000	Electrical	00000		
OBX3-2 LLC dba Atlantic Heating & Cooling Ltd	(252)441-7642	Mechanical	34340		

Building Comments:

Description of Work: Install a ductless mini-split system for sunroom - 17 SEER 12,000 BTU

system

Permit Cost - \$96.00

Planning Conditions:

Flood Zone - X; Elevation - LES=8' NAVD; Map# - 3720987600K; Effective - 06/19/2020

The work authorized by this permit is to be performed in accordance with the applicable Kitty Hawk Zoning Restrictions and with the Laws Governing Building Construction in the State of North Carolina and ordinances adopted by the Town of Kitty Hawk.

Any change in the work as specified is subject to prior approval of the Building Inspector.

Owner	/ Ap	plicant	/ Contractor	1	Agent	Date
Building	o Offici	ial				Date



Town of Kitty Hawk, NC 101 Veterans Memorial Drive Kitty Hawk, NC 27949 Phone: (252) 261-3552

PERMIT

Permit NO. 20458 Permit Type: Residential Work Classification: [Permit Type] Permit Status: Pending

Date

Issue Date: 11/16/2020

Expires: 05/15/2021

Owner / Applicant	/ Contractor /	Agent		Date		
The work authorized by this Governing Building Constru Any change in the work as s	ction in the State of N	North Carolina and ordin	nances adopted by the To	wk Zoning Restrictions and w own of Kitty Hawk.	ith the Laws	
Flood Zone - AE; Elevation	4' + LES=8' NAVD; N	Лар# - 3720986500K; Е	ffective - 06/19/2020			
Planning Conditions:						
Permit Cost - \$50,00						
Building Comments:				Description of Work: change out of a 2 ton system for downstain	split	
All Seasons Heating & Cooling, Inc.	(252)491-9232	Mechanical	19091			
TBD	000-000-0000	Electrical	00000			
Contractor(s)	Phone	Contractor Type	License Number	_ Total Sq. Feet:	.00	
				Construction Cost: Unheated Sq. Feet	6180.00	
		Point Harbor				
Applicant Information All Seasons Heating & 0	Cooling Inc	Address P O Box 244		Phone 252-491-9232		
		Cary NC 275	513	Di		
Francis L & Camille E L	ambe	206 Torry Pir	nes Drive			
Owner Information		Address		Phone		
Flood Zone AE		Constuction Repair/Repla		Building Code MECH2018		
1		0	-	986506483194		
Lot		Block		PIN		
4164 Dowdy Lane		VR-1		AVERY ISLE		
Lot				PIN		

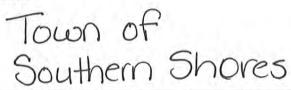
Issued Trade and DPA Monthly Permit Log

From Date:

11/02/2020

To Date:

11/30/2020



To Date:		11/30/2020		Obd men of the					
Date	Permit#	Project Address	Owner Name	Contractor	Use	Permit Type	Work Description	Permit Cost	Total Project Cost
11/02/2020	TP20- 000164	323 HILLCREST DR	BERRY, GEORGE H TRUSTEES	North Carolina Air Conditioning, Inc.	R	М	Remove and Replace 3.5T HVAC System	100.00	9,400.00
11/02/2020	DPA20- 000154	169 S DOGWOOD TRL	RIES, CHARLES P	Intrepidd Construction Inc., T/A Piddington Construction	R	R	ADDITION: Screen porch addition	110.00	27,000.00
11/03/2020	DPA20- 000163	1 KINGFISHER CT	WHITE, LINDA S	Soundside Construction Corp.	R	R	REMODEL: Remodel 2 interior bathrooms	260.00	25,000.00
11/04/2020	TP20- 000172	5 TENTH AVE	ELYSIAN LLC	Delta T Heating & Air Conditioning, Inc	R	М	MECHANICAL: Labor and materials to replace existing lower level unit with a 3 ton indoor/outdoor system as well as upper west system with a 3 ton indoor/outdoor system	100.00	14,800.00
11/04/2020	DPA20- 000102	125 CLAM SHELL TRL	HEERMANN, HENRY F HEERMANN, PAMELA H		R		ADDITION - convert unfinished space in ground floor workshop into 138 sq ft heated living space as an office. AMENDED 11-4-2020 to finish off workshop area. Additional 192 sq. ft. of finished space.		0.00
11/09/2020	DPA20- 000168	127 PUDDING PAN LN	LEWIS, JEREMY SHANNON	Caribbean Pool and Spa of the Outer Banks, Inc	R	R	ACCESSORY: Install inground 14' x 30' pool with required electrical and fencing	125.00	40,195.00
11/09/2020	DPA20- 000165	304 SEA OATS TRL	BACHHUBER, MARTIN H	Finch & Company,	R	R	ADDITION: Expand ground	334.00	75,000.00

				Inc			floor enclosure, add bathroom and heated storage room. No increase in footprint and no increase in sleeping capacity.		
11/09/2020	DPA20- 000166	133 TALL PINE LN	ROHAN, CHRISTOPHER R	Finch & Company, Inc	R	R	ACCESSORY: Add pool, pergola, and deck on grade per site plan. Replace septic and reconfigure driveway to comply with lot coverage requirements.	358.10	125,000.00
11/10/2020	DPA20- 000167	27 NORTH DUNE LOOP	HORN, JAMES F TTEE	Emanuelson & Dad, Inc.	R	R	ACCESSORY: Vinyl Bulkhead	100.00	29,520.00
11/10/2020	DPA20- 000164	172 DUCK RD	EQUITY TRUST CO CUSTODIAN FBO	Darrell Marshall	R	R	ADDITION: Frame covered porch	100.00	8,800.00
11/13/2020	DPA20- 000173	14 FIRST AVE	OSTERGREN, STEVEN E	Stan White Realty and Construction	R	R	Convert existing 8'x21' deck area to heated living area	110.80	55,792.00
11/16/2020	DPA20- 000169	6 ELEVENTH AVE	ELLIS, MARTHA ANNE TRUSTEE OF THE	KJ Construction and Remodeling, Co.	R	R	REMODEL: Renovation/update of 3 existing bathrooms	210.00	19,500.00
11/16/2020	DPA20- 000172	18 SEVENTH AVE	PENROSE, ROBERT L JR		R	R	ADDITION: Add 10' x 10' deck, 4' x 3' deck	100.00	2,000.00
11/17/2020	DPA20- 000170	3 REDBAY LN	TCHALEKIAN, KEVORK	Northeastern Marine	R	R	ACCESSORY: Install 16X16 dock (4 ft. over water and 12 ft. over land)	100.00	5,000.00
11/17/2020	DPA20- 000155	15 TENTH AVE	NIENABER, ERIK J	Four Seasons Pool Builders	R	R	ACCESSORY: New Swimming Pool	125.00	29,500.00
11/17/2020	TP20- 000174	175 CHICAHAUK TRL	HEISEY, JACOB A	Atlantic Heating & Cooling, LTD	R	М	Replace HVAC Equipment - 2 systems	100.00	11,550.00
11/17/2020	TP20- 000176	248 OCEAN BLVD	KREISER, CHRISTOPHER		R	E	ELECTRICAL: Replace roof deck and install solar on roof. Increase	100.00	20,000.00

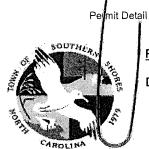
12/1/2020				Query			house service to 400 amp		
11/17/2020	TP20- 000177	5500 N CROATAN HWY	SOUTHERN SHORES OWNER, LLC	Kreiser Electric Inc		E	ELECTRICAL: Add 6 receptacles and move 2 switches and 1 receptacle. AFFORADABLE OPTICAL LOCATED AT 5569 N. CROATAN HWY.	100.00	0.00
11/17/2020	TP20- 000178	185 S DOGWOOD TRL	BEATY, KATHLEEN BAUMANN TTEE OF THE	R.A. Hoy Heating & A/C	R	М	DUCT REPLACEMENT GROUND LEVEL	100.00	12,600.00
11/18/2020	TP20- 000179	277 WAX MYRTLE TRL	KERSEY, KATHARINE C TRUSTEES	R.A. Hoy Heating & A/C		M	C/O 3 TON 16 SEER TRANE SYSTEM LOWER LEVEL WITH T-6 WIFI THERMOSTAT	100.00	7,851.00
11/18/2020	TP20- 000180	3 MOCKINGBIRD LN	KOHLER, WILLIAM L JR	R.A. Hoy Heating & A/C		М	C/ 4 TON 16 SEER TRANE SYSTEM WHOLE HOUSE WITH T-6 THERMOSTAT	100.00	7,900.00
11/18/2020	DPA20- 000159	82 POTESKEET TRL	KRANDA, JAMES L	JES Construction, LLC	R	R	REPAIR: Stabilize foundation using Push Piers	110.00	5,000.00
11/19/2020	TP20- 000175	35 NORTH DUNE LOOP	LADELL, PAULA J	North Beach Services Heating and Cooling	R	М	Replace HVAC system with Trane 14 Seer, 4 ton heat pump and matching air handler. Replacement of lower system with Trane 14 see 3 ton heat pump and matching air handler	100.00	12,000.00
11/19/2020	TP20- 000173	to the second of the second control of	WIELOBOB, STANLEY G JR	North Beach Services Heating and Cooling	R	М	Replace HVAC system with Trane 14 Seer 3 ton heat pump and matching air handler	100.00	6,000.00
11/19/2020	TP20- 000171	Control of the Contro	ARNOLD, REBECCA	Angel Advanced	R	E	Add lighting	100.00	4,500.00

12/1/2020				Query To	ool Ne	ew.			
				Technologies, LLC					
11/19/2020	DPA20- 000175	175 HAPPY INDIAN LN	LASHLEY, KARA	Mark Buckler	R	R	Bathroom Remodel	100.00	7,000.00
11/20/2020	DPA20- 000177	24 FIRST AVE	EBBANDFLOW LLC		R	R	ADDITION: Enclose existing carport under house for use as an art room/pilates/yoga room.	114.00	6,000.00
11/20/2020	DPA20- 000174	40 GINGUITE TRL	FARVER, TED A	Emanuelson & Dad, Inc.	R	R	ACCESSORY: 275' pier with 15x25 platform with partial hip roof and boatlift	100.00	78,643.00
11/20/2020	TP20- 000181	70 E DOGWOOD TRL	HAMLEY, JONATHON C TTEE	R.A. Hoy Heating & A/C		M	C/O 2 TON 16 SEER TRANE SYSTEM TOP LEVEL WITH XL724 THERMOSTAT	100.00	6,713.00
11/24/2020	TP20- 000182	70 E DOGWOOD TRL	HAMLEY, JONATHON C TTEE	R.A. Hoy Heating & A/C		M	DUCT REPLACEMENT GROUND LEVEL	100.00	6,911.00
11/25/2020	DPA20- 000179	267 DUCK RD	CHANDLER, MARY C	Snearer Construction, Inc	R	R	ADDITION Build a 12'x24' in line additon off the rear of existing house. 7'x12' of which will be a new bathroom	154.00	70,000.00
Total All Permits	31							4,026.10	729,175.00
Development Permit Application	18							2,726.10	608,950.00
Trade Permit	13							1,300.00	120,225.00
Total Commercial	0							- 1	
Total Residential	26							3,526.10	699,800.00

10/22/2020

TOWN OF SOUTHERN SHORES PLANNING AND CODE ENFORCEMENT

5375 N Virginia Dare Trail, Southem Shores, NC 27949 (252) 261-2394 - Office (252) 255-0876 - Fax www.southemshores-nc.qov



Residential Trade Contractor Permit

Date October 22, 2020

ΤI	P20	-000	16	4		
	1-		- 1	T	 D	

Project Address: 323 HILLCREST DR	DIN #	029134000		
Property Owner: BERRY, GEORGE H TRUSTEE		239 N DOGWOOD TRL SOUTHERN SHORES, NC 27949		
Permit Types: Plumbing Electrical Mechanical Contractor:	☐ Gas			
Company Name: North Carolina Air Conditioning	, Inc.	Qualifier: Pat King		
Phone: 252-261-3013		Address: P.O. Box 2209		
N. C. License Number: 19037		Kitty Hawk, NC 27949		
Description of Work: Remove and Replace 3.	5T HVAC System	*		
Project Cost Estimate: \$9,400.00 Per	mit Amount: 100.00			

I hereby certify that all information in this application is correct and all work will comply with the State Building Code and all

other local laws and ordinances and regulations. The Inspection Department will be notified of any changes in the

Patricia N. Kux 10/30/20

approved plans and specification for the project permitted herein.

Signature of Licensee or Duly Authorized Reptesentative

Signature of Permit Official

Date

Owner:

Address:

Phone #:



TOWN OF SOUTHERN SHORES PLANNING AND CODE ENFORCEMENT

5375 N Virginia Dare Trail, Southern Shores, NC 27949 (252) 261-2394 Ext 4 - Office (252) 255-0876 - Fax www.southernshares-nc.gov

RESIDENTIAL **BUILDING/FLOODPLAIN** DEVELOPMENT PERMIT

RIES, CHARLES P

7033143438

5027 RENO RD NW

WASHINGTON, DC 20008

BUILDING PERMIT # DPA20-000154

Parcel:	
PIN:	

021722000 986817108344

169 S DOGWOOD TRL

Location: District: RS1 - Single Family Residential District SO/SH SOUND 110 111 120 121 Subdiv

Lot-Block-Sect:

BUSINESS NAME:

LOT: 2 BLK: 121 SEC:

CONTRACTOR'S NAME:

ADDRESS: CITY, STATE, ZIP:

OFFICE#: CELL# FAX#: EMAIL:

Intrepidd Construction Inc., T/A Piddington

Construction Mike Piddington 2 Ginguite Trail Kitty Hawk, NC 27949

(252) 207-1122

mikelmia@gmail.com

NC G.C. LICENSED CONTRACTOR:

NC G.C. LICENSE NUMBER:

LIMITATION: **CLASSIFICATION:** QUALIFIER:

LIEN AGENT NAME: ENTRY#:

LIEN AGENT ADDRESS:

Licensed General Contractor

52198 Limited Building

Michael S. Piddington Chicago Title Company, LLC

1334579

223 S, WEST STREET, SUITE 900, RALEIGH, NC 27603

DESCRIPTION OF WORK - (Any deviation from the Building Plan or Site Plan requires prior approval): Install base pilings & framing of new covered screened porch equal to size of existing porch. New roofing on porch roof & new vinyl soffit to match existing. Install of vinyl ceiling, install of electrical in new porch area including ceiling fan & 2 receptacles. New grill area porch to be built & stairs connecting to stone walkway. New railings on all decks. Replace 2 screen doors & paint interior & railings white **SPECIAL CONDITIONS -**

TYPE OF CONSTRUCTION: New Construction	on - Addition / Expansion - Remodel / Renova	tion / Repair - Accessory - Other					
Bulkhead - Piers/Docks - Retaining Wall - Beach Access Walkway/Stairs - Swimming Pools - Workshop - Gazebo							
Detached Garage Accessory Storage Building Dune Deck Generator							
OCCUPANCY:	TYPE OF FOUNDATION:	PERMIT TYPE: Residential					
HEATED/LIVING AREAS (SqFt): 0.0	HEAT:	RESIDENCE TYPE: Residence					
NON-HEATED AREAS (SqFt): 168	A/C:	BUILDING USE: Single Family					
NUMBER OF STORIES:		ZONING DISTRICT: RS1 - Single Family Residential District					
BEDROOMS:	EXTERIOR WALLS:	ZONING PERMIT #:					
SEPTIC CAP. # OF PERSONS:	FIREPLACE:	DATE APPROVED:					
BATHS: ½BATHS:	ROOF:	PERMITTED/CONDITIONAL USE: Single Family Dwelling					
GARAGE - DETACHED: ATTACHED:	INSULATION:	CAMA PERMIT #:					
STORAGE ENCLOSURE:	ELEVATOR (SqFt):	DATE ISSUED:					
POOL: SHED:	DECKS (SqFt):						
FLOOD ZONE: Unshaded X	WINDOWS MAKE:	SEPTIC PERMIT #: 30143					
BASE FLOOD ELEVATION: PLUS 3FT or LES 8ft	WINDOWS TYPE:	DATE ISSUED: 10/29/2020					

TOTAL CONSTRUCTION COS	ST: \$27,000.00
PERMIT FEES:	
Description	Total Cost
Non-Heated Areas Fee (Single Family)	50,40
Homeowners Recovery Fund	10.00
Minimum Permit Fee	49.60
	TOTAL FEE: 110 00

***The owner and builder are responsible to comply with all regulations and laws; should personally inspect all construction and be certain to comply with all Ordinances of the Town of Southern Shores. The applicant certifies that the information on this permit is correct; that he/she is the owner or duly authorized agent of owner; that all construction shall be as shown on the submitted plans and specifications; the he/she understands this permit is valid for 180 days to begin construction and may be revoked for fail/urg to comply with applicable regulations and laws.

Applicant - Owner/Contractor

(Please print and sign name)

10/30/2020

Date Approved

Building/Code/Zoning Official



5375 N Virginia Dare Trail, Southern Shores, NC 27949 (252) 261-2394 Ext 4 - Office (252) 255-0876 - Fax www.southernshores-nc.gov

RESIDENTIAL BUILDING/FLOODPLAIN DEVELOPMENT PERMIT

Parcel: PIN: Location: District: Subdiv Lot-Block-Sect:	1 KING RS1 - SO/SH	9173042 3FISHER CT Single Family Resid	173042 FISHER CT ngle Family Residential District BLK 61-A LOTS 1-25 PH 1		WHITE, LINDA S 1 KINGFISHER CT SOUTHERN SHORES, NC 27949	
BUSINESS NAME: Soundside Constru CONTRACTOR'S NAME: Sam Moore ADDRESS: P.O. Box 956 CITY, STATE, ZIP: Manteo, NC 27954 OFFICE#: (252) 305-2526 CELL# FAX#: sam@mooreisland		·	NC G.C. LICENSED CONTRACTOR: NC G.C. LICENSE NUMBER: LIMITATION: CLASSIFICATION: QUALIFIER: LIEN AGENT NAME: ENTRY#: LIEN AGENT ADDRESS:			
DESCRIPTION OF W SPECIAL CONDITION	ORK - NS -	(Any deviation fron	n the Building Plan or Si	ite Plan requires prior	approval): Remodel 2 interior bathrooms	
Bulkhead - P Detached Garage	iers/Doc	ks - 🔲 Retaining W	all - Beach Access Walling - Dune Deck -	alkway/Stairs - Swin	ovation / Repair - Accessory - Other aming Pools - Workshop - Gazebo	
OCCUPANCY:			TYPE OF FOUNDATION	l:	PERMIT TYPE: Residential	
HEATED/LIVING ARE	AS (Sc	[Ft]: 0.0	HEAT:		RESIDENCE TYPE: Residence	
NON-HEATED AREA	S (SqFt	:): 0	A/C:		BUILDING USE: Single Family	
NUMBER OF STORIE	is:		INTERIOR WALLS:		ZONING DISTRICT: RS1 - Single Family Residential District	
BEDROOMS:			EXTERIOR WALLS:		ZONING PERMIT #:	
SEPTIC CAP. # OF PI	ERSON	S:	FIREPLACE:		DATE APPROVED:	
BATHS: ½ BATHS:			ROOF:		PERMITTED/CONDITIONAL USE: Single Family Dwelling	
GARAGE - DETACHE		TACHED:	INSULATION:		CAMA PERMIT #:	
STORAGE ENCLOSU	RE:		ELEVATOR (SqFt):		DATE ISSUED:	
POOL: SHED:			DECKS (SqFt):			
FLOOD ZONE: Unsha	ided X		WINDOWS MAKE:		SEPTIC PERMIT #:	
BASE FLOOD ELEVA	TION:	LES 8ft	WINDOWS TYPE:		DATE ISSUED:	
•						
	***************************************		TOTAL CONSTRUCT	ION COST: \$25,000.00		
PERMIT FEES: Description Remodel / Renovation / Homeowners Recovery	Repair I Fund	Fee		•	Total Cost 250.00 10.00 TOTAL FEE: 260.00	
duly authorized agent of a days to be	ne row of owner	n of Southern Shore: r: that all constructio	s. The applicant certifies	that the information on he submitted plans and	y inspect all construction and be certain to comply this permit is correct; that he/she is the owner or specifications: the he/she understands this posmit is	
Jan A	1/00	<u>,, </u>	\bigvee ι		11/02/2020	
Applicant - Owner/Co	ntracto	r 1 ,	(Please print a	and sign name)	Date Approved	
Budder S	H	tas			11-3-20	
Building/Gode/Zoning	Officia	i			Date Issued	

5375 N Virginia Dare Trail, Southern Shores, NC 27949 (252) 261-2394 - Office (252) 255-0876 - Fax www.southernshores-nc.gov



Residential Trade Contractor Permit

Date November 04, 2020

TP20-000172 **Mechanical Trade Permit**

Project Address: 5 TENTH AVE

Property Owner: ELYSIAN LLC

PIN #: 021216000

Mailing Address: PO BOX 1804

MIDDLEBURG, VA 20118

Permit Types:

Plumbing Contractor:

Electrical

Mechanical

Gas

Company Name: Delta T Heating & Air Conditioning, Inc

Phone: (252) 261-0404

N. C. License Number: 23299

Qualifier: Edwin Miller

Address: 162 Yaupon Trail

Kitty Hawk, NC 27949

Description of Work:

MECHANICAL: Labor and materials to replace existing lower level unit with a 3 ton indoor/outdoor system as well as upper west system with a 3 ton indoor/outdoor system

Project Cost Estimate: \$14,800.00

Permit Amount: 100.00

Payment:

Date

Type Reference Receipt ReceivedFrom Amount

11/04/2020 Check 9543

0

Edwin Miller

100.00

I hereby certify that all information in this application is correct and all work will comply with the State Building Code and all other local laws and ordinances and regulations. The Inspection Department will be notified of any changes in the approved plans and specification for the project permitted herein.

Authorized Representative



5375 N Virginia Dare Trail, Southern Shores, NC 27949 (252) 261-2394 Ext 4 - Office (252) 255-0876 - Fax www.southernshores-nc.gov

RESIDENTIAL BUILDING/FLOODPLAIN DEVELOPMENT PERMIT

Parcel: PIN: Location: District: Subdiv Lot-Block-Sect:	026787000 986707774533 125 CLAM SHELL TRL RS1 - Single Family Resid CHICAHAUK LOT: 76 BLK: SEC:	ential District	Owner: Address: Phone #:	HEERMANN, HENRY F HEERMANN, PAMELA H 9211 CLEARSTREAM TER MECHANICSVILLE, VA 23116 8049550688
BUSINESS NAME:			NC G.C. LICENSE	D CONTRACTOR:
CONTRACTOR'S NA	HEERMANN, HEN	RY F HEERMANN,	NC G.C. LICENSE	
ADDRESS:	PAMELA H			NOMBER:
CITY, STATE, ZIP:			LIMITATION: CLASSIFICATION:	
OFFICE#:	804-955-0688		QUALIFIER:	
CELL# FAX#:	804-955-0688		LIEN AGENT NAM	
EMAIL:			ENTRY#: LIEN AGENT ADD	n/a RESS:
ground floor workshol space. SPECIAL CONDITIO	p into 138 sq ft heated living	space as an office. AME	NDED 11-4-2020 to fir	or approval): ADDITION - convert unfinished space in nish off workshop area. Additional 192 sq. ft. of finished
				enovation / Repair - Accessory - Other
Bulkhead -	Plers/Docks - Retaining W	/all - Beach Access V	Valkway/Stairs - Sv	wimming Pools - Workshop - Gazebo
Contract Con	- Accessory Storage Bui	CONTRACTOR OF THE PROPERTY OF		
OCCUPANCY:		TYPE OF FOUNDATIO	N:	PERMIT TYPE: Residential
HEATED/LIVING AR		HEAT: Heat Pump		RESIDENCE TYPE: 2nd Home
NON-HEATED AREA		A/C: Heat Pump		BUILDING USE: Single Family ZONING DISTRICT: RS1 - Single Family
NUMBER OF STORI	ES:	INTERIOR WALLS: Drywall		Residential District
BEDROOMS:		EXTERIOR WALLS:		ZONING PERMIT #:
SEPTIC CAP, # OF P	ERSONS:	FIREPLACE:		DATE APPROVED:
BATHS: 1/2 BATHS:		ROOF:		PERMITTED/CONDITIONAL USE: Single Family Dwelling
GARAGE - DETACH		INSULATION: Batt		CAMA PERMIT#:
STORAGE ENCLOS	URE:	ELEVATOR (SqFt):		DATE ISSUED:
POOL: SHED:	adad V	DECKS (SqFt):		
FLOOD ZONE: Unsh BASE FLOOD ELEV		WINDOWS MAKE: WINDOWS TYPE:		SEPTIC PERMIT #: n/a
IDAOL LLOOD HELV	AIION, LEO OR	MUNDONS ITE.		DATE ISSUED:
		TOTAL CONC.	TRUCTION COST:	
PERMIT FEES:		TOTAL CONS	IRUCTION COST:	
Description	o (Cinalo Esmilu)			Total Cost
Heated/Living Area Fe- Minimum Permit Fee	e (Single Family)			82.80 17,20
Plan Review Fee - Sing	gle Family Addition or Renovat	ion		00,00
Misc. Fee 11-4-2020 P	ermit Amendment			115.20 TOTAL FEE: 215.20
***The owner and build	der are responsible to compl	y/with all regulations and	d laws; should person	ally inspect all construction and be certain to comply
with all Ordinances of	the Town of Southern Shore	s. The applicant certifies	that the information of	on this permit is correct; that he/she is the owner or
valid for 180 days to b	egin construction and may b	on svall be as shown on le revoked for failure to d	tne submitted plans a comply with applicable	nd specifications; the he/she understands this permit is eregulations and laws.
HENRY F. H	FERMANN	XXIIIIXXXXX		
The state of the s		WIND S		
Applicant - Owner/Co	ontractor	(Please print	and sign name)	Date Approved
BUN	7MM			08/25/2020
Building/Code/Zonin	g Official			Date Issued
12 . 1 11	l			1/-N- \c
Ash, Mt	X			

11/6/2020 Permit Detail



TOWN OF SOUTHERN SHORES
PLANNING AND CODE ENFORCEMENT
5375 N Virginia Dare Trail, Southern Shores, NC 27949
(252) 261-2394 Ext 4 - Office (252) 255-0876 - Fax
www.southernshores-nc.gov

RESIDENTIAL BUILDING/FLOODPLAIN DEVELOPMENT PERMIT

		02 45368 DING PAN LN	Owner: Address:	LEWIS, JEREMY 127 PUDDING PA SOUTHERN SHO	AN LN		
District: Subdiv _ot-Block-Sect:	RS1 - Sir CHICAH	ngle Family Residential District	Phone #:	8043355751	JNLO, INC 27 545		
BUSINESS NAME:		aribbean Pool and Spa of the Ou	ter Banks, NC G.C. LICENS	ED CONTRACTOR:	Licensed General Contractor		
CONTRACTOR'S NA ADDRESS: CITY, STATE, ZIP: DFFICE#:	ME: P 6 K	ete Kelly 024 Currituck Road itty Hawk, NC 27949 252) 480-2900	NC G.C. LICENS LIMITATION: CLASSIFICATIO QUALIFIER:		73571 Limited Residential Peter Franklin Kelly		
ELL# EAX#: EMAIL:	·	éte@caribbéanobx.com	LIEN AGENT NA ENTRY#: LIEN AGENT AD		,		
lectrical and fencing PECIAL CONDITION TYPE OF CONSTRU Bulkhead -	NS - CTION:	New Construction - Additio	n / Expansion - Remodel Access Walkway/Stairs -	Renovation / Repair -	inground 14' x 30' pool with require Accessory - Other Workshop - Gazebo		
Detached Garage	- Acc	essory Storage Building - Dun		INCOME TVO			
HEATED/LIVING AR	FAS (SaF		JNDATION:	PERMIT TYPE			
ON-HEATED AREA		The same and the same of the s	A/C:		RESIDENCE TYPE: Residence BUILDING USE: Single Family		
NUMBER OF STORIES:		INTERIOR WA	ALLS:		RICT: RS1 - Single Family		
EDROOMS:		The state of the s	EXTERIOR WALLS:		MIT #: ZP20-000089		
EPTIC CAP. # OF P	ERSONS:	FIREPLACE:	FIREPLACE:		VED: 11/06/2020		
ATHS: ½ BATHS:		ROOF:		Dwelling	CONDITIONAL USE: Single Family		
ARAGE - DETACHI	with the second second			CAMA PERMI			
TORAGE ENCLOSI	UKE:	ELEVATOR (S		DATE ISSUED); 		
LOOD ZONE: Unshi	aded Y	DECKS (SqFt WINDOWS MA		SEDTIC DEDA	MIT #- 20172		
BASE FLOOD ELEV	THE RESERVE OF THE PERSON NAMED IN				SEPTIC PERMIT #: 30172 DATE ISSUED: 11/02/2020		
PERMIT FEES: Description Swimming Pools	0000049,80-96,850-00048888999-037-6860	TOTAL CO	ONSTRUCTION COST: \$40,19	5.00	Total Cos 125.00		
rith all Ordinances of uly authorized agent	the Town of owner;	of Southern Shores. The applicar that all construction shall be as s ruction and may be revoked for f	nt certifies that the information shown on the submitted plan	on on this permit is corr s and specifications; th	e he/she understands this permit i		
				· Caragana	11/06/2020		
Applicant - Owner/Co	Jiliractor	(Pie	ase print and sign name)		Date Approved		
Building/Code/Zonin	g Official				Date Issued		



5375 N Virginia Dare Trail, Southern Shores, NC 27949 (252) 261-2394 Ext 4 - Office (252) 255-0876 - Fax www.southernshores-nc.gov

RESIDENTIAL BUILDING/FLOODPLAIN DEVELOPMENT PERMIT

BUILDING PERMIT # DPA20-000165

Parcel: PIN:

020936026

986809253742

304 SEA OATS TRL

Location: District: Subdiv

RS1 - Single Family Residential District SO/SH BEACH BLKS 62 72 82

Finch & Company, Inc

Lot-Block-Sect:

LOT: 26 BLK: 72 SEC:

Owner: Address: BACHHUBER, MARTIN H

304 SEA OATS TRL

SOUTHERN SHORES, NC 27949

Phone #:

9163166714

BUSINESS NAME: CONTRACTOR'S NAME:

ADDRESS: CITY, STATE, ZIP: Marc Murray 116 Sandy Ridge Road Duck, NC 27949

(252) 202-9879

OFFICE#: CELL# FAX#: EMAIL:

(252) 202-9879 (252) 261-6719

marcemurray@gmail.com

NC G.C. LICENSED CONTRACTOR:

NC G.C. LICENSE NUMBER: LIMITATION:

CLASSIFICATION:

QUALIFIER: LIEN AGENT NAME:

ENTRY#:

LIEN AGENT ADDRESS:

Licensed General Contractor

52567 Unlimited

Building Marc Edward Murray / Olin E

Finch

DESCRIPTION OF WORK - (Any deviation from the Building Plan or Site Plan requires prior approval): Expand ground floor enclosure, add bathroom and heated storage room. No increase in footprint and no increase in sleeping capacity. **SPECIAL CONDITIONS -**

TYPE OF CONSTRUCTION: New Construction	on - Addition / Expansion - Remodel / Renova	ation / Repair - Accessory - Other	
Bulkhead - Piers/Docks - Retaining W	/all - Beach Access Walkway/Stairs - Swimmi	ng Pools - Workshop - Gazebo	
Detached Garage - Accessory Storage Bui	lding - Dune Deck - Generator		
OCCUPANCY: 0	TYPE OF FOUNDATION:	PERMIT TYPE: Residential	
HEATED/LIVING AREAS (SqFt): 540.0	HEAT: Heat Pump	RESIDENCE TYPE: Residence	
NON-HEATED AREAS (SqFt): 0	A/C: Heat Pump	BUILDING USE: Single Family	
NUMBER OF STORIES:	INTERIOR WALLS: Drywall	ZONING DISTRICT: RS1 - Single Family Residential District	
BEDROOMS: 0	EXTERIOR WALLS: Cedar Lap	ZONING PERMIT #:	
SEPTIC CAP. # OF PERSONS:	FIREPLACE:	DATE APPROVED:	
BATHS: 1 ½ BATHS:	ROOF:	PERMITTED/CONDITIONAL USE: Single Family Dwelling	
GARAGE - DETACHED: ATTACHED:	INSULATION: Batt	CAMA PERMIT #:	
STORAGE ENCLOSURE:	ELEVATOR (SqFt):	DATE ISSUED:	
POOL: SHED:	DECKS (SqFt):		
FLOOD ZONE: Unshaded X	WINDOWS MAKE: Jeldwen	SEPTIC PERMIT #: 30174	
BASE FLOOD ELEVATION: LES 8ft	WINDOWS TYPE: Double Hung	DATE ISSUED: 11/02/2020	

TOTAL CONSTRUCTION COST: \$75,000.00

PERMIT FEES:

Description

Heated/Living Area Fee (Single Family) Homeowners Recovery Fund

Total Cost 324.00 10.00

TOTAL FEE: 334.00

***The owner and builder are responsible to comply with all regulations and laws; should personally inspect all construction and be certain to comply with all Ordinances of the Town of Southern Shores. The applicant certifies that the Information on this permit is correct; that he/she is the owner or duly authorized agent of owner; that all construction shall be as shown on the submitted plans and specifications; the he/she understands this permit is valid for 180 days to begin construction and may be revoked for failure to comply with applicable regulations and laws.

MARC MURRAY

Applicant - Owner/Contractor

(Please print and sign name)

11/04/2020

Date Approved

Building/Code/Zoning Official

https://www3.citizenserve.com/Admin/PermitController

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5375 N Virginia Dare Trail, Southern Shores, NC 27949 (252) 261-2394 Ext 4 - Office (252) 255-0876 - Fax www.southernshores-nc.gov

RESIDENTIAL **BUILDING/FLOODPLAIN DEVELOPMENT PERMIT**

BUILDING PERMIT # DPA20-000166

Parcel:	
DIM.	

022335000

986705188414

Location:

133 TALL PINE LN

District: Subdiv

RS1 - Single Family Residential District SO/SH SOUNDSIDE BLKS 124-125

Lot-Block-Sect: LOT: 2 BLK: 125 SEC:

BUSINESS NAME: CONTRACTOR'S NAME:

ADDRESS: CITY, STATE, ZIP:

CELL# FAX#:

(252) 261-6719

EMAIL:

Finch & Company, inc

Магс Миттау 116 Sandy Ridge Road Duck, NC 27949

(252) 202-9879 (252) 202-9879

marcemurray@gmail.com

Owner: Address:

Phone #:

LIMITATION:

QUALIFIER:

ENTRY#:

CLASSIFICATION:

LIEN AGENT NAME:

LIEN AGENT ADDRESS:

ROHAN, CHRISTOPHER R

133 TALL PINE LN SOUTHERN SHORES, NC 27949

NC G.C. LICENSE NUMBER:

NC G.C. LICENSED CONTRACTOR: Licensed General Contractor

52567 Unlimited Building

Marc Edward Murray / Olin E

Finch

Chicago Title Company LLC

1343488

223 S. West Street, Suite 900,

Raleigh, NC 27603

DESCRIPTION OF WORK - (Any deviation from the Building Plan or Site Plan requires prior approval): Add pool, pergola, and deck on grade per site plan. Replace septic and reconfigure driveway to comply with lot coverage requirements. SPECIAL CONDITIONS -

TYPE OF CONSTRUCTION: New Construction	n - Addition / Expansion - Remodel / R	enovation / Repair - Accessory - Other
Bulkhead - Piers/Docks - Retaining W	all - Beach Access Walkway/Stairs - Sv	wimming Pools - Workshop - Gazebo
Detached Garage - Accessory Storage Bui	ding - Dune Deck - Generator	
OCCUPANCY:	TYPE OF FOUNDATION:	PERMIT TYPE: Residential
HEATED/LIVING AREAS (SqFt): 0.0	HEAT:	RESIDENCE TYPE: Residence
NON-HEATED AREAS (SgFt): 777	A/C:	BUILDING USE: Single Family
NUMBER OF STORIES:	INTERIOR WALLS:	ZONING DISTRICT: RS1 - Single Family Residential District
BEDROOMS:	EXTERIOR WALLS:	ZONING PERMIT #: ZP20-000087
SEPTIC CAP. # OF PERSONS:	FIREPLACE:	DATE APPROVED:
BATHS: 1/2 BATHS:	ROOF:	PERMITTED/CONDITIONAL USE: Single Family Dwelling
GARAGE - DETACHED: ATTACHED:	INSULATION:	CAMA PERMIT#:
STORAGE ENCLOSURE:	ELEVATOR (SqFt):	DATE ISSUED:
POOL: SHED:	DECKS (SqFt): 777	
FLOOD ZONE: Unshaded X	WINDOWS MAKE:	SEPTIC PERMIT #: 29574
BASE FLOOD ELEVATION: PLUS 3FT or LES 8ft	WINDOWS TYPE:	DATE ISSUED: 04/01/2020

	TOTAL CONSTRUCTION COST: \$125,000.00
RMIT FEES:	

MARC MURRAY

Description

Non-Heated Areas Fee (Single Family)

Swimming Pools

Total Cost 233.10 125.00 **TOTAL FEE: 358.10**

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Applicant - Owner/Contractor

(Please print and sign name)

11/04/2020 Date Approved

Building/Code/Zoning/Official

https://www3.citizenserve.com/Admin/PermitController

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5375 N Virginia Dare Trail, Southern Shores, NC 27949 (252) 261-2394 Ext 4 - Office (252) 255-0876 - Fax www.southernshores-nc.gov

RESIDENTIAL **BUILDING/FLOODPLAIN DEVELOPMENT PERMIT**

BUILDING PERMIT # DPA20-000167

Parcel:	
PIN:	

022523000

986805081961 27 NORTH DUNE LOOP

Location: District: Subdiv

RS1 - Single Family Residential District SO/SH BLK 61-A LOTS 45-68 PH 3

Lot-Block-Sect:

LOT: 46 BLK: 61A SEC:

Emanuelson & Dad, Inc.

CONTRACTOR'S NAME: ADDRESS:

CITY, STATE, ZIP: OFFICE#:

BUSINESS NAME:

CELL# FAX#: EMAIL:

Rhonda Midgett PO Box 448 Nags Head, NC 27959

(252) 261-2212

(252) 261-1115 emanuelson6705@outlook.com Owner: Address: HORN, JAMES F TTEE 47 CRYSTAL LN DELMAR, NY 12054

Phone #:

5184235102

Non-Licensed Contractor

NC G.C. LICENSED CONTRACTOR:

NC G.C. LICENSE NUMBER: LIMITATION: CLASSIFICATION: QUALIFIER:

LIEN AGENT NAME: ENTRY#:

LIEN AGENT ADDRESS:

DESCRIPTION OF WORK - (Any deviation from the Building Plan or Site Plan requires prior approval): Install 124' Vinyl Bulkhead SPECIAL CONDITIONS -

TYPE OF CONSTRUCTION: New Construction Bulkhead - Piers/Docks - Retaining We	all - Beach Access Walkway/Stairs - Swimmir	ion / Repair - Accessory - Other ig Pools - Workshop - Gazebo
Detached Garage - Accessory Storage Buil		PERMIT TYPE: Residential
IOCCUPANOI.		RESIDENCE TYPE: Residence
MEATED/LIVING AREAS (Cd. 1). SIS	NEAL:	BUILDING USE: Single Family
NON-HEATED AREAS (SqFt): 0		ZONING DISTRICT: RS1 - Single Family
NUMBER OF STORIES:	INTERIOR WALLS:	Residential District
BEDROOMS:	EXTERIOR WALLO.	ZONING PERMIT #: DATE APPROVED:
SEPTIC CAP. # OF PERSONS:	FIREPLACE:	PERMITTED/CONDITIONAL USE: Single Family
BATHS: ½ BATHS:	ROOF:	Dwelling
	INSULATION:	CAMA PERMIT #: 78714
GARAGE - DETACHED: ATTACHED:	ELEVATOR (SqFt):	DATE ISSUED: 10/30/2020
STORAGE ENCLOSURE:	DECKS (SqFt):	
POOL: SHED:	WINDOWS MAKE:	SEPTIC PERMIT #:
FI COU ZONE: Ulbiladed A	MINDOMS INVICE.	- ATT LOCUED.
BASE FLOOD ELEVATION: PLUS 3FT or LES	WINDOWS TYPE:	DATE ISSUED:
IOIT		

TOTAL CONSTRUCTION COST: \$29,520.00

PERMIT FEES: Description

.0-

Bulkhead, Dock, Pier, Retaining Wall Fee

Total Cost 100.00 **TOTAL FEE: 100.00**

***The owner and builder are responsible to comply with all regulations and laws; should personally inspect all construction and be certain to comply with all Ordinances of the Town of Southern Shores. The applicant certifies that the information on this permit is correct; that he/she is the owner or duly authorized agent of owner; that all construction shall be as shown on the submitted plans and specifications; the he/she understands this permit is valid for 180 days to begin construction and may be revoked for fallure to comply with applicable regulations and laws.

Applicant - Owner/Contractor

(Please print and sign name)

11/05/2020 **Date Approved**

Building/Code/Zoning Official

11/4/2020 Permit Detail



TOWN OF SOUTHERN SHORES PLANNING AND CODE ENFORCEMENT

5375 N Virginia Dare Trail, Southern Shores, NC 27949 (252) 261-2394 Ext 4 - Office (252) 255-0876 - Fax www.southernshores-nc.gov

RESIDENTIAL BUILDING/FLOODPLAIN DEVELOPMENT PERMIT

CAROLINA				
Parcel: PIN: Location: District: Subdiv Lot-Block-Sect:		mily Residential District ED PLAT B SEC 3 BLK: 31 SEC: 3	Owner: Address: Phone #:	EQUITY TRUST CO CUSTODIAN FBO 3357 BAUM RD VIRGINIA BEACH, VA 23457
BUSINESS NAME: CONTRACTOR'S NA ADDRESS: CITY, STATE, ZIP: OFFICE#: CELL# FAX#:	1165 Co	Marshall lington Rd. Hills, NC 27948	NC G.C. LICENS NC G.C. LICENS LIMITATION: CLASSIFICATIO QUALIFIER: LIEN AGENT NA ENTRY#:	N:
EMAIL:	mymarli	n57@aol.com	LIEN AGENT AD	DRESS:
SPECIAL CONDITIO	NS - JCTION: New	Construction - Addition / E	xpansion - Remodel	/ Renovation / Repair - Accessory - Other
and the same			-	Swimming Pools - Workshop - Gazebo
	e - Accessory	Storage Building - Dune De		
OCCUPANCY:	EAC (CEt)- 0.0	TYPE OF FOUND	ATION:	PERMIT TYPE: Residential
HEATED/LIVING AR	Market and the contract of the	HEAT:	was a second of the second of	RESIDENCE TYPE: Residence
NON-HEATED AREA	45 (SqFt): 300	A/C:		BUILDING USE: Single Family
NUMBER OF STORI	ES:	INTERIOR WALLS	S:	ZONING DISTRICT: RS1 - Single Family Residential District
BEDROOMS:		EXTERIOR WALL	S.	ZONING PERMIT #:
SEPTIC CAP. # OF P	PERSONS:	FIREPLACE:		DATE APPROVED:
BATHS: ½ BATHS:		ROOF:	akkinin urusu dan estati di dikinin kana dan dalam anda kana dan di akin di dikin di dika dan dan dan dan dan d	PERMITTED/CONDITIONAL USE: Single Family Dwelling
GARAGE - DETACH	ED: ATTACHED:	INSULATION:		CAMA PERMIT#:
STORAGE ENCLOS	URE:	ELEVATOR (SqFt)):	DATE ISSUED:
POOL: SHED:		DECKS (SqFt):		
FLOOD ZONE: Unsh	aded X	WINDOWS MAKE		SEPTIC PERMIT #: 30121
BASE FLOOD ELEV	ATION: LES 8ft	WINDOWS TYPE:		DATE ISSUED: 10/22/2020
PERMIT FEES:		TOTAL CONS	TRUCTION COST: \$8,800	
Description Non-Heated Areas Fee Minimum Permit Fee	e (Single Family)			Total Cost 90.00 10.00 TOTAL FEE: 100.00
vith all Ordinances of Iuly authorized agent	the Town of Sout of owner; that all	hern Shores. The applicant ce	rtifies that the information on the submitted plan	conally inspect all construction and be certain to comply on on this permit is correct; that he/she is the owner or s and specifications; the he/she understands this permit is able regulations and laws.
Dorall Ma	212 1911	James &		10/20
Applicant - Owner/C	ontractor	(Please	print and sign name)	Date Approved
BW	9 M			16-10-90
Building/Code/Zonin	g Official			Date Issued
A . 1.	14.			



TOWN OF SOUTHERN SHORES
PLANNING AND CODE ENFORCEMENT
5375 N Virginia Dare Trail, Southern Shores, NC 27949
(252) 261-2394 Ext 4 - Office (252) 255-0876 - Fax www.southernshores-nc.gov

RESIDENTIAL **BUILDING/FLOODPLAIN DEVELOPMENT PERMIT**

Parcel: PIN: Location: District: Subdiv Lot-Block-Sect:	14 FII R1 - L SEA (54000 14444592 RST AVE .ow Density Resident CREST VILLAGE 17 BLK; 46 SEC;	tial District	Owner: Address: Phone #:	OSTERGREN, S 14 FIRST AVE SOUTHERN SHO 9104772484	
BUSINESS NAME: CONTRACTOR'S NA ADDRESS: CITY, STATE, ZIP: OFFICE#:		Stan White Realty CM Funk P.O. Drawer 1447 Nage Head, NC 27 (252) 261-4614		NC G.C. LICENSI NC G.C. LICENSI LIMITATION: CLASSIFICATION QUALIFIER:		
CELL#		(800) 992-2976		LIEN AGENT NA	NAC.	First American Title Insurance
FAX#:		(252) 261-5408		ENTRY#:	MI.	Company 1345480
EMAIL:		cmfunk@outerbank	ksrentals.com	LIEN AGENT AD	DRESS:	223 S. West Street, Suite 900, Raleigh, NC 27603
DESCRIPTION OF Wheated living area. The SPECIAL CONDITION	is will b	(Any devlation from e an extension of the	n the Building Plan or existing living room.	Site Plan requires p	rior approval): Conve	rt existing 8'x21' deck area to
Bulkhead - F	Piers/Do	cks - 🔲 Retaining W		Walkway/Stairs - 🗍 s		Accessory - Other Workshop - Gazebo
OCCUPANCY: 6	- tunid	Accessory Oldrage Du	TYPE OF FOUNDATION		PERMIT TYPE	· Residential
HEATED/LIVING AR	EAS (S	gFt): 168.0	HEAT: Heat Pump			TYPE: Residence
NON-HEATED AREA			A/C: Heat Pump			E: Single Family
NUMBER OF STORI	ES: 1		INTERIOR WALLS: di	rywali		RICT: R1 - Low Density Residential
BEDROOMS: 3	400000		EXTERIOR WALLS: L	.P SmartSide	ZONING PER	111111111111111111111111111111111111111
SEPTIC CAP. # OF P	ERSO	VS: 6	FIREPLACE:		DATE APPRO	
BATHS: 2 ½ BATHS	in and the second of the		ROOF: Asphalt		Dwelling	CONDITIONAL USE: Single Family
GARAGE - DETACH		TACHED:	INSULATION: Batt		CAMA PERMI	
STORAGE ENCLOS	URE:		ELEVATOR (SqFt):		DATE ISSUED);
POOL: SHED: FLOOD ZONE: Unsh	odod V	FERNING CONTRACTOR CON	DECKS (SqFt):		OEDTIO DEDI	FIT 4. 204.00
			WINDOWS TYPE: Day	CONTRACTOR OF THE PROPERTY OF	SEPTIC PERM	111 #: 30192
BASE FLOOD ELEV	ATION:	LES 8ft	WINDOWS TYPE: Do	uble hung and picture	DATE ISSUED	: 11/05/2020
PERMIT FEES: Description Heated/Living Area Fe Homeowners Recover		e Family)	TOTAL CONSTRU	CTION COST: \$55,792	.00	Total Cost 100.80 10.00 TOTAL FEE: 110.80
with all Ordinances of duly authorized agent valid for 180 days to b	the Tov of own egin co	vn of Southern Shore er; that all constructi	es. The applicant certific on shall be as shown on oe revoked for failure to	es that the information in the submitted plans	n on this permit is corr and specifications; th	ruction and be certain to comply ect; that he/she is the owner or e he/she understands this permit is
Annilogat Oumenic	ontroct	or	/Diagon mile	at and alar name		
Applicant - Owner/C	Ontract	or OW		nt and sign name)	•	Date Approved
MSM	ON	mali		7 19050	******** *	
Building/Code/Zonin	g Offic	ial				Date Issued



5375 N Virginia Dare Trail, Southern Shores, NC 27949 (252) 261-2394 Ext 4 - Office (252) 255-0876 - Fax www.southernshores-nc.gov

RESIDENTIAL **BUILDING/FLOODPLAIN DEVELOPMENT PERMIT**

BUILDING PERMIT # DPA20-000169

Parce	l:
PIN:	
Locati	ion:
Distric	ct:

Subdiv

FAX#: EMAIL:

021289000 986806381739

6 ELEVENTH AVE RS1 - Single Family Residential District

Lot-Block-Sect:

SEA CREST VILLÁGE LOT: 28 BLK: 57 SEC:

Owner: Addrass:

Phone #:

ELLIS, MARTHA ANNE TRUSTEE OF THE

4267 CHEYENNE RD RICHMOND, VA 23235

7576394272

BUSINESS NAME:

CONTRACTOR'S NAME: ADDRESS:

CITY, STATE, ZIP: OFFICE#: CELL#

KJ Construction and Remodeling, Co. Keith Dobie P.O. Box 242 Kitty Hawk, NC 27949 (252) 207-6589

kjconstructionco@yahoo.com

NC G.C. LICENSED CONTRACTOR: NC G.C. LICENSE NUMBER:

LIMITATION:

CLASSIFICATION: QUALIFIER: LIEN AGENT NAME:

ENTRY#:

LIEN AGENT ADDRESS:

Licensed General Contractor

59936 Unlimited

Building WILLIAM KEITH DOBIE, JR

DESCRIPTION OF WORK - (Any deviation from the Building Plan or Site Plan requires prior approval): Update 3 existing bathrooms with new fixtures including showers (2 to be fiberglass unit with tile walls)
SPECIAL CONDITIONS -

TYPE OF CONSTRUCTION: New Cons	truction - Addition / Expansion - Remodel / Re	enovation / Repair - Accessory - Other
Bulkhead - Piers/Docks - Retain	ing Wall - 🔠 Beach Access Walkway/Stairs - 💛 Sw	imming Pools - Workshop - Gazebo
	ge Building - Dune Deck - Generator	
OCCUPANCY:	TYPE OF FOUNDATION:	PERMIT TYPE: Residential
HEATED/LIVING AREAS (SqFt): 0.0	ी HEAT:	RESIDENCE TYPE: Vacation Cottage < 30 days
NON-HEATED AREAS (SqFt): 0	A/C:	BUILDING USE: Single Family
NUMBER OF STORIES:	INTERIOR WALLS:	ZONING DISTRICT: RS1 - Single Family Residential District
BEDROOMS:	EXTERIOR WALLS:	ZONING PERMIT #:
SEPTIC CAP. # OF PERSONS:	FIREPLAGE:	DATE APPROVED:
BATHS: ½ BATHS;	ROOF:	PERMITTED/CONDITIONAL USE: Single Famil Dwelling
GARAGE - DETACHED: ATTACHED:	INSULATION:	CAMA PERMIT #:
STORAGE ENCLOSURE:	ELEVATOR (SqFt):	DATE ISSUED:
POOL: SHED:	DECKS (SqFt):	
FLOOD ZONE: Unshaded X	WINDOWS MAKE:	SEPTIC PERMIT #:
BASE FLOOD ELEVATION: LES 8ft	WINDOWS TYPE:	DATE ISSUED:

10-400000000 1 100000 permit of 100000000000000000000000000000000000	28 June 1 2007	IDMellind
GARAGE - DETACHED: ATTACHED:	INSULATION:	CAMA PERMIT#:
STORAGE ENCLOSURE:	ELEVATOR (SqFt):	DATE ISSUED:
POOL: SHED:	DECKS (SqFt):	
LOOD ZONE: Unshaded X	WINDOWS MAKE:	SEPTIC PERMIT #:
BASE FLOOD ELEVATION: LES 8ft	WINDOWS TYPE:	DATE ISSUED:
with all Ordinances of the I own of Southern:	Shores. The applicant certifies that the informatic	Total Cost 200.00 10.00 TOTAL FEE: 210.00 onally inspect all construction and be certain to comply on on this permit is correct; that he/she is the owner or and specifications; the he/she understands this permit is
W. Keith Dobie)	may be revoked for failure to comply with applica	the regulations and laws.
Applicant - Owner/Contractor	$oldsymbol{U}$ (Please print and sign name)	Date Approved
Buddy Shelton		11-16-26
Building/Code/Zoning Official by Y	NB	Date Issued



TOWN OF SOUTHERN SHORES
PLANNING AND CODE ENFORCEMENT
5375 N Virginia Dare Trail, Southern Shores, NC 27949
(252) 261-2394 Ext 4 - Office (252) 255-0876 - Fax www.southernshores-nc.gov

RESIDENTIAL BUILDING/FLOODPLAIN DEVELOPMENT PERMIT

CAROLINA				
Parcel: PIN: Location:	021177000 986810362811 18 SEVENTH AVE		Owner: Address:	PENROSE, ROBERT L JR 416 HAGEN RD CAPE MAY COURT HOUSE, NJ 08210
District: Subdiv Lot-Block-Sect:	RS1 - Single Family R SEA CREST VILLAGE LOT: 17 BLK: 52 SEC:	<u>:</u>	Phone #:	6094252280
BUSINESS NAME: CONTRACTOR'S NADDRESS:		DBERT L JR	NC G.C. LICENSI LIMITATION:	
CITY, STATE, ZIP: OFFICE#:			CLASSIFICATION QUALIFIER:	4:
CELL#			LIEN AGENT NA	ME:
FAX#:	•		ENTRY#:	
EMAIL: 			LIEN AGENT ADI	DRESS:
SPECIAL CONDITI	ONS - Deck piles to be	ruction - Addition / E	ade with 1 bag each of c xpansion - Remodel /	rior approval): Add 10' x 10' deck, 4' x 3' deck quikcrete. Renovation / Repair - Accessory - Other Swimming Pools - Workshop - Gazebo
Detached Garag	ge - Accessory Storage	e Building - 🔲 Dune De	ck - Generator	
OCCUPANCY:		TYPE OF FOUND	ATION:	PERMIT TYPE: Residential
HEATED/LIVING A		HEAT:		RESIDENCE TYPE: Vacation Cottage < 30 days
ION-HEATED ARE	AS (SqFt): 112	A/C:		BUILDING USE: Single Family
IUMBER OF STOF	RIES:	INTERIOR WALLS	S:	ZONING DISTRICT: RS1 - Single Family Residential District
EDROOMS:		EXTERIOR WALL	S:	ZONING PERMIT #: ZP20-000091
EPTIC CAP. # OF	PERSONS:	FIREPLACE:		DATE APPROVED:
ATHS: ½ BATHS	:	ROOF:		PERMITTED/CONDITIONAL USE: Vacation Cottage
ARAGE - DETAC	HED: ATTACHED:	INSULATION:		CAMA PERMIT#:
TORAGE ENCLO	SURE:	ELEVATOR (SqFt)		DATE ISSUED:
OOL: SHED:		DECKS (SqFt): 11	2	
LOOD ZONE: Uns		WINDOWS MAKE		SEPTIC PERMIT #:
ASE FLOOD ELE	VATION: LES 8 ft	WINDOWS TYPE:		DATE ISSUED:
		TOTAL CONS	TRUCTION COST: \$2,000.	00
PERMIT FEES: Description Non-Heated Areas Fo Minimum Permit Fee	ee (Single Family)			Total Cost 33.60 66.40 TOTAL FEE: 100.00
utn all Ordinances o uly authorized agen	of the Town of Southern S	hores. The applicant cer uction shall be as show	rtifies that the information in on the submitted plans	onally inspect all construction and be certain to comply 1 on this permit is correct; that he/she is the owner or and specifications: the he/she understands this permit is
RUSIFIZT L.PE	NOSE TR	-/aft/	-4	11/10/2020
pplicalt - Owner/	Contractor \	(Please	print and sign name)	Date Approved
KN	NSW			11-16-2
uilding/Code/Zoni	ng Official			Date Issued
	1			
77	1 1 1 1			

11/16/2020 Permit Detail



TOWN OF SOUTHERN SHORES

PLANNING AND CODE ENFORCEMENT
5375 N Virginia Dare Trail, Southern Shores, NC 27949
(252) 261-2394 Ext 4 - Office (252) 255-0876 - Fax
www.southernshores-nc.gov

RESIDENTIAL BUILDING/FLOODPLAIN DEVELOPMENT PERMIT

PIN:	9868	22000 13129674		Owner: Address:	TCHALEKIAN, KI 3 REDBAY LN	
Location: District:	RS1 -	DBAY LN · Single Family Resi		Phone #:	SOUTHERN SHO 7035689282	DRES, NC 27949
Subdiv _ot-Block-Sect:		H SOUNDSIDE BLA 9R BLK: 104 SEC:	K 104			
USINESS NAME: ONTRACTOR'S I DDRESS:		Northeastern Mar Bill Jones P.O. Box 42		NC G.C. LICENS LIMITATION:		Licensed General Contractor 30026 Limited
ITY, STATE, ZIP: DFFICE#: ELL#		Kitty Hawk, NC 27 (252) 261-3682 (252) 261-3682	'949	CLASSIFICATIO QUALIFIER: LIEN AGENT NA		S (Marine Construction)
AX#: MAIL:		Julie@nemarinec	onst.com	ENTRY#: LIEN AGENT AD	DRESS:	
🗍 Bulkhead - 🦪	RUCTION Piers/Do	cks - Retaining		ess Walkway/Stairs -		Accessory - Other Workshop - Gazebo
CCUPANCY:			TYPE OF FOUND	ATION:	PERMIT TYPE	
EATED/LIVING A			HEAT:			TYPE: Residence
ON-HEATED ARI	EAS (Sqi	-t): 0	A/C:			E: Single Family
UMBER OF STO	RIES:		INTERIOR WALLS):	ZONING DIST Residential Dis	RICT: RS1 - Single Family strict
EDDOOMC.			EXTERIOR WALLS	S:		MIT #: DPA20-000092
ALL ALL PARTY OF THE PARTY OF T		NS:	FIREPLACE:			VED: 11/16/2020
ALL ALL PARTY OF THE PARTY OF T	PERSO		l l			CONDITIONAL USE: Single Family
EPTIC CAP. # OF			ROOF:		Dwelling	
EPTIC CAP. # OF ATHS: ½ BATHS ARAGE - DETAC	: HED: A1	TACHED:	INSULATION:		CAMA PERMI	
EPTIC CAP. # OF ATHS: ½ BATHS ARAGE - DETAC FORAGE ENCLO	: HED: A1	TACHED:	INSULATION: ELEVATOR (SqFt)			
EPTIC CAP. # OF ATHS: ½ BATHS ARAGE - DETAC TORAGE ENCLO OOL: SHED:	: HED: A1 SURE:		INSULATION: ELEVATOR (SqFt) DECKS (SqFt):		CAMA PERMI DATE ISSUED	D: 11/06/2020
EPTIC CAP. # OF BATHS: ½ BATHS BARAGE - DETAC TORAGE ENCLO OOL: SHED: LOOD ZONE: Uns	: HED: A1 SURE: shaded X		INSULATION: ELEVATOR (SqFt): DECKS (SqFt): WINDOWS MAKE:		CAMA PERMI DATE ISSUED SEPTIC PERM	D: 11/06/2020 MIT #:
SEPTIC CAP. # OF BATHS: ½ BATHS BARAGE - DETAC STORAGE ENCLO POOL: SHED: BLOOD ZONE: Uns	: HED: A1 SURE: shaded X		INSULATION: ELEVATOR (SqFt) DECKS (SqFt):		CAMA PERMI DATE ISSUED	D: 11/06/2020 MIT #:
SEPTIC CAP. # OF BATHS: ½ BATHS BARAGE - DETAC BTORAGE ENCLO POOL: SHED: BASE FLOOD ELE	: HED: A1 SURE: shaded X		INSULATION: ELEVATOR (SqFt): DECKS (SqFt): WINDOWS MAKE: WINDOWS TYPE:		CAMA PERMI DATE ISSUED SEPTIC PERM DATE ISSUED	D: 11/06/2020 MIT #:
BEDROOMS: BEPTIC CAP. # OF BATHS: ½ BATHS BARAGE - DETAC BTORAGE ENCLO POOL: SHED: FLOOD ZONE: Uns BASE FLOOD ELE PERMIT FEES: Description Bulkhead, Dock, Pie	: HED: AT SURE: shaded X VATION:	LES 8ft	INSULATION: ELEVATOR (SqFt): DECKS (SqFt): WINDOWS MAKE: WINDOWS TYPE:		CAMA PERMI DATE ISSUED SEPTIC PERM DATE ISSUED	D: 11/06/2020 MIT #:
BEPTIC CAP. # OF BATHS: ½ BATHS BARAGE - DETACE BARAGE ENCLO COOL: SHED: COOD ZONE: Uns BASE FLOOD ELE CERMIT FEES: Description Bulkhead, Dock, Pie *The owner and but the all Ordinances ally authorized age	HED: AT SURE: shaded X VATION: r, Retainir tillder are of the Too	LES 8ft Ig Wall Fee responsible to com wn of Southern Sho er; that all construc	INSULATION: ELEVATOR (SqFt) DECKS (SqFt): WINDOWS MAKE: WINDOWS TYPE: TOTAL CONST	TRUCTION COST: \$5,000 Is and laws; should persectifies that the information	CAMA PERMI DATE ISSUED SEPTIC PERMINED DATE ISSUED .00 onally inspect all consists on this permit is consistent and specifications; the	O: 11/06/2020 MIT #: Total Cost 100.00 TOTAL FEE: 100.00 truction and be certain to comply rect; that he/she is the owner or the he/she understands this permit is
EPTIC CAP. # OF ATHS: ½ BATHS ARAGE - DETAC TORAGE ENCLO OOL: SHED: LOOD ZONE: Uns ASE FLOOD ELE ERMIT FEES: DESCRIPTION Ulkhead, Dock, Pie The owner and but th all Ordinances ly authorized age	HED: AT SURE: shaded X VATION: r, Retainir tillder are of the Too	LES 8ft Ig Wall Fee responsible to com wn of Southern Sho er; that all construc	INSULATION: ELEVATOR (SqFt) DECKS (SqFt): WINDOWS MAKE: WINDOWS TYPE: TOTAL CONST	TRUCTION COST: \$5,000 Is and laws; should pers It files that the information on the submitted plans	CAMA PERMI DATE ISSUED SEPTIC PERMINED DATE ISSUED .00 onally inspect all consists on this permit is consistent and specifications; the	O: 11/06/2020 AIT #: Total Cost 100.00 TOTAL FEE: 100.00 truction and be certain to comply rect; that he/she is the owner or the he/she understands this permit is
EPTIC CAP. # OF EATHS: ½ BATHS BARAGE - DETAC TORAGE ENCLO OOL: SHED: LOOD ZONE: Uns ASE FLOOD ELE ERMIT FEES: Description Stulkhead, Dock, Pie The owner and builth all Ordinances ally authorized age lid for 180 days to	HED: AT SURE: shaded X VATION: r, Retainir fillder are of the Ton to of own begin co	LES 8ft Ig Wall Fee responsible to comwn of Southern Sho er; that all construction and may	INSULATION: ELEVATOR (SqFt) DECKS (SqFt): WINDOWS MAKE: WINDOWS TYPE: TOTAL CONST	TRUCTION COST: \$5,000 Is and laws; should pers It files that the information on the submitted plans	CAMA PERMI DATE ISSUED SEPTIC PERMINED DATE ISSUED .00 onally inspect all consists on this permit is consistent and specifications; the	O: 11/06/2020 AIT #: Total Cost 100.00 TOTAL FEE: 100.00 truction and be certain to comply rect; that he/she is the owner or the he/she understands this permit is tys.
BEPTIC CAP. # OF BATHS: ½ BATHS BARAGE - DETACE BTORAGE ENCLO POOL: SHED: LOOD ZONE: Uns BASE FLOOD ELE PERMIT FEES: Description Bulkhead, Dock, Pie *The owner and but ith all Ordinances uty authorized age	HED: AT SURE: shaded X VATION: r, Retainir fillder are of the Ton to of own begin co	LES 8ft Ig Wall Fee responsible to comwn of Southern Sho er; that all construction and may	INSULATION: ELEVATOR (SqFt) DECKS (SqFt): WINDOWS MAKE: WINDOWS TYPE: TOTAL CONST	TRUCTION COST: \$5,000 as and laws; should persetifies that the information on the submitted plane to comply with application of the submitted plane to comply with application.	CAMA PERMI DATE ISSUED SEPTIC PERMINED DATE ISSUED .00 onally inspect all consists on this permit is consistent and specifications; the	Total Cost 100.00 TOTAL FEE: 100.00 truction and be certain to comply rect; that he/she is the owner or le he/she understands this permit is vs.
EPTIC CAP. # OF ATHS: ½ BATHS ARAGE - DETAC TORAGE ENCLO OOL: SHED: LOOD ZONE: Uns ASE FLOOD ELE ERMIT FEES: Description Sulkhead, Dock, Pie The owner and buth all Ordinances sity authorized age lid for 180 days to	HED: AT SURE: shaded X VATION: T, Retainir fillder are of the Too ht of own begin co Contract	LES 8ft Ig Wall Fee responsible to comwin of Southern Shoer; that all construction and may	INSULATION: ELEVATOR (SqFt) DECKS (SqFt): WINDOWS MAKE: WINDOWS TYPE: TOTAL CONST	TRUCTION COST: \$5,000 as and laws; should persetifies that the information on the submitted plane to comply with application of the submitted plane to comply with application.	CAMA PERMI DATE ISSUED SEPTIC PERMINED DATE ISSUED .00 onally inspect all consists on this permit is consistent and specifications; the	Total Cost 100.00 TOTAL FEE: 100.00 TOTAL FEE: 100.00 truction and be certain to comply rect; that he/she is the owner or he he/she understands this permit is vs. 11/16/2020 Date Approved

11/2/2020 Permit Detail



TOWN OF SOUTHERN SHORES PLANNING AND CODE ENFORCEMENT

5375 N Virginia Dare Trail, Southern Shores, NC 27949 (252) 261-2394 Ext 4 - Office (252) 255-0876 - Fax www.southernshores-nc.gov

RESIDENTIAL BUILDING/FLOODPLAIN DEVELOPMENT PERMIT

Parcel:	021220000		Owner:	NIENABER, ERIK J
PIN:	986806288095		Address:	2500 TREE HOUSE DR
_ocation: District:	15 TENTH AVE	dontial District	Phone #:	WOODBRIDGE, VA 22192
Subdiv	RS1 - Single Family Resi	dential district	Phone #:	7033573802
Lot-Block-Sect:	LOT: 10 BLK: 55 SEC:			
BUSINESS NAME:	Four Seasons Po	ol Builders	NC G C LICENS	ED CONTRACTOR:
CONTRACTOR'S NA		or Banaoro	NC G.C. LICENS	
ADDRESS:	P.O. Box 25		LIMITATION:	
CITY, STATE, ZIP:	Point Harbor, NC	27964	CLASSIFICATIO	N:
OFFICE#:	(252) 207-6986		QUALIFIER:	ME.
CELL# FAX#:	(252) 491-8212		LIEN AGENT NA ENTRY#:	NVIC.
EMAIL:	colintcox@gmail.c	com	LIEN AGENT AD	DRESS:
SPECIAL CONDITION	NS -			prior approval): New Swimming Pool and Concrete Deck
TYPE OF CONSTRU	CTION: Wew Construction	tion - 🔲 Addition / Ex	pansion - 🔲 Remodel	/ Renovation / Repair - 🔲 Accessory - 🔲 Other
Bulkhead - P	Piers/Docks - Retaining	Wall - D Beach Acce	ss Walkway/Stairs - 🛮	Swimming Pools - Workshop - Gazebo
	- Accessory Storage B		· ·	<u> </u>
OCCUPANCY:	- Accessory Storage b	TYPE OF FOUNDA		PERMIT TYPE: Residential
HEATED/LIVING ARI	EAS /SaEt\: 0.0	HEAT:	IIION.	RESIDENCE TYPE: Vacation Cottage < 30 days
NON-HEATED AREA		A/C:		BUILDING USE: Single Family
NON-TILATED AINLA	13 (34) t). 0			ZONING DISTRICT: RS1 - Single Family
NUMBER OF STORIE	ES:	INTERIOR WALLS:		Residential District
BEDROOMS:		EXTERIOR WALLS):	ZONING PERMIT #: ZP20-000086
SEPTIC CAP. # OF P	ERSONS: 8	FIREPLACE:		DATE APPROVED:
BATHS: ½ BATHS:		ROOF:		PERMITTED/CONDITIONAL USE: Single Family Dwelling
GARAGE - DETACHE		INSULATION:		CAMA PERMIT #:
STORAGE ENCLOSE	JRE:	ELEVATOR (SqFt):		DATE ISSUED:
POOL: SHED:		DECKS (SqFt):		
FLOOD ZONE: Unsha	aded X	WINDOWS MAKE:		SEPTIC PERMIT #: 30091
BASE FLOOD ELEVA	ATION:	WINDOWS TYPE:		DATE ISSUED: 10/15/2020
		TOTAL CONSTI	RUCTION COST: \$29,50	0.00
PERMIT FEES:			, -,-	
Description Swimming Pools				Total Cost 125.00 TOTAL FEE: 125.00
vith all Ordinances of Iuly authorized agent	the Town of Southern Sho	res. The applicant cert tion shall be as shown	tifies that the informatio า on the submitted plan	sonally inspect all construction and be certain to comply on on this permit is correct; that he/she is the owner or s and specifications; the he/she understands this permit is
		- On the second	• 777	
Applicant - Owner/Co	ontractor	(Please p	orint and sign name)	Date Approved
Buddy	Shelton		11-17-208	
Building/Code/Zonin	g Official L	mB		Date Issued
J	$ \nu$	1110		

TP20-000174

TOWN OF SOUTHERN SHORES PLANNING AND CODE ENFORCEMENT

5375 N Virginia Dare Trail, Southern Shores, NC 27949 (252) 261-2394 - Office (252) 255-0876 - Fax www.southernshores-nc.gov



Residential Trade Contractor Permit

Date November 17, 2020

Project Address: 175 CHICAHAUK TRL	PIN #:	022383541
Property Owner: HEISEY, JACOB A	Mailing Address:	175 CHICAHAUK TRL KITTY HAWK, NC 27949
Permit Types: ☐ Plumbing ☐ Electrical	al □Gas	
Company Name: Atlantic Heating & Cooling	, LTD	Qualifier: Andrew L Buchanan
Phone: (252) 441-7642		Address: P.O. Box 132
N. C. License Number: 34340		Kill Devil Hills, NC 27948
Description of Work: Replace HVAC Eq	ıipment - 2 systems	·
Description of Work: Replace HVAC Equ	uipment - 2 systems	
	uipment - 2 systems Permit Amount: 100.00	·
Description of Work: Replace HVAC Equ Project Cost Estimate: \$11,550.00	Permit Amount: 100.00 Payment:	eipt ReceivedFrom Amount

11/17/2020

Date

Signature of Licensee or Duly Authorized Representative

Permit Detail

TOWN OF SOUTHERN SHORES PLANNING AND CODE ENFORCEMENT 5375 N Virginia Dare Trail. Southern Shores, NC 2794

5375 N Virginia Dare Trail, Southern Shores, NC 27949 (252) 261-2394 - Office (252) 255-0876 - Fax www.southernshores-nc.gov



Residential Trade Contractor Permit

Date November 17, 2020

TP20-000	176	
Flectrical	Trade	Permit

Project Address: 248 OCEAN BLVD

Property Owner: KREISER, CHRISTOPHER

PIN #: 021658000

Mailing Address: 248 OCEAN BLVD

SOUTHERN SHORES, NC 27949

	SSO (HEMASHO) NO SUSTO
Permit Types: Plumbing	ical Gas
Company Name: Phone: 252-564-2367 N. C. License Number:	Qualifier: KREISER, CHRISTOPHER Address:
Description of Work: ELECTRICAL: Re	eplace roof deck and install solar on roof. Increase house service to 400
Project Cost Estimate: \$20,000.00	Permit Amount: 1,00.00 Payment: Date Type Reference Receipt ReceivedFrom Amount

I hereby certify that all information in this application is correct and all work will comply with the State Building Code and all other local laws and ordinances and regulations. The inspection Department will be notified of any changes in the approved plans and specification for the project permitted herein.

Signature of Licensee or Duly Authorized Representative

Date

Signature of Permit Official

Date

Permit Detail

TOWN OF SOUTHERN SHORES PLANNING AND CODE ENFORCEMENT

5375 N Virginia Dare Trail, Southern Shores, NC 27949 (252) 261-2394 - Office (252) 255-0876 - Fax www.southernshores-nc.gov



Trade Contractor Permit

Date November 17, 2020

TP20-000	177	
Electrical		Permit

Project Address	5500 N	N CROATÁN HŴY
Project Address:	วอบนา	N CROATAN FIVE

Property Owner: SOUTHERN SHORES OWNER, LLC-

PIN #: 022510000

Mailing Address: 610 E MOREHEAD ST STE 100

CHARLOTTE, NC 28202

Permit Types: Plumbing Electrical Contractor:	MechanicalGas		
Company Name: Kreiser Elec	trie Inc	Qualifier:	Chris Kreiser
Phone:		Address:	248 Ocean Blvd
N. C. License Number: 31684			Southern Shores, NC 27949
ELEC	TRICAL: Add 6 receptacles	s and move 2 sw	vitches and 1 receptacle. AFFORADABLE
Description of Work: ELEC	TRICAL: Add 6 receptacles	s and move 2 sw CROATAN HWY.	vitches and 1 receptacle. AFFORADABLE
Description of Work: ELEC OPTION	TRICAL: Add 6 receptacles CAL LOCATED AT 5569 N. Permit Amount: 100,	CROATAN HWY.	vitches and 1 receptacle. AFFORADABLE

I hereby certify that all information in this application is correct and all work will comply with the State Building Code and all other local laws and ordinances and regulations. The inspection Department will be notified of any changes in the approved plans and specification for the project permitted herein.

Signature of Licensee or Duly Authorized Representative

5375 N Virginia Dare Trail, Southern Shores, NC 27949 (252) 261-2394 - Office (252) 255-0876 - Fax www.southernshores-nc.gov



Residential Trade Contractor Permit

Date November 17, 2020

TP20-000178 Mechanical Trade Permit		
Project Address: 185 S DOGWOOD TRL		PIN #: 021718000
Property Owner: BEATY, KATHLEEN BAUNTHE	MANN TTEE OF	Mailing 4008 N GARLAND ST Address: ALEXANDRIA, VA 22304
Permit Types: Plumbing Electrical Mechanic Contractor:	al 🗌 Gas	
Company Name: R.A. Hoy Heating & A/C		Qualifier: Douglas Wakeley
Phone: (252) 261-2008		Address: P.O. Box 179
N. C. License Number: 13056		Kitty Hawk, NC 27949
Project Cost Estimate: \$12,600.00	Permit Amount: 100.00 Payment: Date Type Reference F	0 Receipt ReceivedFrom Amount
I hereby certify that all information in this appl other local laws and ordinances and regulatio approved plans and specification for the proje Jaclyn Slater	ns. The Inspection Departnect permitted herein.	2
Signature of Licensee or Duly Authorized Rep	11/17/2020 presentative Date	Buddy Shelton 11-17-2026 Signature of Permit Officially, Date
organization of Electroce of Duly Authorized Nep	"Sociitativo Dato	Signature of Permit Official Date

Permit Detail

TOWN OF SOUTHERN SHORES PLANNING AND CODE ENFORCEMENT

5375 N Virginia Dare Trail, Southern Shores, NC 27949 (252) 261-2394 - Office (252) 255-0876 - Fax www.southemshores-nc.gov



Trade Contractor Permit

Date November 18, 2020

TP20-00017	9	
Mechanical	Trade	Permit

Project Address: 277 WAX MYRTLE TRL Property Owner: KERSEY, KATHARINE C TRUSTEES	PIN #: 021530000 Mailing Address: 4057 ESTATES LN PORTSMOUTH, VA 23703
Permit Types: Plumbing Electrical Mechanical Gas Contractor:	s
Company Name: R.A. Hoy Heating & A/C	Qualifier: Douglas Wakeley
Phone: (252) 261-2008	Address: P.O. Box 179
N. C. License Number: 13056	Kitty Hawk, NC 27949
Payment:	mount: 100.00 : be Reference Receipt ReceivedFrom Amount
I hereby certify that all information in this application is co	orrect and all work will comply with the State Building Code and all pection Department will be notified of any changes in the
Jaclyn Slater 11/18/2020	Buddy Shelton 11-18-303 Signature of Permit Official by Date
Signature of Licensee or Duly Authorized Representative	Signature of Pérmit Official by Date

5375 N Virginia Dare Trail, Southern Shores, NC 27949 (252) 261-2394 - Office (252) 255-0876 - Fax www.southemshores-nc.gov



Trade Contractor Permit

Date November 18, 2020

TP20-00018	0	
Mechanical	Trade	Permit

Project Address: 3 MOCKINGBIRD LN
PIN #: 021637000
Property Owner: KOHLER, WILLIAM L JR
Mailing Address: 7108 BLAN

Mailing Address: 7108 BLANCHARD DR DERWOOD, MD 20855

DERWOOD, MD 20855 **Permit Types:** Mechanical Gas Plumbing Electrical Contractor: Qualifier: Douglas Wakeley Company Name: R.A. Hoy Heating & A/C Phone: (252) 261-2008 Address: P.O. Box 179 N. C. License Number: 13056 Kitty Hawk, NC 27949 Description of Work: C/ 4 TON 16 SEER TRANE SYSTEM WHOLE HOUSE WITH T-6 THERMOSTAT Project Cost Estimate: \$7,900.00 Permit Amount: 100.00 Payment: Date Type Reference Receipt ReceivedFrom Amount

I hereby certify that all information in this application is correct and all work will comply with the State Building Code and all other local laws and ordinances and regulations. The Inspection Department will be notified of any changes in the approved plans and specification for the project permitted herein.

Jaclyn Slater

11/18/2020

Signature of Licensee or Duly Authorized Representative

Date

Signature of Permit Official



TOWN OF SOUTHERN SHORES
PLANNING AND CODE ENFORCEMENT
5375 N Virginia Dare Trail, Southern Shores, NC 27949
(252) 261-2394 Ext 4 - Office (252) 255-0876 - Fax
www.southernshores-nc.gov

RESIDENTIAL BUILDING/FLOODPLAIN **DEVELOPMENT PERMIT**

Parcel: PIN: Location: District: Subdiv Lot-Block-Sect:	RS1 - Sir CHICAH	57307 SKEET TRL ngle Family Reside	ential District	Owner: Address: Phone #:	KRANDA, JAMES 82 POTESKEET 1 KITTY HAWK, NO 7036242927	rrl (
BUSINESS NAME: CONTRACTOR'S NA ADDRESS: CITY, STATE, ZIP: OFFICE#: CELL# FAX#:	ME: W 1 V	ES Construction, L //lliam Davis 741 Corporate Lar irginia Beach, VA 2 57) 337-4221	iding Pkwy Ste 101	NC G.C. LICENSED NC G.C. LICENSE N LIMITATION: CLASSIFICATION: QUALIFIER: LIEN AGENT NAME: ENTRY#:	UMBER:	Licensed General Contractor 69678 Limited Building William Scott Davis
EMAIL:	Je	svbpermitting@jes	swork.com	LIEN AGENT ADDRE	ESS:	
TYPE OF CONSTRU	CTION:	New Constructio	n - Addition / Expans	ion - Remodel / Rer	ievation / Repair -	Accessory - Olher Vorkshop - Gazebo
Detached Garage	- i Acc		ding - 🛴 Dune Deck -			
OCCUPANCY:	-10 (Ö-F)		TYPE OF FOUNDATIO	N:	PERMIT TYPE	
HEATED/LIVING ARE NON-HEATED AREA			HEAT:		RESIDENCE T	
		Ų .	A/C:		BUILDING USE	: Single Family
NUMBER OF STORIE	ES:		INTERIOR WALLS:		Residential Dist	RICT: RS1 - Single Family
BEDROOMS:			EXTERIOR WALLS:		ZONING PERM	IIT #:
SEPTIC CAP. # OF P	ERSONS:		FIREPLACE:		DATE APPROVED:	
BATHS: 1/2 BATHS:			ROOF:		PERMITTED/C	ONDITIONAL USE:
GARAGE - DETACHE			INSULATION:		CAMA PERMIT	·#:
STORAGE ENCLOSE	JRE:		ELEVATOR (SqFt):		DATE ISSUED:	
POOL: SHED:			DECKS (SgFt):			V =
FLOOD ZONE: Unsha			WINDOWS MAKE:		SEPTIC PERM	T#:
BASE FLOOD ELEVA	TION: PL	.US 2FT= 2	WINDOWS TYPE:		DATE ISSUED:	
PERMIT FEES: Description Remodel / Renovation / Homeowners Recovery Minimum Permit Fee	Fund			TION COST: \$5,000.00		Total Cost 50,00 10,00 50,00 TOTAL FEE: 110,00
cult authorized agent	ne rown o	n abuthern andres habelt capatructio	with all regulations and The applicant certifies I shall be as shown on revoked for failure to c	that the information on	this permit is corre	uction and be certain to comply ct; that he/she is the owner or he/she understands this permit is
Applicant - Owner/Co	ntractor	<i>j</i> ~	(Please print	and sign name)		•
Buddy	Shel	ton		18-2020		Date Approved
Building/Code/Zoning	Official	by MB	Karan Maria	TO STATE OF THE ST		Date Issued
		U				

5375 N Virginia Dare Trail, Southern Shores, NC 27949 (252) 261-2394 - Office (252) 255-0876 - Fax www.southernshores-nc.gov



Residential Trade Contractor Permit

Date November 17, 2020

TP20-00017	5	
Mechanical	Trade	Permit

Project Address: 35 NORTH DUNE LOOP

Property Owner: LADELL, PAULA J

PIN #: 022523050

Mailing Address: 35 NORTH DUNE LOOP

Property Owner. LADELL, FAOLA 3	iwaling Address	SOUTHERN SH	HORES, NC 27949
Permit Types: Plumbing Electrical Mechanica Contractor:	al Gas		
Company Name: North Beach Services Hea	ating and Cooling	Qualifier:	Jimmy Weaver
Phone: (252) 491-2878		Address:	PO Box 181
N. C. License Number: 22053			Kitty Hawk , NC 27949
Description of Work: Replace HVAC sys	tem with Trane 14 Seer, 4 to wer system with Trane 14 se	on heat pump and see 3 ton heat pum	l matching air handler. np and matching air handler
Project Cost Estimate: \$12,000.00	Permit Amount: 100.00 Payment: Date Type Reference Re	ceipt ReceivedFı	om Amount
I hereby certify that all information in this appl	lication is correct and all work	will comply with the	ne State Building Code and all

I hereby certify that all information in this application is correct and all work will comply with the State Building Code and all other local laws and ordinances and regulations. The Inspection Department will be notified of any changes in the approved plans and specification for the project permitted herein.

Signature of Lidensee or Duly Authorized Representative

11 // ZL)

Signature of Permit Off

Date

5375 N Virginia Dare Trail, Southern Shores, NC 27949 (252) 261-2394 - Office (252) 255-0876 - Fax www.southernshores-nc.gov



Residential Trade Contractor Permit

Date November 16, 2020

TP20-000173	
Mechanical Trade	Permit

Mechanical Trade Permit	
Project Address: 294 WAX MYRTLE TRL Property Owner: WIELOBOB, STANLEY G JR	PIN #: 021344000 Mailing Address: 400 FINNIN RD NEW KENSINGTON, PA 15068
Permit Types: Plumbing Electrical Mechanical Gas Contractor:	
Company Name: North Beach Services Heating and Coo Phone: (252) 491-2878 N. C. License Number: 22053	Qualifier: Jimmy Weaver Address: PO Box 181 Kitty Hawk , NC 27949
Description of Work: Replace HVAC system with Tra	ne 14 Seer 3 ton heat pump and matching air handler

I hereby certify that all information in this application is correct and all work will comply with the State Building Code and all other local laws and ordinances and regulations. The Inspection Department will be notified of any changes in the approved plans and specification for the project permitted herein.

Date Type Reference Receipt ReceivedFrom Amount

Permit Amount: 100.00

Payment:

Licensee or Duly Authorized Representative

Project Cost Estimate: \$6,000.00

5375 N Virginia Dare Trail, Southern Shores, NC 27949 (252) 261-2394 - Office (252) 255-0876 - Fax www.southernshores-nc.gov



Residential Trade Contractor Permit

Date November 02, 2020

TP20-000171 Electrical Trade Permit	
Project Address: 101 bear track LN	PIN #:
Property Owner: ARNOLD, REBECCA	Mailing Address: 101 BEAR TRACK LN. SOUTHERN SHORES, NC 27949
Permit Types: Plumbing Electrical Mechanical Contractor:	Gas
Company Name: Angel Advanced Technologies, L	.LC Qualifier: Matius Antonio Florez
Phone: (252) 256-2773	Address: 9138 Carotoke Hwy
N. C. License Number: 30701-I	Point Harbor, NC 27964
Project Cost Estimate: \$4,500.00 Perm	nit Amount: 100.00
	Type Reference Receipt ReceivedFrom Amount
I hereby certify that all information in this application other local laws and ordinances and regulations. The approved plans and specification for the project perm	is correct and all work will comply with the State Building Code and all e Inspection Department will be notified of any changes in the mitted herein.
Signature of Licenses on Duty Authority of December 1	11/18/2020 BM / 5 M //-18-da
Signature of Licensee or Duly Authorized Represent	ative Date Signature of Permit Official Date



5375 N Virginia Dare Trail, Southern Shores, NC 27949 (252) 261-2394 Ext 4 - Office (252) 255-0876 - Fax www.southernshores-nc.gov

RESIDENTIAL BUILDING/FLOODPLAIN DEVELOPMENT PERMIT

GARAGE - DETACHED: ATTACHED: INSULATION: CAMA PERMIT #: STORAGE ENCLOSURE: ELEVATOR (SqFt): DATE ISSUED: DOOL: SHED: CLOOD ZONE: Unshaded X WINDOWS MAKE: SEPTIC PERMIT #: BASE FLOOD ELEVATION: LES 8ft WINDOWS TYPE: DATE ISSUED: TOTAL CONSTRUCTION COST: \$7,000.00 PERMIT FEES: DECKS (SqFt): TOTAL CONSTRUCTION COST: \$7,000.00 PERMIT FEES: DECKS (SqFt): TOTAL CONSTRUCTION COST: \$7,000.00 TOTAL FEES: DECKS (SqFt): TOTAL CONSTRUCTION COST: \$7,000.00 TOTAL FEES: DECKS (SqFt): TOTAL CONSTRUCTION COST: \$7,000.00 DESCRIPTION COST: \$7,000.00 TOTAL FEES: TOTAL CONSTRUCTION COST: \$7,000.00 TOTAL FEES:	Parcel: PIN:	022437000 986716833579		Owner: Address:	LASHLEY, KARA 175 HAPPY INDIAN LN
LUCHICAHAÜK LOT: 278 BLK: SEC: HUSINESS NAME: LOT: 278 BLK: SEC: LUBI AGENT NAME: LUBI AGENT NA		175 HAPPY INDIAN LI	1		KITTY HAWK, NC 27949
DISPESS NAME: USINESS NAME: ONTEACTOR'S NAME: DISPESS: 175 Happy Indian Lane 175 Hap			esidential District	Phone #:	2525996275
USINESS NAME: ONTRACTOR'S NAME: ONTRACTOR'S NAME: ONTRACTOR'S NAME: OTRACTOR'S NAME: OTRACTOR'S NAME: OTRACTOR'S NAME: OTRACTOR'S NAME: OTRACTOR'S NAME: 175 Happy Indian Lane 176 Happy Indian Lane 176 Happy Indian Lane 176 Happy Indian Lane 177 Happy Indian Lane 177 Happy Indian Lane 177 Happy Indian Lane 178 Happy Indian Lane 1					
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DRESS: 175 Happy Indian Lane Southern Shores, NC 27949 CLASSIFICATION: QUALIFIER: LIEN AGENT NAME: ENTRY#: LIEN AGENT ADDRESS: SCRIPTION OF WORK - (Any deviation from the Building Plan or Site Plan requires prior approval): Bathroom Remodel with no addit uare footage or restricting of floor plan. Adding additional sink and moving one drain done by licensed plumber. Licensed electrician to movel/ure and heated floor. Wall floor resurfacing to be done by property owner. ECIAL CONDITIONS - PE OF CONSTRUCTION: New Construction - Addition / Expansion - Remodel / Renovation / Repair - Accessory - Other Builkhead - Piers/Docks - Retaining Wall - Beach Access Walkway/Stairs - Swimming Pools - Workshop - Gazebo Detached Garage - Accessory Storage Building - Dune Deck - Generator CCUPANCY: TyPE OF FOUNDATION: PERMIT TYPE: Residential ATEDILLVING AREAS (SqFt): 0.0 HEAT: RESIDENCE TYPE: Residence DN-HEATED AREAS (SqFt): 0.0 AC: BUILDING USE: Single Family MIBER OF STORIES: NTERIOR WALLS: Residential District DROOMS: EXTERIOR WALLS: ZONING DISTRICT: RS1 - Single Family ARAGE - DETACHED: ATTACHED: (NSULATION: OAR) DRAGE PERMIT #: DRAGE - DETACHED: ATTACHED: (NSULATION: OAR) ORAGE ENCLOSURE: ELEVATOR (SqFt): DATE ISSUED: DATE ISSUED: TOTAL CONSTRUCTION COST: \$7,000.00 RRMIT FEES: Secription TOTAL CONSTRUCTION COST: \$7,000.00 TOTAL FEE The owner and builder are responsible to comply with all regulations and laws; should personally inspect all construction and he certain to he all Ordinances of the Town of Southern Shores. The applicant certifies that the information on this permit is correct, that he/she is the own y authorized agent of owner; that all construction shall be as shown on the submitted plans and specifications; the he/she understands this do for 90 days to begin construction and may be revoked for failure to comply with applicable regulations and laws. PLACE - CONTROL CONTRUCTION CONTRUCTION CONTRUCTION and laws.					
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LIEN AGENT NAME: ### ENTRY#: IAIL: bucklermark@gmail.com LIEN AGENT ADDRESS: #### ENTRY#: LIEN AGENT ADDRESS: ##################################	ΓY, STATE, ZIP:	Southern Shore	s, NC 27949	CLASSIFICATIO	N:
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DOL: SHED: DECKS (SqFt): DOD ZONE: Unshaded X WINDOWS MAKE: SEPTIC PERMIT #: DATE ISSUED: TOTAL CONSTRUCTION COST: \$7,000.00 ERMIT FEES: Percription Permit Fee TOTAL FE The owner and builder are responsible to comply with all regulations and laws; should personally inspect all construction and be certain to the hall Ordinances of the Town of Southern Shores. The applicant certifies that the information on this permit is correct; that he/she is the own by authorized agent of owner; that all construction shall be as shown on the submitted plans and specifications; the he/she understands this id for 180 days to begin construction and may be revoked for failure to comply with applicable regulations and laws. Your Authorized School Sc			INSULATION:		CAMA PERMIT #:
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TOTAL CONSTRUCTION COST: \$7,000.00 ERMIT FEES: Escription Emodel / Renovation / Repair Fee Inimum Permit Fee TOTAL FE The owner and builder are responsible to comply with all regulations and laws; should personally inspect all construction and be certain to the hall Ordinances of the Town of Southern Shores. The applicant certifies that the information on this permit is correct; that he/she is the own by authorized agent of owner; that all construction shall be as shown on the submitted plans and specifications; the he/she understands this id for 180 days to begin construction and may be revoked for failure to comply with applicable regulations and laws. **Auxa Lashey** (Please print and sign name) Date Auxiliary (Please print and sign name)	OOD ZONE: Uns	shaded X	WINDOWS MAKE		SEPTIC PERMIT #:
TOTAL FE The owner and builder are responsible to comply with all regulations and laws; should personally inspect all construction and be certain to the hall Ordinances of the Town of Southern Shores. The applicant certifies that the information on this permit is correct; that he/she is the own youthorized agent of owner; that all construction shall be as shown on the submitted plans and specifications; the he/she understands this id for 180 days to begin construction and may be revoked for failure to comply with applicable regulations and laws. **TOTAL FE** TOTAL FE** TO	SE FLOOD ELE	VATION: LES 8ft			DATE ISSUED:
The owner and builder are responsible to comply with all regulations and laws; should personally inspect all construction and be certain to the hall Ordinances of the Town of Southern Shores. The applicant certifies that the information on this permit is correct; that he/she is the own by authorized agent of owner; that all construction shall be as shown on the submitted plans and specifications; the he/she understands this id for 180 days to begin construction and may be revoked for failure to comply with applicable regulations and laws. **AUA Lashley** Oplicant - Owner/Contractor* (Please print and sign name) **Date AUA** Oplicant - Owner/Contractor* (Please print and sign name)	escription emodel / Renovatio		TOTAL CONS	TRUCTION COST: \$7,000	70.00 Total Cost 70.00 30.00 TOTAL FEE: 100.00
	th all Ordinances o ly authorized ager	of the Town of Southern S nt of owner; that all constr	hores. The applicant ce uction shall be as show	rtifies that the information on the submitted plans	sonally inspect all construction and be certain to comply on on this permit is correct; that he/she is the owner or s and specifications; the he/she understands this permit is
Dudde Shalton	plicant - Owner/	Contractor	(Please	print and sign name)	Date Approved
Buday (Mel 101)	Buddy	Shelton	•		



5375 N Virginia Dare Trail, Southern Shores, NC 27949 (252) 261-2394 Ext 4 - Office (252) 255-0876 - Fax www.southernshores-nc.gov

RESIDENTIAL BUILDING/FLOODPLAIN DEVELOPMENT PERMIT

PIN:	021051000		Owner:	EBBANDFLOW LLC
13.21	98681444053		Address:	24 FIRST AVE
ocation: District:	24 FIRST AV	E Family Residential District	Phone #:	SOUTHERN SHORES, NC 27949 9194915625
Subdiv	SEA CREST		Phone #:	9194915625
ot-Block-Sect:	LOT: 14 BLK:			
USINESS NAME:				SED CONTRACTOR:
ONTRACTOR'S NA DDRESS:		Ripley irst Ave.	NC G.C. LICENS LIMITATION:	SE NUMBER:
ITY, STATE, ZIP:	Sout	thern Shores, NC 27949	CLASSIFICATIO	ON:
FFICE#:	919-4	91-5625	QUALIFIER:	
ELL#	919-4	91-5625	LIEN AGENT NA	AME:
AX#:			ENTRY#:	
MAIL:	paul	aripley@gmail.com	LIEN AGENT AL	DDRESS:
	the state of the s	ew Construction - Addition / Ex		/ Renovation / Repair - Accessory - Other Swimming Pools - Workshop - Gazebo
Maria Service Control of the Control	The second secon	ry Storage Building - Dune Dec	200	A CHARLES AND A CONTRACT OF A SECURIOR
CCUPANCY:	- W Moodoo	TYPE OF FOUNDA		PERMIT TYPE: Residential
EATED/LIVING AR	FAS (SaFt): 19	Control of the Contro	Allow.	RESIDENCE TYPE: Residence
ON-HEATED AREA		A/C: Electric		BUILDING USE: Single Family
UMBER OF STORI		INTERIOR WALLS	: sheetrock	ZONING DISTRICT: RS1 - Single Family Residential District
EDROOMS:		EXTERIOR WALLS	S: TBD	ZONING PERMIT #:
EPTIC CAP. # OF P	ERSONS:	FIREPLACE:		DATE APPROVED:
ATHS: 1/2 BATHS:		ROOF:		PERMITTED/CONDITIONAL USE: Single Family Dwelling
ARAGE - DETACH	COMMUNICATION OF THE PARTY OF T			CAMA PERMIT #:
TORAGE ENCLOS	JRE:	ELEVATOR (SqFt):	:	DATE ISSUED:
	1.157	DECKS (SqFt):		
	the state of the s	WINDOWS MAKE:		SEPTIC PERMIT #:
LOOD ZONE: Unsh		ft WINDOWS TYPE:	Vinyl Double Hung	IDATE ISSUED:
LOOD ZONE: Unsh	ATION: LES 8	WINDOWS THE	Villyi Double Hung	DATE ISSUED:
POOL: SHED: FLOOD ZONE: Unsh. BASE FLOOD ELEV. PERMIT FEES: Description Heated/Living Area Fe		TOTAL CONST	TRUCTION COST: \$6,00	0.00 Total Cost 114.00
PERMIT FEES: Description Heated/Living Area Feeth all Ordinances of the Justine Authorized agent	e (Single Family der are respon the Town of S of owner; វូវាជុំវ	TOTAL CONST /) sible to comply with all regulation outhern Shores. The applicant cer	TRUCTION COST: \$6,00 as and laws; should per- rtifies that the information on the submitted plan	Total Cosing 114.00 TOTAL FEE: 114.00 TOTAL FEE: 114.00 sonally inspect all construction and be certain to comply on on this permit is correct; that he/she is the owner or and specifications; the he/she understands this permit is
PERMIT FEES: Description Heated/Living Area Fee The owner and built all Ordinances of ally authorized agent all for 180 days to be	e (Single Family der are respons the Town of So of owner; that egin construct W	TOTAL CONST sible to comply with all regulation outhern Shores. The applicant cer all construction shall be as show	TRUCTION COST: \$6,00 as and laws; should per- rtifies that the information on the submitted plan	Total Cos 114.00 TOTAL FEE: 114.00 sonally inspect all construction and be certain to comply on on this permit is correct; that he/she is the owner or as and specifications; the he/she understands this permit is able regulations and laws.
PERMIT FEES: Description Heated/Living Area Fee The owner and built ith all Ordinances of buly authorized agent alid for 180 days to b	e (Single Family der are respons the Town of So of owner; that egin construct W	TOTAL CONST sible to comply with all regulation buthern Shores. The applicant cer all construction shall be as show ion and may be revoked for failure	TRUCTION COST: \$6,00 as and laws; should per- rtifies that the information on the submitted plan	Total Cos 114.00 TOTAL FEE: 114.00 sonally inspect all construction and be certain to comply on on this permit is correct; that he/she is the owner or as and specifications; the he/she understands this permit is
PERMIT FEES: Description Heated/Living Area Ferlith all Ordinances of uly authorized agent	e (Single Family der are respons the Town of So of owner; that egin construct W	TOTAL CONST sible to comply with all regulation buthern Shores. The applicant cer all construction shall be as show ion and may be revoked for failure	IRUCTION COST: \$6,00 Is and laws; should per- rtifies that the information on the submitted plar the to comply with applic	Total Cos 114.00 TOTAL FEE: 114.00 sonally inspect all construction and be certain to comply on on this permit is correct; that he/she is the owner or as and specifications; the he/she understands this permit i able regulations and laws.



TOWN OF SOUTHERN SHORES
PLANNING AND CODE ENFORCEMENT
5375 N Virginia Dare Trail, Southern Shores, NC 27949
(252) 261-2394 Ext 4 - Office (252) 255-0876 - Fax
www.southernshores-nc.gov

RESIDENTIAL **BUILDING/FLOODPLAIN DEVELOPMENT PERMIT**

PIN: Location: District: Subdiv	022519101 986714323684 40 GINGUITE TRL RS1 - Single Family Res SO/SH BLK 129 SEC E LOT: 79A BLK: 129 SEC		Owner: Address: Phone #:	MIDDLETON, RC 40 GINGUITE TR SOUTHERN SHC 4104356171	RL .
BUSINESS NAME: CONTRACTOR'S NAI ADDRESS: CITY, STATE, ZIP: DFFICE#: CELL# FAX#: EMAIL:	PO Box 448 Nags Head, NC 2 (252) 261-2212 (252) 261-1115 emanuelson6705	27959 i@outlook.com	NC G.C. LICENSEI NC G.C. LICENSE LIMITATION: CLASSIFICATION: QUALIFIER: LIEN AGENT NAM ENTRY#: LIEN AGENT ADD	NUMBER: E: RESS:	Licensed General Contractor 79801 Limited Residential Elizha Barrett Chicago Title Company LLC 1351406 223 S. West St, Suite 900/Raleigh, NC 27603 TRUCT 275' PIER WITH 15X25'
LATFORM WITH PAR PECIAL CONDITION	RTIAL HIP ROOF. INSTA IS -	LL BOATLIFT			Accessory - Other
YPE OF CONSTRUC	New Constru	CHOTI - Addition / Ex	ss Walkway/Stairs - S	wimming Pools -	Workshop - Gazebo
i Bulkhead - 💥 Pi	ers/Docks - Retaining	vvali - Libeach Acce	as vvainway/olalis = 1 3	managa ooo	
	- Accessory Storage	Building - U Dune Dec	k - Generator	PERMIT TYP	E. Pesidential
CCUPANCY:		TYPE OF FOUNDA	TION:		TYPE: Residence
EATED/LIVING ARE		HEAT:			SE: Single Family
ON-HEATED AREA	S (SqFt): 0	A/C:			RICT: RS1 - Single Family
UMBER OF STORIE	ES:	INTERIOR WALLS	:	Residential Di	
		EXTERIOR WALLS	·		MIT #: ZP20-000093
BEDROOMS: BEPTIC CAP. # OF PI	EDOONS.	FIREPLACE:		DATE APPRO	OVED: 11/17/2020
BATHS: 1/2 BATHS:	ERGONG.	ROOF:		PERMITTED/ Dwelling	CONDITIONAL USE: Single Family
ARAGE - DETACHE	D. ATTACHED:	INSULATION:		CAMA PERM	IT #: 78708
TORAGE ENCLOSE		ELEVATOR (SqFt):		DATE ISSUE	D: 10/23/2020
OOL: SHED:		DECKS (SqFt):			
LOOD ZONE: Shade	ed X	WINDOWS MAKE:		SEPTIC PER	MIT #:
BASE FLOOD ELEVA		WINDOWS TYPE:		DATE ISSUE	D:
JAGE 1 LOOD LLLT					
	/	TOTAL CONST	RUCTION COST: \$78,643.	ብበ	
PERMIT FEES: Description	Detailing Mail For	IO IAL CONST	1100 11011 0001. W. 0,040.		Total Cos 100.00
Bulkhead, Dock, Pier, I	_				TOTAL FEE: 100.0
with all Ordinances of duly authorized agent valid for 180 days to b	of owner; that all construction and m	iores. The applicant cei iction shall be as show ay be revoked for failur		and specifications; to le regulations and la	struction and be certain to comply rrect; that he/she is the owner or he he/she understands this permit ws.
Cargue C	lens	1 repoet	LINE O'KEW	13	11/17/202
/ Applicant - Owner/C	ontractor	(Please	print and sign name)		Date Approve
4	halton				11-20-21
Buddy Si Building/Code/Zonir	WY (X)				Date Issue

5375 N Virginia Dare Trail, Southern Shores, NC 27949 (252) 261-2394 - Office (252) 255-0876 - Fax www.southernshores-nc.gov



Trade Contractor Permit

Date November 19, 2020

Project Address: 70 E DOGWOOD TR		PIN #: 022193000
Property Owner: HAMLEY, JONATHON	I C TTEE	Mailing Address: 1228 RELLEN ST CHESAPEAKE, VA 23320
Permit Types: Plumbing Electrical Mech Contractor:	anical Gas	
Company Name: R.A. Hoy Heating & A	/C	Qualifier: Douglas Wakeley
Phone: (252) 261-2008		Address: P.O. Box 179
N. C. License Number: 13056		Kitty Hawk, NC 27949
Description of Work: C/O 2 TON 16 S	SEER TRANE SYS	STEM TOP LEVEL WITH XL724 THERMOSTAT
Description of Work: C/O 2 TON 16 S	EER TRANE SYS	STEM TOP LEVEL WITH XL724 THERMOSTAT
•	Permit Amo	
Description of Work: C/O 2 TON 16 S Project Cost Estimate: \$6,713.00	Permit Amo Payment:	

11/19/2020

Date

Signature of Licensee or Duly Authorized Representative

Jaclyn Slater

11/23/2020 Permit Detail

TOWN OF SOUTHERN SHORES PLANNING AND CODE ENFORCEMENT

5375 N Virginia Dare Trail, Southern Shores, NC 27949 (252) 261-2394 - Office (252) 255-0876 - Fax www.southernshores-nc.gov

Project Address: 70 E DOGWOOD TRL



Trade Contractor Permit

Date November 23, 2020

PIN #: 022193000

TP20-000182			
Mechanical Trade	Permit		

CHESAPEAKE, VA 23320
al Gas
Qualifier: Douglas Wakeley
Address: P.O. Box 179
Kitty Hawk, NC 27949
ENT GROUND LEVEL
Permit Amount: 100.00
Payment:
Date Type Reference Receipt ReceivedFrom Amount

Jaclyn Slater

11/23/2020

Signature of Licensee or Duly Authorized Representative

approved plans and specification for the project permitted herein.

Date

Suddy Sheltm //-24-2020 Signature of Permit Officially Date



TOWN OF SOUTHERN SHORES
PLANNING AND CODE ENFORCEMENT
5375 N Virginia Dare Trail, Southern Shores, NC 27949
(252) 261-2394 Ext 4 - Office (252) 255-0876 - Fax
www.southernshores-nc.gov

RESIDENTIAL BUILDING/FLOODPLAIN **DEVELOPMENT PERMIT**

Parcel: PIN: Location: District:	021510000					
Location:			Owner:	CHANDLER, MA	RY C	
	986814347108		Address:	152 CONNERY T		
	267 DUCK RD	eldential Dietriot	Phone #:	LEESBURG, VA	20175	
ubdiv	RS1 - Single Family Re SO/SH BEACH BLKS		rnone #:	7036254751		
ot-Block-Sect:	LOT: 19 BLK: 63 SEC:	70 00 0 <u>2</u> 4				
USINESS NAME: ONTRACTOR'S NA DDRESS: ITY, STATE, ZIP: FFICE#:	Snearer Constr AME: Paul Snearer P.O. Box 2875 Kitty Hawk, NC (252) 261-2228	•	NC G.C. LICENSED NC G.C. LICENSE N LIMITATION: CLASSIFICATION: QUALIFIER:		Licensed General Contractor 25865 Unlimited Building Paul Snearer	
: . , (02,);; ELL#	(202) 201-2220		LIEN AGENT NAME	:•	First American Tiltle Insurance	
\X#:	•			•	COmpany	
			ENTRY#:		1356163 223 S West Street, Suite 900	
MAIL:	paulsnearerhon	nes@gmail.com	LIEN AGENT ADDR	ESS;	Raleigh, NC 27603	
🗍 Bulkhead - 🔘 F	JCTION: New Constr	g Wall - 🔲 Beach Acces	pansion - Remodel / Ress Walkway/Stairs - Swi		-	
CCUPANCY:	>- ' Nobedadiy Otorage	TYPE OF FOUNDAT		PERMIT TYPE	- Residential	
EATED/LIVING AR	(EAS (SqFt): 84.0	HEAT: Electric			TYPE: 2nd Home	
ON-HEATED AREA		A/C: Heat Pump			E: Single Family	
UMBER OF STORI		INTERIOR WALLS:	Drywail		RICT: RS1 - Single Family	
EDROOMS:		EXTERIOR WALLS:	: Cedar Shakes	ZONING PERMIT #: ZP20-000095		
PTIC CAP. # OF P	'ERSONS:	FIREPLACE:			DATE APPROVED: 11/25/2020	
	:	ROOF: Asphalt		Dwelling	CONDITIONAL USE: Single Family	
				CAMA PERMI		
ARAGE - DETACH	ED: ATTACHED:	INSULATION: Batt				
ARAGE - DETACH	ED: ATTACHED:	ELEVATOR (SqFt):		DATE ISSUED		
ARAGE - DETACH FORAGE ENCLOS DOL: SHED;	ED: ATTACHED: URE:	ELEVATOR (SqFt): DECKS (SqFt): 228	Andorson	DATE ISSUED):	
ARAGE - DETACH TORAGE ENCLOS DOL: SHED: LOOD ZONE: Unsh	ED: ATTACHED: URE: naded X	ELEVATOR (SqFt): DECKS (SqFt): 228 WINDOWS MAKE: /		DATE ISSUED SEPTIC PERM	D: MIT #: 30242	
ARAGE - DETACH TORAGE ENCLOS OOL: SHED: LOOD ZONE: Unsh	ED: ATTACHED: URE: naded X	ELEVATOR (SqFt): DECKS (SqFt): 228		DATE ISSUED	D: MIT #: 30242	
ARAGE - DETACH TORAGE ENCLOS TOOL: SHED: LOOD ZONE: Unsh ASE FLOOD ELEV PERMIT FEES: Description Heated/Living Area Fe Homeowners Recovery	ED: ATTACHED: URE: maded X ATION: LES 8ft ee (Single Family) e (Single Family) y Fund	ELEVATOR (SqFt): DECKS (SqFt): 228 WINDOWS MAKE: / WINDOWS TYPE: D TOTAL CONSTR	ouble Hung	SEPTIC PERM DATE ISSUED	Total Cost 50.40 93.60 10.00 TOTAL FEE: 154.00	
ith all Ordinances of ulv authorized agent	e (Single Family) e (Single Family) e (Single Family) y Fund der are responsible to co	ELEVATOR (SqFt): DECKS (SqFt): 228 WINDOWS MAKE: / WINDOWS TYPE: D TOTAL CONSTR Imply with all regulations ores. The applicant certication shall be as shown ay be revoked for failure	ouble Hung COST: \$70,000.00 and laws; should persona	SEPTIC PERM DATE ISSUED Illy inspect all const in this permit is corrid specifications; the	Total Cost 50.40 93.60 10.00 TOTAL FEE: 154.00 Truction and be certain to comply ect; that he/she is the owner or e he/she understands this permit is	



Manteo: (252) 475-5080 Northern Beach: (252) 475-5871

Frisco: (252) 475-5878

RESIDENTIAL BUILDING PERMIT

BUILDING PERMIT#: R-3145					11/04/2020	
Parcel Number:	015117003					
Location:	PINEY RIDGE RD	PINEY RIDGE RD – FRISCO				
Subdivision:	JOHN & MARTHA	JOHN & MARTHA SHELTON DIVISION				
Legal Description:	LOT: 2 BLK: SEC:					
Owner Name:	REGENA R TTEE	KAVANAGH				
Owner Mail Address: Owner Phone and email:	P O BOX 118 BUXTON, NC 27920					
Contractor Name:	CAROLAN'S BAY	SHORE CONSTRUCTION	ON INC			
Contractor Mail Address:	PO BOX 1486, B	UXTON, NC 27920				
Contractor Phone:	252-473-9129	Contractor NC	License#: 46373			
BUILDING INFORMATION						
Proposed Construction Use:	SINGLE FAMILY D	WELLING NEW				
Proposed Construction Type:	SFD	Cost of	Construction:	\$377,000		
Finished Square Footage:	1560	CAMA	Permit#:	N/A		
Unfinished Square Footage:	968	Septic	Permit#:	30157		
Stories:	1.0	Septic	Permit Date:	10/29/20		
Building Height:	0	Survey	/Site Plan:	YES		
Total Rooms:	5	Water	Тар#:	yes		
Footing Type:	PILING	Water	Туре:	Central Water		
Exterior Finish:	WOOD SHINGLES	Flood	Zone:	AE		
Proposed Finished Floor	A1.60	Base F	lood Elevation:	9.0		
Elevation:	N/A	Lot/Gr	ound Elevation:	6		
Bedrooms:	3	Baths/	half baths:	2.00/0		
Comments: Any deviation from or site plan requires prior appr		PERMIT FEE			\$1,557.20	
- Land - Janes brief abb		FLOOD DEVELOPME	NT BLDG PERMIT	~	75.00	
		HOME OWNERS REC		247	10.00	
		RESIDENTIAL ZONIN	G APPROVAL		100.00	
		TOTAL FEES:			\$1,742.20	
Applicant Signature:	no.	1.12	CAROLAN'S BAY	SHORE CONSTRUC	TION INC	
Inspector Signature:			CHF			



Manteo: (252) 475-5080 Northern Beach: (252) 475-5871

Frisco: (252) 475-5878

RESIDENTIAL BUILDING PERMIT

BUILDING	PERMIT#:	R-3187

11/09/2020

Parcel Number:

017222000

Location:

DIPPIN VAT RD - BUXTON **BUXTON WOODS TRACT**

Subdivision: **Legal Description:**

LOT: 5 BLK: SEC:

Owner Name:

STOWE, DAVID & WENDY

Owner Mail Address:

PO BOX 328 BUXTON, NC 27920

Owner Phone and email:

252-996-0292

Contractor Name:

STOWE, DAVID & WENDY

Contractor Mail Address:

PO BOX 328, BUXTON, NC 27920

Contractor Phone:

Contractor NC License#:

BUILDING INFORMATION

Proposed Construction Use:

SINGLE FAMILY DWELLING NEW, New Single Family Dwelling with pool

Proposed Construction Type:

SFD

Cost of Construction: \$360,000

Finished Square Footage:

2282

CAMA Permit#:

N/A

Unfinished Square Footage:

Proposed Finished Floor

1896

Septic Permit#:

29947

Stories:

2.0

Septic Permit Date:

9/4/20

YES

Building Height: Total Rooms:

0

Survey/Site Plan: Water Tap#:

CENTR

Footing Type:

PILING

Water Type: Flood Zone:

Central Water

Exterior Finish:

N/A

Base Flood Elevation:

Baths/half baths:

X 8.0

Elevation: Bedrooms:

Lot/Ground Elevation:

6 3.00/0

Comments: Any deviation from the building plan

PERMIT FEE

\$2,469.90 300.00

or site plan requires prior approval.

SWIMMING POOLS;HOT TUBS

158

FLOOD DEVELOPMENT BLDG PERMIT HOME OWNERS RECOVERY FEE **RESIDENTIAL ZONING APPROVAL**

75.00 10.00 100.00

TOTAL FEES:

\$2,954.90

Applicant Signature:

STOWE, DAVID & WENDY

Inspector Signature:

WAYLAND JENNETTE

CHF



Manteo: (252) 475-5080 Northern Beach: (252) 475-5871

Frisco: (252) 475-5878

RESIDENTIAL BUILDING PERMIT

BUILDING PERMIT#: R-3212				11/12/2020
Parcel Number:	011633000			
Location:	25252 SEA ISLE	HILLS DR - WAVES		
Subdivision:	SEA ISLE HILLS			
Legal Description:	LOT: 10 BLK: SEC	C: 3		
Owner Name:	CARL WORSLEY	& ASSOCIATES INC		
Owner Mail Address:	P O BOX 188 NA	GS HEAD, NC 27959		
Owner Phone and email:				
Contractor Name:	CARL WORSLEY	AND ASSOCIATES INC		
Contractor Mail Address:	PO BOX 188, NA	AGS HEAD, NC 27959		
Contractor Phone:	252-441-2327	Contractor NC License#: 58569		
BUILDING INFORMATION				
Proposed Construction Use:	SINGLE FAMILY	DWELLING NEW, NEW SFD		
Proposed Construction Type:	SFD	Cost of Construction:	\$300,000	
Finished Square Footage:	1944	CAMA Permit#:	N/A	
Unfinished Square Footage:	1063	Septic Permit#:	30029	
Stories:	0.0	Septic Permit Date:	9/30/20	
Building Height:	0	Survey/Site Plan:	YES	
Total Rooms:	0	Water Tap#:	YES	
Footing Type:		Water Type:	Central Water	
Exterior Finish:		Flood Zone:	X	
Proposed Finished Floor	9'	Base Flood Elevation:	8.0	
Elevation:	9	Lot/Ground Elevation:	4.7	
Bedrooms:	0	Baths/half baths:	0.00/0	
Comments: Any deviation from		PERMIT FEE		\$1,883.20
or site plan requires prior appr	oval.	FLOOD DEVELOPMENT BLDG PERMIT		75.00
		HOME OWNERS RECOVERY FEE	154	10.00
		RESIDENTIAL ZONING APPROVAL		100.00
		TOTAL FEES:		\$2,068.20
Applicant Signature:	may Carp	CARL WORSLEY A	AND ASSOCIATES IN	IC
Inspector Signature: CREW I	HAYES	CHF		



Manteo: (252) 475-5080 Northern Beach: (252) 475-5871 Frisco: (252) 475-5878

RESIDENTIAL BUILDING PERMIT

BUILDING	PERMIT#:	R-3285

11/25/2020

Parcel Number:

014822624

Location: Subdivision: **BREECHES BUOY LN - AVON** KINNAKEET SHORES PHASE 6

Legal Description:

LOT: 624 BLK: SEC:

Owner Name:

CARL WORSLEY & ASSOCIATES INC. P O BOX 188 NAGS HEAD, NC 27959

Owner Phone and email:

Owner Mail Address:

Contractor Name:

CARL WORSLEY AND ASSOCIATES INC.

Contractor Mail Address:

PO BOX 188, NAGS HEAD, NC 27959

Contractor Phone:

252-441-2327

Contractor NC License#: 58569

BUILDING INFORMATION

Proposed Construction Use:

SINGLE FAMILY DWELLING NEW, NEW SFD

Proposed Construction Type:

SFD

Cost of Construction:

\$300,000

Finished Square Footage:

1485

CAMA Permit#: Septic Permit#:

KINNAKEET SHORES

Unfinished Square Footage:

737 0.0

Septic Permit Date:

NA

Stories:

0

Survey/Site Plan:

YES

Building Height: Total Rooms:

Water Tap#:

YES

Footing Type:

0

Water Type:

Central Water

Exterior Finish:

Flood Zone:

SHX

Proposed Finished Floor

Base Flood Elevation:

8.0 4

Elevation: Bedrooms:

0

Lot/Ground Elevation: Baths/half baths:

0.00/0

Comments: Any deviation from the building plan

PERMIT FEE

\$1,408.55

or site plan requires prior approval.

FLOOD DEVELOPMENT BLDG PERMIT

202

75.00 10.00

HOME OWNERS RECOVERY FEE

RESIDENTIAL ZONING APPROVAL

100.00

TOTAL FEES:

\$1,593.55

Applicant Signature:

CARL WORSLEY AND ASSOCIATES INC

Inspector Signature: CREW HAYES



Manteo: (252) 475-5080 Northern Beach: (252) 475-5871

Frisco: (252) 475-5878

RESIDENTIAL BUILDING PERMIT

BUILDING PERMIT#: R-3234				11/16/2020
Parcel Number:	014822614			
Location:	41190 COSTEN L	IGHT CT – AVON		
Subdivision:	KINNAKEET SHO	RES PHASE 6		
Legal Description:	LOT: 614 BLK: SE	ic:		
Owner Name:	WILLIAM B LAZA	AR .		
Owner Mail Address: Owner Phone and email:	6 SARASOTA DR	STAFFORD, VA 22554		
Contractor Name:	KENRICK J ALBA	UGH INC		
Contractor Mail Address:	PO BOX 90, AVO			
Contractor Phone:	252-305-1569	Contractor NC License#: 60766		
BUILDING INFORMATION				
Proposed Construction Use:	SINGLE FAMILY	OWELLING NEW		
Proposed Construction Type:	SFD	Cost of Construction:	\$436,000	
Finished Square Footage:	2137	CAMA Permit#:	NO	
Unfinished Square Footage:	989	Septic Permit#:	N/A	
Stories:	0.0	Septic Permit Date:	N/A	
Building Height:	0	Survey/Site Plan:	YES	
Total Rooms:	0	Water Tap#:	YES	
Footing Type:		Water Type:	Central Water	
Exterior Finish:		Flood Zone:	AE	
Proposed Finished Floor	12	Base Flood Elevation:	8.0	
Elevation:	12	Lot/Ground Elevation:	4	
Bedrooms:	0	Baths/half baths:	0.00/0	
Comments: Any deviation from or site plan requires prior appr	• •	PERMIT FEE		\$1,998.35
or site plan requires prior appr	V1011	FLOOD DEVELOPMENT BLDG PERMIT	204	75.00
		HOME OWNERS RECOVERY FEE	2	10.00
		RESIDENTIAL ZONING APPROVAL		100.00
		TOTAL FEES:		\$2,183.35

PARE KENRICK J ALBAUGH INC

Inspector Signature: CREW HAYES CHF

Applicant Signature:



Manteo: (252) 475-5080 Northern Beach: (252) 475-5871

Frisco: (252) 475-5878

RESIDENTIAL BUILDING PERMIT

BUILDING PERMIT#: R-3256				11/20/2020
Parcel Number:	016018000			
Location:	NC 12 HWY - HA	ATTERAS		
Subdivision:	SUBDIVISION - N	IONE		
Legal Description:	LOT: BLK: SEC:			
Owner Name:	HATTERAS SHOP	RES TWO LLC		
Owner Mail Address:	P O BOX 90 KILL	DEVIL HILLS, NC 27948		
Owner Phone and email:				
Contractor Name:	SAGA CONSTRU	CTION INC		
Contractor Mail Address:	STE 301, 1314 S	CROATAN HWY KILL DEVIL HILLS, NC 279	948.	
Contractor Phone:	252-441-9003	Contractor NC License#: 62306		
BUILDING INFORMATION				
Proposed Construction Use:	SINGLE FAMILY	DWELLING NEW , NEW SFD WITH ATTACHE	ED POOL	
Proposed Construction Type:	SFD	Cost of Construction:	\$700,000	
Finished Square Footage:	4997	CAMA Permit#:	Hi-40-20	
Unfinished Square Footage:	1553	Septic Permit#:	30102	
Stories:	3.0	Septic Permit Date:	10/19/20	
Building Height:	50'9'	Survey/Site Plan:	YES	
Total Rooms:	14	Water Tap#:	YES	
Footing Type:	PILING	Water Type:	Central Water	
Exterior Finish:	OTHER	Flood Zone:	AO	
Proposed Finished Floor	N/A	Base Flood Elevation:	8.0	
Elevation:	13.7	Lot/Ground Elevation:	6.9	
Bedrooms:	11	Baths/half baths:	11.00/0	
Comments: Any deviation from	n the building plan	PERMIT FEE		\$4,368.95
or site plan requires prior appr	oval.	SWIMMING POOLS;HOT TUBS		300.00
		FLOOD DEVELOPMENT BLDG PERMIT	140	75.00
		HOME OWNERS RECOVERY FEE		10.00
		RESIDENTIAL ZONING APPROVAL		100.00
		TOTAL FEES:		\$4,853.95
Applicant Signature:	hu Al	RESIDENTIAL ZONING APPROVAL	TION INC	

CHF

Inspector Signature: WAYLAND JENNETTE



Manteo: (252) 475-5080 Northern Beach: (252) 475-5871

Frisco: (252) 475-5878

RESIDENTIAL BUILDING PERMIT

BUILDING PERMIT#: R-3181				11/09/2020
Parcel Number:	012821091			
Location:	26194 OTTER W	AY - SALVO		
Subdivision:	WIND OVER WA	VES PHASE 3		
Legal Description:	LOT: 11-R BLK: S	EC:		
Owner Name:	ONE LIFE OBX H	OLDINGS LLC		
Owner Mail Address:	P O BOX 9796 JA	ACKSON, WY 83002		
Owner Phone and email:				
Contractor Name:	RENAISSANCE C	ONSTRUCTION COMPANY INC	0.2 1	
Contractor Mail Address:	PO BOX 1411, N	/ANTEO, NC 27954		
Contractor Phone:	252-473-3312	Contractor NC License#: 26244		
BUILDING INFORMATION				
Proposed Construction Use:	SINGLE FAMILY	DWELLING NEW, NEW SFD with POOL		
Proposed Construction Type:	SFD	Cost of Construction:	\$1,438,000	
Finished Square Footage:	5011	CAMA Permit#:		
Unfinished Square Footage:	1988	Septic Permit#:	30094	
Stories:	3.0	Septic Permit Date:	10/16/20	
Building Height:	0	Survey/Site Plan:		
Total Rooms:	0	Water Tap#:	yes	
Footing Type:		Water Type:		
Exterior Finish:		Flood Zone:	AE	
Proposed Finished Floor		Base Flood Elevation:	8.0	
Elevation:		Lot/Ground Elevation:		
Bedrooms:	6	Baths/half baths:	6.50/0	
Comments: Any deviation from	n the building plan	PERMIT FEE		\$4,553.45
or site plan requires prior appr	roval.	SWIMMING POOLS;HOT TUBS	0	300.00
		FLOOD DEVELOPMENT BLDG PERMIT	287	75.00
		HOME OWNERS RECOVERY FEE		10.00
		RESIDENTIAL ZONING APPROVAL		100.00
		TOTAL FEES:		\$5,038.45

CHF

Inspector Signature: CREW HAYES



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

Frisco: (252) 475-5878

	MECHANICAL	LPROJECT	
MECHANICAL PROJECT	#: MECH-3215		11/12/2020
Parcel Number: Location: Subdivision: Legal Description:	015184000 54087 MARLIN DR – FRISCO MARLIN VILLAGE LOT: 9 BLK: SEC:		
Owner Name: Owner Mail Address: Owner Contact Inform	THOMAS A PILESKI 29026 GATES MILLS BLVD - I ation:	PEPPER PIKE, OH 44124	
Contractor Name: Contractor Mail Addre Contractor Phone: Contractor NC Licenses	252-261-8178 #: L13056		
UNITS: Electrical Contractor ID: Units	RESIDENTIAL 1.00 22222-L 1	Cost of Job: MECHANICAL PROJECT FEE	\$3,307 : \$150.00
The owner and builder a construction and be cer information on this per shown on the submittee revoked for failure to construction.	are responsible to comply with all regultain to comply with all zoning regulation mit is correct. That he is owner or duly a diplans and specifications that he under the omply with applicable regulations and late 24 Hours in advance) for inspections at	lations and laws, and should persor ns and building setbacks. The appli authorized agent of owner. That all rstands this permit is valid for six m aws.	cant certifies that the I construction shall be as nonths and may be
	871 or Frisco Office 252.475.5878	E BAHOV HEATING AND	A IR CONDITIONING INC
	NO SIGNATURE REQUIRED AT THIS TIM	marceyb@rahoy.com	O AIR CONDITIONING INC



Manteo: (252) 475-5080 Northern Beach: (252) 475-5871

Frisco: (252) 475-5878

RESIDENTIAL BUILDING PERMIT

BUILDING PERMIT#: R-3218					11/12/2020
Parcel Number:	014272001				
Location:	25855 NC 12 HW	Y-WAVES			
Subdivision:	CLARENCE E MID				
Legal Description:	LOT: 5A BLK: SEC	:			
Owner Name:	GAGE P FICHTER				
Owner Mail Address: Owner Phone and email:	P O BOX 130 WA	VES, NC 2798	2		
Contractor Name:	THE WINDWARD	GROUP, LTD			
Contractor Mail Address:	301 W. SOUNDS	DE RD, NAGS	HEAD, NC, NAGS HEAD, I	NC 27959	
Contractor Phone:	Contract	tor NC License	#:		
BUILDING INFORMATION					
Proposed Construction Use:	ELEVATION PERM FOR FUTURE COM		ELEVATE CURRENT STRUCT	URE, ENCLOSE U	NDERNEATH
Proposed Construction Type:			Cost of Construction:	\$25,000	
Finished Square Footage:	0		CAMA Permit#:		
Unfinished Square Footage:	0		Septic Permit#:		
Stories:	0		Septic Permit Date:		
Building Height:	0		Survey/Site Plan:		
Total Rooms:	0		Water Tap#:		
Footing Type:			Water Type:		
Exterior Finish:			Flood Zone:	AE	
Proposed Finished Floor			Base Flood Elevation:	8.0	
Elevation:			Lot/Ground Elevation:		
Bedrooms:	0		Baths/half baths:	0/0	
Comments: Any deviation from		PERMIT FEE			\$200.00
or site plan requires prior appr	rovai.	ELOOD DEVI	LOPMENT BLDG PERMIT		75.00
			ERS RECOVERY FEE		10.00
/	n /	TOTAL FEES			\$285.00
Applicant Signature:	gh		THE WINDWARI	O GROUP, LTD	
Inspector Signature: CREW	HAYES		CHF		



Manteo: (252) 475-5870

Northern Beach: (252) 475-5871

Frisco: (252) 475-5878

	MECHANICA	L PROJECT	
MECHANICAL PROJECT#:	MECH-3244		11/19/2020
Parcel Number: Location: Subdivision: Legal Description:	011644000 25255 BOLD DUNE DR – WA PALISADE ACRES LOT: 12 BLK: SEC:	VES	
Owner Name: Owner Mail Address: Owner Contact Informat	SHAUN F FITZPATRICK 42 RANDOLPH HILL RD - RA	NDOLPH, NH 03593	
Contractor Name: Contractor Mail Address Contractor Phone: Contractor NC License#: DETAILS	252-261-8178		
Electrical Contractor ID:	22222-L	Cost of Job:	\$6,984
Units	1	MECHANICAL PROJECT FE	E: \$150.00
	L6 SEER TRANE SYSTEM TOP LEVEL W		
construction and be certa information on this perm shown on the submitted	e responsible to comply with all regu- ain to comply with all zoning regulation it is correct. That he is owner or duly plans and specifications that he unde inply with applicable regulations and I	ons and building setbacks. The apparauthorized agent of owner. That a stratands this permit is valid for six	olicant certifies that the all construction shall be as
-	4 Hours in advance) for inspections at 11 or Frisco Office 252.475.5878	t Dare County Offices Manteo Offi	ce 252.475.5870, Northern
Applicant Signature: N	O SIGNATURE REQUIRED AT THIS TIM	R A HOY HEATING AN	ID AIR CONDITIONING INC
Inspector Signature: Ki	EVIN CLARK	AYT	



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

Frisco: (252) 475-5878

MECHANICAL PROJEC	T#: MECH-3250		11/19/2020
Parcel Number: Location: Subdivision: Legal Description:	011629000 25253 SEA ISLE HILLS SEA ISLE HILLS LOT: 4 BLK: SEC: 3	DR – WAVES	
Owner Name: Owner Mail Address: Owner Contact Inform		APEAKE, VA 23322	
Contractor Name: Contractor Mail Addr Contractor Phone: Contractor NC Licens DETAILS	ess: PO BOX 204 - JARVIS 252-2075457 e#: 16934	AL AND ELECTRICAL SERVIC BURG, NC 27947	
UNITS: Electrical Contractor II Units	RESIDENTIAL 1.00 D: 26968	Cost of Job:	\$3,600 ECT FEE: \$150.00
Comments: REPLACE	2 TON 14 SEER HEAT PUMP		ł
construction and be conformation on this pershown on the submitted	ertain to comply with all zoning remit is correct. That he is owner	all regulations and laws, and should egulations and building setbacks. The or duly authorized agent of owner. The understands this permit is valid for and laws.	ne applicant certifies that the That all construction shall be as
	(24 Hours in advance) for inspec 5871 or Frisco Office 252.475.58	ctions at Dare County Offices Mante 78	o Office 252.475.5870, Northern
Applicant Signature:	NO SIGNATURE REQUIRED AT T	COASTAL MECH john@coastalm	HANICAL AND ELECTRICAL SERVIC
Inspector Signature:	CREW HAVES	AVT	



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Frisco: (252) 475-5878

	MICHA	NICAL PROJECT	
MECHANICAL PROJECT	#: ELEC-3161		11/05/2020
Parcel Number: Location: Subdivision: Legal Description:	017135000 46213 ORAMAR DR – BU CAPE HATTERAS SEASHO LOT: 2 BLK: SEC: C		
Owner Name: Owner Mail Address: Owner Contact Inform	HODGES FAMILY COTTA PO BOX 396 - BUXTON, nation:		
Contractor Name: Contractor Mail Addre Contractor Phone: Contractor NC License	252-564-4031		
DETAILS	COMMERCIAL		
Electrical Contractor IC Units Comments: INSTALL I	ST.PH.32045 1 NDOOR AND OUTDOOR SYSTEM	Cost of Job: MECHANICAL PROJECT	\$5,500 CT FEE: \$150.00
construction and be ce information on this pe shown on the submitte	are responsible to comply with all crtain to comply with all zoning regumit is correct. That he is owner or ed plans and specifications that he comply with applicable regulations a	ulations and building setbacks. The duly authorized agent of owner. T understands this permit is valid fo	e applicant certifies that the hat all construction shall be as
	(24 Hours in advance) for inspectio 5871 or Frisco Office 252.475.5878	ns at Dare County Offices Manteo	Office 252.475.5870, Northern
Applicant Signature:	SIGNATURE NOT REQUIRED AT TH	IS TIME C-BREEZE HEATI	NG AND AIR CONDITIONING LL
Inchector Cionatura	WAYLAND IENNETTE	CHE	



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Frisco: (252) 475-5878

MECHANICAL PROJECT

	MECHANICAL	PROJECT#:	MECH-3308
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11/30/2020

Parcel Number:

012821014

Location:

26135 TURTLE CT - SALVO

Subdivision:

WIND OVER WAVES

Legal Description:

LOT: 14 BLK: SEC:

Owner Name:

JOHN L TTEE WALSTON

Owner Mail Address:

119 SHORE DR - EMPORIA, VA 23847

Owner Contact Information:

Contractor Name:

BEACH AIR OF THE OUTER BANKS LLC.

Contractor Mail Address:

PO BOX 1047 - MANTEO, NC 27954

Contractor Phone:

252-473-1995

Contractor NC License#:

L29768

DETAILS

UNITS:

2.00

Cost of Job:

\$8,981

Electrical Contractor ID:

4354U

Units

MECHANICAL PROJECT FEE: \$150.00

Comments: REMOVE/REPLACE TWO HEAT PUMPS/AIR HANDLERS

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

Call Building Inspector (24 Hours in advance) for inspections at Dare County Offices Manteo Office 252.475.5870, Northern Beach Office 252,475,5871 or Frisco Office 252,475,5878

Applicant Signature Cate Jordan		BEACH AIR OF THE OUTER BANKS LLC
SEODOESSOCF44F2	11/30/2020	
Inspector Signature: Lindenster		ALD
-8F0A005E752B444	11/30/2020	-



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Frisco: (252) 475-5878

	HIECH	AINICAL PROJECT	
MECHANICAL PROJECT	T#: MECH-3164		11/05/2020
Parcel Number: Location: Subdivision: Legal Description:	014297010 25218 SEA ISLE SHORE SEA ISLE SHORES LOT: 10 & PT 9 BLK: PH		
Owner Name: Owner Mail Address: Owner Contact Inform	MICHAEL SEAN JANZE 8416 ELKO DR - ELLICO nation:		
Contractor Name: Contractor Mail Addr Contractor Phone: Contractor NC License	ess: PO BOX 801 - AVON, 1 252-564-4031	ND AIR CONDITIONING LL NC 27915	
UNITS: Electrical Contractor II Units	2.00	Cost of Job:	\$10,450 CT FEE: \$150.00
Comments: INSTALL	OUTDOOR		
construction and be conformation on this pershown on the submitted	ertain to comply with all zoning re- rmit is correct. That he is owner o	Ill regulations and laws, and should gulations and building setbacks. The or duly authorized agent of owner. The understands this permit is valid for and laws.	e applicant certifies that the hat all construction shall be as
	(24 Hours in advance) for inspect 5871 or Frisco Office 252.475.5878	ions at Dare County Offices Manted 8	Office 252.475.5870, Northern
Applicant Signature:	SIGNATURE NOT REQUIRED AT T	THIS TIME C-BREEZE HEATI	ng and air conditioning LL
Inchestor Signature:	CREW HAVES	CHE	



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

Frisco: (252) 475-5878

	MECHA	INICAL PROJECT	
MECHANICAL PROJECT	#: MECH-3163		11/05/2020
Parcel Number: Location: Subdivision: Legal Description:	016071006 57202 SUMMERPLACE SUMMERPLACE II LOT: 6 BLK: SEC:	DR — HATTERAS	
Owner Name: Owner Mail Address: Owner Contact Inform		JTHERN PINES, NC 28387	
Contractor Name: Contractor Mail Addre Contractor Phone: Contractor NC License	PO BOX 801 - AVON, N 252-564-4031	D AIR CONDITIONING LL IC 27915	
DETAILS	RESIDENTIAL		
UNITS: Electrical Contractor ID Units	1.00 ST.PH.32045	Cost of Job: MECHANICAL PROJE	\$3,400 CT FEE: \$150.00
Comments: INSTALL C	OUTDOOR		
construction and be ce information on this per shown on the submitte	rtain to comply with all zoning reg mit is correct. That he is owner or	regulations and laws, and should gulations and building setbacks. The duly authorized agent of owner. I understands this permit is valid fo and laws.	e applicant certifies that the That all construction shall be as
	(24 Hours in advance) for inspections (24 Hours in advance) for inspections (252.475.5878)	ons at Dare County Offices Manted	o Office 252.475.5870, Northern
Applicant Signature:	SIGNATURE NOT REQUIRED AT TH	HIS TIME C-BREEZE HEATI	ING AND AIR CONDITIONING LL
Inchector Signature	WAYLAND JENNETTE	CHE	



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

Frisco: (252) 475-5878

MECHANICAL PROJECTA	#: MECH-3157		11/05/2020
Parcel Number:	029954000		
Location:	58223 DUNES EAST DR HAT	TTERAS	
Subdivision:	SUBDIVISION - NONE		
Legal Description:	LOT: BLK: SEC:		
Owner Name:	ERIC T ANDERSEN		
Owner Mail Address:	4720 BURNLEY BRANCH LN	- BARBOURSVILLE, VA 22923	
Owner Contact Inform	ation:		
Contractor Name:	C-BREEZE HEATING AND AIR	CONDITIONING LL	
Contractor Mail Addres	ss: PO BOX 801 - AVON, NC 279	915	
Contractor Phone:	252-564-4031		
Contractor NC Licenses	#: L31244		
DETAILS	RESIDENTIAL		
UNITS:	1.00	Cost of Job:	\$6,700
Electrical Contractor ID:			
Units		MECHANICAL PROJECT FEE:	\$150.00
The owner and builder a construction and be cer information on this pen shown on the submitted revoked for failure to construction.	are responsible to comply with all regulation to comply with all zoning regulation mit is correct. That he is owner or duly diplans and specifications that he under the omply with applicable regulations and lates are also apply with a policy and applicable regulations are apply with all regulation and lates are also apply with all regulations are a	ons and building setbacks. The applications and building setbacks. The applications are applicated as a set of the set of	ant certifies that the construction shall be as onths and may be
	SIGNATURE NOT REQUIRED AT THIS TIN		D AIR CONDITIONING IL
Inspector Signature:	WAYLAND JENNETTE	CHF	



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

Frisco: (252) 475-5878

	WECHA	WICHE PROJECT	
MECHANICAL PROJEC	T#: MECH-3155		11/05/2020
Parcel Number:	014564011		
Location:	OCEAN ISLE LOOP AV	ON	
Subdivision:	OCEAN ISLE ESTATES		
Legal Description:	LOT: 11 BLK: SEC:		
Owner Name:	JOHN WAYNE MORGAN	N	
Owner Mail Address:	PO BOX 324 - AVON, N	IC 27915	
Owner Contact Infor	mation:		
Contractor Name:	C-BREEZE HEATING AN	D AIR CONDITIONING LL	
Contractor Mail Add	ress: PO BOX 801 - AVON, N	IC 27915	
Contractor Phone:	252-564-4031		
Contractor NC Licens	se#: L31244		
DETAILS	RESIDENTIAL		
UNITS:	1.00	Cost of Job:	\$6,100
Electrical Contractor I	D: ST.PH.32045		
Units	1	MECHANICAL PROJECT	CT FEE: \$150.00
The owner and builde construction and be conformation on this pershown on the submitt revoked for failure to Call Building Inspector	er are responsible to comply with all certain to comply with all zoning regermit is correct. That he is owner or ted plans and specifications that he comply with applicable regulations or (24 Hours in advance) for inspection.	rulations and building setbacks. The duly authorized agent of owner. I understands this permit is valid for and laws. ons at Dare County Offices Manted	e applicant certifies that the That all construction shall be as or six months and may be
		HIS TIME C-BREEZE HEATI	



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

Frisco: (252) 475-5878

MECHANICAL PROJECT	#: MECH-3280		11/24/2020
Parcel Number:	030877000		
Location:	57630 NC 12 HWY - H	ATTERAS	
Subdivision:	SUBDIVISION - NONE		
Legal Description:	LOT: BLK: SEC:		
Owner Name:	DARRELL ALLEN DANIE	ELS	
Owner Mail Address: Owner Contact Inform	P O BOX 1087 - MANT nation:	EO, NC 27954	
Contractor Name:	CALLAHAN HVAC REPA	AIRS AND SERVICE LLC	
Contractor Mail Addre		S, NC 27943	
Contractor Phone:	252-986-2757		
Contractor NC License	#: L17825		
DETAILS	COMMERCIAL		
UNITS:	1.00	Cost of Job:	\$5,500
Electrical Contractor ID	:		
Units		MECHANICAL PROJECT I	EE: \$150.00
Comments: REPLACE	HEAT DIIMD		
Comments. REPLACE	TEXT POWE		
construction and be cer information on this per shown on the submitte	rtain to comply with all zoning requirit is correct. That he is owner o	Il regulations and laws, and should per gulations and building setbacks. The ap r duly authorized agent of owner. That a understands this permit is valid for size and laws.	oplicant certifies that the all construction shall be as
-	(24 Hours in advance) for inspecti 871 or Frisco Office 252.475.5878	ions at Dare County Offices Manteo Of	fice 252.475.5870, Northern
Applicant Signature: _	SIGNATURE NOT REQUIRED AT TO	HIS TIME CALLAHAN HVAC RI	EPAIRS AND SERVICE LLC
Inspector Signature:	WAYLAND JENNETTE	CHF	



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

Frisco: (252) 475-5878

	10120	I NOTE I NOTE I	
MECHANICAL PROJECTS	#: MECH-3273		11/24/2020
Parcel Number:	016066007		
Location:	57220 SUMMERPLA	CE DR HATTERAS	
Subdivision:	SUMMERPLACE		
Legal Description:	LOT: 7 BLK: SEC:		
Owner Name:	OCEAN VISIONS LLC		
Owner Mail Address: Owner Contact Inform		- WAY - FORT WAYNE, IN 46845	
Contractor Name:	C-BREEZE HEATING	AND AIR CONDITIONING LL	
Contractor Mail Addre		, NC 27915	
Contractor Phone:	252-564-4031		
Contractor NC Licenses	#: L31244		
DETAILS	RESIDENTIAL		
UNITS:	1.00	Cost of Job:	\$6,200
Electrical Contractor ID:		MECHANICAL PROJECT	FEE: \$150.00
Units		WECHANICAL PROJECT	ree. \$130.00
Comments: INSTALL IN	IDOOR AND OUTDOOR SYSTEM	1	
		all regulations and laws, and should pe regulations and building setbacks. The a	•
		or duly authorized agent of owner. The	
		he understands this permit is valid for s	
	omply with applicable regulation		
_ u			
	24 Hours in advance) for inspe 871 or Frisco Office 252.475.58	ctions at Dare County Offices Manteo C 178	Mice 252.4/5.58/0, Northern
Applicant Signature:	SIGNATURE NOT REQUIRED AT	THIS TIME C-BREEZE HEATING	G AND AIR CONDITIONING LL
Inches Circums	MANUAND ISNBETTE	CHE	
Inspector Signature:	WAYLAND JENNETTE	CHF	



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

Frisco: (252) 475-5878

MECHANICAL PROJECT#: MECH-3272			11/24/2020
Parcel Number: Location: Subdivision: Legal Description:	017038000 47551 BUXTON BACK RD — E SUBDIVISION - NONE LOT: BLK: SEC:	BUXTON	
Owner Name: Owner Mail Address: Owner Contact Inform	NOREEN L REASOR PO BOX 984 - BUXTON, NC	27920	
Contractor Name: Contractor Mail Addre Contractor Phone: Contractor NC License DETAILS UNITS: Electrical Contractor ID Units Comments: INSTALL I	252-564-4031 #: L31244 RESIDENTIAL 1.00		\$5,400 SECT FEE: \$150.00
construction and be ce information on this per shown on the submitte revoked for failure to c Call Building Inspector	are responsible to comply with all regulation to comply with all zoning regulation is correct. That he is owner or duly deplans and specifications that he under comply with applicable regulations and (24 Hours in advance) for inspections at 871 or Frisco Office 252.475.5878	ons and building setbacks. T authorized agent of owner. erstands this permit is valid f laws.	The applicant certifies that the That all construction shall be as for six months and may be
Applicant Signature:	SIGNATURE NOT REQUIRED AT THIS TI	ME C-BREEZE HEA	TING AND AIR CONDITIONING LL
Inspector Signature:	WAYLAND JENNETTE	CHF	



Manteo: (252) 475-5080 Northern Beach: (252) 475-5871

Frisco: (252) 475-5878

RESIDENTIAL BUILDING PERMIT

BUILDING PERMIT#: REPAIR	-3262		1	1/23/2020	
Parcel Number:	013184085				
Location:	26223 BLUEBEAR	RD RD - SALVO			
Subdivision:	HATTERAS COLONY SEC A				
Legal Description:	LOT: 85 BLK: SEC	LOT: 85 BLK: SEC: A			
Owner Name:	THOMAS R BRUE	CKNER			
Owner Mail Address:	PO BOX 451 SALV	VO, NC 27972			
Owner Phone and email:					
Contractor Name:					
Contractor Mail Address:	,				
Contractor Phone:	Contract	tor NC License#:			
BUILDING INFORMATION					
Proposed Construction Use: REMODEL RES OR COM, ENLARGE EXISITING MASTER BEDRROM ON 2ND FLOOR ADDITIO NAL 128 FT LIVING SPACE				R ADDING	
Proposed Construction Type:		Cost of Construction:	\$25,000		
Finished Square Footage:	0	CAMA Permit#:	N/A		
Unfinished Square Footage:	0	Septic Permit#:	30026		
Stories:	0	Septic Permit Date:	9/30/20		
Building Height:	0	Survey/Site Plan:			
Total Rooms:	0	Water Tap#:	N/A		
Footing Type:		Water Type:	Central Water		
Exterior Finish:		Flood Zone:	AE		
Proposed Finished Floor	N/A	Base Flood Elevation:	8.0		
Elevation:	N/A	Lot/Ground Elevation:	6.0		
Bedrooms:	0	Baths/half baths:	0/0		
Comments: Any deviation from or site plan requires prior app		PERMIT FEE		\$150.00	
of site plan requires prior approval.		HOME OWNERS RECOVERY FEE		10.00	
		REMODEL		250.00	
		TOTAL FEES:		\$410.00	
Applicant Signature: SIGNA	TURE NOT REQUIRE	D AT THIS TIME THOMAS R BRUI	ECKNER		
Inspector Signature: CREW	HAYES	CHF			



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

ACCESSORY PERMIT

ACCESSORY PERMIT#: ACC-	3261			11/23/2020
Parcel Number: Location: Subdivision: Legal Description:	013048000 26501 COLONY DR – SA HATTERAS COLONY SEC LOT: 5 BLK: SEC: B			
Owner Name: Owner Mail Address: Owner Phone and email:	JOHN C II MORRIS 18140 ARBORMONT DI	R CYPRESS, TX 77429		
Contractor Name: Contractor Mail Address: Contractor Phone: ACCESSORY INFORMATION	SOUNDSIDE POOLS INC PO BOX 2996, KILL DEV 2522562684 Co			
Proposed Construction: Description of Work Septic Permit Date: Septic Permit #:	RESIDENTIAL - SWIMMII SWIMMING POOL 10/01/2020 30039	Cost of Construction: CAMA Permit#: Flood Zone: Base Flood Elevation: Lot/Ground Elevation:	\$43,000 N/A SHX 8.0 N/A	
Comments:	PERM	AIT FEE		\$300.00
	тотл	AL FEES:		\$300.00
Applicant Signature: SIGNA	ATURE NOT REQUIRED AT TH	HIS TIME SOUNDSIDE POO	OLS INC	
Inspector Signature: CREW	HAYES	CHF		



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	ACCES	SSORY PERMIT		
ACCESSORY PERMIT#: ACC-	3260			11/23/2020
Parcel Number: Location: Subdivision: Legal Description:	013057000 26625 COLONY DR – SA HATTERAS COLONY SEC LOT: 14 BLK: SEC: B			
Owner Name: Owner Mail Address: Owner Phone and email:	BETTY JO GRIFFIN POBOX 437 SALVO, NC	27972		
Contractor Name: Contractor Mail Address: Contractor Phone: ACCESSORY INFORMATION	SOUNDSIDE POOLS INC PO BOX 2996, KILL DEV 2522562684 Co			
Proposed Construction: Description of Work Septic Permit Date: Septic Permit #:	RESIDENTIAL - SWIMMII ADDING DETACHED POO 10/29/2020 30151		\$36,000 SHX 8.0	
Comments:	PERM	MIT FEE		\$300.00
	TOTA	AL FEES:		\$300.00
Applicant Signature: SIGNA	ATURE NOT REQUIRED AT T	HIS TIME SOUNDSIDE PO	OLS INC	
Inspector Signature: CREW	/ HAYES	CHF		



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RESIDENTIAL BUILDING PERMIT

BUILDING PERMIT#: R-3217				11/12/2020
Parcel Number:	015183000			
Location:	MARLIN DR - FR	ISCO		
Subdivision:	MARLIN VILLAGE	Ē		
Legal Description:	LOT: 10 BLK: SEC			
Owner Name:	BONNIE J TTEE I	BEHRENDS		
Owner Mail Address:	303 BRIDLEWOO	DD LN SUFFOLK, VA 23434		
Owner Phone and email:				
Contractor Name:	TIDE CONSTRUC	TION LLC		
Contractor Mail Address:	PO BOX 22, HAT	TERAS, NC 27943		
Contractor Phone:	2523053055	Contractor NC License#: 70343		
BUILDING INFORMATION				-
Proposed Construction Use:	RESIDENTIAL AD	DITION , 10 x 12 ADDITION BATHROOM	REPAIR DECKS	
Proposed Construction Type:	SFD	Cost of Construction:	\$73,456	
Finished Square Footage:	80	CAMA Permit#:	NA	
Unfinished Square Footage:	. 0	Septic Permit#:	30208	
Stories:	0.0	Septic Permit Date:	11/05/2020	
Building Height:	0	Survey/Site Plan:	YES	
Total Rooms:	0	Water Tap#:	NA	
Footing Type:	WOOD	Water Type:		
Exterior Finish:		Flood Zone:	AE	
Proposed Finished Floor		Base Flood Elevation:	9.0	
Elevation:	•	Lot/Ground Elevation:	-4.1	
Bedrooms:	0	Baths/half baths:	1.00/0	
Comments: Any deviation from	n the building plan	PERMIT FEE		\$150.00
or site plan requires prior appr	oval.			
		HOME OWNERS RECOVERY FEE		10.00
		TOTAL FEES:		\$160.00
Applicant Signature:	ill de	TIDE CONSTRUC	CTION LLC	
Abunant o Buntance	-	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		
Inspector Signature: WAYI A	AID IEAINETEE	CHE		



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

	MECHANIC	AL PROJECT	
MECHANICAL PROJECT	: MECH-3199		11/10/2020
Parcel Number: Location: Subdivision: Legal Description:	013704000 39065 PORPOISE PL – AVOI HATTERAS COLONY SEC 3 LOT: 83 BLK: SEC: 3	N	
Owner Name: Owner Mail Address: Owner Contact Informa	RODNEY W OLIVER 4025 TRAVIS PKWY - ANNA ation:	NDALE, VA 22003	
Contractor Name: Contractor Mail Addres Contractor Phone: Contractor NC Licenses	252-564-4031 t: L31244		
UNITS: Electrical Contractor ID: Units	RESIDENTIAL 1.00	Cost of Job: MECHANICAL PROJECT	\$6,200 FEE: \$150.00
Comments: INSTALL IN	DOOR AND OUTDOOR SYSTEM		
construction and be cert information on this perr shown on the submitted	are responsible to comply with all regulation to comply with all zoning regulation it is correct. That he is owner or duly plans and specifications that he undermply with applicable regulations and	ons and building setbacks. The a rauthorized agent of owner. The erstands this permit is valid for s	applicant certifies that the at all construction shall be as
	24 Hours in advance) for inspections a 371 or Frisco Office 252.475.5878	t Dare County Offices Manteo (Office 252.475.5870, Northern
Applicant Signature:	SIGNATURE NOT REQUIRED AT THIS T	ME C-BREEZE HEATING	g and air conditioning LL
Inspector Signature:	CREW HAYES	CHF	



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

	MECHAN	ICAL PROJECT	
MECHANICAL PROJECT	#: MECH-3198		11/10/2020
Parcel Number: Location: Subdivision: Legal Description:	013797000 39194 N ALBACORE LN – HATTERAS COLONY SEC 4 LOT: 166 & PT 167 BLK: S		
Owner Name: Owner Mail Address: Owner Contact Informa		VIS -202 - MIDLOTHIAN, VA 23112	
Contractor Name: Contractor Mail Addres Contractor Phone: Contractor NC Licenses	252-564-4031 t: L31244		
UNITS: Electrical Contractor ID: Units	RESIDENTIAL 1.00 ST.PH. 32045	Cost of Job: MECHANICAL PROJECT	\$3,575 FEE: \$150.00
Comments: INSTALL IN	DOOR AND OUTDOOR SYSTEM		
construction and be cer information on this per shown on the submitted	are responsible to comply with all re tain to comply with all zoning regula mit is correct. That he is owner or de I plans and specifications that he ur omply with applicable regulations ar	ations and building setbacks. The a uly authorized agent of owner. Tha nderstands this permit is valid for s	applicant certifies that the at all construction shall be as
	24 Hours in advance) for inspection 371 or Frisco Office 252.475.5878	s at Dare County Offices Manteo C	office 252.475.5870, Northern
Applicant Signature:	SIGNATURE NOT REQUIRED AT THIS	TIME C-BREEZE HEATING	S AND AIR CONDITIONING LL
Inchector Signature	TREW HAVES	CHF	



Manteo: (252) 475-5080 Northern Beach: (252) 475-5871

Frisco: (252) 475-5878

RESIDENTIAL BUILDING PERMIT

BUILDING PERMIT#: R-3193				11/10/2020
Parcel Number:	015429002			
Location:		RALIA LN — HATTERAS		
Subdivision:	JOHN H HIGH SU			
Legal Description:	LOT: 3 BLK: SEC:			
Owner Name:	ELAINE C WHITA	KER		
Owner Mail Address:	P O BOX 150 HA	TTERAS, NC 27943		
Owner Phone and email:				
Contractor Name:				
Contractor Mail Address:	,			
Contractor Phone:	Contract	tor NC License#:		
BUILDING INFORMATION				
Proposed Construction Use:	RESIDENTIAL ADI	DITION, STORAGE BUILDING 320 SQ FT		
Proposed Construction Type:	ACC	Cost of Construction:	\$5,000	
Finished Square Footage:	0	CAMA Permit#:		
Unfinished Square Footage:	320	Septic Permit#:	3207	
Stories:	0.0	Septic Permit Date:	11/05/20	
Building Height:	0	Survey/Site Plan:		
Total Rooms:	0	Water Tap#:		
Footing Type:		Water Type:		
Exterior Finish:		Flood Zone:		
Proposed Finished Floor		Base Flood Elevation:	0.0	
Elevation:		Lot/Ground Elevation:		
Bedrooms:	0	Baths/half baths:	0.00/0	
Comments: Any deviation from		PERMIT FEE		\$128.00
or site plan requires prior appr	roval.			40.00
		HOME OWNERS RECOVERY FEE		10.00
		TOTAL FEES:		\$138.00
Applicant Signature: SIGNA	TURE NOT REQUIRE	DAT THIS TIME ELAINE C WHITA	KER	
Inspector Signature: WAYI	AND IENNIETTE	CHE		



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

	MECHANICAL PR	ROJECT	
MECHANICAL PROJECT#:	MECH-3192		11/09/2020
Parcel Number:	014822813		
Location:	41179 FATHOM CT – AVON		
Subdivision:	KINNAKEET SHORES PH 8		
Legal Description:	LOT: 813 BLK: SEC: 8		
Owner Name:	JOHN M LOVELESS		
Owner Mail Address: Owner Contact Information	743 CRESTVIEW DR - BOLINGBE	OOK, IL 60440	
Contractor Name:	PAMLICO AIR INC		
Contractor Mail Address:	PO BOX 579 - BUXTON, NC 279	20	
Contractor Phone:	252-995-5435		
Contractor NC License#:	L15259		
DETAILS	RESIDENTIAL		
UNITS:	2.00	Cost of Job:	\$14,250
Electrical Contractor ID:	30600-L		
Units	2	MECHANICAL PROJECT FEE:	\$150.00
The owner and builder are construction and be certain information on this permit shown on the submitted plarevoked for failure to comp	responsible to comply with all regulation to comply with all zoning regulations a is correct. That he is owner or duly authans and specifications that he understably with applicable regulations and laws	and building setbacks. The application in the application of the appli	ant certifies that the construction shall be as onths and may be
	Hours in advance) for inspections at Dai or Frisco Office 252.475.5878	re County Offices Manteo Office	252.475.5870, Northern
Applicant Signature: SIG	NATURE NOT REQUIRED AT THIS TIME	PAMLICO AIR INC	
Inspector Signature: CRE	EW HAYES	CHF	



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

	MECHA	NICAL PROJECT	
MECHANICAL PROJECT	#: MECH-3191		11/09/2020
Parcel Number: Location:	014905000 52222 NC 12 HWY FR	ISCO	
Subdivision:	C H FULCHER TRACT BL		
Legal Description:	LOT: 7 BLK: A SEC:		
Owner Name:	JEFFREY B WESCOAT		
Owner Mail Address: Owner Contact Inform	P O BOX 280 - FRISCO, nation:	NC 27936	
Contractor Name:	PAMLICO AIR INC		
Contractor Mail Addre Contractor Phone:	ess: PO BOX 579 - BUXTON 252-995-5435	, NC 27920	
Contractor NC License			
DETAILS	RESIDENTIAL		
UNITS:	1.00	Cost of Job:	\$4,500
Electrical Contractor ID		Warman A County and a	
Units	1	MECHANICAL PROJE	CT FEE: \$150.00
construction and be ce information on this per shown on the submitte revoked for failure to c Call Building Inspector	are responsible to comply with all artain to comply with all zoning regrmit is correct. That he is owner or ed plans and specifications that he comply with applicable regulations (24 Hours in advance) for inspections of Frisco Office 252.475.5878	ulations and building setbacks. The duly authorized agent of owner. understands this permit is valid for and laws.	e applicant certifies that the That all construction shall be as or six months and may be
	SIGNATURE NOT REQUIRED AT TH		NC .



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Frisco: (252) 475-5878

\$469.00

RESIDENTIAL BUILDING PERMIT

11/05/2020 **BUILDING PERMIT#: R-3170** Parcel Number: 016066012 SUMMERPLACE DR - HATTERAS Location: **SUMMERPLACE** Subdivision: LOT: 12 BLK: SEC: **Legal Description:** Owner Name: SARAT NAGABHIRAVA Owner Mail Address: 1297 KNIGHTS BRIDGE LN VIRGINIA BEACH, VA 23455 Owner Phone and email: A E MORSE CONSTRUCTION INC Contractor Name: P.O. BOX 1660, BUXTON, NC 27920 Contractor Mail Address: Contractor Phone: Contractor NC License#: 44662 252-305-1452 **BUILDING INFORMATION Proposed Construction Use: RESIDENTIAL ADDITION Proposed Construction Type:** SFD Cost of Construction: \$60,000 Finished Square Footage: 512 CAMA Permit#: **Unfinished Square Footage:** 0 Septic Permit#: Stories: 0.0 Septic Permit Date: **Building Height:** 0 Survey/Site Plan: Water Tap#: **Total Rooms:** 0 **Footing Type:** PILING Water Type: Flood Zone: **Exterior Finish:** Proposed Finished Floor Base Flood Elevation: 0.0 Elevation: Lot/Ground Elevation: Bedrooms: 0 Baths/half baths: 0.00/0\$384.00 Comments: Any deviation from the building plan **PERMIT FEE** or site plan requires prior approval. FLOOD DEVELOPMENT BLDG PERMIT 75.00 10.00 **HOME OWNERS RECOVERY FEE**

Applicant Signature: SIGNATURE NOT REQUIRED AT THIS TIME A E MORSE CONSTRUCTION INC

TOTAL FEES:

Inspector Signature: WAYLAND JENNETE CHF



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

Frisco: (252) 475-5878

MECHANICAL PROJECT

	MECHANIC	AL PROJECT	
MECHANICAL PROJECT#	: MECH-3166		11/05/2020
Parcel Number: Location: Subdivision: Legal Description:	029596056 41924 OCEAN VIEW DR — A KINNAKEET SHORES PHAS LOT: 56 BLK: SEC:		
Owner Name: Owner Mail Address: Owner Contact Informa	MICHAEL J MONTELEONE 4192 LIBERTY TRCE - MAR	RIETTA, GA 30066	
Contractor Name: Contractor Mail Addres Contractor Phone: Contractor NC Licenses	252-564-4031		
UNITS: Electrical Contractor ID: Units	1.00 ST.PH.32045	Cost of Job: MECHANICAL PROJECT	\$6,500 FEE: \$150.00
Comments: INSTALL IN	DOOR AND OUTDOOR SYSTEM		
construction and be cert information on this perr shown on the submitted	are responsible to comply with all reg tain to comply with all zoning regular nit is correct. That he is owner or du I plans and specifications that he und amply with applicable regulations and	tions and building setbacks. The apply authorized agent of owner. That derstands this permit is valid for si	oplicant certifies that the tall construction shall be as
	24 Hours in advance) for inspections 871 or Frisco Office 252.475.5878	at Dare County Offices Manteo Of	ffice 252.475.5870, Northern
Applicant Signature:	SIGNATURE NOT REQUIRED AT THIS	TIME C-BREEZE HEATING	AND AIR CONDITIONING LL
Inspector Signature: (CREW HAYES	CHF	



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

Frisco: (252) 475-5878

MECHANICAL PROJECT

	MECHA	INICAL PROJECT	
MECHANICAL PROJECT#: ME	ECH-3245		11/19/2020
Parcel Number: Location: Subdivision: Legal Description:	029577000 42119 GREENWOOD P KINNAKEET SHORES PH LOT: 70 BLK: SEC:		
Owner Name: Owner Mail Address: Owner Contact Information:	WILLIAM Z HASKELL 4104 OVERLOOK CT - I	DUNKIRK, MD 20754	
Contractor Name: Contractor Mail Address: Contractor Phone: Contractor NC License#: DETAILS	R A HOY HEATING AND PO BOX 265 - KITTY HA 252-261-8178 L13056 RESIDENTIAL	AIR CONDITIONING INC AWK, NC 27949	
	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	Cost of Job:	\$9,757
Electrical Contractor ID: Units	22222-L 1	MECHANICAL PROJECT FEE:	\$150.00
Comments: C/O 4 TON 16 S	EER TRANE SYSTEM WHOLE	HOUSE WITH T-6 WIFI THE RMOSTAT	
construction and be certain to information on this permit is	o comply with all zoning reg correct. That he is owner or is and specifications that he	I regulations and laws, and should persona gulations and building setbacks. The applica r duly authorized agent of owner. That all of understands this permit is valid for six most and laws.	ant certifies that the construction shall be as
Call Building Inspector (24 Ho Beach Office 252.475.5871 or		ons at Dare County Offices Manteo Office	252.475.5870, Northern
Applicant Signature: NO SI	GNATURE REQUIRED AT TH	IS TIME R A HOY HEATING AND A	AIR CONDITIONING INC
Inspector Signature: KEVIN	I CLARK		



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

	MECHANICAL F	PROJECT	
MECHANICAL PROJECT	#: MECH-3250		11/19/2020
Parcel Number: Location: Subdivision: Legal Description:	011629000 25253 SEA ISLE HILLS DR – WA SEA ISLE HILLS LOT: 4 BLK: SEC: 3	VES	
Owner Name: Owner Mail Address: Owner Contact Inform	TERESA S HUBBARD 516 LONG PT - CHESAPEAKE, V	√A 23322	
Contractor Name: Contractor Mail Addre Contractor Phone: Contractor NC License	252-2075457		
DETAILS UNITS: Electrical Contractor ID Units	RESIDENTIAL 1.00 26968	Cost of Job: MECHANICAL PROJECT FE	\$3,600 EE: \$150.00
Comments: REPLACE 2	2 TON 14 SEER HEAT PUMP		
construction and be ce information on this per shown on the submitte	are responsible to comply with all regulated are responsible to comply with all zoning regulations armit is correct. That he is owner or duly auted plans and specifications that he understoomply with applicable regulations and law	s and building setbacks. The app thorized agent of owner. That a tands this permit is valid for six	olicant certifies that the all construction shall be as
	(24 Hours in advance) for inspections at D 871 or Frisco Office 252.475.5878	are County Offices Manteo Offi	ce 252.475.5870, Northern
Applicant Signature:	NO SIGNATURE REQUIRED AT THIS TIME	COASTAL MECHANIC john@coastalmes.co	AL AND ELECTRICAL SERVIC m
Inspector Signature:	CREW HAYES	AYT	



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

	MECHANICAL PR	OJECI	
MECHANICAL PROJECT	#: MECH-3271		11/24/2020
Parcel Number: Location: Subdivision: Legal Description:	016639000 NC 12 HWY – BUXTON EDWARD QUIDLEY LOT: 1 BLK: SEC:		
Owner Name: Owner Mail Address: Owner Contact Inform	JOSEPH E WASHABAUGH PO BOX 851 - BUXTON, NC 2792 ation:	0	
Contractor Name: Contractor Mail Addre Contractor Phone: Contractor NC Licenses	252-441-1740 #: L12643		
UNITS: Electrical Contractor ID: Units	RESIDENTIAL 1.00 30701	Cost of Job: MECHANICAL PROJECT FEE:	\$11,948 \$150.00
Comments: INSTALLAT	ION OF 14 SEER 2 1/2 TON CARRIER HEAT P	UMP SYSTEM	
construction and be cer information on this per shown on the submitted	are responsible to comply with all regulatio tain to comply with all zoning regulations a mit is correct. That he is owner or duly auth plans and specifications that he understand omply with applicable regulations and laws.	nd building setbacks. The applica orized agent of owner. That all o nds this permit is valid for six mo	ant certifies that the construction shall be as
	24 Hours in advance) for inspections at Dar 871 or Frisco Office 252.475.5878	e County Offices Manteo Office	252.475.5870, Northern
Applicant Signature:	NO SIGNATURE REQUIRED AT THIS TIME	OBHC INC DBA ONE HOU	UR HEATING & AIR
Inspector Signature:	KEVIN CLARK	AYT	1



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

	MECHANICAL	PROJECT	
MECHANICAL PROJECT#:	MECH-3128		11/02/2020
Parcel Number:	013587000		
Location:	39263 SANDFIDDLER LN - AVO	ON	
Subdivision:	HATTERAS COLONY SEC 2		
Legal Description:	LOT: 43 BLK: SEC: 2		
Owner Name:	GARY N FULLER		
Owner Mail Address:	148 RIDGEMONT DR - COLUM	MBIA, SC 29212	
Owner Contact Informat	tion:		
Contractor Name:	VILLAGE AIR INC		
Contractor Mail Address		27968	
Contractor Phone:	252-305-6149		
Contractor NC License#:	L31489		
DETAILS	RESIDENTIAL		
	•	Cost of Job:	\$2,800
Electrical Contractor ID:	L-34189		
Units	1	MECHANICAL PROJECT FEE:	\$150.00
construction and be certa information on this perm shown on the submitted revoked for failure to con	re responsible to comply with all regular ain to comply with all zoning regulations it is correct. That he is owner or duly auplans and specifications that he undersuply with applicable regulations and law 4 Hours in advance) for inspections at D	s and building setbacks. The applic of owner. That all tands this permit is valid for six moves.	ant certifies that the construction shall be as onths and may be
Beach Office 252.475.587	GNATURE NOT REQUIRED AT THIS TIME		252.475.5870, Northern
Inspector Signature: CI	REW HAYES	CHF	



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

Frisco: (252) 475-5878

MECHANICAL PROJECT

	MECHA	VICAL PROJECT	
MECHANICAL PROJECT	#: MECH-3129		11/02/2020
Parcel Number:	011614000		
Location:	25219 WIMBLE SHORES	NORTH - WAVES	
Subdivision:	WIMBLE SHORES NORTI	н	
Legal Description:	LOT: 30 BLK: SEC:		
Owner Name:	MELISSA WEEMS BARTE	:K	
Owner Mail Address: Owner Contact Inform		LN - DAVIDSONVILLE, MD 21035	
Contractor Name:	VILLAGE AIR INC		
Contractor Mail Addre	ess: PO BOX 421 - RODANTH	HE, NC 27968	
Contractor Phone:	252-305-6149		
Contractor NC License	#: L31489		
DETAILS	RESIDENTIAL		
		Cost of Job:	\$3,200
Electrical Contractor ID	: L-31489	0030 01302.	45,200
Units	1	MECHANICAL PROJECT FEE	\$150.00
Comments: INSTALL 3	S TON HEAT PUMP		
construction and be ce information on this per shown on the submitte	rtain to comply with all zoning regurnit is correct. That he is owner or o	regulations and laws, and should person lations and building setbacks. The appl duly authorized agent of owner. That all understands this permit is valid for six mand laws.	icant certifies that the I construction shall be as
	(24 Hours in advance) for inspection 871 or Frisco Office 252.475.5878	ns at Dare County Offices Manteo Offic	e 252.475.5870, Northern
Applicant Signature:	SIGNATURE NOT REQUIRED AT THE	S TIME VILLAGE AIR INC	
Inspector Signature:	CREW HAYES	CHF	



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

	MECHANICAL	PROJECT	
MECHANICAL PROJECT	#: MECH-3130		11/02/2020
Parcel Number: Location: Subdivision: Legal Description:	011533000 23191 WIMBLE SHOALS DR – WIMBLE SHOALS ESTATES LOT: 1 BLK: SEC:	RODANTHE	
Owner Name: Owner Mail Address: Owner Contact Inform	BARBARA J DAVIS 14330 HAPPY HILL RD - CHES ation:	TER, VA 23831	
Contractor Name: Contractor Mail Addre Contractor Phone: Contractor NC Licenses	252-305-6149 #: L31489	27968	
UNITS: Electrical Contractor ID: Units	RESIDENTIAL 1.00 : L-31489 1	Cost of Job: MECHANICAL PROJECT FEE:	\$6,500 \$ 150.00
	TON HEAT PUMP AND AIR HANDLER		W
construction and be cer information on this per shown on the submittee	are responsible to comply with all regulation to comply with all zoning regulation mit is correct. That he is owner or duly a d plans and specifications that he undersomply with applicable regulations and later	s and building setbacks. The application is and building setbacks. The application is applicated agent of owner. That all obtained stands this permit is valid for six most	ant certifies that the construction shall be as
	24 Hours in advance) for inspections at I 871 or Frisco Office 252.475.5878	Dare County Offices Manteo Office	252.475.5870, Northern
Applicant Signature: _	SIGNATURE NOT REQUIRED AT THIS TIM	VILLAGE AIR INC	
Inspector Signature:	CREW HAYES	CHF	



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

Frisco: (252) 475-5878

MOBILE HOME PERMIT

11/04/2020 PERMIT#: R-3142

Parcel Number:

015164002

Location:

NC 12 HWY - FRISCO

Subdivision:

SUBDIVISION - NONE

LOT: 2 BLK: SEC:

Mobile Home Park:

OWNER INFORMATION

ELWOOD RAYMOND AUSTIN

1560 NORTH ROAD ST HATTERAS, NC 27943

CONTRACTOR

CLAYTON HOMES INC

1560 NORTH ROAD ST ELIZABETH CITY, NC 27909

252-335-1070

MOBILE HOME INSTALLER

ADKINS AND SONS

258 WILLEYTON RD GATES, NC 27937 757-297-4436 NC License#: 46321

DETAILS

Make:

Model:

Year:

01

Living Space

Non-living Space

1159

100

Clayton

29ULT28443AH20

2021

Serial #: HUD#:

OHCO30056NCAB

Width in feet:

28

Length in feet: **Hurricane Built:**

Footing/foundation Type:

44

3 PILING

Estimated Cost:

CAMA Permit#:

Septic Permit#:

Septic Permit Date:

Survey/Site Plan:

Water Tap#:

Water Type:

Flood Zone:

Base Flood Elevation:

Lot/Ground Elevation: **Application Number:**

0.0 0 2416

AE

Comments: Any deviation from the building plan

PERMIT FEE

\$78,000

29534

3.13.20

Y

Yes

or site plan requires prior approval.

FLOOD DEVELOPMENT BLDG PERMIT

HOME OWNERS RECOVERY FEE

75.00 10.00

\$579.50

TOTAL FEES:

\$664.50

Applicant Signature:

ADKINS AND SONS

Inspector Signature

CHF

Application Reference # 2416 on 09/18/2020



Manteo: (252) 475-5080 Northern Beach: (252) 475-5871

Frisco: (252) 475-5878

RESIDENTIAL BUILDING PERMIT

BUILDING PERMIT#: R-3141				11/03/2020
Parcel Number:	027398000			
Location:	51031 COMER C	T – FRISCO		
Subdivision:	SUBDIVISION - N	IONE		
Legal Description:	LOT: BLK: SEC:			
Owner Name:	JOYCE P ATCHIS	ON		
Owner Mail Address:	P O BOX 250 FRI	SCO, NC 27936		
Owner Phone and email:				
Contractor Name:				
Contractor Mail Address:	,			
Contractor Phone:	Contrac	tor NC License#:		
BUILDING INFORMATION				
Proposed Construction Use:	ELEVATION PERM DORIAN-FEE WA	MIT PROJECT , ELEVATE MOBIE HOME STO VED	ORM DAMAGE- HUR	RICANE
Proposed Construction Type:		Cost of Construction:	\$20,000	
Finished Square Footage:	0	CAMA Permit#:		
Unfinished Square Footage:	0	Septic Permit#:		
Stories:	0	Septic Permit Date:		
Building Height:	0	Survey/Site Plan:		
Total Rooms:	0	Water Tap#:		
Footing Type:		Water Type:		
Exterior Finish:		Flood Zone:		
Proposed Finished Floor		Base Flood Elevation:	0.0	
Elevation:		Lot/Ground Elevation:		
Bedrooms:	0	Baths/half baths:	0/0	
Comments: Any deviation from	n the building plan	PERMIT FEE		\$.00
or site plan requires prior appr	oval.			
		FLOOD DEVELOPMENT BLDG PERMIT		
		TOTAL FEES:		\$.00
Applicant Signature: SIGNAT	TURE NOT REQUIRE	D AT THIS TIME JOYCE P ATCHIS	ON	
Inspector Signature: WAYLA	ND JENNETTE	CHF		



Manteo: (252) 475-5080 Northern Beach: (252) 475-5871

Frisco: (252) 475-5878

RESIDENTIAL BUILDING PERMIT

BUILDING PERMIT#: R-3147

11/04/2020

Parcel Number:

014875002

Location:

PARK DR - AVON

Subdivision:

ASKINS CREEK SEC 2 & 3

Legal Description:

LOT: 2 BLK: SEC: 2

Owner Name:

MARK A WATSON

Owner Mail Address:

15424 SULTREE DR MIDLOTHIAN, VA 23112

Owner Phone and email:

Contractor Name:

CHRIS MACDONALD

Contractor Mail Address:

291 DUCK ROAD, SOUTHREN SHORES, NC 27949

Contractor Phone:

252-337-4097 Contractor NC License#:

BUILDING INFORMATION

Proposed Construction Use:

RESIDENTIAL ADDITION, Deck rebuild & extension

Proposed Construction Type: SFD

Cost of Construction:

\$28,000

inished Square Footage:

0

CAMA Permit#:

Unfinished Square Footage:

572

Hi-45-20

Septic Permit#:

30113

Stories:

0.0

Septic Permit Date: Survey/Site Plan:

10/20/20

Building Height:

0 0

Water Tap#:

N/A

Total Rooms: Footing Type:

PILING

Water Type:

AE

Exterior Finish:

Proposed Finished Floor

Flood Zone: Base Flood Elevation:

8.0

Elevation:

N/A

Lot/Ground Elevation:

N/A

Bedrooms:

0

Baths/half baths:

0.00/0

Comments: Any deviation from the building plan

PERMIT FEE

\$153.80

or site plan requires prior approval.

FLOOD DEVELOPMENT BLDG PERMIT

75.00

HOME OWNERS RECOVERY FEE

10.00

TOTAL FEES:

\$238.80

Applicant Signature

MARK A WATSON

spector Signature:

CHF



Manteo: (252) 475-5080 Northern Beach: (252) 475-5871

Frisco: (252) 475-5878

RESIDENTIAL BUILDING PERMIT

BUILDING PERMIT#: REPAIR-	-3307			11/30/2020
Parcel Number: Location: Subdivision: Legal Description:	013645000 ANGELFISH RD – AVON HATTERAS COLONY SEC 2 LOT: 104 BLK: SEC: 2			
Owner Name: Owner Mail Address: Owner Phone and email:	MICHAEL D RICHA 39218 ANGELFISH	ARD HRD AVON, NC 27915		
Contractor Name:	EMANUELSON AN	ND DAD INC		
Contractor Mail Address:	PO BOX 448, NAC	GS HEAD, NC 27959		
Contractor Phone:	252-261-2212	Contractor NC License#: 79801		
BUILDING INFORMATION				
Proposed Construction Use:	REPAIR , replace 8	house piles and 1 deck pile		
Proposed Construction Type:	,,	Cost of Construction:	\$8,000	
Finished Square Footage:	0	CAMA Permit#:	V = /	
Unfinished Square Footage:	0	Septic Permit#:		
Stories:	0	Septic Permit Date:		
Building Height:	0	Survey/Site Plan:		
Total Rooms:	0	Water Tap#:		
Footing Type:		Water Type:		
Exterior Finish:		Flood Zone:	AE	
Proposed Finished Floor		Base Flood Elevation:	8.0	
Elevation:		Lot/Ground Elevation:		
Bedrooms:	0	Baths/half baths:	0/0	
Comments: Any deviation from or site plan requires prior apple		PERMIT FEE		\$150.00
		TOTAL FEES:		\$150.00
Applicant Signature: SIGNA	TURE NOT REQURED	AT THIS TIME EMANUELSON A	ND DAD INC	
Inspector Signature: WAYLA	AND JENNETTE	CHF		



Manteo: (252) 475-5080 Northern Beach: (252) 475-5871

Frisco: (252) 475-5878

RESIDENTIAL BUILDING PERMIT

BUILDING PERMIT#: REPAI	R-3306			11/30/2020
Parcel Number:	011995000			
Location:	50321 TIMBER TE	RL - FRISCO		
Subdivision:	INDIANTOWN SH	ORES		
Legal Description:	LOT: 17 BLK: A SE	C:		
Owner Name:	CYNTHIA K BRIGH	ITBILL		
Owner Mail Address: Owner Phone and email:	P O BOX 745 NAG	SS HEAD, NC 27959		
Contractor Name:	EMANUELSON A	ND DAD INC		
Contractor Mail Address:	PO BOX 448, NA	GS HEAD, NC 27959		
Contractor Phone:	252-261-2212	Contractor NC License#: 79801		
BUILDING INFORMATION				
Proposed Construction Use:	REPAIR, replace 1	10 house pilings		
Proposed Construction Type:		Cost of Construction:	\$9,550	
Finished Square Footage:	0	CAMA Permit#:		
Unfinished Square Footage:	0	Septic Permit#:		
Stories:	0	Septic Permit Date:		
Building Height:	0	Survey/Site Plan:		
Total Rooms:	0	Water Tap#:		
Footing Type:		Water Type:		
Exterior Finish:		Flood Zone:	AE	
Proposed Finished Floor		Base Flood Elevation:	9.0	
Elevation:		Lot/Ground Elevation:		
Bedrooms:	0	Baths/half baths:	0/0	
Comments: Any deviation fro or site plan requires prior ap		PERMIT FEE		\$150.00
		TOTAL FEES:		\$150.00
Applicant Signature: SIGNA	ATURE NOT REQUIRED	AT THIS TIME EMANUELSON A	ND DAD INC	
Applicant signature. Sidia	TORE NOT REQUIRED	AT THIS THALL EINIANOELSON A	NO DAD INC	
Inspector Signature: WAYI	AND JENNETTE	CHF		



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

	MECHANICAL PRO	JECI	
MECHANICAL PROJECT#:	MECH-3284		11/25/2020
Parcel Number: Location: Subdivision: Legal Description:	013779000 39160 S ALBACORE LN – AVON HATTERAS COLONY SEC 4 LOT: 146 BLK: SEC: 4		
Owner Name: Owner Mail Address: Owner Contact Informat	WILLIAM SAMUEL EGGLESTON PO BOX 1222 - AVON, NC 27915 ion:		
Contractor Name: Contractor Mail Address Contractor Phone: Contractor NC License#: DETAILS	AUGUST AIR LLC : PO BOX 726 - AVON, NC 27915 252-423-9101 L33886 RESIDENTIAL		
J. M. W.	nesio anti in a	Cost of Job:	\$3,200
Electrical Contractor ID: Units	L-15935 1	MECHANICAL PROJECT FEE:	\$150.00
construction and be certa	e responsible to comply with all regulation in to comply with all zoning regulations an	d building setbacks. The applica	ant certifies that the
shown on the submitted	it is correct. That he is owner or duly author plans and specifications that he understand hiply with applicable regulations and laws.	_	
	Hours in advance) for inspections at Dare or Frisco Office 252.475.5878	County Offices Manteo Office	252.475.5870, Northern
Applicant Signature: SI	NGNATURE NOT REQUIRED AT THIS TIME	AUGUST AIR LLC	
Inspector Signature: CF	REW HAYES	CHF	



Manteo: (252) 475-5870

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

	MECHANICAL PRO	DIECT	
MECHANICAL PROJECT#:	MECH-3283		11/25/2020
Parcel Number: Location: Subdivision: Legal Description:	014449000 40199 C C GRAY RD – AVON SUBDIVISION - NONE LOT: BLK: SEC:		
Owner Name: Owner Mail Address: Owner Contact Informati	DELLA RAY GREEN P O BOX 327 - AVON, NC 27915 ion:		
Contractor Name: Contractor Mail Address: Contractor Phone: Contractor NC License#: DETAILS	AUGUST AIR LLC PO BOX 726 - AVON, NC 27915 252-423-9101 L33886 RESIDENTIAL		
		Cost of Job:	\$3,600
Electrical Contractor ID: Units	L-15935 1	MECHANICAL PROJECT FEE:	\$150.00
construction and be certainformation on this permisshown on the submitted prevoked for failure to commodule Building Inspector (24)	e responsible to comply with all regulation in to comply with all zoning regulations are is correct. That he is owner or duly authoral and specifications that he understanuply with applicable regulations and laws. Hours in advance) for inspections at Dare	d building setbacks. The application of the depth of the contract and the	ant certifies that the construction shall be as onths and may be
	1 or Frisco Office 252.475.5878 SNATURE NOT REQUIRED AT THIS TIME	AUGUST AIR LLC	
Inspector Signature: CR	EW HAYES	CHF	



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

	WIECHANICAL PROJ	ECI	
MECHANICAL PROJECT#: ME	CH-3282		11/25/2020
Parcel Number: Location:	017005000 46986 NC 12 HWY BUXTON		
Subdivision: Legal Description:	SUBDIVISION - NONE LOT: BLK: SEC:		
Owner Name: Owner Mail Address: Owner Contact Information:	GEORGE OLIVER III O'NEAL PO BOX 219 - BUXTON, NC 27920		
Contractor Name: Contractor Mail Address:	AUGUST AIR LLC PO BOX 726 - AVON, NC 27915		
Contractor Phone:	252-423-9101		
Contractor NC License#:	L33886		
DETAILS	RESIDENTIAL		
		Cost of Job:	\$7,200
Electrical Contractor ID:	L-15935		
Units	1	MECHANICAL PROJECT FEE:	\$150.00
construction and be certain to information on this permit is a shown on the submitted plans revoked for failure to comply to	ponsible to comply with all regulations ocomply with all zoning regulations and correct. That he is owner or duly authors and specifications that he understand with applicable regulations and laws.	d building setbacks. The application rized agent of owner. That all of s this permit is valid for six mo	ant certifies that the construction shall be as inths and may be
Applicant Signature: SIGNA	TURE NOT REQUIRED AT THIS TIME	AUGUST AIR LLC	
Inspector Signature: WAYLA	AND JENNETTE	CHF	



Manteo: (252) 475-5080 Northern Beach: (252) 475-5871

Frisco: (252) 475-5878

RESIDENTIAL BUILDING PERMIT

BUILDING PERMIT#: R-3274				11/24/2020
Parcel Number: Location: Subdivision: Legal Description:	014831000 42003 BARTLIK LN – AVON SUBDIVISION - NONE LOT: BLK: SEC:			
Owner Name: Owner Mail Address: Owner Phone and email:	DOUGLAS W VA 7508 ESTATE CIR	N RIPER R NIWOT, CO 80503		
Contractor Name:	KENRICK J ALBAI			
Contractor Mail Address:	PO BOX 90, AVO 252-305-1569	ON, NC 27915 Contractor NC License#: 60766		
Contractor Phone:	232-303-1303	Contractor NC License#. 60766		
BUILDING INFORMATION				
Proposed Construction Use:		DITION , TOP FLOOR ADDITION	4	
Proposed Construction Type:	SFD	Cost of Construction:	\$150,000	
Finished Square Footage:	636	CAMA Permit#:	20240	
Unfinished Square Footage:	0	Septic Permit#:	30219	
Stories:	0.0	Septic Permit Date:	11/1120	
Building Height:	0	Survey/Site Plan:		
Total Rooms:	0	Water Tap#:		
Footing Type:		Water Type: Flood Zone:	X	
Exterior Finish:		Base Flood Elevation:	0.0	
Proposed Finished Floor Elevation:		Lot/Ground Elevation:	0.0	
Bedrooms:	0	Baths/half baths:	0.00/0	
Comments: Any deviation from		PERMIT FEE		\$477.00
or site plan requires prior appr	roval.			75.00
		FLOOD DEVELOPMENT BLDG PERMIT HOME OWNERS RECOVERY FEE		75.00 10.00
		HOINE OWNERS RECOVERT FEE		10.00
		TOTAL FEES:		\$562.00
Applicant Signature:	9	Renalek J ALBAU	JGH INC	
Inspector Signature: CREW	HAYES	CHF		



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

	MECHA	NICAL PROJECT	
MECHANICAL PROJECT#:	MECH-3277		11/24/2020
Parcel Number: Location: Subdivision: Legal Description:	015791003 58215 EMPIRE GEM LN WHEELER BALLANCE LOT: 3 BLK: SEC:	HATTERAS	
Owner Name: Owner Mail Address: Owner Contact Informat	EDDIE A FORT 451 SOUR WOOD - HAR	RDY, VA 24101	
Contractor Name: Contractor Mail Address Contractor Phone: Contractor NC License#:	252-564-4031 L31244	1	
UNITS: Electrical Contractor ID: Units	RESIDENTIAL 1.00 ST.PH.32045 1	Cost of Job: MECHANICAL PROJ	\$6,300 ECT FEE: \$150.00
Comments: INSTALL IND	OOR AND OUTDOOR SYSTEM		
construction and be certa information on this permi shown on the submitted p	e responsible to comply with all in to comply with all zoning regulations correct. That he is owner or plans and specifications that he inply with applicable regulations	ulations and building setbacks. T duly authorized agent of owner. understands this permit is valid f	he applicant certifies that the That all construction shall be as
	Hours in advance) for inspection 1 or Frisco Office 252.475.5878	ons at Dare County Offices Mante	eo Office 252.475.5870, Northern
Applicant Signature: Sl	GNATURE NOT REQUIRED AT TH	IS TIME C-BREEZE HEA	TING AND AIR CONDITIONING LL
Inspector Signature: W	AYLAND JENNETTE	CHF	

PO Box 99 Nags Head, NC 27959 Phone (252) 441-7016 Fax (252) 441-4290



Residential Project Approval Application # 202001495

Property Address: 108 EAST SEA HOLLY CT PIN #: 080006493289 Parcel: 030983000

Lot/Block/Sec: LOT: 22 BLK: SEC:

Subdivision: SEASIDE SOUTH

Zoning: VILLAGE DET SF 3

Land Use: SINGLE FAMILY DWELLING, LARGE

Flood Zone: AE

Base Flood Elevation: 9.0 Regulatory Flood Elevation: 12

Map Panel No: 0800

Map Panel Date: 06/19/2020

Suffix: J

Datum Used: NAVD 1988

Owner Name:

LEWIS, QUINTIN DWIGHT - LEWIS, BEVERLY G

Owner Address.

PO BOX 907

NAGS HEAD, NC 27959

Contractor Name:

J.A. Hart General Contractor, LLC

Confractor Phone:

Contractor Address:

PO Box 1782

Kill Devil Hills, NC 27948

Description: Installing inground pool 30'X 14" w/concrete deck; generator with stand 4'x6'

Construction Value: \$50750

Classification of Work: RESIDENTIAL ACC STRUCTURE

BUILDING INFORMATION

Permit#

Permit Description

Total Fees Paid/Due

Approved By:

Approved Date:

RE202002632 RES ADD-REM-REP-ACC

\$310.00

11/02/2020

Conditions of Approval:

Provide address #s on home if none are present. Generator shall be at or above the 12 foot RFPE. Pull electrical permit. All pool equipment shall be elevated at or above 12 foot RFPE. No pool inspections until v zone cert and buoyancy calcs are turned in for review and approval.

FLOOD INFORMATION

Permit #

Permit Description

Total Fees Paid/Due

Approved By:

Approved Date:

FL202002631 FLOOD PERMIT

\$0.00

SS

11/02/2020

Conditions of Approval:

ZONING INFORMATION

Permit#

Permit Description

Total Fees Paid/Due

Approved By:

Approved Date:

ZN202002633 ZONING PERMIT - RES

\$0.00

Conditions of Approval:

pool and pool apron and equipment stands shall meet 5 ft side and 5 ft rear setback silt fence shall be installed prior to any lad disturbance material from pool shall meet a 5 ft no fill setback and a 3:1 slope As-built survey required all disturbed areas shall be stabilized call for final zoning 252-449-6045

Additional Conditions:

CALL FOR ALL REQUIRED INSPECTIONS; All new work to meet current code; FINAL INSPECTION REQUIRED PRIOR TO ISSUANCE OF CERTIFICATION OF COMPLIANCE

PLEASE NOTE:

All work shall conform to all applicable North Carolina State Building codes and Ordinances of the Town of Nags Head and shall be the responsibility of the undersigned applicant.

In accordance with GS160A-418, a permit expires 6 months after the date of issuance if the work authorized by the permit has not been commenced. If, after commencement, the work is discontinued for a period of 12 months (no inspections have taken place) the permit immediately expires. No work authorized by a permit that has expired may be performed until a new permit has been issued.

PO Box 99 Nags Head, NC 27959 Phone (252) 441-7016 Fax (252) 441-4290



Residential Project Approval Application # 202001535

Property Address:

3608 SOUTH VA DARE TRL

PIN #: 989215730832 Parcel: 007648005

Lot/Block/Sec: LOT: 255 BLK: SEC: Subdivision: GEO T STRONACH

Zoning: GENERAL COMMERCIAL DISTRICT

Land Use: SINGLE FAMILY DWELLING, LARGE

Flood Zone: AE

Base Flood Elevation: 10.0

Regulatory Flood Elevation:

Map Panel No:

Map Panel Date:

Suffix: Datum Used:

Owner Name:

GODDARD, MARK B - GODDARD, JENNIFER L

Owner Address:

17765 CLARKE RD

Contractor Name:

PROPERTY OWNER

Contractor Phone:

Contractor Address:

See Above

Description:

Adding fence around entire backyard at property line, replace benches old railing install w/vinyl handralls

Construction Value: \$16000

Classification of Work: RESIDENTIAL REMODEL

BUILDING INFORMATION

Permit#

Permit Description

RE202002635 RES ADD-REM-REP-ACC

Total Fees Paid/Due

\$190.00

\$0.00

0.00

Approved By:

Approved Date:

55

11/03/2020

Conditions of Approval:

Provide address #s on home if none are present. New vinyl rails shall be installed per product evaluation report. If new fence has anything to do with pool barrier protection than it shall comply with Appendix V of the 2018 NC RES CODE. Review zoning permit conditions. Call me with any Questions Steve 252 449 2005

FLOOD INFORMATION

Permit #

Permit Description FL202002634 FLOOD PERMIT

Total Fees Paid/Due

Approved By:

55

Approved Date:

11/03/2020

Conditions of Approval:

ZONING INFORMATION

Permit #

Permit Description

ZN202002636 ZONING PERMIT - RES

Total Fees Paid/Due

Approved By:

MK

Approved Date:

11/03/2020

Conditions of Approval:

fence shall not exceed a 6 ft in height call for final zoning inspection 252-449-6045

Additional Conditions:

CALL FOR ALL REQUIRED INSPECTIONS; All new work to meet current code; FINAL INSPECTION REQUIRED PRIOR TO ISSUANCE OF CERTIFICATION OF COMPLIANCE

PLEASE NOTE:

All work shall conform to all applicable North Carolina State Building codes and Ordinances of the Town of Nags Head and shall be the responsibility of the undersigned applicant.

In accordance with GS160A-418, a permit expires 6 months after the date of issuance if the work authorized by the permit has not been commenced. If, after commencement, the work is discontinued for a period of 12 months (no inspections have taken place) the permit immediately expires. No work authorized by a permit that has expired may be performed until a new permit has been issued.

(ZONING) RIGHT OF APPEAL

Pursuant to Section 48-594(b)(1) of the Nags Head Zoning Ordinance, you have the right to appeal this decision to the Nags Head Board of Adjustment within thirty (30) days of the date of this notice. This decision shall become final and unappealable if not appealed during this thirty (30) day period.

PO Box 99 Nags Head, NC 27959 Phone (252) 441-7016 Fax (252) 441-4290



Residential Project Approval Application # 202001516

Property Address:

2800 SOUTH WRIGHTSVILLE AVE

PIN#: 989206388703

Parcel: 005993000

Lot/Block/Sec: LOT: 23 BLK: SEC: Subdivision: VISTA COLONY SECTION 2

Zoning: HIGH DENSITY RES DISTRICT

Land Use: SINGLE FAMILY DWELLING

Flood Zone: AE

Base Flood Elevation: 10.0

Regulatory Flood Elevation: 9

Map Panel No: 9892

Map Panel Date: 06/19/2020

Suffix: J

Datum Used: NAVD 1988

LARSON, MICHAEL R - LARSON, NICOLE S

Owner Name: Owner Address:

19052 STALEYBRIDGE RD

GERMANTOWN, MD 20876

Contractor Name:

PROPERTY OWNER

Contractor Phone:

Contractor Address:

See Above

000, 00 00000

Description: Replace step treads & hand rails

Construction Value: \$700

Classification of Work: RESIDENTIAL REPAIR

BUILDING INFORMATION

Permit #

RE202002645

Permit Description

RES ADD-REM-REP-ACC

Approved By: Approved Date:

Total Fees Paid/Due

11/04/2020

Conditions of Approval:

Provide address #s on home if none are present. Stairs shall meet code. This was a SWO. Call for final inspection

\$100.00

FLOOD INFORMATION

Permit#

Permit Description

Total Fees Paid/Due Approved By: Approved Date:

FL202002644

FLOOD PERMIT

\$0.00

SS 11/04/2020

Conditions of Approval:

Additional Conditions:

CALL FOR ALL REQUIRED INSPECTIONS; All new work to meet current code; FINAL INSPECTION REQUIRED PRIOR TO ISSUANCE OF CERTIFICATION OF COMPLIANCE

PLEASE NOTE:

All work shall conform to all applicable North Carolina State Building codes and Ordinances of the Town of Nags Head and shall be the responsibility of the undersigned applicant.

In accordance with GS160A-418, a permit expires 6 months after the date of issuance if the work authorized by the permit has not been commenced. If, after commencement, the work is discontinued for a period of 12 months (no inspections have taken place) the permit immediately expires. No work authorized by a permit that has expired may be performed until a new permit has been issued.

I, the undersigned, understand that the issuance of a floodplain development permit approval is contingent upon the above information being correct and that the plans and supporting data have been or shall be provided as required, including but not limited to a proposed elevation certificate and or V-Zone certificate. Note: all elevation certificates must be signed by a professional engineer or registered land surveyor.

DECISION: Approved with Conditions (See above)

PO Box 99 Nags Head, NC 27959 Phone (252) 441-7016 Fax (252) 441-4290



Residential Project Approval Application # 202001518

Property Address:

447 WEST VILLA DUNES DR

PIN #: 989214336318 Parcel: 006118004

Lot/Block/Sec: LOT: 4 BLK: SEC:

Subdivision: BRITTINGHAM HILLS

Zoning: SPECIAL PLANNED DEV DISTRICT

Land Use: SINGLE FAMILY DWELLING

Flood Zone: X Base Flood Elevation: 0.0

Regulatory Flood Elevation: 9

Map Panel No: 9892

Map Panel Date: 06/19/2020

Suffix: J

Datum Used: NAVD 1988

Owner Name:

PAUL, CAITLIN D - PAUL, LAKELAND

Owner Address:

447 W VILLA DUNES DR

Contractor Name:

GranPlan, Inc.

Contractor Phone:

252-305-6881

Contractor Address:

349C Water Plant Rd

Manteo, NC 27954

Description: Repair/replace top floor rear deck S side and exterior stairs to top floor rear deck

Construction Value: \$5000

Classification of Work: RESIDENTIAL REPAIR

BUILDING INFORMATION

Permit Description

Total Fees Pald/Due

Approved By: Approved Date:

RE202002655

RES ADD-REM-REP-ACC

\$130.00

11/06/2020

Conditions of Approval:

Provide address #s on home if none are present. All work and repairs and replacements shall meet current codes. Call for final inspection

FLOOD INFORMATION

Permit #

Permit Description

Total Fees Pald/Due Approved By: Approved Date:

FL202002654

FLOOD PERMIT

\$0.00

11/08/2020

Conditions of Approval:

Additional Conditions:

CALL FOR ALL REQUIRED INSPECTIONS; All new work to meet current code; FINAL INSPECTION REQUIRED PRIOR TO ISSUANCE OF CERTIFICATION OF COMPLIANCE

PLEASE NOTE:

All work shall conform to all applicable North Carolina State Building codes and Ordinances of the Town of Nags Head and shall be the responsibility of the undersigned applicant.

In accordance with GS160A-418, a permit expires 6 months after the date of issuance if the work authorized by the permit has not been commenced. If, after commencement, the work is discontinued for a period of 12 months (no inspections have taken place) the permit immediately expires. No work authorized by a permit that has expired may be performed until a new permit has been issued.

I, the undersigned, understand that the Issuance of a floodplain development permit approval is contingent upon the above information being correct and that the plans and supporting data have been or shall be provided as required, including but not limited to a proposed elevation certificate and or V-Zone certificate. Note: all elevation certificates must be signed by a professional engineer or registered land surveyor.

DECISION: Approved with Conditions (See above)

PO Box 99 Nags Head, NC 27959 Phone (252) 441-7016 Fax (252) 441-4290



Residential Project Approval Application # 202001491

Property Address:

8613 EAST TIDE DR

PIN #: 071909077245 Parcel: 007138000

Lot/Block/Sec: LOT: 5 BLK: SEC:

Subdivision: TIDES TIME

Zoning: MEDIUM DENSITY RES DISTRICT

Land Use: SINGLE FAMILY DWELLING

Flood Zone: VE

Base Flood Elevation: 11.0 Regulatory Flood Elevation: 12

Map Panel No: 0719

Map Panel Date: 06/19/2020

Datum Used: NAVD 1988

Owner Name:

SCHMUNK, MARK E - SCHMUNK, TONYA M

Owner Address:

6580 FLETCHER CHAPEL RD

Contractor Name:

PROPERTY OWNER

Contractor Phone:

Contractor Address:

See Above

Description:

Enclose portion of covered deck to create bathroom 75 sq ft, add/relo windos, add lights outlets enlarge

existing closet

Construction Value: \$20000

Classification of Work: RESIDENTIAL ADDITION

BUILDING INFORMATION

Permit #

Permit Description

Total Fees Paid/Due

Approved By:

Approved Date:

RE202002675 RES ADD-REM-REP-ACC

\$190.00

SS

11/09/2020

Conditions of Approval:

Provide address #s on home if none are present. Additional engineering may be requested. All work shall meet current codes. All plumbing clearances shall be met, Call for a site visit to discuss job if you like. All subs shall pull permits prior to starting work. Call for all required inspections. A new flood elevation cert may be required

FLOOD INFORMATION

Permit #

Permit Description FL202002674 FLOOD PERMIT

Total Fees Paid/Due

Approved By:

Approved Date:

\$0.00

SS

11/09/2020

Conditions of Approval:

ZONING INFORMATION

Permit #

Permit Description

Total Fees Paid/Due

Approved By:

Approved Date:

ZN202002673 ZONING PERMIT - RES

0.00

11/09/2020

Conditions of Approval:

Enclosure shall meet CAMA requirements as approved enclosing within existing footprint no additional lot coverage call for final zoning and CAMA inspection 252-449-6045

Additional Conditions:

CALL FOR ALL REQUIRED INSPECTIONS; All new work to meet current code; FINAL INSPECTION REQUIRED PRIOR TO ISSUANCE OF CERTIFICATION OF COMPLIANCE

PLEASE NOTE:

All work shall conform to all applicable North Carolina State Building codes and Ordinances of the Town of Nags Head and shall be the responsibility of the undersigned applicant.

In accordance with GS160A-418, a permit expires 6 months after the date of issuance if the work authorized by the permit has not been commenced. If, after commencement, the work is discontinued for a period of 12 months (no inspections have taken place) the permit immediately expires. No work authorized by a permit that has expired may be performed until a new permit has been issued.

(ZONING) RIGHT OF APPEAL

PO Box 99 Nags Head, NC 27959 Phone (252) 441-7016 Fax (252) 441-4290



Residential Project Approval Application # 202001550

Property Address:

115 OVERLOOK CT

PIN #: 080118207577 Parcel: 024961262

Lot/Block/Sec: LOT: 62 BLK: SEC: 2 Subdivision: RIDGES SEC 2,THE

Zoning: VILLAGE DET RES SF 2

Land Use: SINGLE FAMILY DWELLING

Flood Zone: X Base Flood Elevation: 0.0

Regulatory Flood Elevation: 9

Map Panel No: 0801

Map Panel Date: 06/19/2020

Suffix: J

Datum Used: NAVD 1988

Owner Name:

EATON, JOHN H TTEE - EATON, SUSAN E TTEE

Owner Address:

115 OVERLOOK CT NO 36

Contractor Name:

K.I.C.Z. MAINTENANCE & REMODELING INC

Contractor Phone:

252-

619-2599

Contractor Address:

P O BOX 875

GRANDY, NC 27939

Description: Reskin decking w/trex, replace handrails in back w/composite

Construction Value: \$22000

Classification of Work: RESIDENTIAL REPAIR

BUILDING INFORMATION

Permit #

Permit Description

Total Fees Paid/Due

Approved By: Approved Date:

RE202002681

RES ADD-REM-REP-ACC

\$220.00

SS

11/12/2020

Conditions of Approval:

Provide address #s on home if none are present. Install trex decking composite rails per evaluation report. Call for final inspection

FLOOD INFORMATION

Permit # FL202002680

Permit Description FLOOD PERMIT

Total Fees Paid/Due

\$0.00

SS

Approved By: Approved Date: 11/12/2020

Conditions of Approval:

Additional Conditions:

CALL FOR ALL REQUIRED INSPECTIONS; All new work to meet current code; FINAL INSPECTION REQUIRED PRIOR TO ISSUANCE OF CERTIFICATION OF COMPLIANCE

PLEASE NOTE:

All work shall conform to all applicable North Carolina State Building codes and Ordinances of the Town of Nags Head and shall be the responsibility of the undersigned applicant.

In accordance with GS160A-418, a permit expires 6 months after the date of issuance if the work authorized by the permit has not been commenced. If, after commencement, the work is discontinued for a period of 12 months (no inspections have taken place) the permit immediately expires. No work authorized by a permit that has expired may be performed until a new permit has been issued.

I, the undersigned, understand that the issuance of a floodplain development permit approval is contingent upon the above information being correct and that the plans and supporting data have been or shall be provided as required, including but not limited to a proposed elevation certificate and or V-Zone certificate. Note: all elevation certificates must be signed by a professional engineer or registered land surveyor.

DECISION: Approved with Conditions (See above)

PO Box 99 Nags Head, NC 27959 Phone (252) 441-7016 Fax (252) 441-4290

RESIDENTIAL

Project Approval

Application # 202001564

Property Address: 6105 SOUTH SOUTH SHORE CT PIN #: 080006381688 Parcel: 024961342

Lot/Block/Sec: LOT: 12 BLK: SEC:

Subdivision: LEEWARD SHORES

Zoning: VILLAGE DET SF 3

Land Use: SINGLE FAMILY DWELLING, LARGE

Flood Zone: AE

Base Flood Elevation: 9.0

Regulatory Flood Elevation: 9

Map Panel No: 0800

Map Panel Date: 06/19/2020

Suffix: J

Datum Used: NAVD 1988

Owner Name:

ABOUD, LISA MARIE - ABOUD, PAUL MICHAEL

Owner Address:

622 E CUSTIS AVE

Contractor Name:

Gallop Roofing & Remodeling, Inc.

Contractor Phone:

252-473-2888

Contractor Address:

PO Box 157

WANCHESE, NC 27981

Description: Remove and replace cedar shake roof

Construction Value: \$33630

Classification of Work: RESIDENTIAL REMODEL

BUILDING INFORMATION

Permit #

Permit Description

Total Fees Pald/Due

Approved By: Approved Date:

RE202002690

RES ADD-REM-REP-ACC

\$250.00

SS

11/13/2020

Conditions of Approval:

Provide address #s on home if none are present. Call for material inspection. Call for final inspections

FLOOD INFORMATION

Permit #

Permit Description

Total Fees Paid/Due Approved By: Approved Date:

FL202002689

FLOOD PERMIT

\$0.00

11/13/2020

Conditions of Approval:

Additional Conditions:

CALL FOR ALL REQUIRED INSPECTIONS; All new work to meet current code; FINAL INSPECTION REQUIRED PRIOR TO ISSUANCE OF CERTIFICATION OF COMPLIANCE

PLEASE NOTE:

All work shall conform to all applicable North Carolina State Building codes and Ordinances of the Town of Nags Head and shall be the responsibility of the undersigned applicant.

in accordance with GS160A-418, a permit expires 6 months after the date of issuance if the work authorized by the permit has not been commenced. If, after commencement, the work is discontinued for a period of 12 months (no inspections have taken place) the permit immediately expires. No work authorized by a permit that has expired may be performed until a new permit has been issued.

I, the undersigned, understand that the issuance of a floodplain development permit approval is contingent upon the above information being correct and that the plans and supporting data have been or shall be provided as required, including but not limited to a proposed elevation certificate and or V-Zone certificate. Note: all elevation certificates must be signed by a professional engineer or registered land surveyor.

DECISION: Approved with Conditions (See above)

Devon H.

11/13/2020

Responsible Party

Date

PO Box 99 Nags Head, NC 27959 Phone (252) 441-7016 Fax (252) 441-4290



Residential Project Approval Application # 202001528

Property Address:

3110 SOUTH MEMORIAL AVE

PIN #: 989211570102 Parcel: 005351000

Lot/Block/Sec: LOT: 7 BLK: 9 SEC: 1 Subdivision: NAGS HEAD SHORES AMENDED SEC 1

Zoning: HIGH DENSITY RES DISTRICT

Land Use: SINGLE FAMILY DWELLING

Flood Zone: AE

Base Flood Elevation: 10.0

Regulatory Flood Elevation:

Map Panel No:

Map Panel Date:

Suffix: Datum Used:

Owner Name:

ROTHENBACH, KARL E - ROTHENBACH, LAURA H

Owner Address:

12507 Shadyglen Ct

Contractor Name:

2 Guys Services

Contractor Phone:

252-489-8753

Contractor Address:

605 W Archdale St

KILL DEVIL HILLS, NC 27948

Description:

Build an 8' X 12'6" roof deck over existing porch; reside house; replace windows

Construction Value: \$57000

Classification of Work: RESIDENTIAL REMODEL.

BUILDING INFORMATION

Permit #

Permit Description

RE202002699 RES ADD-REM-REP-ACC

Total Fees Paid/Due

\$320.00

\$0.00

0.00

Approved By:

Approved Date:

11/13/2020

Conditions of Approval:

FLOOD INFORMATION

Permit#

Permit Description

Total Fees Paid/Due

Approved By:

Approved Date:

11/13/2020

Conditions of Approval:

FL202002698 FLOOD PERMIT

ZONING INFORMATION

Permit#

Permit Description

ZN202002697 ZONING PERMIT - RES

Total Fees Paid/Due Approved By:

MK

Approved Date: 11/13/2020

Conditions of Approval:

No additional lot coverage proposed

max height 35 ft

call for final zoning inspection 252-449-6045

Additional Conditions:

CALL FOR ALL REQUIRED INSPECTIONS; All new work to meet current code; FINAL INSPECTION REQUIRED PRIOR TO ISSUANCE OF CERTIFICATION OF COMPLIANCE

PLEASE NOTE:

All work shall conform to all applicable North Carolina State Building codes and Ordinances of the Town of Nags Head and shall be the responsibility of the undersigned applicant.

In accordance with GS160A-418, a permit expires 6 months after the date of issuance if the work authorized by the permit has not been commenced. If, after commencement, the work is discontinued for a period of 12 months (no inspections have taken place) the permit immediately expires. No work authorized by a permit that has expired may be performed until a new permit has been issued.

(ZONING) RIGHT OF APPEAL

Pursuant to Section 48-594(b)(1) of the Nags Head Zoning Ordinance, you have the right to appeal this decision to the Nags Head Board of Adjustment within thirty (30) days of the date of this notice. This decision shall become final and unappealable if not appealed during this thirty (30) day period.

I, the undersigned, understand that the issuance of a floodplain development permit approval is contingent upon the above information being correct and that the plans and supporting data have been or shall be provided as

PO Box 99 Nags Head, NC 27959 Phone (252) 441-7016 Fax (252) 441-4290



Residential Project Approval Application # 202001505

Property Address: 10235 SOUTH COLONY SOUTH DR PIN #: 071815627845 Parcel: 007500000

Lot/Block/Sec: LOT: 70 BLK: SEC:

Subdivision: GOOSE WING

Zoning: MEDIUM DENSITY RES DISTRICT

Land Use: SINGLE FAMILY DWELLING

Flood Zone: AE

Base Flood Elevation: 10.0

Regulatory Flood Elevation: 9

Map Panel No: 0718

Map Panel Date: 06/19/2020

Suffix: J

Datum Used: NAVD 1988

Owner Name:

ANDERSON, MARK E TTEE - ANDERSON, SUSAN

Owner Address:

200 BROOKE DR

Contractor Name:

Albemarle Contracting Services (ACS)

Contractor Phone:

252-599-2999

Contractor Address:

PO Box 1771

Nags Head, NC 27959

Description:

Enclose under existing structure enlarging bedroom & bath 367 sq ft & adding screened porch 85 sq ft

Construction Value: \$170000

Classification of Work: RESIDENTIAL ADDITION

BUILDING INFORMATION

Permit #

Permit Description

Total Fees Paid/Due

Approved By:

Approved Date:

RE202002712 RES ADD-REM-REP-ACC

\$650.00

11/16/2020

Conditions of Approval:

Provide address #s on home if none are present. Review zoning permit conditions. A new flood elevation certificate may be required. Smokes and Co2 detector shall be brought up to code. Provide protection for new windows and doors. All subs shall pull permits prior to staring work. Call for all required inspections. Call for final inspection

FLOOD INFORMATION

Permit #

FL202002711

Permit Description

FLOOD PERMIT

Total Fees Paid/Due \$0.00

Approved By:

Approved Date:

11/16/2020

Conditions of Approval:

ZONING INFORMATION

Permit #

Permit Description

Total Fees Paid/Due

0.00

Approved By:

Approved Date:

ZN202002710 ZONING PERMIT - RES

MK

11/16/2020

Conditions of Approval:

all work within the existing footprint no additional lot coverage any land disturbance shall be stabilized call for final CAMA and Zoning 252-449-6045

Additional Conditions:

CALL FOR ALL REQUIRED INSPECTIONS; All new work to meet current code; FINAL INSPECTION REQUIRED PRIOR TO ISSUANCE OF CERTIFICATION OF COMPLIANCE

PLEASE NOTE:

All work shall conform to all applicable North Carolina State Building codes and Ordinances of the Town of Nags Head and shall be the responsibility of the undersigned applicant.

In accordance with GS160A-418, a permit expires 6 months after the date of issuance if the work authorized by the permit has not been commenced. If, after commencement, the work is discontinued for a period of 12 months (no inspections have taken place) the permit immediately expires. No work authorized by a permit that has expired may be performed until a new permit has been issued.

(ZONING) RIGHT OF APPEAL

PO Box 99 Nags Head, NC 27959 Phone (252) 441-7016 Fax (252) 441-4290



Residential Project Approval Application # 202001520

Property Address: 9129 SOUTH OLD OREGON INLET RD PIN#: 071918320396 Parcel: 029085000

Lot/Block/Sec: LOT: 2 BLK: 10 SEC: 2 Subdivision: HOLLYWOOD BEACH SEC 2

Zoning: MEDIUM DENSITY RES DISTRICT

Land Use: SINGLE FAMILY DWELLING

Flood Zone: VE

Base Flood Elevation: 11.0 Regulatory Flood Elevation: 12

Map Panel No: 0719

Map Panel Date: 06/19/2020

Suffix: J

Datum Used: NAVD 1988

Owner Name:

HOWARD, WALTER SCOTT - HOWARD, LYNDA A

Owner Address:

3 HILLOCK WOODS

Contractor Name:

R. Lawson Construction Co. Inc.

Contractor Phone:

252-202-3428

Contractor Address:

8443 CARATOKE HW Ste

Powells Point, NC 27966

Description: Move west entry stairs and add 72 htd sq feet for bathroom a dition

Construction Value: \$78523

Classification of Work: RESIDENTIAL ADDITION

BUILDING INFORMATION

Permit Description

Total Fees Paid/Due Approved By:

Approved Date:

RE202002702 RES ADD-REM-REP-ACC

\$380.00

SS

11/13/2020

Conditions of Approval:

Provide address #s on home if none are present. All work shall meet current code. All subs shall pull permits prior to starting work. Smokes and Co2 detectors shall be brought to code throughout home. A new flood elevation certificate may be required. Call for all required inspections. Call final inspection

FLOOD INFORMATION

Permit #

Permit Description

Total Fees Paid/Due

Approved By:

Approved Date:

FL202002701 FLOOD PERMIT

\$0.00

22

11/13/2020

Conditions of Approval:

ZONING INFORMATION

Permit #

Permit Description

Total Fees Paid/Due

Approved By:

Approved Date:

ZN202002700 ZONING PERMIT - RES

11/13/2020

Conditions of Approval:

Addition of bathroom is under existing porch no additional lot coverage Moving of entry steps shall maintain setbacks Must comply with CAMA Minor Permit 20-24 Call for CAMA and Zoning final inspections 252-449-6045

Additional Conditions:

CALL FOR ALL REQUIRED INSPECTIONS; All new work to meet current code; FINAL INSPECTION REQUIRED PRIOR TO ISSUANCE OF CERTIFICATION OF COMPLIANCE.

PLEASE NOTE:

All work shall conform to all applicable North Carolina State Building codes and Ordinances of the Town of Nags Head and shall be the responsibility of the undersigned applicant.

In accordance with GS160A-418, a permit expires 6 months after the date of Issuance if the work authorized by the permit has not been commenced. If, after commencement, the work is discontinued for a period of 12 months (no inspections have taken place) the permit immediately expires. No work authorized by a permit that has expired may be performed until a new permit has been issued.

(ZONING) RIGHT OF APPEAL

PO Box 99 Nags Head, NC 27959 Phone (252) 441-7016 Fax (252) 441-4290



Residential Project Approval Application # 202001533

Property Address:

8601 EAST TIDE DR

PIN #: 071909063958 Parcel: 007134000

Lot/Block/Sec: LOT: 1 BLK: SEC:

Subdivision: TIDES TIME

Zoning: MEDIUM DENSITY RES DISTRICT

Land Use: SINGLE FAMILY DWELLING

Flood Zone: AE

Base Flood Elevation: 10.0

Regulatory Flood Elevation: 12

Map Panel No: 0719

Map Panel Date: 06/19/2020

Suffix: J

Datum Used: NAVD 1988

Owner Name:

AHRENBERG, DOUGLAS - AHRENBERG, SHARON

Owner Address:

7148 ARBOR OAKS DR

Contractor Name:

MICHAEL L. DILETTOSO

Contractor Phone:

919-942-8279

Contractor Address:

1616 Jo Mac Rd

Description: Addition, 1400 htd SF, to include new bath and closet; sunro om; new top floor - family room & kitchen

Construction Value: \$230000

Classification of Work: RESIDENTIAL ADDITION

BUILDING INFORMATION

Permit #

Permit Description

Total Fees Paid/Due

Approved By:

Approved Date:

RE202002721 RES ADD-REM-REP-ACC

\$740.00

SS

11/17/2020

Conditions of Approval:

Provide address #s on home. Provide v zone certificate prior to calling for any inspections. A building under construction and final elevation certificate will be required. Enclosure under home shall be removed and not be put back. Heat pump shall be elevated to 12 foot or greater to bottom, Girders of house shall be elevated at or above the 12 foot RFPE to the lowest horizontal structural member. All things that make the house non conforming shall be removed. Call for a site visit to determine what may make your house non conforming

FLOOD INFORMATION

Permit #

Permit Description FL202002720 FLOOD PERMIT

Total Fees Paid/Due

Approved By:

Approved Date:

\$0.00

SS

11/17/2020

Conditions of Approval:

ZONING INFORMATION

Permit #

Permit Description

Total Fees Paid/Due

Approved By:

Approved Date:

ZN202002719 ZONING PERMIT - RES

0.00

MK

11/17/2020

Conditions of Approval:

Septic removal and replacement please install silt fencing prior to land disturbance and ensure it is maintained until stabilized

Addition must meet setbacks

height cert required - max height with 6/12 roof pitch shall not exceed 35 ft as-bilt survey may be required call zoning for final inspection

Additional Conditions:

CALL FOR ALL REQUIRED INSPECTIONS; All new work to meet current code; FINAL INSPECTION REQUIRED PRIOR TO ISSUANCE OF CERTIFICATION OF COMPLIANCE

PLEASE NOTE:

All work shall conform to all applicable North Carolina State Building codes and Ordinances of the Town of Nags Head and shall be the responsibility of the undersigned applicant.

In accordance with GS160A-418, a permit expires 6 months after the date of issuance if the work authorized by the permit has not been commenced. If, after commencement, the work is discontinued for a period of 12 months (no inspections have taken place) the permit immediately expires. No work authorized by a permit that has expired may be performed until a new permit has been issued.

PO Box 99 Nags Head, NC 27959 Phone (252) 441-7016 Fax (252) 441-4290



Residential Project Approval Application # 202001524

Property Address:

3823 SOUTH VA DARE TRL

PIN #: 989220813949 Parcel: 007546000

Lot/Block/Sec: LOT: 2 BLK: SEC:

Subdivision: GEO T STRONACH

Zoning: COMMERCIAL/RESIDENTIAL DISTRIC

Land Use: SINGLE FAMILY DWELLING

Flood Zone: VE

Base Flood Elevation: 11.0

Regulatory Flood Elevation: 12

Map Panel No: 9892

Map Panel Date: 06/19/2020

Suffix: .!

Datum Used: NAVD 1988

Owner Name:

LINDEN OBX PROPERTIES LLC

Owner Address:

68 Linden Avenue

Contractor Name:

Saunders General Contractor, Inc., R.M.

Contractor Phone:

252-207-8710

Contractor Address:

PO Box 1922

Kill Devil Hills, NC 27948

Description:

Raise house from existing grade to approx. 8'4" to top of gi rder system; replace front & rear steps;

replace existing lattice & underpinning, replace existing walkway to the beach

Construction Value: \$132633

Classification of Work: RESIDENTIAL REMODEL

BUILDING INFORMATION

Permit #

Permit Description

Total Fees Paid/Due

Approved By:

Approved Date:

RE202002718 RES ADD-REM-REP-ACC

\$560.00

SS

11/17/2020

Conditions of Approval:

Provide address #s on home if none are present. A new flood elevation cert will be required. Lowest horizontal structural member shall be at or above the 12 foot RFPE to the bottom of member. Concrete shall not be in contact with piles. Concrete shall be frangible under house. All subs shall pull permits prior to starting work. Call for all required inspections. Additional engineering may be requested. Call for all required inspection

FLOOD INFORMATION

Permit#

Permit Description

Total Fees Paid/Due

Approved By:

Approved Date:

FL202002717 FLOOD PERMIT

\$0.00

SS

11/17/2020

Conditions of Approval:

ZONING INFORMATION

Permit#

Permit Description

Total Fees Paid/Due

Approved By:

Approved Date:

ZN202002716 ZONING PERMIT - RES

0.00

MK

11/17/2020

Conditions of Approval:

Raise house within existing footprint 8' 4"

any land disturbance please install silt fencing and maintain throughout project until property is stabilized as-built survey required to insure setbacks

Final zoning and CAMA required call 252-449-6045

Additional Conditions:

CALL FOR ALL REQUIRED INSPECTIONS; All new work to meet current code; FINAL INSPECTION REQUIRED PRIOR TO ISSUANCE OF CERTIFICATION OF COMPLIANCE

PLEASE NOTE:

All work shall conform to all applicable North Carolina State Building codes and Ordinances of the Town of Nags Head and shall be the responsibility of the undersigned applicant.

In accordance with GS160A-418, a permit expires 6 months after the date of issuance if the work authorized by the permit has not been commenced. If, after commencement, the work is discontinued for a period of 12 months (no inspections have taken place) the permit immediately expires. No work authorized by a permit that has expired may be performed until a new permit has been issued.

PO Box 99 Nags Head, NC 27959 Phone (252) 441-7016 Fax (252) 441-4290



Residential Project Approval Application # 202001553

Property Address: 9005 SOUTH OLD OREGON INLET RD PIN #: 071913234636 Parcel: 007195000

Lot/Block/Sec: LOT: 14 & PT 15 BLK: 13 SEC: 3

Subdivision: HOLLYWOOD BEACH SEC 3

Zoning: MEDIUM DENSITY RES DISTRICT

Land Use: SINGLE FAMILY DWELLING, LARGE

Flood Zone: VE

Base Flood Elevation: 11.0

Regulatory Flood Elevation: 12

Map Panel No: 0719

Map Panel Date: 06/19/2020

Suffix: J

Datum Used: NAVD 1988

Owner Name:

STAPLETON, JOHN WARREN

Owner Address:

400 5TH AVE

Contractor Name:

Aria Construction & Development, Inc.

Contractor Phone:

252-796-7737

Contractor Address:

PO Box 321

Creswell, NC 27928

Description:

Demolition of existing structure & removal of septic system in preparation for new home

Construction Value: \$38000

Classification of Work: RESIDENTIAL DEMO

DEMO PERMIT INFORMATION

Permit#

Permit Description

Total Fees Paid/Due

Approved By:

Approved Date:

DR202002735 DEMO RES WITHIN AEC

\$1150.00

98

11/18/2020

Conditions of Approval:

Review Demo procedure handout. Call for all required inspections. Call Steve at 252 449 2005 to discuss demo procedures

FLOOD INFORMATION

Permit#

Permit Description

Total Fees Paid/Due

Approved By:

Approved Date:

FL202002734 FLOOD PERMIT

\$0.00

SS

11/18/2020

Conditions of Approval:

ZONING INFORMATION

Permit #

Permit Description

Total Fees Paid/Due

Approved By:

Approved Date:

ZN202002733 ZONING PERMIT - RES DEMO 0.00

MK

11/18/2020

Conditions of Approval:

Prior to any land disturbance/ demolition please install silt fencing until project is complete and stabilized please refer to Sec. 10-212. - Procedure for demolition from a location within an ocean hazard or an estuarine AEC. prior

Dune shall not be touched during the demolition of the structure Call for final zoning 252-449-6045

Additional Conditions:

CALL FOR ALL REQUIRED INSPECTIONS; All new work to meet current code; FINAL INSPECTION REQUIRED PRIOR TO ISSUANCE OF CERTIFICATION OF COMPLIANCE

PLEASE NOTE:

All work shall conform to all applicable North Carolina State Building codes and Ordinances of the Town of Nags Head and shall be the responsibility of the undersigned applicant.

In accordance with GS160A-418, a permit expires 6 months after the date of issuance if the work authorized by the permit has not been commenced. If, after commencement, the work is discontinued for a period of 12 months (no inspections have taken place) the permit immediately expires. No work authorized by a permit that has expired may be performed until a new permit has been issued.

(ZONING) RIGHT OF APPEAL

PO Box 99 Nags Head, NC 27959 Phone (252) 441-7016 Fax (252) 441-4290



Residential Project Approval Application # 202001558

Property Address:

4134 SOUTH VA DARE TRL

PIN #: 989108987342 Parcel: 008556076

Lot/Block/Sec: LOT: 76 & UNUMBERED LOT BLK: SEC:

Subdivision: OLD HOTEL LOTS - DB 15-219

Zoning: GENERAL COMMERCIAL DISTRICT

Land Use: SINGLE FAMILY DWELLING, LARGE

Flood Zone: AE

Base Flood Elevation: 10.0

Regulatory Flood Elevation: 9

Map Panel No: 9891

Map Panel Date: 06/19/2020

Suffix: J

Datum Used: NAVD 1988

Owner Name:

VOGEDES, WILLIAM III - VOGEDES, VIRGINIA

Owner Address:

104 BLOUNT ST

Contractor Name:

JB Utz Construction

Contractor Phone:

Contractor Address:

2719 S Wrightsville Ave

Nags Head, NC 27959

Description:

Replace shakes on S & W side, replace existing stairs from upper to mid-level deck on S side

Construction Value: \$14000

Classification of Work: RESIDENTIAL REPAIR

BUILDING INFORMATION

Permit #

Permit Description

Total Fees Paid/Due

Approved By: Approved Date:

RE202002726

RES ADD-REM-REP-ACC

\$190.00

SS 11/18/2020

Conditions of Approval:

- Provide address #s on home if none are present. All work shall be code compliant. Call for final inspection

FLOOD INFORMATION

Permit #

Permit Description

Total Fees Paid/Due

Approved By: Approved Date:

FL202002725

FLOOD PERMIT

\$0.00

11/18/2020 SS

Conditions of Approval:

Additional Conditions:

CALL FOR ALL REQUIRED INSPECTIONS; All new work to meet current code; FINAL INSPECTION REQUIRED PRIOR TO ISSUANCE OF CERTIFICATION OF COMPLIANCE

PLEASE NOTE:

All work shall conform to all applicable North Carolina State Building codes and Ordinances of the Town of Nags Head and shall be the responsibility of the undersigned applicant.

In accordance with GS160A-418, a permit expires 6 months after the date of issuance if the work authorized by the permit has not been commenced. If, after commencement, the work is discontinued for a period of 12 months (no inspections have taken place) the permit immediately expires. No work authorized by a permit that has expired may be performed until a new permit has been issued.

I, the undersigned, understand that the Issuance of a floodplain development permit approval is contingent upon the above information being correct and that the plans and supporting data have been or shall be provided as required, including but not limited to a proposed elevation certificate and or V-Zone certificate. Note: all elevation certificates must be signed by a professional engineer or registered land surveyor.

PO Box 99 Nags Head, NC 27959 Phone (252) 441-7016 Fax (252) 441-4290



Residential Project Approval **Application # 202001541**

Property Address:

9131 SOUTH OLD OREGON INLET RD

PIN #: 071918321312 Parcel: 007226000

Lot/Block/Sec: LOT: 1 BLK: 10 SEC: 2 Subdivision: HOLLYWOOD BEACH SEC 2

Zoning: MEDIUM DENSITY RES DISTRICT

Land Use: SINGLE FAMILY DWELLING

Flood Zone: VE

Base Flood Elevation: 11.0

Regulatory Flood Elevation: 12

Map Panel No: 0719

Map Panel Date: 06/19/2020

Suffix: J

Datum Used: NAVD 1988

Owner Name:

SACKETT, DEAN R III - SACKETT, MARIE-EL

Owner Address:

8541 RIVERSIDE RD

Contractor Name:

R. Lawson Construction Co. Inc.

Contractor Phone:

252-202-3428

Contractor Address:

8443 CARATOKE HW Ste

Powells Point, NC 27966

Description: remodel upstairs bath, waterproof existing deck

Construction Value: \$49332

Classification of Work: RESIDENTIAL REMODEL

BUILDING INFORMATION

Permit #

Permit Description

Total Fees Paid/Due

Approved By: Approved Date:

RE202002728

RES ADD-REM-REP-ACC

\$280.00

11/18/2020

Conditions of Approval:

Provide address #s on home if none are present. All subs shall pull permits prior to starting work. Call for all required inspections. Provide Smoke / Co2 detectors to code throughout home. All plumbing clearances shall be to code. Call for final inspection

FLOOD INFORMATION

Permit #

Permit Description

Total Fees Paid/Due

Approved By: Approved Date:

FL202002727

FLOOD PERMIT

\$0.00

SS 11/18/2020

Conditions of Approval:

Additional Conditions:

CALL FOR ALL REQUIRED INSPECTIONS; All new work to meet current code; FINAL INSPECTION REQUIRED PRIOR TO ISSUANCE OF CERTIFICATION OF COMPLIANCE

PLEASE NOTE:

All work shall conform to all applicable North Carolina State Building codes and Ordinances of the Town of Nags Head

and shall be the responsibility of the undersigned applicant.
In accordance with GS160A-418, a permit expires 6 months after the date of Issuance if the work authorized by the permit has not been commenced. If, after commencement, the work is discontinued for a period of 12 months (no inspections have taken place) the permit immediately expires. No work authorized by a permit that has expired may be performed until a new permit has been issued.

l, the undersigned, understand that the issuance of a floodplain development permit approval is contingent upon the above information being correct and that the plans and supporting data have been or shall be provided as required, including but not limited to a proposed elevation certificate and or V-Zone certificate. Note: all elevation certificates must be signed by a professional engineer or registered land surveyor.

DECISION: Approved with Conditions (See above)

Debbie Lawson

11/18/20

Responsible Party

Date

PO Box 99 Nags Head, NC 27959 Phone (252) 441-7016 Fax (252) 441-4290



Residential Project Approval Application # 202001549

Property Address:

218 EAST ALTOONA SOUTH ST

PIN #: 071815648217 Parcel: 008982000

Lot/Block/Sec: LOT: 29 & PT 30 BLK: SEC: Subdivision: OCEAN COLONY SOUTH

Zoning: MEDIUM DENSITY RES DISTRICT

Land Use: SINGLE FAMILY DWELLING

Flood Zone: VE

Base Flood Elevation: 12.0

Regulatory Flood Elevation: 12

Map Panel No: 0718

Map Panel Date: 06/19/2020

Suffix: J

Datum Used: NAVD 1988

Owner Name:

BRIGHAM, EDWARD - BRIGHAM, JULIE

Owner Address:

113 BRERETON DR

Contractor Name:

PROPERTY OWNER

Contractor Phone:

Contractor Address:

See Above

000, 00 00000

Description:

Adding x braces under house (suggested by engineer) add supports/brackets to deck repair od shower

shed sandfence

Construction Value: \$3000

Classification of Work: RESIDENTIAL REPAIR

BUILDING INFORMATION

Permit #

Permit Description

Total Fees Paid/Due Approved By: Approved Date:

RE202002732

RES ADD-REM-REP-ACC

\$130.00

38 11/18/2020

Conditions of Approval:

Provide address #s on home if none are present. Additional engineering may be requested. Call for all required inspections. Call for final inspection

FLOOD INFORMATION

Parmit #

Permit Description

Total Fees Paid/Due

Approved By: Approved Date:

FL202002731

FLOOD PERMIT

11/18/2020

Conditions of Approval:

Additional Conditions:

CALL FOR ALL REQUIRED INSPECTIONS; All new work to meet current code; FINAL INSPECTION REQUIRED PRIOR TO ISSUANCE OF CERTIFICATION OF COMPLIANCE

PLEASE NOTE:

All work shall conform to all applicable North Carolina State Building codes and Ordinances of the Town of Nags Head

and shall be the responsibility of the undersigned applicant.
In accordance with GS160A-418, a permit expires 6 months after the date of Issuance if the work authorized by the permit has not been commenced. if, after commencement, the work is discontinued for a period of 12 months (no inspections have taken place) the permit immediately expires. No work authorized by a permit that has expired may be performed until a new permit has been issued.

i, the undersigned, understand that the issuance of a floodplain development permit approval is contingent upon the above information being correct and that the plans and supporting data have been or shall be provided as required, including but not limited to a proposed elevation certificate and or V-Zone certificate. Note: all elevation certificates must be signed by a professional engineer or registered land surveyor.

PO Box 99 Nags Head, NC 27959 Phone (252) 441-7016 Fax (252) 441-4290



Residential Project Approval Application # 202001572

Property Address:

10200 EAST SEA GULL DR

PIN #: 071815638867 Parcel: 007488000

Lot/Block/Sec: LOT: 56 BLK: SEC:

Subdivision: GOOSE WING

Zoning: MEDIUM DENSITY RES DISTRICT

Land Use: SINGLE FAMILY DWELLING

Flood Zone: VE

Base Flood Elevation: 11.0

Regulatory Flood Elevation: 12

Map Panel No: 0718

Map Panel Date: 06/19/2020

Suffix: J

Datum Used: NAVD 1988

Owner Name:

HINDMARSH, CONNIE B TTEE

Owner Address:

2414 HEUTTE DR

Contractor Name:

Pain Construction Company

Contractor Phone:

Contractor Address:

407 Raceview Ct

Nags Head, NC 27959

Description:

Construct bathroom in 1st floor SE bedroom, no change in footprint

Construction Value: \$15000

Classification of Work: RESIDENTIAL REMODEL

SS

BUILDING INFORMATION

Permit #

Permit Description

RE202002738 RES ADD-REM-REP-ACC

Total Fees Paid/Due

Approved By:

Approved Date:

11/18/2020

Conditions of Approval:

Provide address #s on home if none are present. Bath clearances shall be met. Window or fan required, Pull all permits prior to staring work. Call for all required inspections

FLOOD INFORMATION

Permit # FL202002737 FLOOD PERMIT

Permit Description

Total Fees Paid/Due \$0.00

\$200.00

Approved By:

SS

MK

Approved Date:

11/18/2020

Conditions of Approval:

ZONING INFORMATION

Permit#

Permit Description

Total Fees Paid/Due 0.00

Approved By:

Approved Date:

11/18/2020

Conditions of Approval:

All interior remodel - no additional lot coverage

ZN202002736 ZONING PERMIT - RES

Additional Conditions:

CALL FOR ALL REQUIRED INSPECTIONS; All new work to meet current code; FINAL INSPECTION REQUIRED PRIOR TO ISSUANCE OF CERTIFICATION OF COMPLIANCE

PLEASE NOTE:

All work shall conform to all applicable North Carolina State Building codes and Ordinances of the Town of Nags Head and shall be the responsibility of the undersigned applicant.

In accordance with GS160A-418, a permit expires 6 months after the date of issuance if the work authorized by the permit has not been commenced. If, after commencement, the work is discontinued for a period of 12 months (no inspections have taken place) the permit immediately expires. No work authorized by a permit that has expired may be performed until a new permit has been issued.

(ZONING) RIGHT OF APPEAL

Pursuant to Section 48-594(b)(1) of the Nags Head Zoning Ordinance, you have the right to appeal this decision to the Nags Head Board of Adjustment within thirty (30) days of the date of this notice. This decision shall become final and unappealable if not appealed during this thirty (30) day period.

I, the undersigned, understand that the issuance of a floodplain development permit approval is contingent upon the above information being correct and that the plans and supporting data have been or shall be provided as

PO Box 99 Nags Head, NC 27959 Phone (252) 441-7016 Fax (252) 441-4290



Residential Project Approval Application # 202001573

Property Address:

5132 WEST MASHIE CT

PiN #: 080113122557 Parcel: 028844034

Lot/Block/Sec: LOT: 34 BLK: SEC: 2 Subdivision: LINKSIDE SEC 2

Zoning: VILLAGE ATTACHED SF 4

Land Use: SINGLE FAMILY DWELLING

Flood Zone: X Base Flood Elevation: 0.0

Regulatory Flood Elevation: 9

Map Panel No: 0801

Map Panel Date: 06/19/2020

Suffix: J

Datum Used: NAVD 1988

Owner Name:

TYLER, PHILLIP ANDREW SR. - TYLER, JESS

Owner Address:

15224 WOODMAN HALL RD

Contractor Name:

J & T Construction

Contractor Phone:

Contractor Address:

P O Box 1316

Kill Devil Hills, NC 27948

Description:

Remove siding on the south & east side, replace with smart lp siding, replace 3 windows on S side (same

Construction Value: \$9200

Classification of Work: RESIDENTIAL REMODEL

BUILDING INFORMATION

Permit #

Permit Description

Total Fees Paid/Due

Approved By: Approved Date:

RE202002740

RES ADD-REM-REP-ACC

\$160.00

SS 11/18/2020

Conditions of Approval:

Provide address #s on home if none are present. Call for inspection of any rot repair. Install slding per evaluation report, Call for final inspection

FLOOD INFORMATION

Permit #

Permit Description

Total Fees Paid/Due

Approved By: Approved Date:

FL202002739

FLOOD PERMIT

11/18/2020

Conditions of Approval:

Additional Conditions:

CALL FOR ALL REQUIRED INSPECTIONS; All new work to meet current code; FINAL INSPECTION REQUIRED PRIOR TO ISSUANCE OF CERTIFICATION OF COMPLIANCE

PLEASE NOTE:

All work shall conform to all applicable North Carolina State Building codes and Ordinances of the Town of Nags Head and shall be the responsibility of the undersigned applicant.

In accordance with GS160A-418, a permit expires 6 months after the date of issuance if the work authorized by the permit has not been commenced. If, after commencement, the work is discontinued for a period of 12 months (no inspections have taken place) the permit immediately expires. No work authorized by a permit that has expired may be performed until a new permit has been issued.

I, the undersigned, understand that the issuance of a floodplain development permit approval is contingent upon the above information being correct and that the plans and supporting data have been or shall be provided as required, including but not limited to a proposed elevation certificate and or V-Zone certificate. Note: all elevation certificates must be signed by a professional engineer or registered land surveyor.

DECISION: Approved with Conditions (See above)

onsible Party Date

PO Box 99 Nags Head, NC 27959 Phone (252) 441-7016 Fax (252) 441-4290



Residential Project Approval Application # 202001565

Property Address:

9008 SOUTH OLD OREGON INLET RD

PIN #: 071913139383 Parcel: 007970209

Lot/Block/Sec: LOT: 9 BLK: SEC:

Subdivision: SOUTH CREEK ACRES PH 2

Zoning: MEDIUM DENSITY RES DISTRICT

Land Use: SINGLE FAMILY DWELLING

Flood Zone: AE

Base Flood Elevation: 11.0

Regulatory Flood Elevation: 9

Map Panel No: 0719

Map Panel Date: 06/19/2020

Suffix: J

Datum Used: NAVD 1988

Owner Name:

MORLEY, JOHN F X JR - MORLEY, ELEANOR E

Owner Address:

534 10TH AVE

Contractor Name:

DANIEL ANDRONOWITZ DBA D AND B BULKHEADS

Contractor Phone:

Contractor Address:

252-455-6322

3930 PARKER STAPT B

KITTY HAWK, NC 27949

Description:

Remove old front steps, install new steps in same footprint front steps run from ground to 2nd story 12x8

Construction Value: \$3000

Classification of Work: RESIDENTIAL REPAIR

BUILDING INFORMATION

Permit #

Permit Description

Total Fees Paid/Due

Approved By: Approved Date:

RE202002742

RES ADD-REM-REP-ACC

\$130.00

SS

11/18/2020

Conditions of Approval:

FLOOD INFORMATION

Permit#

Permit Description

Total Fees Paid/Due Approved By: Approved Date:

FL202002741

FLOOD PERMIT

\$0.00

SS

11/18/2020

Conditions of Approval:

Provide address #s on home if none are present. Stairs shall be built to todays codes. Call for final inspection

Additional Conditions:

CALL FOR ALL REQUIRED INSPECTIONS; All new work to meet current code; FINAL INSPECTION REQUIRED PRIOR TO ISSUANCE OF CERTIFICATION OF COMPLIANCE

PLEASE NOTE:

All work shall conform to all applicable North Carolina State Building codes and Ordinances of the Town of Nags Head and shall be the responsibility of the undersigned applicant.

In accordance with GS160A-418, a permit expires 6 months after the date of issuance if the work authorized by the permit has not been commenced. If, after commencement, the work is discontinued for a period of 12 months (no inspections have taken place) the permit immediately expires. No work authorized by a permit that has expired may be performed until a new permit has been issued.

I, the undersigned, understand that the issuance of a floodplain development permit approval is contingent upon the above information being correct and that the plans and supporting data have been or shall be provided as required, including but not limited to a proposed elevation certificate and or V-Zone certificate. Note: all elevation certificates must be signed by a professional engineer or registered land surveyor.

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Residential Project Approval Application # 202001563

Property Address:

7032 SOUTH VA DARE TRL

PIN #: 080015646509 Parcel: 006623000

Lot/Block/Sec: LOT: 17 BLK: 6 SEC: Subdivision: WHALEBONE BEACHES - COMP. MAP

Zoning: GENERAL COMMERCIAL DISTRICT

Land Use: SINGLE FAMILY DWELLING

Flood Zone: AF

Base Flood Elevation: 10.0

Regulatory Flood Elevation: 9

Map Panel No: 0800

Map Panel Date: 06/19/2020

Suffix: J

Datum Used: NAVD 1988

Owner Name:

SMITH, JOHN H JR - SMITH, AMY L

Owner Address:

2304 MAPLE ST

Contractor Name:

JOHN BURGAMY DBA JB REMODELING

Contractor Phone:

252-564-4829

Contractor Address:

7034 S VIRGINIA DARE TR

NAGS HEAD, NC 27959

Description:

Replace deck boards, handrails w/new middle level front of house

Construction Value: \$4150

Classification of Work: RESIDENTIAL REPAIR

BUILDING INFORMATION

Permit#

Permit Description

Total Fees Paid/Due

Approved By: Approved Date:

RE202002744

RES ADD-REM-REP-ACC

\$130.00

11/18/2020 SS

Conditions of Approval:

- Provide address #s on home if none are present. All work shall meet current code. Call for final inspection

FLOOD INFORMATION

Permit#

Permit Description

Total Fees Paid/Due Approved By: Approved Date:

FL202002743

FLOOD PERMIT

\$0.00

11/18/2020 SS

Conditions of Approval:

Additional Conditions:

CALL FOR ALL REQUIRED INSPECTIONS; All new work to meet current code; FINAL INSPECTION REQUIRED PRIOR TO ISSUANCE OF CERTIFICATION OF COMPLIANCE

PLEASE NOTE:

All work shall conform to all applicable North Carolina State Building codes and Ordinances of the Town of Nags Head and shall be the responsibility of the undersigned applicant.

In accordance with GS160A-418, a permit expires 6 months after the date of issuance if the work authorized by the permit has not been commenced. If, after commencement, the work is discontinued for a period of 12 months (no inspections have taken place) the permit immediately expires. No work authorized by a permit that has expired may be performed until a new permit has been issued.

I, the undersigned, understand that the issuance of a floodplain development permit approval is contingent upon the above information being correct and that the plans and supporting data have been or shall be provided as required, including but not limited to a proposed elevation certificate and or V-Zone certificate. Note: all elevation certificates must be signed by a professional engineer or registered land surveyor.

PO Box 99 Nags Head, NC 27959 Phone (252) 441-7016 Fax (252) 441-4290



Residential Project Approval Application # 202001561

Property Address:

7204 SOUTH VA DARE TRL

PIN #: 080015731640 Parcel: 006640002

Lot/Block/Sec: LOT: 2A BLK: 10 SEC: A

Subdivision: WHALEBONE BEACHES SEC A

Zoning: GENERAL COMMERCIAL DISTRICT

Land Use: SINGLE FAMILY DWELLING, LARGE

Flood Zone: AE

Base Flood Elevation: 10.0

Regulatory Flood Elevation: 9

Map Panel No: 0800

Map Panel Date: 06/19/2020

Suffix: J

Datum Used: NAVD 1988

Owner Name:

TAB 4, LLC

Owner Address:

1140 E BAYSHORE DR

Contractor Name:

CAROLINA BEACH BUILDERS, INC.

Contractor Phone:

252-256-1521

Contractor Address:

252 WOODLAND DR

SOUTHERN SHORES, NC 27949

Description: Siding replacement, deck boards & railing replacement

Construction Value: \$152000

Classification of Work: RESIDENTIAL REPAIR

BUILDING INFORMATION

Permit#

Permit Description

Total Fees Paid/Due

Approved By: Approved Date:

RE202002746

RES ADD-REM-REP-ACC

\$610.00

11/18/2020

Conditions of Approval:

Provide address #s on home if none are present. Install new siding per evaluation report, Call for inspection of rot repair. 4 x 4 posts shall not be notched. Pull electrical permit to deal with wiring issues as they arise. Call with any questions. 252 449 2005

FLOOD INFORMATION

Permit #

Permit Description

Total Fees Paid/Due

Approved By: Approved Date:

FL202002745

FLOOD PERMIT

\$0.00

55

11/18/2020

Conditions of Approval:

Additional Conditions:

CALL FOR ALL REQUIRED INSPECTIONS; All new work to meet current code; FINAL INSPECTION REQUIRED PRIOR TO ISSUANCE OF CERTIFICATION OF COMPLIANCE

PLEASE NOTE:

All work shall conform to all applicable North Carolina State Building codes and Ordinances of the Town of Nags Head and shall be the responsibility of the undersigned applicant.

In accordance with GS160A-418, a permit expires 6 months after the date of issuance if the work authorized by the permit has not been commenced. If, after commencement, the work is discontinued for a period of 12 months (no inspections have taken place) the permit immediately expires. No work authorized by a permit that has expired may be performed until a new permit has been issued.

I, the undersigned, understand that the issuance of a floodplain development permit approval is contingent upon the above information being correct and that the plans and supporting data have been or shall be provided as required, including but not limited to a proposed elevation certificate and or V-Zone certificate. Note: all elevation certificates must be signed by a professional engineer or registered land surveyor.

DECISION: Approved with Conditions (See above)

Responsible Party

PO Box 99 Nags Head, NC 27959 Phone (252) 441-7016 Fax (252) 441-4290



Residential Project Approval Application # 202001559

Property Address:

10303D EAST LOON CT

PIN #: 071815722791 Parcel: 007429000

Lot/Block/Sec: LOT: 20 BLK: SEC: Subdivision: GLENLEA BEACH

Zoning: MEDIUM DENSITY RES DISTRICT

Land Use: SINGLE FAMILY DWELLING

Flood Zone: VE

Base Flood Elevation: 11.0

Regulatory Flood Elevation: 12

Map Panel No: 0718

Map Panel Date: 06/19/2020

Suffix: J

Datum Used: NAVD 1988

GACH, GREGORY J - GACH, JUDY A

Owner Name: Owner Address:

10303 D LOON CT

Contractor Name:

K.I.C.Z. MAINTENANCE & REMODELING INC

Contractor Phone:

252-

619-2599

Contractor Address: P O BOX 875

GRANDY, NC 27939

Description: New windows, doors, kitchen tops, floors, deck rails, vanities & toilets

Construction Value: \$60000

Classification of Work: RESIDENTIAL REMODEL

BUILDING INFORMATION

Permit #

Permit Description

Total Fees Paid/Due

Approved By: Approved Date:

RE202002748

RES ADD-REM-REP-ACC

\$310.00

SS 11/18/2020

Conditions of Approval:

Provide address #s on none if none are present. Review window and door handout we have provided. Call for air sealing of windows. Leave stickers on window. Provide tempered windows where required. Provide for wind born debris protection. Call for final inspection

FLOOD INFORMATION

Permit #

Permit Description

Total Fees Paid/Due

Approved By: Approved Date:

FL202002747

FLOOD PERMIT

\$0.00

SS 11/18/2020

Conditions of Approval:

Additional Conditions:

CALL FOR ALL REQUIRED INSPECTIONS; All new work to meet current code; FINAL INSPECTION REQUIRED PRIOR TO ISSUANCE OF CERTIFICATION OF COMPLIANCE

PLEASE NOTE:

All work shall conform to all applicable North Carolina State Building codes and Ordinances of the Town of Nags Head and shall be the responsibility of the undersigned applicant.

In accordance with GS160A-418, a permit expires 6 months after the date of Issuance if the work authorized by the permit has not been commenced. If, after commencement, the work is discontinued for a period of 12 months (no inspections have taken place) the permit immediately expires. No work authorized by a permit that has expired may be performed until a new permit has been issued.

I, the undersigned, understand that the issuance of a floodplain development permit approval is contingent upon the above information being correct and that the plans and supporting data have been or shall be provided as regulred, including but not limited to a proposed elevation certificate and or V-Zone certificate. Note: all elevation certificates must be signed by a professional engineer or registered land surveyor.

PO Box 99 Nags Head, NC 27959 Phone (252) 441-7016 Fax (252) 441-4290



Residential Project Approval Application # 202001576

Property Address:

204 EAST DRIFTWOOD ST

PIN#: 989317213952 Parcel: 006696000

Lot/Block/Sec: LOT: 3 BLK: F SEC: Subdivision: NAGS HEAD SHORES REVISED BLK F

Zoning: VILLAGE COMMERCIAL DISTRICT

Land Use: SINGLE FAMILY DWELLING

Flood Zone: AE

Base Flood Elevation: 10.0

Regulatory Flood Elevation: 9

Map Panel No: 9893

Map Panel Date: 06/19/2020

Suffix: J

Datum Used: NAVD 1988

Owner Name:

DONAHUE LAW FIRM PLLC

Owner Address:

P. O. BOX 1721

Contractor Name:

SALTY SOULS INC

Contractor Phone:

252-564-5101

Contractor Address;

P. O. BOX 69

NAGS HEAD, NC 27959

Description: Replace deck boards on front ground level deck and rebuild benches

Construction Value: \$5000

Classification of Work: RESIDENTIAL REPAIR

BUILDING INFORMATION

Permit #

Permit Description

Total Fees Paid/Due Approved By: Approved Date:

RE202002775

RES ADD-REM-REP-ACC

\$130.00

11/23/2020

Conditions of Approval:

Provide address #s on home if none are present. All work to meet current code. Remove all dangerous conditions. Call for final inspection

FLOOD INFORMATION

Permit #

Permit Description

Total Fees Paid/Due Approved By: Approved Date:

FL202002774

FLOOD PERMIT

\$0.00

11/23/2020

Conditions of Approval:

Additional Conditions:

CALL FOR ALL REQUIRED INSPECTIONS; All new work to meet current code; FINAL INSPECTION REQUIRED PRIOR TO ISSUANCE OF CERTIFICATION OF COMPLIANCE

PLEASE NOTE:

All work shall conform to all applicable North Carolina State Building codes and Ordinances of the Town of Nags Head and shall be the responsibility of the undersigned applicant.

In accordance with GS160A-418, a permit expires 6 months after the date of issuance if the work authorized by the permit has not been commenced. If, after commencement, the work is discontinued for a period of 12 months (no inspections have taken place) the permit immediately expires. No work authorized by a permit that has expired may be performed until a new permit has been issued.

I, the undersigned, understand that the Issuance of a floodplain development permit approval is contingent upon the above information being correct and that the plans and supporting data have been or shall be provided as required, including but not limited to a proposed elevation certificate and or V-Zone certificate. Note: all elevation certificates must be signed by a professional engineer or registered land surveyor.

DECISION: Approved with Conditions (See above)

11/25/20

PO Box 99 Nags Head, NC 27959 Phone (252) 441-7016 Fax (252) 441-4290



Residential Project Approval Application # 202001578

Property Address:

4031 WEST SOUNDSIDE RD

PIN #: 989107772601 Parcel: 006731002

Lot/Block/Sec: LOT: 2-R BLK: SEC: Subdivision: THOMAS A. FOX JR. SUBDIVISION

Zoning: MEDIUM DENSITY RES DISTRICT

Land Use: SINGLE FAMILY DWELLING, LARGE

Flood Zone: AE

Base Flood Elevation: 9.0

Regulatory Flood Elevation: 9

Map Panel No: 9891

Map Panel Date: 06/19/2020

Suffix: J

Datum Used: NAVD 1988

Owner Name:

MADDOX, JOHN CURTIS - MADDOX, STEPHANIE

Owner Address:

2400 STERLINGWOOD TER

Contractor Name:

Albemarle Contractors Inc.

Contractor Phone:

252-202-9994

Contractor Address:

PO Box 146

KITTY HAWK, NC 27949

Description:

Replace drywall interior doors & trim paint interior replace interior stair handrails, light fixtures & outlets

Construction Value: \$142378

Classification of Work: RESIDENTIAL REMODEL

BUILDING INFORMATION

Permit#

Permit Description

Total Fees Paid/Due

Approved By: Approved Date:

RE202002779

RES ADD-REM-REP-ACC

\$580.00

SS 11/24/2020

Conditions of Approval:

Provide address #s on home if none are present. Smokes and Co2 detectors to code throughout. All work to meet current code. House is flood non compliant and contact us before doing anymore work. Call for all required inspections. Call for final inspection.

FLOOD INFORMATION

Permit#

Permit Description

Total Fees Paid/Due

Approved By: Approved Date:

FL202002780

FLOOD PERMIT

\$0.00

11/24/2020 SS

Conditions of Approval:

Additional Conditions:

CALL FOR ALL REQUIRED INSPECTIONS; All new work to meet current code; FINAL INSPECTION REQUIRED PRIOR TO ISSUANCE OF CERTIFICATION OF COMPLIANCE

PLEASE NOTE:

All work shall conform to all applicable North Carolina State Building codes and Ordinances of the Town of Naos Head and shall be the responsibility of the undersigned applicant.

In accordance with GS160A-418, a permit expires 6 months after the date of issuance if the work authorized by the permit has not been commenced. If, after commencement, the work is discontinued for a period of 12 months (no inspections have taken place) the permit immediately expires. No work authorized by a permit that has expired may be performed until a new permit has been issued.

I, the undersigned, understand that the issuance of a floodplain development permit approval is contingent upon the above information being correct and that the plans and supporting data have been or shall be provided as required, including but not limited to a proposed elevation certificate and or V-Zone certificate. Note: all elevation certificates must be signed by a professional engineer or registered land surveyor.

PO Box 99 Nags Head, NC 27959 Phone (252) 441-7016 Fax (252) 441-4290



Residential Project Approval Application # 202001584

Property Address:

9240 SOUTH OLD OREGON INLET RD

PIN #: 071918310142 Parcel: 007970048

Lot/Block/Sec: LOT: 48 BLK: SEC:

Subdivision: HOLLYWD BCH RECOMB/SO CREEK AC

Zoning: MEDIUM DENSITY RES DISTRICT

Land Use: SINGLE FAMILY DWELLING

Flood Zone: AE

Base Flood Elevation: 11.0

Regulatory Flood Elevation: 9

Map Panel No: 0719

Map Panel Date: 06/19/2020

Suffix: J

Datum Used: NAVD 1988

RAUSCH, MATTHEW T - RAUSCH, ALISON

Owner Name: Owner Address:

3100 CANOE BROOK PKWY

Contractor Name:

DANIEL ANDRONOWITZ DBA D AND B BULKHEADS

252-455-6322

Contractor Address:

3930 PARKER ST APT B

KITTY HAWK, NC 27949

Description: Replace 1 rotten piling

Construction Value: \$700

Classification of Work: RESIDENTIAL REPAIR

BUILDING INFORMATION

Permit#

Permit Description

Total Fees Paid/Due

Approved By: Approved Date:

Contractor Phone:

RE202002783

RES ADD-REM-REP-ACC

\$100.00

11/24/2020 SS

Conditions of Approval:

- Call for piling inspection. Call for final inspection

FLOOD INFORMATION

Permit #

Permit Description

Total Fees Paid/Due Approved By: Approved Date:

FL202002784

FLOOD PERMIT

SS 11/24/2020

Conditions of Approval:

Additional Conditions:

CALL FOR ALL REQUIRED INSPECTIONS; All new work to meet current code; FINAL INSPECTION REQUIRED PRIOR TO ISSUANCE OF CERTIFICATION OF COMPLIANCE

PLEASE NOTE:

All work shall conform to all applicable North Carolina State Building codes and Ordinances of the Town of Nags Head and shall be the responsibility of the undersigned applicant.

In accordance with GS160A-418, a permit expires 6 months after the date of issuance if the work authorized by the permit has not been commenced. If, after commencement, the work is discontinued for a period of 12 months (no inspections have taken place) the permit immediately expires. No work authorized by a permit that has expired may be performed until a new permit has been issued.

I, the undersigned, understand that the issuance of a floodplain development permit approval is contingent upon the above information being correct and that the plans and supporting data have been or shall be provided as required, including but not limited to a proposed elevation certificate and or V-Zone certificate. Note: all elevation certificates must be signed by a professional engineer or registered land surveyor.

DECISION: Approved with Conditions (See above)

esponsible Party

PO Box 99 Nags Head, NC 27959 Phone (252) 441-7016 Fax (252) 441-4290



Residential Project Approval Application # 202001575

Property Address:

109 EAST FINCH ST

PIN #: 080011572046 Parcel: 008819000

Lot/Block/Sec: LOT: 16 BLK: C SEC: Subdivision: WHALEBONE BEACH EXT AT NH

Zoning: GENERAL COMMERCIAL DISTRICT

Land Use: SINGLE FAMILY DWELLING

Flood Zone: AE

Base Flood Elevation: 9.0

Regulatory Flood Elevation: 9

Map Panel No: 0800

Map Panel Date: 06/19/2020

Suffix: i

Datum Used: NAVD 1988

Owner Name:

HARRIS, MARY ANN

Owner Address:

3608 MEADOW DR

Contractor Name:

MCPHERSON TRACTOR

Contractor Phone:

252-475-4630

Contractor Address:

5359 MASHOES RD

Description: Demo house and septic tank

Construction Value: \$8000

Classification of Work: RESIDENTIAL DEMO

DEMO PERMIT INFORMATION

Permit#

Permit Description

DR202002810 DEMO RES OUTSIDE AEC

Total Fees Paid/Due

Approved By:

Approved Date:

\$625.00

55

11/30/2020

Conditions of Approval:

Review Derno permit conditions and procedures. Review Zoning permit conditions. Call for all required inspections.

FLOOD INFORMATION

Permit #

Permit Description

Total Fees Paid/Due \$0.00

Approved By:

Approved Date:

11/30/2020

Conditions of Approval:

FL202002809 FLOOD PERMIT

ZONING INFORMATION

Permit#

Permit Description

Total Fees Paid/Due

Approved By:

Approved Date:

ZN202002808 ZONING PERMIT - RES DEMO 0.00

MK

SS

11/30/2020

Conditions of Approval:

slit fencing shall be installed prior to any land disturbance - and shall be maintained throughout and stabilized once complete

demo of existing house please follow Sec. 30-10. - Construction and demolition sites. and Chapter 10 ARTICLE V. -**DEMOLITION OF STRUCTURES[4]**

call for final zoning 252-449-6045

Additional Conditions:

CALL FOR ALL REQUIRED INSPECTIONS; All new work to meet current code; FINAL INSPECTION REQUIRED PRIOR TO ISSUANCE OF CERTIFICATION OF COMPLIANCE

PLEASE NOTE:

All work shall conform to all applicable North Carolina State Building codes and Ordinances of the Town of Nags Head and shall be the responsibility of the undersigned applicant.

In accordance with GS160A-418, a permit expires 6 months after the date of Issuance if the work authorized by the permit has not been commenced. If, after commencement, the work is discontinued for a period of 12 months (no inspections have taken place) the permit immediately expires. No work authorized by a permit that has expired may be performed until a new permit has been issued.

(ZONING) RIGHT OF APPEAL

PO Box 99 Nags Head, NC 27959 Phone (252) 441-7016 Fax (252) 441-4290



Residential Project Approval Application # 202001540

Property Address:

5313 SOUTH VA DARE TRL

PIN #: 08011832046502

Parcel: 000380014

Lot/Block/Sec: LOT: LT 4 UNIT B BLK: SEC: Subdivision: SEA POINTE

Zoning: VILLAGE TOWNHOUSE

Land Use: DUPLEX

Flood Zone: VE

Base Flood Elevation: 11.0 Regulatory Flood Elevation: 12

Map Panel No: 0801

Map Panel Date: 06/10/2020

Suffix: J

Datum Used: NAVD 1988

Owner Name:

DAVIS, JAMES BARKER JR - DAVIS, KELLY AN

Owner Address:

104 STONEY BROOK BLVD

Contractor Name:

BISTRAM CONTRACTING, INC.

Contractor Phone:

917-498-5060

Contractor Address:

PO BOX 453

Frisco, NC 27936

Description: Repair existing entrance and back lower and upper decks; sta irs and railings

Construction Value:

\$20000

Classification of Work: RESIDENTIAL REPAIR

BUILDING INFORMATION

Permit#

Permit Description

Total Fees Paid/Due

Approved By: Approved Date:

RE202002707

RES ADD-REM-REP-ACC

\$190.00

SS

11/16/2020

Conditions of Approval:

Provide address #s on home if none are present. All work shall meet current code. Call for final inspection

FLOOD INFORMATION

Permit #

Permit Description

Total Fees Paid/Due

Approved By: Approved Date:

FL202002706

FLOOD PERMIT

\$0.00

SS

11/16/2020

Conditions of Approval:

Additional Conditions:

CALL FOR ALL REQUIRED INSPECTIONS; All new work to meet current code; FINAL INSPECTION REQUIRED PRIOR TO ISSUANCE OF CERTIFICATION OF COMPLIANCE

PLEASE NOTE:

All work shall conform to all applicable North Carolina State Building codes and Ordinances of the Town of Nags Head and shall be the responsibility of the undersigned applicant.

in accordance with GS160A-418, a permit expires 6 months after the date of issuance if the work authorized by the permit has not been commenced. If, after commencement, the work is discontinued for a period of 12 months (no inspections have taken place) the permit immediately expires. No work authorized by a permit that has expired may be performed until a new permit has been issued.

I, the undersigned, understand that the issuance of a floodplain development permit approval is contingent upon the above information being correct and that the plans and supporting data have been or shall be provided as required, including but not limited to a proposed elevation certificate and or V-Zone certificate. Note: all elevation certificates must be signed by a professional engineer or registered land surveyor.

PO Box 99 Nags Head, NC 27959 Phone (252) 441-7016 Fax (252) 441-4290



Assistantian Project Approval

Application # 202001598

Property Address: 4905 SOUTH VA DARE TRL PIN #: 0801132422333F

Parcel: 026379603

Lot/Block/Sec: LOT: UNIT 3 BLDG F BLK: SEC:

Subdivision: QUAY CONDO PHASE 2, THE

Zoning: VILLAGE TOWNHOUSE

Land Use: SINGLE FAMILY DWELLING

Flood Zone: VE

Base Flood Elevation: 11.0

Regulatory Flood Elevation: 12

Map Panel No: 0801

Map Panel Date: 06/19/2020

Suffix: J

Datum Used: NAVD 1988

Owner Name:

THE NUTMEG GROUP, LLC

Owner Address:

64 BRINDLEWOOD RD

Contractor Name:

Outer Banks Cottage Renovations Inc

Contractor Phone:

252-207-7269

Contractor Address:

PO Box 719

Kitty Hawk, NC 27949

Description: Remodel 3 bathrooms, new shower, flooring, vanities, fixture ect

Construction Value: \$39178

Classification of Work: COMMERCIAL REMODEL

BUILDING INFORMATION

Permit #

Permit Description

Total Fees Paid/Due

Approved By: Approved Date:

CA202002760

COMM ADD-REM-REP-ACC

\$250.00

11/20/2020 SS

Conditions of Approval:

- All subs shall pull permits prior to starting work. Call for all required inspections, Call for final inspection

FLOOD INFORMATION

Permit#

Permit Description

Total Fees Paid/Due Approved By: Approved Date:

FL202002759

FLOOD PERMIT

\$0.00

11/20/2020 SS

Conditions of Approval:

Additional Conditions:

CALL FOR ALL REQUIRED INSPECTIONS; All new work to meet current code; FINAL INSPECTION REQUIRED PRIOR TO ISSUANCE OF CERTIFICATION OF COMPLIANCE

PLEASE NOTE:

All work shall conform to all applicable North Carolina State Building codes and Ordinances of the Town of Nags Head and shall be the responsibility of the undersigned applicant.

In accordance with GS160A-418, a permit expires 6 months after the date of Issuance if the work authorized by the permit has not been commenced. If, after commencement, the work is discontinued for a period of 12 months (no inspections have taken place) the permit immediately expires. No work authorized by a permit that has expired may be performed until a new permit has been issued.

I, the undersigned, understand that the issuance of a floodplain development permit approval is contingent upon the above information being correct and that the plans and supporting data have been or shall be provided as required, including but not limited to a proposed elevation certificate and or V-Zone certificate. Note: all elevation certificates must be signed by a professional engineer or registered land surveyor.

DECISION: Approved with Conditions (See above)

Responsible Party

PO Box 99 Nags Head, NC 27959 Phone (252) 441-7016 Fax (252) 441-4290



Commercial Project Approval Application # 202001569

Property Address:

500 WEST VILLA DUNES DR

PIN #: 989218326375A5

Parcel: 011318000

Lot/Block/Sec: LOT: BLDG A UNIT 5 BLK: SEC:

Subdivision: VILLAS CONDO, THE

Zoning: SPECIAL PLANNED DEV DISTRICT

Land Use: MULTI-FAMILY DWELLING

Flood Zone: X Base Flood Elevation: 0.0

Regulatory Flood Elevation: 9

Map Panel No: 9892

Map Panel Date: 06/19/2020

Suffix: J

Datum Used: NAVD 1988

Owner Name:

SHIELDS, WILLIS D - SHIELDS, KAREN C

Owner Address:

326 W VILLA DUNES DR

Contractor Name:

Brumfield Realty & Construction Custom H

Contractor Phone:

252-202-4293

Contractor Address:

PO Box 158

Nags Head, NC 27959

Description:

Completely tear out drywall to studs, rewire whole unit, new cabinets, flooring, trim & paint

Construction Value:

\$90000

Classification of Work: COMMERCIAL REMODEL

BUILDING INFORMATION

Permit#

Permit Description

Total Fees Paid/Due

Approved By: Approved Date:

CA202002688

COMM ADD-REM-REP-ACC

\$400.00

11/13/2020

Conditions of Approval:

Provide address on unit. Call for a site visit once demo has finished. Pull all permits prior to starting work. Call for all required inspections. Provide smokes and Co2 detectors to code throughout home. Call for final inspection

FLOOD INFORMATION

Permit #

Permit Description

Total Fees Paid/Due

Approved By: Approved Date:

FL202002687

FLOOD PERMIT

11/13/2020

Conditions of Approval:

Additional Conditions:

CALL FOR ALL REQUIRED INSPECTIONS; All new work to meet current code; FINAL INSPECTION REQUIRED PRIOR TO ISSUANCE OF CERTIFICATION OF COMPLIANCE

PLEASE NOTE:

All work shall conform to all applicable North Carolina State Building codes and Ordinances of the Town of Nags Head and shall be the responsibility of the undersigned applicant.

In accordance with GS160A-418, a permit expires 6 months after the date of issuance if the work authorized by the permit has not been commenced. If, after commencement, the work is discontinued for a period of 12 months (no inspections have taken place) the permit immediately expires. No work authorized by a permit that has expired may be performed until a new permit has been issued.

I, the undersigned, understand that the issuance of a floodplain development permit approval is contingent upon the above information being correct and that the plans and supporting data have been or shall be provided as required, including but not limited to a proposed elevation certificate and or V-Zone certificate. Note: all elevation certificates must be signed by a professional engineer or registered land surveyor.

PO Box 99 Nags Head, NC 27959 Phone (252) 441-7016 Fax (252) 441-4290



Commercial Project Approval Application # 202001542

Property Address:

5314 SOUTH CROATAN HWY

PIN #: 080117212912 Parcel: 024961001

Lot/Block/Sec: LOT: 1 BLK: SEC:

Subdivision: NAGS HEAD MUNICIPAL COMPLEX

Zoning: VILLAGE INSTITUTIONAL

Land Use: MUNICIPAL FACILITY

Flood Zone: X Base Flood Elevation: 0.0

Regulatory Flood Elevation: 9

Map Panel No: 0801

Map Panel Date: 06/19/2020

Suffix: .i

Datum Used: NAVD 1988

Owner Name:

TOWN OF NAGS HEAD

Owner Address:

P O BOX 99

Contractor Name:

PROPERTY OWNER

Contractor Phone:

Contractor Address:

See Above

000, 00 00000

Description:

Remove and replace ridge cap and vent mat at Station 16

Construction Value: \$0

Classification of Work: COMMERCIAL REPAIR

BUILDING INFORMATION

Permit #

Permit Description

Total Fees Paid/Due

Approved By: Approved Date:

CA202002664

COMM ADD-REM-REP-ACC

\$0.00

55

11/09/2020

Conditions of Approval:

Call for material check. Call for final inspection

FLOOD INFORMATION

Permit #

Permit Description

Total Fees Paid/Due

Approved By: Approved Date:

FL202002663

FLOOD PERMIT

\$0.00

SS

11/09/2020

Conditions of Approval:

Additional Conditions:

CALL FOR ALL REQUIRED INSPECTIONS; All new work to meet current code; FINAL INSPECTION REQUIRED PRIOR TO ISSUANCE OF CERTIFICATION OF COMPLIANCE

PLEASE NOTE:

All work shall conform to all applicable North Carolina State Building codes and Ordinances of the Town of Nags Head and shall be the responsibility of the undersigned applicant.

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PO Box 99 Nags Head, NC 27959 Phone (252) 441-7016 Fax (252) 441-4290



Commercial Project Approval Application # 202001486

Property Address:

103 EAST MORNING VIEW PL

PIN #: 989206382974 Parcel; 005731000

Lot/Block/Sec: LOT: 1-4 BLK: B SEC: Subdivision: VISTA COLONY

Zoning: GENERAL COMMERCIAL DISTRICT

Land Use: RETAIL

Flood Zone: X

Owner Name:

PEARSON, BERTRAM J - PEARSON, GLORIA S

Owner Address:

PEARSON, CURTIS MORRIS

POBOX96

Contractor Name:

Ad Light Signs

Contractor Phone:

252-202-4625

Contractor Address:

600 W Boundary St

Kill Devil Hills, NC 27948

Description: 64 sq ft illuminated sign as per attached drawings

Construction Value: \$7500

Classification of Work: COMMERCIAL SIGN

BUILDING INFORMATION

Permit #

Permit Description

Total Fees Paid/Due

Approved By: Approved Date:

SG202002658

BUILDING SIGN PERMIT

\$75.00

11/06/2020

Conditions of Approval:

- Call for inspection of steel pole prior to installation to verify length of pole for embedment depth per submitted plans. Electrical work for illumination of sign will require separate electrical permit.

ZONING INFORMATION

Permit#

Permit Description

Total Fees Paid/Due Approved By: Approved Date:

Z\$202002659

ZONING - COMMERCIAL SIGN \$75.00

KW

11/06/2020

Conditions of Approval:

- Electrical Permit required; Must comply with all conditions of Electrical Permit
- Building Permit required; Must comply with all conditions of Building Permit
- Zoning is authorized for a freestanding sign, not to exceed 64 square feet in area and 20 ft. in height from grade.
- Sign shall be entirely within the property and not obstruct the 10 x 70 sight triangle.
- Final Zoning inspection required upon completion and prior to issuance of Certificate of Compliance.

Additional Conditions:

CALL FOR ALL REQUIRED INSPECTIONS; All new work to meet current code; FINAL INSPECTION REQUIRED PRIOF TO ISSUANCE OF CERTIFICATION OF COMPLIANCE

PLEASE NOTE:

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DECISION: Approved with Conditions (See above)

Responsible Party

Date 11/6/2020



Manteo: (252) 475-5080 Northern Beach: (252) 475-5871

Frisco: (252) 475-5878

RESIDENTIAL BUILDING PERMIT

BUILDING PERMIT#: R-3281

11/24/2020

Parcel Number:

024410025

Location:

124 WEIR POINT DR - MANTEO

Subdivision:

HERITAGE POINT PHASE 2

Legal Description:

LOT: 67 BLK: SEC:

Owner Name:

DONALD PETER JR OSTERGREN

Owner Mail Address:

3814 N CROATAN HWY NO 1989 KITTY HAWK, NC 27949

Owner Phone and email:

Contractor Name:

RM SAUNDERS GENERAL CONTRACTOR INC

Contractor Mail Address:

PO BOX 1922, KILL DEVIL HILLS, NC 27948

Contractor Phone:

2522078710

Contractor NC License#: 32380

BUILDING INFORMATION

Proposed Construction Use:

SINGLE FAMILY DWELLING NEW, NEW SFD

Proposed Construction Type:

SFD

Cost of Construction:

\$515,000

Finished Square Footage:

2915

CAMA Permit#:

NA NA

Unfinished Square Footage:

1174

Septic Permit#:

30218

Stories:

2.0

Septic Permit Date:

11/10/2020

Building Height:

0

Survey/Site Plan:

YES 53098

Total Rooms:

11 PILING Water Type:

Central Water

Footing Type: Exterior Finish:

LAP SIDING

Flood Zone: Base Flood Elevation: X 8.0

Proposed Finished Floor Elevation:

9'00"

Lot/Ground Elevation:

5.0

Bedrooms:

4

Baths/half baths:

3.00/1

Comments: Any deviation from the building plan

or site plan requires prior approval.

PERMIT FEE

\$2,656.00

LES OF 8' APPLIES FLOOD VENTS REQUIRED IN

AREAS BELOW 8', UNDER

HOME OWNERS RECOVERY FEE RESIDENTIAL ZONING APPROVAL

10.00

CONSTRUCTIONELEVATION CERTIFICATE REQUIRED BEFORE ROUGH IN, FINISHED

CONSTRUCTION ELEVATION CERTIFICATE AND
AS-BUILT SURVEY REQUIRED CO.

TOTAL FEES:

\$2,766.00

Kandy Saunders

11/25/2020

RM SAUNDERS GENERAL CONTRACTOR INC

Applicant Signature: 18548D1A456

Ed kindemater

11/24/2020

ALD

Inspector Signature:



Manteo: (252) 475-5080 Northern Beach: (252) 475-5871

Frisco: (252) 475-5878

RESIDENTIAL BUILDING PERMIT

BUILDING PERMIT#: R-3137

11/02/2020

Parcel Number:

024655002

Location:

983 BURNSIDE RD - MANTEO

Subdivision:

BURNSIDE ESTATES

Legal Description:

LOT: 2 BLK: SEC:

Owner Name:

BURNSIDE ESTATES LLC

Owner Mail Address:

114 FORT HUGAR WAY MANTEO, NC 27954

Owner Phone and email:

Contractor Name:

HADDON HOMES INC

Contractor Mail Address:

PO BOX 1868, NAGS HEAD, NC 27959

Contractor Phone:

252-267-2287

Contractor NC License#: 55566

BUILDING INFORMATION

Proposed Construction Use:

SINGLE FAMILY DWELLING NEW, NEW CONSTRUCTION SFD

Proposed Construction Type:

SFD

Cost of Construction:

\$202,000

Finished Square Footage:

1445

CAMA Permit#:

NA

Unfinished Square Footage:

483

Septic Permit#:

30134

Stories:

1.0

Septic Permit Date:

10/27/2020

Building Height:

0

Survey/Site Plan:

YES

31068

Total Rooms:

6 PILING

Water Tap#:

Footing Type:

VINYL SIDING

Water Type: Flood Zone:

Central Water

Exterior Finish: Proposed Finished Floor

Base Flood Elevation:

X 8.0

Elevation:

10

Lot/Ground Elevation:

6.0

Bedrooms:

3

Baths/half baths:

2.00/0

Comments: Any deviation from the building plan

or site plan requires prior approval.

LES OF 8' APPLIES FLOOD VENTS REQUIRED IN **AREAS BELOW 8', UNDER CONSTRUCTION ELEVATION CERTIFICATE REQUIRED BEFORE**

ROUGH IN, FINISHED CONSTRUCTION **ELEVATION CERTIFICATE AND AS-BUILT SURVEY** **PERMIT FEE**

\$1,277.00

HOME OWNERS RECOVERY FEE RESIDENTIAL ZONING APPROVAL 140

10.00 100.00

TOTAL FEES:

\$1,387.00

Applicant Signature:

REQUIRED BEFORE CO.

HADDON HOMES INC

Inspector Signature: Ed Kindervater / AD

ALD



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

Frisco: (252) 475-5878

ACCESSORY PERMIT

ACCESSORY PERMIT#: ACC-3229

11/16/2020

Parcel Number:

025848010

Location:

359 TOLER RD - MANTEO

Subdivision:

GRIZELLE M FEARING HEIRS SUBD

Legal Description:

LOT: 6-AR BLK: SEC:

Owner Name:

LAURA WAKEFIELD

Owner Mail Address:

419 SKYCO RD MANTEO, NC 27954

Owner Phone and email:

Contractor Name:

ASHTON HARRELL

Contractor Mail Address:

4144 POOR RIDGE RD, KITTY HAWK, NC 27948

Contractor Phone:

252-207-1247

Contractor NC License#: 82424

ACCESSORY INFORMATION

Proposed Construction:

RESIDENTIAL - SINGLE FAMILY DWELLING NEW, SFD

Description of Work

NEW CONSTRUCTION OF GARAGE W/ LIVING SPACE ONLY

Septic Permit Date:

6/23/2020

Cost of Construction:

\$88,900

Water Tap:

NA

CAMA Permit#:

NA

Flood Zone: PILING

AE

Base Flood Elevation:

4.0

576

Lot/Ground Elevation:

29749

Comments: ADD 24 X 8' DECK ON LEFT SIDE OF DWELLING. TO BE REMOVED ONCE NEW MAIN

HOUSE BUILT. AD

PERMIT FEE \$150.00 FLOOD DEVELOPMENT BLDG PERMIT 75.00

HOME OWNERS RECOVERY FEE 10.00 RESIDENTIAL ZONING APPROVAL 100.00 SINGLE FAMILY DWELLING NEW 662.00

TOTAL FEES:

\$997.00

Applicant Signature: Signature not required at this time / AD



Inspector Signature: Ed Kindervater / AD



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

Frisco: (252) 475-5878

MECHANICAL PROJECT

The state of the s	CH-3222		11/13/202
Parcel Number:	025991000		
Location:	733 OLD WHARF RD - W	ANCHESE	
Subdivision:	SUBDIVISION - NONE		
Legal Description:	LOT: BLK: SEC:		
Owner Name:	ERIN MAE CALLUM		
Owner Mail Address: Owner Contact Information:	102 GARETH RD - MANT	EO, NC 27954	
Contractor Name:	OBHC INC DBA ONE HOU		
Contractor Mail Address:	PO BOX 2600 - KILL DEV	L HILLS, NC 27948	
Contractor Phone: Contractor NC License#:	252-441-1740 L12643		
DETAILS	RESIDENTIAL		
	1.00	Cost of Job:	\$6,489
UNITS:			
	32935	2031 01 305.	
UNITS: Electrical Contractor ID: Units Comments: REPLACE HVAC V	32935 1	MECHANICAL PROJECT FE	EE: \$150.00
Electrical Contractor ID: Units Comments: REPLACE HVAC V The owner and builder are resconstruction and be certain to information on this permit is	32935 1 VITH 14 SEER 3 TON DAIKIN A sponsible to comply with all rocomply with all correct. That he is owner or distance and specifications that he up	MECHANICAL PROJECT FE IR HANDLER & HEAT PUMP egulations and laws, and should perso ations and building setbacks. The app uly authorized agent of owner. That anderstands this permit is valid for six	onally inspect all plicant certifies that the all construction shall be as
Electrical Contractor ID: Units Comments: REPLACE HVAC V The owner and builder are resconstruction and be certain to information on this permit is shown on the submitted plan revoked for failure to comply	32935 1 VITH 14 SEER 3 TON DAIKIN A sponsible to comply with all zoning regul correct. That he is owner or distance and specifications that he unwith applicable regulations a surs in advance) for inspection	MECHANICAL PROJECT FE IR HANDLER & HEAT PUMP egulations and laws, and should perso ations and building setbacks. The app uly authorized agent of owner. That anderstands this permit is valid for six	onally inspect all policant certifies that the all construction shall be as months and may be

AYT

Inspector Signature: KEVIN CLARK



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

Frisco: (252) 475-5878

ACCESSORY PERMIT

ACCESSORY PERMIT#: ACC-	3175				11/06/2020
Parcel Number: Location: Subdivision: Legal Description:	024371000 238 MOTHER VIN SUBDIVISION - NO LOT: BLK: SEC:		MANTEO .		
Owner Name: Owner Mail Address: Owner Phone and email:	KEITH D MORRIS 238 MOTHER VIN	IEYARD RD M	ANTEO, NC 27954		
Contractor Name: Contractor Mail Address: Contractor Phone: ACCESSORY INFORMATION	KEITH AND JENNI 238 MOTHER VIN 404.797.7555	IEYARD RD M	ANTEO, NC 27954, or NC License#: OWNER C	CONTRACTOR	
Proposed Construction: Description of Work Septic Permit Date: Septic Permit #:	RESIDENTIAL - SW ADD NEW 18x30' I 10/15/2020 30092		LS;HOT TUBS, POOL VALK AROUND Cost of Construction: CAMA Permit#: Flood Zone: Base Flood Elevation: Lot/Ground Elevation:	\$58,780 NA X 8.0 NA	
Comments:		PERMIT FEE			\$300.00
		TOTAL FEES:			\$300.00
Applicant Signature:	ju,		KEITH D MORRIS		

ALD

Inspector Signature: Ed Kindervater / AD



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

Frisco: (252) 475-5878

ACCESSORY PERMIT

ACCESSORY PERMIT#: ACC-3266	11/23/2020

Parcel Number:

031114000

Location:

116 PAYNE RD - MANTEO

Subdivision:

ISLAND WOODS

Legal Description:

LOT: 1 BLK: SEC:

Owner Name:

RANDALL W WEIKERT

Owner Mail Address:

116 PAYNE RD MANTEO, NC 27954

Owner Phone and email:

Contractor Name:

RANDALL W WEIKERT

Contractor Mail Address:

116 PAYNE RD MANTEO NC 27954

Contractor Phone:

240.367.4488

Contractor NC License#: OWNER

ACCESSORY INFORMATION

Proposed Construction:

RESIDENTIAL - ACCESSORY STRUCT OVER 12 FT, ACC

Description of Work

ADD NEW 12X18' SHED

Septic Permit Date:

11/03/2020

Cost of Construction:

\$10,323

Septic Permit #:

CAMA Permit#:

30182

Flood Zone:

NA

Footing Type:

MASONARY

Base Flood Elevation:

X 8.0

Finished Square Footage: Unfinished Square Footage:

216

Lot/Ground Elevation:

6.5

Comments: LES of 8' applies flood vents required

PERMIT FEE

\$150.00

if below 8' from base flood elevation

TOTAL FEES:

\$150.00

Applicant Signature: Signature not required at this time / AD

RANDALL W WEIKERT

Inspector Signature:

ALD



Manteo: (252) 475-5080 Northern Beach: (252) 475-5871

Frisco: (252) 475-5878

RESIDENTIAL BUILDING PERMIT

BUILDING PERMIT#: R-3136				11/02/2020
Parcel Number:	029589000			
Location:	1150 BURNSIDE	RD - MANTEO		
Subdivision:	BURNSIDE FORE	ST SEC 2		
Legal Description:	LOT: E8 BLK: SEG	2: 2		
Owner Name:	PHILIP J SPINELL	A		
Owner Mail Address: Owner Phone and email:	P O BOX 1126 N	1ANTEO, NC 27954		
Contractor Name:	SCOTT JOHNSOI	N		
Contractor Mail Address:	P.O. BOX 842, N	MANTEO, NC 27954		
Contractor Phone:	9102744570	Contractor NC License#: 60312		
BUILDING INFORMATION				
Proposed Construction Use:	RESIDENTIAL AD	DITION, ADD 260 SQ FT DECK & STAIRS		
Proposed Construction Type:	SFD	Cost of Construction:	\$9,500	
Finished Square Footage:	0	CAMA Permit#:	2020-39	
Unfinished Square Footage:	260	Septic Permit#:	3682	
Stories:	0.0	Septic Permit Date:	10/27/2020	
Building Height:	0	Survey/Site Plan:	YES	
Total Rooms:	0	Water Tap#:	NA	
Footing Type:	PILING	Water Type:		
Exterior Finish:		Flood Zone:	AE	
Proposed Finished Floor	12.84	Base Flood Elevation:	8.0	
Elevation:	12.04	Lot/Ground Elevation:	4.6	
Bedrooms:	0	Baths/half baths:	0.00/0	
Comments: Any deviation from		PERMIT FEE		\$150.00
or site plan requires prior appr		HOME OWNERS BESS TRUES		40.00
AS-BUILT SURVEY REQUIRED B	EFORE CO	HOME OWNERS RECOVERY FEE		10.00
		TOTAL FEES:		\$160.00
	1			

SCOTT JOHNSON

ALD

Inspector Signature: Ed Kindervater / AD

Applicant Signature:



Manteo: (252) 475-5080 Northern Beach: (252) 475-5871

Frisco: (252) 475-5878

RESIDENTIAL BUILDING PERMIT

BUILDING PERMIT#: REMD-3138	11/03/2020

Parcel Number:

024371000

Location:

238 MOTHER VINEYARD RD - MANTEO

Subdivision:

SUBDIVISION - NONE

Legal Description:

LOT: BLK: SEC:

Owner Name:

KEITH D MORRIS

Owner Mail Address:

238 MOTHER VINEYARD RD MANTEO, NC 27954

Owner Phone and email:

Contractor Name:

RENAISSANCE CONSTRUCTION COMPANY INC.

Contractor Mail Address:

PO BOX 1411, MANTEO, NC 27954

Contractor Phone:

252-473-3312 Contractor NC License#:

BUILDING INFORMATION

Proposed Construction Use:

REMODEL RES OR COM, REMODEL EXISTING BATH / BEDROOM

Proposed Construction Type:

Cost of Construction: \$26,000

Finished Square Footage:

CAMA Permit#:

NA

Unfinished Square Footage:

Septic Permit#:

NA

Stories:

Septic Permit Date:

NA

Building Height:

Survey/Site Plan:

0 0

0

0

0

Water Tap#:

Total Rooms: Footing Type:

Water Type: Flood Zone:

NA

Exterior Finish: Proposed Finished Floor

Base Flood Elevation:

0.0 NA

0/0

Elevation: Bedrooms: NA 0

Lot/Ground Elevation: Baths/half baths:

\$260.00

Comments: Any deviation from the building plan

PERMIT FEE

or site plan requires prior approval.

		TOTAL FEES:	\$260.00
	DocuSigned by:		
Applicant Signature:	Michael D. Jones		RENAISSANCE CONSTRUCTION COMPANY INC
	244FB844163C445 Docu8igned by:	11/4/2020	
Inspector Signature:	Ed kindemater		ALD

11/3/2020

-8F0A695E752B444...



Manteo: (252) 475-5080 Northern Beach: (252) 475-5871

Frisco: (252) 475-5878

11/16/2020

RESIDENTIAL BUILDING PERMIT

BUILDING PERMIT#:	REPAIR-3237	

Parcel Number:

024034000

Location:

151 BAYVIEW DR - STUMPY POINT

Subdivision:

SUBDIVISION - NONE

Legal Description:

LOT: BLK: SEC:

Owner Name:

KEITH THOMAS HAWKINS

Owner Mail Address:

2455 STRASBURG RD COATESVILLE, PA 19320

Owner Phone and email:

Contractor Name:

EMANUELSON AND DAD INC

Contractor Mail Address:

PO BOX 448, NAGS HEAD, NC 27959

Contractor Phone:

252-261-2212

Contractor NC License#: UNLC

BUILDING INFORMATION

Proposed Construction Use:

REPAIR, Replace 21 house pilings

Proposed Construction Type:

Cost of Construction: \$19,950

Finished Square Footage: Unfinished Square Footage:

0 0 0

0

0

0

CAMA Permit#: Septic Permit#:

Stories:

Septic Permit Date:

Building Height:

Survey/Site Plan: Water Tap#:

Total Rooms: Footing Type:

Water Type:

Exterior Finish:

Flood Zone:

Base Flood Elevation: 0.0

0/0

EMANUELSON AND DAD INC

Proposed Finished Floor

Elevation:

Lot/Ground Elevation:

Bedrooms:

Baths/half baths:

\$150.00

Comments: Any deviation from the building plan

PERMIT FEE

or site plan requires prior approval.

TOTAL FEES:

\$150.00

Applicant Signature:

11/16/2020

Inspector Signature:

8F0A895E752B444

ALD

11/16/2020



Manteo: (252) 475-5080 Northern Beach: (252) 475-5871

Frisco: (252) 475-5878

RESIDENTIAL BUILDING PERMIT

BUILDING	PERMIT#:	REPAIR-3228	

11/16/2020

Parcel Number:

025373000

Location:

960 BURNSIDE RD - MANTEO

Subdivision:

JOHN T DANIELS ESTATE

Legal Description:

LOT: BLK: SEC:

Owner Name:

MARTHA JORDAN CHUKINAS

Owner Mail Address:

442 HAWTHORNE DR DANVILLE, VA 24541

Owner Phone and email:

Contractor Name:

PAUL CREEF

Contractor Mail Address:

1318 US HWY 64, MANTEO, NC 27954

Contractor Phone:

2524806053

Contractor NC License#: 28283

BUILDING INFORMATION

Proposed Construction Use:

REPAIR, REMOVE WRAPAROUND FRONT PORCH, LEAVING ROOF, REPLACE SAME SIZE

Proposed Construction Type:

Cost of Construction:

\$18,000

Finished Square Footage: Unfinished Square Footage: 0 0

CAMA Permit#: Septic Permit#:

Stories:

0

Septic Permit Date:

Building Height: Total Rooms:

0 0

0

Survey/Site Plan: Water Tap#:

Footing Type:

Water Type:

Exterior Finish:

Flood Zone: Base Flood Elevation:

0.0

Proposed Finished Floor

Lot/Ground Elevation:

Elevation: Bedrooms:

Baths/half baths:

0/0

Comments: Any deviation from the building plan

PERMIT FEE

\$150.00

or site plan requires prior approval.

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\$150.00

Applicant Signature:

11/16/2020

Inspector Signature:

ALD

PAUL CREEF

11/16/2020



BUILDING PERMIT PERMIT NUMBER: 4936 OWNER: 1 BUILDER: Jes Construction
CONTRACTOR LICENSE #: 0 1091179 ADDRESS: 400 Winging Pre CONTRACTOR LICENSE #: P 69679 ADDRESS: 1741 Corp. Lindg. PKW CITY: VA BOOCK STATE: VA ZIP: 23454 PHONE: 757.337.4221 LOCATION OF BUILDING SITE: Wing in Ave ZONING DISTRICT:

PARCEL NUMBER: _____ FLOOD ZONE: ____ BFE: ___ FFE: ____

NC POWER WORK REQUEST NUMBER OR POWER METER NUMBER (IF APPLICABLE) _____ ERECT: ____ ALTER: ___ REPAIR: __ SQUARE FOOTAGE OF HEATED SPACE: UNHEATED SPACE: NUMBER OF STORIES: ROOMS: BATHS: FIREPLACES: FINISHES: OR WALLS: _____ INTERIOR WALLS: ____ ROOF TYPE AND MATERIAL: _____
HEAT TYPE: _____ INSULATION & R VALUE: ____ FLOORING: _____
FOOTING: _____ FOUNDATION: ____ EXTERIOR WALLS: ADDITIONAL NOTES: Stabilize foundation using Intelligences EACH APPLICATION MUST BE ACCOMPANIED BY: SITE PLAN SHOWING ACTUAL DIMENSIONS OF THE LOT, ALL STRUCTURES, DRIVEWAYS AND PARKING TWO SETS OF WORKING DRAWINGS ☐ ELEVATION OF THE SITE 023255000 RESTAURANTS: HEALTH DEPARTMENT APPROVALS ☐ CAMA PERMIT IF REQUIRED. *** CALL BUILDING INSPECTOR 24 HOURS IN ADVANCE FOR ALL INSPECTIONS*** This building is to be erected or altered in accordance with the latest edition of the General Building Laws of North Carolina and all amendments as adopted by the Town of Manteo. This permit is valid for six (6) months. Compliance with Building Regulations is the responsibility of the undersigned applicant. Any change in construction or site plans will be subject to prior notification of the Planning and Zoning Department and the Building Inspector. Estimated or Contract Cost: 19,000 Permit Cost: Date of Issuance: Seals: Chelsea Wrobel
Applicant oning Official Conditions of Permit:



MECHANICAL PERMIT

PERMIT NUMBER: 403/	DATE: 11/4/2020
Owner: FRANCHISE INVESTMENT CORP ADDRESS: 705 CANAL DRIVE CITY: KILL DEVIL HILLSSTATE: NC ZIP: 27948 PHONE: 252-207-9235 LOCATION: 212 UNIT B HWY 64 (POST OFFICE) BUILDER:	CONTRACTOR: RAHOY HEATING & A/C, INC ADDRESS: POBOX #179 CITY: KITTY HAWK STATE: NC ZIP: 27949 PHONE: (252) 261-2008
Number of Heating Units: 1 Number of B.T.U.'s: LICENSE Number: 13056 Cost: 4: If repairing or altering, please describe work: C/O 5	Number of Registers: Tonnage: Work Order Number: Permit Cost:
CALL BUILDING INSPECTOR 24 HOLDATE OF ISSUANCE: 115/20 SEALS: 114/1	JRS IN ADVANCE FOR ALL INSPECTIONS (Applicant)



BUILDING PERMIT

PERMIT NUMBER: 4938 DATE: 11/9/20
OWNER: STEVE DANIES BUILDER: RENAISSANCE CONSTRUCTION ADDRESS: PO BOX 1411 ADDRESS: PO BOX 1411 CITY: MANTED STATE: NC ZIP: 27954 CITY: MANTED STATE: NC ZIP: 27954 PHONE: 251-982-6059 PHONE: 262-473-3311
LOCATION OF BUILDING SITE: LOT 10 - Flat 3 ZONING DISTRICT:
FLOOD ZONE: AE 8.1 BASE FLOOD ELEVATION: 8.2+1 FINISHED FLOOR ELEVATION: 9.25
ERECT: ALTER: REPAIR:
SQUARE FOOTAGE OF: HEATED SPACE: 1879 UNHEATED SPACE: 278
NUMBER OF: STORIES: 2 ROOMS: BATHS: 3 FIREPLACES: N/A
EXTERIOR WALLS: VINY SIDE GETERIOR WALLS: DEVEN ROOF TYPE AND MATERIAL: ASALAH HEAT TYPE: WALLED INSULATION & R VALUE: R-19/R 38/ FLOORING: LVT, EARPH FOOTING: DILES FOUNDATION: R 15
ADDITIONAL NOTES: 026730010
EACH APPLICATION MUST BE ACCOMPANIED BY: Site Plan showing actual dimensions of the lot, all structures driveways and parking A set of working drawings Elevation of site Approximate setbacks of all buildings on adjoining lots Restaurants: Health Department Approvals CAMA permit if required
CALL BUILDING INSPECTOR 24 HOURS IN ADVANCE FOR ALL INSPECTIONS
This building is to be erected or altered in accordance with the latest edition of the General Building Laws of the State of North Carolina and all amendments as adopted by the Town of Manteo. This permit is valid for six (6) months. Compliance with Building Regulations is the responsibility of the undersigned applicant. Any change in construction or site plans will be subject to prior notification and approval of the Planning Department and the Building Inspector.
ESTIMATED OR CONTRACT COST: 1200,000 Permit Cost: 1009.90
DATE OF ISSUANCE: 1/10/20 \$ 1109.00 (Inspector) (Inspector)
CONDITIONS OF PERMIT:



BUILDING PERMIT PERMIT NUMBER: 4930 DATE: 1/10/20 OWNER: TRUPE OF THOMAS

ADDRESS: PO BOX 129

CITY: NEWLLE STATE: NC ZIP: 2159 BUILDER: Albamarle Bulthereds CONTRACTOR LICENSE #:
ADDRESS: PO BOX 50
CITY: LOH STATE: NU ZIP: 27948
PHONE: 262-241-1446 LOCATION OF BUILDING SITE: 77 BUILDING SITE: 77 BUILDING DISTRICT:

PARCEL NUMBER: 025694462 FLOOD ZONE: BFE: FFE: NC POWER WORK REQUEST NUMBER OR POWER METER NUMBER (IF APPLICABLE) ERECT: ____ REPAIR: ____ SOUARE FOOTAGE OF HEATED SPACE: UNHEATED SPACE: NUMBER OF STORIES: ROOMS: BATHS: FIREPLACES: FINISHES: OR WALLS: ____ INTERIOR WALLS: ____ ROOF TYPE AND MATERIAL: ____ HEAT TYPE: ____ INSULATION & R VALUE: ____ FLOORING: ____ EXTERIOR WALLS: FOOTING: _____FOUNDATION: ____ ADDITIONAL NOTES: 40 Bulkhead EACH APPLICATION MUST BE ACCOMPANIED BY: SITE PLAN SHOWING ACTUAL DIMENSIONS OF THE LOT, ALL STRUCTURES, DRIVEWAYS AND PARKING TWO SETS OF WORKING DRAWINGS T ELEVATION OF THE SITE RESTAURANTS: HEALTH DEPARTMENT APPROVALS ☐ CAMA PERMIT IF REQUIRED *** CALL BUILDING INSPECTOR 24 HOURS IN ADVANCE FOR ALL INSPECTIONS*** This building is to be erected or aftered in accordance with the latest edition of the General Building Laws of North Carolina and aff amendments as adopted by the Town of Manteo. This permit is valid for six (6) months. Compliance with Building Regulations is the responsibility of the undersigned applicant. Any change in construction or site plans will be subject to prior notification of the Planning Estimated or Contract Cost. 0300,00

Date of Issuance. 1/10/20

1/10 · 00 Kev190 50.00 Permit Cost 60.00 Conditions of Permit:



BUILDING PERMIT

PERMIT NUMBER: 4142	DATE: 11/5/2020
OWNER: Phil & Hannah Forslund	BUILDER: Premiere Coastal Contracting
ADDRESS: 300 Budleigh St	CONTRACTOR LICENSE #: 78086
CITY: Manteo STATE: NC ZIP:	
	CITY: Manteo STATE: NC ZIP: 27954
	PHONE: 252-305-8067
LOCATION OF BUILDING SITE: 300 Budleigh S	it Manteo, NC 27954 ZONING DISTRICT: 10
PARCEL NUMBER: 024759001	Et Manteo, NC 27954 ZONING DISTRICT: 10 FLOOD ZONE: X BFE: FFE:
NC POWER WORK REQUEST NUMBER OR	POWER METER NUMBER (IF APPLICABLE) ALTER: X REPAIR:
SQUARE FOOTAGE OF HE NUMBER OF STORIES: 2	EATED SPACE: 2287+700=2987 UNHEATED SPACE: ROOMS: 4 BATHS: 5.5 FIREPLACES: 2 Gas FINISHES:
EXTERIOR WALLS:	NTERIOR WALLS: ROOF TYPE AND MATERIAL:
HEAT TYPE:II	NSULATION & R VALUE: FLOORING:
FOOTING	:FOUNDATION:
EACH APPLICATION MUST BE ACCOMPA SITE PLAN SHOWING ACTUAL D TWO SETS OF WORKING DRAWIN ELEVATION OF THE SITE RESTAURANTS: HEALTH DEPART CAMA PERMIT IF REQUIRED	IMENSIONS OF THE LOT, ALL STRUCTURES, DRIVEWAYS AND PARKING NGS
amendments as adopted by the Town of Mante	At 2
	late of Issuance II 13 20 ULUL D Inspector Zoning Official
Conditions of Permit: 170,00	00.00



PERMIT NUMBER: 4943 DATE: 11/3/20
OWNER: Harrison R. Tyler Jr. ADDRESS: 506 Lloyd Sin. CITY: Alexandria State: VA ZIP: 22302 BUILDER: CranPlan Restarctions, LLC Contractor License #: 72798 Address: 349-C Water Planted. CITY: Manteo State: NCZIP: 27954
PHONE: 259 - 478 - 3334 PARCEL NUMBER: 025094005 FLOOD ZONE: BFE: FFE: NC POWER WORK REQUEST NUMBER OR POWER METER NUMBER (IF APPLICABLE) ERECT: ALTER: REPAIR:
SQUARE FOOTAGE OF HEATED SPACE: 1,201 UNHEATED SPACE: 0 NUMBER OF STORIES: 1 ROOMS: 3 BATHS: 2 FIREPLACES: 1
FINISHES: EXTERIOR WALLS: INTERIOR WALLS: ROOF TYPE AND MATERIAL: HEAT TYPE: INSULATION & R VALUE: FLOORING: FOOTING: FOUNDATION:
ADDITIONAL NOTES: Remodel kitchen, 2 bathrooms, interior painting, New Frooting, vew Exterior door
EACH APPLICATION MUST BE ACCOMPANIED BY: SITE PLAN SHOWING ACTUAL DIMENSIONS OF THE LOT, ALL STRUCTURES, DRIVEWAYS AND PARKING TWO SETS OF WORKING DRAWINGS ELEVATION OF THE SITE RESTAURANTS: HEALTH DEPARTMENT APPROVALS CAMA PERMIT IF REQUIRED
*** CALL BUILDING INSPECTOR 24 HOURS IN ADVANCE FOR ALL INSPECTIONS***
This building is to be erected or altered in accordance with the latest edition of the General Building Laws of North Carolina and all responsibility of the undersigned applicant. Any change in construction or site plans will be subject to prior notification of the Planning
Seals: Applicant Date of Issuance: 1773.53 Date of Issuance: 1773.53 Dispector: 1793.53
Conditions of Permit:



PERMIT NUMBER: 4944 BUILDING PERMIT DATE: Nov 12/2020
OWNER: Gent Hito ADDRESS: 480 Sun Forest Way CITY: Chapel Hill STATE: NC ZIP: 27517 BUILDER: Cecil Brear CONTRACTOR LICENSE #: 63826. ADDRESS: 5257 Sartan Rd. CITY: Burlington STATE: NC ZIP: 27217
LOCATION OF BUILDING SITE: 13 Spinnager of Pirches Cove Zoning District: R-5 PARCEL NUMBER: 025694013 FLOOD ZONE: H.E BFE: 4.0 FFE: 12 104" NC POWER WORK REQUEST NUMBER OR POWER METER NUMBER (IF APPLICABLE) ERECT: ALTER: REPAIR:
SQUARE FOOTAGE OF HEATED SPACE: 3276 SF UNHEATED SPACE: 1923 SF NUMBER OF STORIES: 2 ROOMS: 7 BATHS: 5 FIREPLACES: 0
EXTERIOR WALLS: hard: Portinterior Walls: Shearak Roof Type and Material: Shinges HEAT Type: Heat function & R Value: fer code Flooring: Tile Footing: Foundation: Vilings
ADDITIONAL NOTES: deck SF. 1363.
EACH APPLICATION MUST BE ACCOMPANIED BY: SITE PLAN SHOWING ACTUAL DIMENSIONS OF THE LOT, ALL STRUCTURES, DRIVEWAYS AND PARKING TWO SETS OF WORKING DRAWINGS ELEVATION OF THE SITE RESTAURANTS: HEALTH DEPARTMENT APPROVALS CAMA PERMIT IF REQUIRED
*** CALL BUILDING INSPECTOR 24 HOURS IN ADVANCE FOR ALL INSPECTIONS***
This building is to be erected or altered in accordance with the latest edition of the General Building Laws of North Carolina and all amendments as adopted by the Town of Manteo. This permit is valid for six (6) months. Compliance with Building Regulations is the responsibility of the undersigned applicant. Any change in construction or site plans will be subject to prior notification of the Planning and Zoning Department and the Building Inspector.
Estimated or Contract Cost: 420 000 Date of Issuance: W Permit Cost: 2/18.75
Seals: Or Bres UMU D Applicant Inspector Zoning Official
Conditions of Permit:



DATE: 1/-/6-20 OWNER: LAUKA DANIELS CONTRACTOR: COMFORT FIRST HE C ADDRESS: 14 CLOATAN CT ADDRESS: 148 NIET LANE CITY: MANTED STATE: PL ZIP:27954 PHONE: 252-123-1240 LOCATION: 14 CROATAN CT PARCEL NUMBER: NUMBER OF HEATING UNITS: NUMBER OF AIR HANDLERS: LICENSE NUMBER: 33466 COST: 5549 WORK ORDER NUMBER: If repairing or aitering, please describe work: REPLACE 2.0 70,0 HOL AM AND LINESET CHARLES 2.0 70,0 HOL AM AND ***CALL BUILDING INSPECTOR 24 HOURS IN ADVANCE FOR ALL INSPECTIONS*** DATE OF ISSUANCE: 10 SEALS: (Applicant) (UPDATED 7/2017)	MECHANICAL PERMIT
OWNER: LAUKA DANIELS CONTRACTOR: COMFORT FIRST HEC ADDRESS: 14 CLOATAN CT ADDRESS: 148 RIE LANK CITY: MANTED STATE: PL ZIP: 27954 PHONE: 252-425-1240 PHONE: 919-843-3953 LOCATION: 14 CROATAN CT PARCEL NUMBER: BUILDER: NUMBER OF HEATING UNITS: NUMBER OF AIR HANDLERS: TONNAGE: 2.0 WORK ORDER NUMBER: Permit Cost: If repairing or altering, please describe work: REPLACE 2.0 700 HOR AND ***CALL BUILDING INSPECTOR 24 HOURS IN ADVANCE FOR ALL INSPECTIONS*** DATE OF ISSUANCE: VIDE OF SEALS: (Applicant) DATE OF ISSUANCE: (Applicant)	II CERWII NUMBER' TALLER
NUMBER OF REGISTERS: LICENSE NUMBER: 33466 COST: 542 If repairing or altering, please describe work: Cost: 542 Cost: 544 Cost: 544	OWNER: LAURA DANIELS CONTRACTOR: COMFORT FIRST HEC ADDRESS: 14 CROATAN CT ADDRESS: 148 IRIE LANE CITY: MANTED STATE: PL ZIP: 27954 CITY: IGNERISBUT STATE: NC ZII 2796 PHONE: 252-423-1240 PHONE: 919-842-3953
CALL BUILDING INSPECTOR 24 HOURS IN ADVANCE FOR ALL INSPECTIONS DATE OF ISSUANCE: (Applicant)	NUMBER OF REGISTERS: LICENSE NUMBER: 3346 COST: 5549 Permit Cost: Permit Cost:
C PAILE (IEO II)	***CALL BUILDING INSPECTOR 24 HOURS IN ADVANCE FOR ALL INSPECTIONS***

Mike ZEINER (252) 489-1515 Mikez. Confert First Ggmail.com

Kim check many

002278014



BUILDING PERMIT PERMIT NUMBER: 4946 DATE: 1113120 OWNER: MCISSA Maraver

ADDRESS: 2508 Blooming St.

City: Raleigh State: NCZIP: 27612

Builder: Granplan Restarutions, LLC

Contractor License #: 72798

Address: 349-Cwater Plant Rd. CITY: Manted State: NCZIP: 27954 LOCATION OF BUILDING SITE: 40 Ballast Point Or. Zoning District: 10

PARCEL NUMBER: 025694397 FLOOD ZONE: BFE: FFE: NC POWER WORK REQUEST NUMBER OR POWER METER NUMBER (IF APPLICABLE) ERECT: _____ ALTER: ____ REPAIR: ____ SQUARE FOOTAGE OF HEATED SPACE: 3,298 UNHEATED SPACE: NUMBER OF STORIES: 2 ROOMS: 4 BATHS: 4 FIREPLACES: FINISHES: OR WALLS:_____ INTERIOR WALLS:_____ ROOF TYPE AND MATERIAL: _____
HEAT TYPE: _____ INSULATION & R VALUE: _____ FLOORING: _____
FOOTING: _____ FOUNDATION: _____ EXTERIOR WALLS: ADDITIONAL NOTES: Remodel Kitchen, 3 bathrooms, 1 powder room new Exterior doors EACH APPLICATION MUST BE ACCOMPANIED BY: SITE PLAN SHOWING ACTUAL DIMENSIONS OF THE LOT, ALL STRUCTURES, DRIVEWAYS AND PARKING TWO SETS OF WORKING DRAWINGS **ELEVATION OF THE SITE** ☐ RESTAURANTS: HEALTH DEPARTMENT APPROVALS ☐ CAMA PERMIT IF REQUIRED *** CALL BUILDING INSPECTOR 24 HOURS IN ADVANCE FOR ALL INSPECTIONS*** This building is to be erected or altered in accordance with the latest edition of the General Building Laws of North Carolina and all amendments as adopted by the Town of Manteo. This permit is valid for six (6) months. Compliance with Building Regulations is the responsibility of the undersigned applicant. Any change in construction or site plans will be subject to prior notification of the Planning and Zoning Department and the Building Inspector. Estimated or Contract Cost: \$150,000.00 Date of Issuance: \mathcal{C} Seals: Conditions of Permit:



PERMIT NUMBER: 4947 DATE: 11/15/20
OWNER: WKe + VONNE THIMER BUILDER: RENAISSANCE CONSTRUCTION ADDRESS: 13221 AUTUMN CHASE Place ADDRESS: PO BOX 141 PHONE: 804-873-5529 PHONE: 473-3313
LOCATION OF BUILDING SITE: LOT 26 ZONING DISTRICT:
FLOOD ZONE: X BASE FLOOD ELEVATION: 8.0 FINISHED FLOOR ELEVATION: 8.4
ERECT: ALTER: REPAIR:
SQUARE FOOTAGE OF: HEATED SPACE: 2107 UNHEATED SPACE: 1334
NUMBER OF: STORIES: 3 ROOMS: 8 BATHS: 3/2 FIREPLACES: N/A
EXTERIOR WALLS: FINISH: ROOF TYPE AND MATERIAL: 15/14 HEAT TYPE: 15/14 INSULATION & R VALUE: 18/19/10-38 FLOORING: FOUNDATION & ILLES
ADDITIONAL NOTES: PILINES INSTAILER 12' DOES
EACH APPLICATION MUST BE ACCOMPANIED BY: Site Plan showing actual dimensions of the lot, all structures driveways and parking a set of working drawings Elevation of site Approximate setbacks of all buildings on adjoining lots Restaurants: Health Department Approvals CAMA permit if required
CALL BUILDING INSPECTOR 24 HOURS IN ADVANCE FOR ALL INSPECTIONS
This building is to be erected or altered in accordance with the latest edition of the General Building Laws of the State of North Carolina and all amendments as adopted by the Town of Manteo. This permit is valid for six (6) months. Compliance with Building Regulations is the responsibility of the undersigned applicant. Any change in construction or site plans will be subject to prior notification and approval of the Planning Department and the Building Inspector.
ESTIMATED OR CONTRACT COST: 4550, 660. Permit Cost: 1437.00
SEARS: Alle W Vanier DATE OF ISSUANCE: 129 18 3 1.00
(Applicant) (Inspector) (Zoning Official) CONDITIONS OF PERMIT:



MECHANICAL PERMIT

PERMIT NUMBER: 4948	DATE: 11/23/2020
OWNER: STEVE & NANCY DRISKILL ADDRESS: 2135 OLD FOREST ROAD CITY: LYNCHBURG STATE: VA ZIP: 24501 PHONE: 434-238-8185 LOCATION: 507 WINGINA AVE BUILDER:	CONTRACTOR: RA HOY HEATING & A/C, INC ADDRESS: POBOX #179 CITY: KITTY HAWK STATE: NC ZIP: 27949 PHONE: (252) 261-2008
Number of Heating Units: Number of B.T.U.'s: LICENSE Number: \2056 Cost: \square 5991 If repairing or altering, please describe work: \(\frac{C}{0} \)	NUMBER OF REGISTERS: TONNAGE: WORK ORDER NUMBER: Permit Cost: 1/50.00
WIFI THERMOSTAT	3 TON 14 SEER TRANE SYSTEM MAIN LEVEL WITH
CALL BUILDING INSPECTOR 24 HOLD DATE OF ISSUANCE: 1 24 20 SEALS: A 44 4	JRS IN ADVANCE FOR ALL INSPECTIONS (Applicant) (Inspector)

024531000



110110	BUILDING PERMIT
PERMIT NUMBER: 4949	DATE: 11/19/2020
OWNER: Cabell, Charles L.	BUILDER: GranPlan Restorations, LLC
ADDRESS: P O. Box 1320	CONTRACTOR LICENSE #: 72798
CITY: Richmond STATE: VA ZIP: 23218	ADDRESS: 349-C Water Plant Road
	CITY: Manteo STATE: NC ZIP: 27954
	PHONE: 525-473-3334
LOCATION OF BUILDING SITE: 28 Sailfish Drive, Mante	
PARCEL NUMBER: 025694336	O. NC 27954 ZONING DISTRICT: 10 BFE:FFE:
NC POWER WORK REQUEST NUMBER OR POWER	R METER NUMBER (IF APPLICABLE)
	ALTER: X REPAIR:
SQUARE FOOTAGE OF HEATED	SPACE: 2182 UNHEATED SPACE:
NUMBER OF STORIES: 2	ROOMS: 4 BATHS: 3 FIREPLACES:
	FINISHES:
EXTERIOR WALLS: FRAME INTERIOR	DR WALLS: DRYWALL ROOF TYPE AND MATERIAL: ASPHALT
HEAT TYPE: FORCED AIR INSULA	TION & R VALUE; FLOORING: CARPETIVINYL
FOOTING:	FOUNDATION: PILINGS
ADDITIONAL NOTES: SECOND FLOOR REMODEL NEV REMODEL TWO (2) BATHROOMS INCLUDING NEW CABINETS.	W LUXURY VINYL AND CARPET FLOORING, REMOVE POPCORN TEXTURE FROM CEILINGS, COUNTERTOPS, PLUMBING FIXTURES, LIGHT FIXTURES, CERAMIC SHOWER ENCLOSURE,
PAINTING WALLS CEILINGS & TRIM	TO STATE OF THE ST
 ☐ TWO SETS OF WORKING DRAWINGS ☐ ELEVATION OF THE SITE ☐ RESTAURANTS: HEALTH DEPARTMEN ☐ CAMA PERMIT IF REQUIRED 	IONS OF THE LOT, ALL STRUCTURES, DRIVEWAYS AND PARKING T APPROVALS
*** CALL BUILDING INSPECTO	R 24 HOURS IN ADVANCE FOR ALL INSPECTIONS***
amendments as adobted by the town of Maufeo. Tulk	with the latest edition of the General Building Laws of North Carolina and all permit is valid for six (6) months. Compliance with Building Regulations is the e in construction or site plans will be subject to prior notification of the Planning
Estimated or Contract Cost: \$57,019.64 Date of	Issuance: 12420 \$ 620.19
Seals: Applicant	MO AD
	Inspector Zoning Official
Conditions of Permit:	



110	Building Permit
PERMIT NUMBER: 4950	DATE: 11/18/20
OWNER: Twifords Funeral Home	BUILDER: Ocean Builders
ADDRESS: 500 Budleigh SI	CONTRACTOR LICENSE #: 56420
OWNER: Twifords Funeral Home ADDRESS: 500 Budleigh St CITY: Manteo STATE: NC ZIP: 27954	ADDRESS: PO Box 160
	CITY: Manns Harbor STATE: NC ZIP: 27953
	DI LONE, 250 440 2000
LOCATION OF BUILDING SITE: Twifords Funeral Home, 500 Bud	ZONING DISTRICT: 10- MANTEO IN FLOOD ZONE: BFE: FFE:
PARCEL NUMBER: 023275000	FLOOD ZONE: BFE: FFE:
NC POWER WORK REQUEST NUMBER OR POWER	METER NUMBER (IF APPLICABLE)
ERECT:	ALTER: X REPAIR:
SOLIABE ECOTAGE OF HEATER S	DAGE: 8543
NUMBER OF STORIES:	PACE: 8543 UNHEATED SPACE: ROOMS: BATHS: FIREPLACES:
140MBER 01 310KE31	FINISHES:
EXTERIOR WALLS: Stucco INTERIOR	
HEAT TYPE: Elect INSULATI	R WALLS: ROOF TYPE AND MATERIAL: ON & R VALUE: FLOORING: CORPORATION CONTROL
FOOTING: brick	FOUNDATION: concrete
ADDITIONAL NOTES: Renovations to the interior space at Twifords	Funeral Home- Including adding one wall to heated space, replacing carpet, moving plumbing fixtures, and painting
 ☐ TWO SETS OF WORKING DRAWINGS ☐ ELEVATION OF THE SITE ☐ RESTAURANTS: HEALTH DEPARTMENT ☐ CAMA PERMIT IF REQUIRED 	ONS OF THE LOT, ALL STRUCTURES, DRIVEWAYS AND PARKING APPROVALS
This building is to be erected or altered in accordance wi	24 HOURS IN ADVANCE FOR ALL INSPECTIONS*** ith the latest edition of the General Building Laws of North Carolina and all
amendments as adopted by the Town of Manteo. This pe	ermit is valid for six (6) months. Compliance with Building Regulations is the in construction or site plans will be subject to prior notification of the Planning
Estimated or Contract Cost: \$99K Date of I	Ssuance: 124/20 1040.00
Seals: Le mor livides Applicant	Inspector Zoning Official
Conditions of Permit:	



PERMIT NUMBER: 495

	DATE: 11/19/2020
OWNER: Withers, Allen J.	Pull per o e
ADDRESS: 385 Widewater Road CITY: Stafford STATE: VA ZIP: 22	BUILDER: GranPlan Restorations, LLC
CITY: Stafford STATE: VA ZIP: 22	CONTRACTOR LICENSE #: 72798 ADDRESS: 349 C Marker Branch St. 72798
1	CITY: Manteo STATE: NC ZIP: 27954 PHONE: 525-473-3334
LOCATION OF BUILDING SITE: 126 Pirate's Way,	manteo ZONINO Diagram
NC POWER MORK PROMISE	PHONE: 525-473-3334 manteo ZONING DISTRICT: 10 FLOOD ZONE: BFE: FFE: DWER METER NUMBER (IF APPLICABLE)
NC POWER WORK REQUEST NUMBER OR PO	OWER METER NUMBER (IF APPLICABLE)
ERECT:	ALTER: X REPAIR:
SQUARE FOOTAGE OF HEA-	FED CRAOS. 4000
NUMBER OF STORIES: 2	ROOMS: 2 UNHEATED SPACE:
	TED SPACE: 1220 UNHEATED SPACE: ROOMS: 2 BATHS: 2 FIREPLACES: 1 FINISHES:
EXTERIOR WALLS: FRAME INT	ERIOR WALLS: DRYWALL POOR TYPE
HEAT TYPE: FORCED AIR INS	ULATION & R VALUE: FLOORING CONTROL ASPHALT
FOOTING: _	FINISHES: ERIOR WALLS: DRYWALL ROOF TYPE AND MATERIAL: ASPHALT ULATION & R VALUE: FLOORING: CARPET/VINYL FOUNDATION: PILINGS
AND LVP FLOORING, REMOVE POPCORN TEXTURE FROM CHILDREN	IEPLACE & PROPANE TANK, KITCHEN CABINETS AND TOPS, NEW KITCHEN APPLIANCES (BY OWNER), NEW CARPET
PLUMBING FIXTURES, LIGHT FIXTURES, CERAMIC SHOWER ENDLOSES	REPLACE & PROPANE TANK, KITCHEN CABINETS AND TOPS, NEW KITCHEN APPLIANCES (BY OWNER), NEW CARPET S, NEW TRIM AND INTERIOR DOORS, REMODEL TWO (2) BATHROOMS INCLUDING NEW VANITIES, COUNTERTOPS, RES, PAINT WALLS, CEILINGS & TRIM, NEW PATIO AND SELECTION.
S. I. O. M. C. P. C.	S, NEW TRIM AND INTERIOR DOORS, REMODEL TWO (2) BATHROOMS INCLUDING NEW VANITIES, COUNTERTOPS, RES, PAINT WALLS, CEILINGS & TRIM, NEW PATIO AND REAR EXTERIOR DOORS, NEW TREX DECKING ON REAR PORCH
LACH APPLICATION MUST BE ACCOMPANIE	
SITE PLAN SHOWING ACTUAL DIME	NSIONS OF THE LOT, ALL STRUCTURES, DRIVEWAYS AND PARKING
TWO SETS OF WORKING DRAWINGS	NOIONS OF THE LOT, ALL STRUCTURES, DRIVEWAYS AND PARKING
LJ ELEVATION OF THE SITE	
RESTAURANTS: HEALTH DEPARTM	ENT APPROVALS
☐ CAMA PERMIT IF REQUIRED	
*** CALL BUILDING INSPECT	TOR 24 HOURS IN ADVANCE FOR ALL INSPECTIONS***
	TO THE POR ALL INSPECTIONS***
This building is to be erected as allow to	
amendments as adopted by the Town of Manteo. The	ce with the latest edition of the General Building Laws of North Carolina and all
responsibility of the undersigned applicant. Any char	ce with the latest edition of the General Building Laws of North Carolina and all his permit is valid for six (6) months. Compliance with Building Regulations is the hope in construction or site plans will be subject to prior polification.
and Boliding Hispector.	nis permit is valid for six (6) months. Compliance with Building Regulations is the nge in construction or site plans will be subject to prior notification of the Planning
Estimated or Contract Cost: \$90,917	
	of Issuance: 11/24/20 Permit Cost: 909.17
	959-17
Seals:	- Hos tot
Applicant	Inspector Zoning Official
Conditions of Permit:	Zoning Official



Date Issued: Permit #: B20-000226

Building/Floodplain Development Permit

Project Addre	ss: 106 S	SEABREE	ZE DR
Property Own	er: STE\	ENS, GR	EGORY J

PIN #: 986917015731 Mailing Address: 1850 FRAY RD

RUCKERSVILLE, VA 22968

Contractor:

Company Name: Gibbs Daughters NC, LLC

Phone:

Email: clgibbsir@yahoo.com

Contact Name: Clarence Gibbs

Address: 130 Fort Hugar Way Manteo, NC 27954

Classification: General Contractor

NC State License #: **Expiration Date:**

Description of Work:

Deck extension/construction of mid-level deck, drawing attached, and reconstruction of existing decks.

Use:

110.00

Single Family

Structure/Work Type: Primary Structure:

Pool/Hot Tub: Deck: Addition

Permit Amount:

Demo:

Accessory Building: Bukhead (L.F.):

Pier (L.F.) House Moving:

Heated:

Unheated: 24

House:

Accessory Heated:

Accessory Unheated:

Proposed Finished Grade (ft.):

Proposed Area Schedule (Sq.Ft.):

N/A:

Pool:

Driveway:

Parking:

Other:

Floodplain Development:

Flood Zone: Unshaded X Existing Elevation:

Structure Value:

Storage Below Existing Elevation:

Vegetation Management (Sq.Ft.):

N/A:

Required Coverage: 0.0

Area Preserved:

Required Plantings: 0,0

Project Cost Estimate:

Building \$38,394.00 Electrical \$0.00

Mechanical \$0.00

Plumbing \$0.00

Gas \$0.00 Other \$0.00

Total \$38,394.00

Permit Conditions:

- Any change or changes in the plans for development, construction or land use activities will require a re-evaluation and modification of this permit.
- The erection (including excavation), demolition, alteration or repair of any building in a residential or business district other than between the hours of 7 am and 6 pm, Monday through Saturday is prohibited.
- No change to coverage or footprint.
- Notching of rail posts are prohibited, 2- 3/8" bolts required per post. All spacing of openings shall be constructed so that a 4" sphere cannot pass through.
- Provide Final As-Built Survey with Updated Coverage Breakdown.
- The mid-level deck may not encroach into the rear or side yard setbacks. Final as-built survey must clearly show the mid-level deck line. (initial)
- Call for final inspection.

This permit is issued on the expressed condition that all information is correct and all work will comply with the State Building Code and all other applicable State and Local laws, ordinances and regulations. All provisions of laws and ordinances governing this type of work will be complied with whether specified herein or not.

10/20/2020

arence Gibbs pplicant Signature



Date Issued: 11/02/2020

Permit #: TR20-000286

Mechanical Trade Permit

Project Address: 1532 DUCK RD

Property Owner: FEDELE, LOUIS

PIN #: 995114236737

Mailing Address: 1532 DUCK RD

DUCK, NC 27949

Permit Types:

Plumbing

Electrical

Mechanical

Gas

Contractor:

Company Name: R.A. Hoy Heating & A/C

Phone: (252) 261-2008

Contact Name: Douglas Wakeley

P.O. Box 179

Address:

NC State License #: 13056

Kitty Hawk, NC 27949

Description of Work:

C/O 2 TON 14 SEER TRANE SYSTEM TOP SOUTH LEVEL WITH T6 THERMOSTAT

Project Cost Estimate: 6,095.00

Permit Amount: 160.00

I hereby certify that all the information provided by me in support of this application is true and accurate to the best of my knowledge. I certify that I will comply with all applicable state and local laws and regulations pertaining to the work for which this permit is issued, and that I possess all trade contractor licenses required by the NC General Statutes and the NC Administrative Code. If I resign or am no longer affiliated with this project, I will notify the local authority (Town of Duck Building inspector) immediately by phone or in person and in writing within three (3) working days.

Applicant Signature



Applicant Signature

Department of Community Development PO Box 8369 1200 Duck Road Town of Duck, North Carolina 27949 (252) 255-1234



Building/Floodplain Development Permit

Project Address: 127 COOK DR	PIN #: 985912962759							
Property Owner: MANNO, CYNTHIA LYNN ALBERT			Mailing Address: 9393 RIVERSHORE DR SUFFOLK, VA 23433					
Contractor:								
Company Name: Outer Banks Deck &	Fence			Name: Jay Perr			sification:	
Phone: (252) 473-9880 Email: jperrin01@aol.com						State Licen iration Date		
				mantoo,	110 27 00 7			
Description of Work: Replace	e front and side s	second floor dec	ks and stairs;	new girders inst	talled			
Use:	Structure/Wo	rk Type:						
Single Family	Primary Struck	ture:				-		
	Pool/Hot Tub: Deck: Repair				ssory Building:			
Permit Amount:	Demo:			Pier (ead (L.F.): L.F.):			
100.00					e Moving:			
Proposed Area Schedule (Sq.Ft.):	Heated:	Unheated:	Rem	odel Heated:	Re	model Uni	neated: 288	3
Proposed Finished Grade (ft.):	N/A:	House	: Poo	ol: Drivev	vay:	Parking	g:	Other:
Floodplain Development:	Flood Zone:	Unshaded X I	Existing Eleva	tion: 14 Structu	re Value: Sto	orage Belov	w Existing E	Elevation:
Vegetation Management (Sq.Ft.):	N/A:	Required Co	overage: 0.0	Area P	reserved:	Requi	ired Planting	js: 0.0
Project Cost Estimate:	Buil	ding Elec	trical I	Mechanical	Plumbing	Gas	Other	Tota
	\$11,00	_	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$11,000.0
Permit Conditions: - Any change or changes in the plans - The erection (including excavation). 7 am and 6 pm, Monday through Sat - Repair & maintenance only - No change to coverage or footprint Notching of rail posts are prohibited through Call for final inspection.	, demolition, alter urday is prohibite	ration or repair o ed.	of any building	in a residential o	or business di	strict other	than betwe	en the hours of
This permit is issued on the expressed applicable State and Local laws, ordina whether specified herein or not.	condition that all inces and regular	information is o	correct and all ons of laws ar	work will comply d ordinances go	with the State	e Building (Code and a	ll other nplied with



PIN #: 98590897572282

Permit #: TR20-000284

Date Issued: 11/04/2020

Mechanical Trade Permit

Project Address: 117 D324 SEA COLONY DR

Property Owner: BIRMINGHAM, JULIE D	Mailing Address: 14542 SAILVIEW CT MIDLOTHIAN, VA 23112
Permit Types:	
Plumbing Electrical Mechanical Gas	
Contractor:	
Company Name: All Seasons Heating & Cooling	Contact Name: Joe Simpson
Phone: (252) 491-9232	P.O. Box 244
	Address:
NC State License #: H3Class1: 19091	Point Harbor, NC 27964
Description of Work: Replacement of existing sy	stem with a 2 ton split system heat pump and air handler
Project Cost Estimate: 7,450.00	Permit Amount: 160.00
all applicable state and local laws and regulations pertaining to	ort of this application is true and accurate to the best of my knowledge. I certify that I will comply with the work for which this permit is issued, and that I possess all trade contractor licenses required by esign or am no longer affiliated with this project, I will notify the local authority (Town of Duck Building hin three (3) working days.
Applicant Signature Date	



PIN #: 985912871402

Date Issued: 11/04/2020

Permit #: TR20-000285

Mechanical Trade Permit

Project Address: 113 SEA COLONY DR

Property Owner: CAMPBELL, EVERETT	Mailing Address: 2402 SUNFLOWER COVE LN FULSHEAR, TX 77423
Permit Types:	
Plumbing Electrical Mechanical	Gas
Contractor:	
Company Name: All Seasons Heating & Cooling	Contact Name: Joe Simpson
Phone: (252) 491-9232	P.O. Box 244
	Address:
NC State License #: H3Class1: 19091	Point Harbor, NC 27964
Description of Work: Replace existing	g system with a 3 ton split system heat pump and air handler
Project Cost Estimate: 7,140.00	Permit Amount: 160.00
all applicable state and local laws and regulations parties in NC General Statutes and the NC Administrative Inspector) immediately by phone or in person and it	me in support of this application is true and accurate to the best of my knowledge. I certify that I will comply with bertaining to the work for which this permit is issued, and that I possess all trade contractor licenses required by a Code. If I resign or am no longer affiliated with this project, I will notify the local authority (Town of Duck Building in writing within three (3) working days.
Applicant Signature Date	



Land Disturbance/Floodplain Development Permit

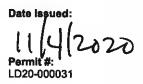
Project Address: 1240 DUCI	(RD			PIN #: 985911761465				
Property Owner: ALLIS HOLDINGS LLC			Mailing Address: P O BOX 1544 VIRGINIA BEACH, VA 23451					
Contractor:								
Company Name: Silver Seas	, LLC		Contact Name:		Classification: Other			
Phone: (252) 489-9313			Address:	5150 The Woods Road	NC State License #:			
Email: jonyounts@gmail.com	1			Kitty Hawk, NC 27949	Expiration Date:			
Description of Work:	21 space 64 sf stor	parking lot additio age shed and relo	n with associated stor cation of existing dum	m water control measures, lighti pster pad with enclosure	ng and landscaping, addition of small			
Permit Amount: Land Disturbing Activity:	\$200.00							
Parking		Driveway	New Septic	Stormwater Conveyance	Grading/Filling			
Landscaping/Minor Gradi	ing	Irrigation	Septic Repair	Stormwater Retention	Vegetation Removal			
Proposed Finished Grade (ft	.):	N/A:	Driveway	r: Parking:	Other:			
Floodplain Development:		Flood Zone: AE	4	Existing Elevation:	2			
Vegetation Management (Sq.	Ft.):	N/A: Re	quired Coverage: per	site plan Area Preserved:	Required Plantings: per site plan			
Estimated Project Cost:	\$100,0	000						
- The erection (including ex of 7 am and 6 pm, Monday - Install properly toed-in en - Stabilize all disturbed are - The project must be deve	ccavation), through Sosion contras prior to loped in coloped in co	demolition, alterated aturday is prohibited for the prohibited for the prohibited at the prohibited for the	tion or repair of any buted. perimeter of developm plans, standards, and	allding in a residential or busines nent prior to commencing work; if conditions approved under USA	luation and modification of this permit. s district other than between the hours maintain at all times. ACOE Permit SAW-2011-01897. DEQ Stormwater Permit #SW7140905.			
association with this permit mu	st meet the	applicable land d	disturbing provisions of	the Town of Duck Zoning Ordin	r not. All land disturbing activities in ance Section 156.128. The granting of gulation. When properly validated this is			
Applicant Signature		Date						



Project Address: 113 TRINITIE DR

Department of Community Development PO Box 8369 1200 Duck Road Town of Duck, North Carolina 27949 (252) 255-1234

PIN #: 995011563772



Land Disturbance/Floodplain Development Permit

Property Owner: LE BLANC, MA	RC E TTEE	Malling Address: 113 TRINITIE DR DUCK, NC 27949					
Contractor: Company Name: Hines Contraction Phone: (252) 261-8899 Email: hinescontractors@aol.com			en Hines 90 Caratoke Highway wells Point, NC 27966	Classification: Landscaper NC State License #: Expiration Date:			
Permit Amount: 25. Land Disturbing Activity:	pair septic 00						
Parking	Driveway	New Septic	Stormwater Conveyance	Grading/Filling			
Landscaping/Minor Grading	Irrigation	Septic Repair	Stormwter Retention	Vegetation Removal			
Proposed Finished Grade (ft.):	roposed Finished Grade (ft.):		ay: Parkin	g: Other:			
Floodplain Development: Flood Zone:		nshaded X	Existing	Elevation: 11			
Vegetation Management (Sq.Ft.):	N/A:	Required Coverage:	0,0 Area Preserve	d: Required Plantings;			
Estimated Project Cost:	3800						
Permit Conditions: - Any change or changes in the - The erection (including excav of 7 am and 6 pm, Monday thro - Stabilize all disturbed areas p - Call for inspection once stabil	ation), demolition, alter ough Saturday is prohib rior to CO.	ation or repair of any b ited.	use activities will require a re-evuilding in a residential or busine	valuation and modification of this permit. ess district other than between the hours			
association with this permit must m	eet the applicable land	disturbing provisions	of the Town of Duck Zoning Ord	or not. All land disturbing activities in			
Applicant Signature	Date						



Date Issued: B20-000241

Building/Floodplain Development Permit

Project Addr	ess: 135	SPINDE	RIFT LN
Property Ow	ner: TEL	FAIR OB	X LLC

PIN #: 995016820565

Mailing Address: 135 SPINDRIFT COURT

PO BOX 8129 **DUCK, NC 27949**

Contractor:	
Continuotor.	

Company Name:

Phone: Email: jeffc55@aol.com

Contact Name: Jeff Chasen

Address:

Classification: Unlicensed Contractor

NC State License #: **Expiration Date:**

Description of Work:

Siding and partial deck replacement

Use: Single Family

210.00

Permit Amount:

Structure/Work Type:

Primary Structure: 4.Repair/Maintenance Pool/Hot Tub:

Deck: Repair

Demo:

Accessory Building:

Bukhead (L.F.): Pier (L.F.): House Moving:

Proposed Area Schedule (Sq.Ft.):

Heated:

N/A:

Unheated:

Accessory Heated:

Accessory Unheated:

Proposed Finished Grade (ft.):

House:

Pool:

Driveway:

Parking:

Other:

Floodplain Development:

Flood Zone: VE 11

Existing

Elevation: 16.5

Structure Value: \$642,800.00

Storage Below Existing Elevation:

Vegetation Management (Sq.Ft.):

N/A:

Required Coverage: 0.0

Area Preserved:

Required Plantings: 0.0

Project Cost Estimate:

Building \$50,000.00 **Electrical** \$0.00 Mechanical \$0.00

Plumbing \$0.00

Gas \$0.00 Other \$0.00

Total \$50,000.00

Permit Conditions:

- Any change or changes in the plans for development, construction or land use activities will require a re-evaluation and modification of this permit.
- The erection (including excavation), demolition, alteration or repair of any building in a residential or business district other than between the hours of 7 am and 6 pm, Monday through Saturday is prohibited.
- Repair & maintenance only
- No change to coverage or footprint.
- Call for inspection if rot is found; if no rot is found provide letter stating same for CO.
- Notching of rail posts are prohibited, 2- 3/8" bolts required per post. All spacing of openings shall be constructed so that a 4" sphere cannot pass through.
- Pursuant to GS 113-103 (5)(B)(5) and CAMA 15A NCAC 7K.0209 structures may be repaired in a similar manner, size and location as the original structure without a CAMA Minor Permit. No expansions or additions are permissible and repairs are limited to 50% of the physical value of the existing structure.
- Call for final inspection.

This permit is issued on the expressed condition that all information is correct and all work will comply with the State Building Code and all other applicable State and Local laws, ordinances and regulations. All provisions of laws and ordinances governing this type of work will be complied with whether specified herein or not.

A	1: 4	C:	4
Ann	licant	Niona	nire
4 4 1 1	TIVMILL	CIEII	···



Applicant Signature

Department of Community Development PO Box 8369 1200 Duck Road Town of Duck, North Carolina 27949 (252) 255-1234



Building/Floodplain Development Permit

Project Address: 126 CHIP CT Property Owner: MORRISON, JEFFREY D Contractor: Company Name: Costin Creations, LLC Phone: (252) 261-5177 Email: travis@costincreations.com			Mali	ing Address:			23602		
			Contact Name: Address:	Travis Costin 109 Jaycrest Road Duck, NC 27949		Classification: General Contract NC State License #: 68905 Expiration Date:			ctor
Description of Work: B	athroom remo	del; mid- le	vel; no new sq ft; no	exterior modil	ications				
Use: Single Family	Primary St Pool/Hot T	Work Type ructure: 3.F ub:				Accessory Bu	ilding:		
Permit Amount: 110.00	Deck: Demo:					Bukhead (L.F. Pier (L.F.): House Moving			
Proposed Area Schedule (Sq.F	t.): Hear	ted:	Unheated:	Accessory I	leated:		Accessory	Unheated	
Proposed Finished Grade (ft.):	N/A:	V	House:	Pool:	Drive	way:	Parking) :	Other:
Floodplain Development:	Floo	d Zone: Un	shaded X Existing	Elevation: 28	Structu	ure Value: Sto	orage Belov	w Existing	Elevation:
Vegetation Management (Sq.Ft.): N/A:		Required Coverage	e: 0.0	Area P	reserved:	Requi	red Plantin	gs: 0.0
Project Cost Estimate:		Buildin	g Electrical	Mechan	ical	Plumbing	Gas	Other	Tota
		\$15,000.0	10 \$1,000.00	\$(0.00	\$4,000.00	\$0.00	\$0.00	\$20,000.00
Permit Conditions: - Any change or changes in the - The erection (including excave) 7 am and 6 pm, Monday throug - No change to coverage or foo - Typical trade inspections requ - Call for final inspection.	ation), demoliti h Saturday is tprint.	on, alteration	onstruction or land on or repair of any b	use activities w uilding in a res	rill requir sidential	re a re-evaluat or business dis	on and mo strict other	dification of than between	of this permit. Hen the hours of
This permit is Issued on the expre applicable State and Local laws, whether specified herein or not.	essed condition ordinances and	n that all info	ormation is correct and in the second	and all work wi laws and ordin	ll comply ances go	y with the State overning this ty	Building (pe of work	Code and a will be cor	il other nplied with



Building/Floodplain Development Permit

Project Address: 1396 DUCK RD PIN #: 995010468206							
Property Owner: WRENN, KENIE	Mailing Address: 4722 BROOKHAVEN DRIVE RALEIGH, NC 27612						
Contractor:							
Company Name:		ct Name: WREI	NN, KENIE		ification:		
Phone:	•	Address:			ate Licens		
Email:		1		Expir	ation Date	:	
Description of Work: Remode	el kitchen, remodel half	of porch for sun	room				
	ructure/Work Type:						
	imary Structure: 3.Rem iol/Hot Tub:	odel		A D.	diata a .		
De	iovnot rub: ick:			Accessory Bu			
Permit Amount:	emo:			Bukhead (L.F Pier (L.F.):	.):		
125.00				House Movin	g:		
Proposed Area Schedule (Sq.Ft.):	Heated: Uni	neated:	Remodel Heated:	125	Remod	el Unheated	j :
Proposed Finished Grade (ft.):	N/A: 🗹	House:	Pool: Driv	eway:	Parking	j :	Other:
Floodplain Development:	Flood Zone: Unshad	led X Existing	Elevation: 8 Struct	ure Value: Sto	rage Belov	v Existing E	levation:
Vegetation Management (Sq.Ft.):	N/A: Req	uired Coverage	0.0 Area	Preserved:	Requi	red Planting	gs: 0.0
Project Cost Estimate:	Building	Electrical	Mechanical	Plumbing	Gas	Other	Total
	\$14,500.00	\$1,500.00	\$0.00	\$1,500.00	\$0.00	\$0.00	\$17,500.00
Permit Conditions: - Any change or changes in the plans - The erection (including excavation), 7 am and 6 pm, Monday through Satu - No change to coverage or footprint Typical trade inspections required Call for final inspection Occupancy to remain unchanged.	demolition, alteration or	ruction or land u repair of any bu	se activities will requ illding in a residentia	iire a re-evaluat I or business di	ion and mo	dification o than betwe	f this permit. en the hours of
This permit is issued on the expressed on applicable State and Local laws, ordinar whether specified herein or not.	condition that all informations. All	ation is correct a Il provisions of la	nd all work will comp lws and ordinances (oly with the State	e Building (pe of work	Code and al	l other aplied with
Applicant Signature	Dat	te					



Date issued:

Permit #: B20-000246

Building/Floodplain Development Permit

Project Address: 128 North SNOW GEESE DR Property Owner: ISSACS, BARBARA ANN

PIN #: 995015733850 Mailing Address: 3315 LERITZ LN

EDGEWATER, MD 21037

Contractor:

Company Name: Sandmark Custom Homes, Inc.

Phone: (252) 261-1123

Email: mark@outerbanksbuilders.com

Contact Name: Mark Martin

Address: P.O. Box 3219

Kitty Hawk, NC 27949

Classification: General Contractor

NC State License #: 75383

Expiration Date:

Description of Work:

Build two story bedroom- bath addition on pilings to the west side of the house; remove one bath and add two more in the

addition; add one additional bedroom and expand another

Use:

Structure/Work Type:

Primary Structure: 2.Addition

Permit Amount:

Single Family

570.60

Pool/Hot Tub:

Deck: Demo: Accessory Building:

Bukhead (L.F.): Pier (L.F.): House Moving:

Proposed Area Schedule (Sq.Ft.): Heated: 528 Unheated: 264 Accessory Heated: Accessory Unheated: Proposed Finished Grade (ft.): N/A: House: Pool: Driveway: Parking: Other: Floodplain Development: Storage Below Existing Elevation: Flood Zone: Unshaded Existing Structure Value: Elevation: 9.5 \$140,800.00 Vegetation Management (Sq.Ft.): Required Coverage: 1154.25 Area Preserved: not provided N/A: Required Plantings: 1154.25 **Project Cost Estimate: Building** Electrical Mechanical Plumbing Gas Other **Total** \$124,579.00 \$5,937.00 \$16,380.00 \$8,600.00 \$0.00 \$0.00 \$155,496.00

Permit Conditions:

- Any change or changes in the plans for development, construction or land use activities will require a re-evaluation and modification of this permit.
- The erection (including excavation), demolition, alteration or repair of any building in a residential or business district other than between the hours of 7 am and 6 pm, Monday through Saturday is prohibited.
- Stabilize all disturbed areas prior to CO.
- Vegetation canopy at completion of development and prior to CO must be greater than or equal to 15% coverage of Net Lot Area. or 1,154 s.f.
- Height certificate required prior to CO.
- Elevation Certificate required prior to CO.
- -FEMA Technical bulletin #1 references Section R322.2.2.1 Installation of openings. Specifically, at least two openings on different sides of an enclosure are required, and if more than one enclosed area is present, each must have openings on exterior walls. Proposed Elevation Certificate has two enclosures and only 3 vents. One additional vent may be required prior to CO.
- Provide Final As-Built Survey with Updated Coverage Breakdown.

This permit is issued on the expressed condition that all information is correct and all work will comply with the State Building Code and all other applicable State and Local laws, ordinances and regulations. All provisions of laws and ordinances governing this type of work will be complied with whether specified herein or not.



Building/Floodplain Development Permit

Project Address: 111 COOK DR **Property Owner: PICKETT, MCLEAN**

PIN #: 985912865785

Mailing Address: 12551 ANSIN CIRCLE DR

POTOMAC, MD 20854

Contractor:

Company Name: Reliant Construction, LLC

Phone: (252) 202-7007

Email: bameads@yahoo.com

Contact Name: Blair Meads

Address: 4275 Worthington Ln.

Kitty Hawk, NC 27949

Classification: Citizen NC State License #;

Expiration Date:

Description of Work:

Remove and rebuild first and second level decks and stairs; install approx. 62 feet of additional vinyl fencing; build a small structure to cover the existing irrigation pump

Use:

150.00

Single Family

Permit Amount:

Structure/Work Type: Primary Structure:

Pool/Hot Tub:

Deck: Repair Demo:

Accessory Building:

Bukhead (L.F.): Pier (L.F.): House Moving:

Proposed Area Schedule (Sq.Ft.):

Heated:

Unheated:

Remodel Heated:

Remodel Unheated: 1000

Proposed Finished Grade (ft.):

N/A: 🌃

House:

Pool:

Driveway:

Parking:

Other:

Floodplain Development:

Flood Zone: Unshaded X Existing Elevation:

Structure Value: Storage Below Existing Elevation:

Vegetation Management (Sq.Ft):

N/A: 🜌

Required Coverage: 0.0

Area Preserved:

Required Plantings: 0.0

Project Cost Estimate:

Building \$45,000.00 Electrical \$0.00

Mechanical \$0.00

Plumbing \$0.00

Gas \$0.00

Other \$0.00

Total \$45,000.00

 Any change or changes in the plans for development, construction or land use activities will require a re-evaluation and modification of this permit. - The erection (including excavation), demolition, alteration or repair of any building in a residential or business district other than between the hours of 7 am and 6 pm, Monday through Saturday is prohibited.

- Repair & maintenance only

- No change to coverage or footprint.

- Call for final inspection.

This permit is issued on the expressed condition that all information is correct and all work will comply with the State Building Code and all other applicable State and Local laws, ordinances and regulations. All provisions of laws and ordinances governing this type of work will be complied with

pplicant Signature





Building/Floodplain Development Permit

Project A	ddress:	1430	DUCK F	RD	
Property	Owner:	FINCH	- SMIT	H CAR	RIE

PIN #: 995006472825

Mailing Address: 35 SWEET GRESS LN

BUENA VISTA, VA 24416

Contractor:

Company Name: ADP CONSTRUCTION

Contact Name: ADRIAN PITTS

Classification: General Contractor

Phone: (252) 305-8088

Address: 801 INDIAN TRAIL DRIVE

NC State License #: 0196-33629-0

Email: adp8088@gmail.com

KILL DEVIL HILLS, NC 27948

Expiration Date: 07/07/2013

Description of Work:

Replace decking, handrails, and exterior stairs; maintain existing footprint; raising the hot tub deck to the level of the

existing deck

Use: Single Family

Permit Amount:

123.10

Structure/Work Type:

Primary Structure:

Pool/Hot Tub:

Deck: Repair

Accessory Building:

Bukhead (L.F.):

Demo:

Pier (L.F.): House Moving:

						•			
Proposed Area Schedule (Sq.Ft.):	Heated: Unhea		eated: Remodel Heated:		Re	Remodel Unheated: 754			
Proposed Finished Grade (ft.):			ouse:	Pool: Dríveway:		way:	Parking:		Other:
Floodplain Development:	Flood Zone:	Shaded X	Existing Ele	evation: 5	Structure	e Value: Store	age Below	Existing El	evation:
Vegetation Management (Sq.Ft.):	N/A:	Require	ed Coverage:	0.0	Area F	Preserved:	Requi	red Planting	gs: 0.0
Project Cost Estimate:	Buil	ding	Electrical	Mechar	nical	Plumbing	Gas	Other	Total
	\$27,50	0.00	\$0.00	\$	0.00	\$0.00	\$0.00	\$0.00	\$27,500.00

Permit Conditions:

- Any change or changes in the plans for development, construction or land use activities will require a re-evaluation and modification of this permit.
- The erection (including excavation), demolition, alteration or repair of any building in a residential or business district other than between the hours of 7 am and 6 pm, Monday through Saturday is prohibited.
- Repair & maintenance only
- No change to coverage or footprint.
- Notching of rail posts are prohibited, 2- 3/8" bolts required per post. All spacing of openings shall be constructed so that a 4" sphere cannot pass through.
- Call for final inspection.
- Pursuant to GS 113-103 (5)(B)(5) and CAMA 15A NCAC 7K.0209 structures may be repaired in a similar manner, size and location as the original structure without a CAMA Minor Permit. No expansions or additions are permissible and repairs are limited to 50% of the physical value of the existing structure.

This permit is issued on the expressed condition that all information is correct and all work will comply with the State Building Code and all other applicable State and Local laws, ordinances and regulations. All provisions of laws and ordinances governing this type of work will be complied with whether specified herein or not.

Applicant Signature	Date



Date Issued:

Land Disturbance/Floodplain Development Permit

Project Address: 146 DUNE RD Property Owner: BERES, ALLAN W PIN #: 985912975325

Mailing Address: 146 DUNE RD

KITTY HAWK, NC 27949

Contractor:

Company Name: Wade A Tillett Septic

Contact Name: wade tillett

Classification: Other

Phone:

Address:

NC State License #:

Email: wadeatillett@gmail.com

Expiration Date:

Description of Work:

Drainfield replacement

Permit Amount:

Parking

25.00

Land Disturbing Activity:

Driveway

New Septic

Stormwater Conveyance

Grading/Filling

Landscaping/Minor Grading

Irrigation

Septic Repair

Stormwter Retention

Vegetation Removal

Proposed Finished Grade (ft.):

N/A: €#

Driveway:

Parking:

Other:

Floodplain Development:

Flood Zone:

Existing Elevation: 14

Vegetation Management (Sq.Ft.):

N/A:

Required Coverage: 0.0

Area Preserved:

Required Plantings:

Estimated Project Cost:

5000

Permit Conditions:

- Any change or changes in the plans for development, construction or land use activities will require a re-evaluation and modification of this permit.
- No land disturbing activity within 5 feet of property line.
- Stabilize all disturbed areas prior to CO.
- Call for inspection once stabilization has been completed.

All provisions of laws and ordinances governing this type of work will be complied with whether specified herein or not. All land disturbing activities in association with this permit must meet the applicable land disturbing provisions of the Town of Duck Zoning Ordinance Section 156.128. The granting of this permit does not presume to give authority to violate or cancel the provisions of any other state or local law regulation. When properly validated this is your permit.

Applicant Signature



Date issued: B20-000261

Building/Floodplain Development Permit

Project Address:	128 2	JAY (CREST	RD
Property Owner:	DEUTS	SCH.	DAVID	

PIN #: 98680509081702 Mailing Address: 11605 W HILL DR

ROCKVILLE, MD 20852

Contracto	r:
-----------	----

Company Name: H&W Services Group

Phone: (252) 423-0744

Email: hughesdavidw@netzero.com

Contact Name: David Hughes

Address: 1053 Martins Point Road

Martins Point, NC 27949

Classification: General Contractor

NC State License #: 81536-L

Expiration Date:

Description of Work:

Investigate leak under deck ledger, remove deck to replace rotten seating as needed; replace deck and handraits

Use: Multi Family Structure/Work Type:

Primary Structure: 4.Repair/Maintenance

Pool/Hot Tub:

Permit Amount:

100.00

Deck: Repair

Demo:

Accessory Building:

Bukhead (L.F.): Pier (L.F.): House Moving:

Proposed Area Schedule (Sq.Ft.):

Heated:

Unheated:

Remodel Heated:

Remodel Unheated: 160

Proposed Finished Grade (ft.):

N/A:

House:

Pool:

Driveway:

Parking:

Other:

Floodplain Development:

Flood Zone: Unshaded X Existing Elevation: 20 Structure Value: Storage Below Existing Elevation:

Vegetation Management (Sq.Ft.):

N/A:

Required Coverage: 0.0

Area Preserved:

Required Plantings: 0.0

Project Cost Estimate:

Building \$15,000.00 Electrical \$0.00

Mechanical \$0.00 **Plumbing** \$0.00

Gas \$0.00 Other \$0.00

Total \$15,000.00

Permit Conditions:

- Any change or changes in the plans for development, construction or land use activities will require a re-evaluation and modification of this permit.
- The erection (including excavation), demolition, alteration or repair of any building in a residential or business district other than between the hours of 7 am and 6 pm, Monday through Saturday is prohibited.
- No change to coverage or footprint.
- Repair & maintenance only
- Call for final inspection.

This permit is issued on the expressed condition that all information is correct and all work will comply with the State Building Code and all other applicable State and Local laws, ordinances and regulations. All provisions of laws and ordinances governing this type of work will be complied with whether specified herein or not.

11-9-20



Applicant Signature

Department of Community Development PO Box 8369 1200 Duck Road Town of Duck, North Carolina 27949 (252) 255-1234



Building/Floodplain Development Permit

Project Address: 109 ROYAL TERN	LN		PIN #: 99511	8305619					
Property Owner: HALE LENOX, MA	CY	Mail	Mailing Address: 1477 OLD BALLARD RD CHARLOTTESVILLE, VA 22901						
Contractor: Company Name: Outer Banks Deck	& Fence		Contact Name: Jay	Perrin	Clas	sification:			
Phone: (252) 473-9880 Email: jperrin01@aol.com			Address: P.O Mar	. Box 1130 nteo, NC 27954		State Licen ration Date			
Description of Work: Repla	ce decking, rails a	nd stairs, no new pili	ngs						
Use: Single Family	Structure/Wo Primary Struct								
Permit Amount: 180.00	Pool/Hot Tub: Deck: Repair Demo:		E F	Accessory Building Bukhead (L.F.): Pier (L.F.): House Moving:					
Proposed Area Schedule (Sq.Ft.):	Heated:	Unheated:	Remodel Heated	i: Ren	nodel Unhe	ated: 1200	ı		
Proposed Finished Grade (ft.):	N/A:	House:	Pool: D	riveway:	Parking	j:	Other:		
Floodplain Development:	Flood Zone:	AE 4 Existing Ele	vation: 4 Structur	re Value: Storag	e Below Ex	disting Elevi	ation:		
Vegetation Management (Sq.Ft.):	N/A:	Required Covera	ge: 0.0 Ar	ea Preserved:	Requi	red Planting	js: 0.0		
Project Cost Estimate:		ding Electrica			Gas	Other	Total		
	\$22,00	0,00 \$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$22,000.00		
Permit Conditions: - Any change or changes in the plar - The erection (including excavation 7 am and 6 pm, Monday through Sa - Repair & maintenance only - No change to coverage or footprin - Notching of rall posts are prohibite through. - Call for final inspection.), demolition, alter aturday is prohibite t.	ation or repair of any d.	building in a resider	ntial or business di	strict other	than betwe	en the hours of		
This permit is issued on the expressed applicable State and Local laws, ordin whether specified herein or not.	d condition that all ances and regulat	Information is corrections. All provisions of	t and all work will co f laws and ordinance	mply with the States as governing this ty	e Building (ype of work	Code and all will be con	l other plied with		



Date Issued: 11/10/2020

Permit #: TR20-000288

Mechanical Trade Permit

Project Address: 108 CARROL DR

Property Owner: MAJKA, JAMES B	Mailing Address:	129 YORK POINT DR SEAFORD, VA 23696	
Permit Types:			
Plumbing Electrical Mechanical	Gas		
Contractor:			
Company Name: One Hour Heating & Air Conditioning		Contact Name	Brian McDonald
Phone: (252) 441-1740			P.O. Box 1415
		Address	
NC State License #: 12643			Nags Head, NC 27959
Description of Work: Replace Hvac with 1	4 seer 2 ton Carrier airhan	dler and heatpump	
Project Cost Estimate: 5,866.00		Permit Amount: 160.00	
I hereby certify that all the information provided by me in all applicable state and local laws and regulations pertain the NC General Statutes and the NC Administrative Coc Inspector) immediately by phone or in person and in writing the control of the control	ning to the work for which the le. If I resign or am no longe	nis permit is issued, and that I possess or affiliated with this project, I will notify	all trade contractor licenses required by
Applicant Signature Date			

PIN #: 995006479812



Date Issued: 11/13/2020

B20-000257

Building/Floodplain Development Permit

Project Address: 110 COOK DR **Property Owner: CLANCY, TIMOTHY** PIN #: 985912863962

Mailing Address: 108 GEORGE SANDYS

WILLIAMSBURG, VA 23185

Contractor:

Company Name: CASTRO CONSTRUCTION

Phone: (252) 305-7941

Email: gregbravo33@yahoo.com

Contact Name: UBALDO CASTRO Address: 1100 CLAM SHELL DR

KILL DEVIL HILLS, NC 27948

Classification: Citizen NC State License #: **Expiration Date:**

Description of Work:

Re-doing deck joists and stairs; also 4 x 4 hand rail switching out 2 x 12 boards and 2 x 8 boards

Use:

Single Family

Structure/Work Type:

Primary Structure:

Permit Amount:

100.00

Pool/Hot Tub:

Deck: Repair

Demo:

Accessory Building:

Bukhead (L.F.):

Pier (L.F.): House Moving:

Proposed Area Schedule (Sq.Ft.):

Heated:

Unheated:

Accessory Heated:

Accessory Unheated:

Proposed Finished Grade (ft.):

N/A:

House:

Pool:

Driveway:

Parking:

Other:

Floodplain Development:

Flood Zone: Unshaded X Existing Elevation: 30 Structure Value: Storage Below Existing Elevation:

Vegetation Management (Sq.Ft.):

N/A:

Required Coverage: 0.0

Area Preserved:

Required Plantings: 0.0

Project Cost Estimate:

Building \$9,000.00 Electrical

\$0.00

Mechanical

\$0.00

Plumbing

\$0.00

Gas \$0.00 Other \$0.00

Total \$9,000.00

Permit Conditions: - Any change or changes in the plans for development, construction or land use activities will require a re-evaluation and modification of this permit.

- The erection (including excavation), demolition, alteration or repair of any building in a residential or business district other than between the hours of 7 am and 6 pm, Monday through Saturday is prohibited.

- No change to coverage or footprint.

- Repair & maintenance only

- Notching of rail posts are prohibited, 2- 3/8" bolts required per post. All spacing of openings shall be constructed so that a 4" sphere cannot pass through.

- Call for final inspection.

This permit is issued on the expressed condition that all information is correct and all work will comply with the State Building Code and all other applicable State and Local laws, ordinances and regulations. All provisions of laws and ordinances governing this type of work will be complied with whether specified herein or not.

Applicant Signature



Date Issued: 11/16/2020

Permit #: TR20-000289

Mechanical Trade Permit

Project Address: 1201 DUCK RD	PIN #:	985916843991				
Property Owner: KELLOGG SUPPLY CO INC	Mailing Address:	ms: P O BOX 99 MANTEO, NC 27954				
Permit Types:						
Plumbing Electrical Mechanical Gas						
Contractor:						
Company Name: Coastal Element, LLC		Contact Name:	Brian R Parks			
Phone: (252) 548-4202			PO Box 1772			
		Address:				
NC State License #: 32607			Harbinger, NC 27941			
Description of Work: Change out 5 ton HVAC system	n					
Project Cost Estimate: 6,000.00		Permit Amount: 160.0	00			
I hereby certify that all the information provided by me in support of all applicable state and local laws and regulations pertaining to the the NC General Statutes and the NC Administrative Code. If I resignispector) immediately by phone or in person and in writing within	work for which this pen In or am no longer affilia	mit is issued, and that I posse	ess, all trade contractor licenses required by			
Applicant Signature Date	-					

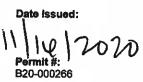


Dat	e Issued	:
11	116	2020
	mit #: -000264	'

Building/Floodplain Development Permit

Project Address: 109 WAX	WING LN				PIN #: 99	95118325	373			
Property Owner: PARK, JO	HN T			Mailing	Address: 10 D	09 WAXV UCK, NC				
Contractor:										
Company Name: Ken Green	n & Associate	s		Cont	act Name: M	like Dehu	S	Clas	sification:	
Phone: (252) 491-8127					Address: P	O. Box3	72	NC S	State Licen	nse #:
Email: mdehus@kg-a.com					Н	larbinger,	NC 27941	Ехр	Iration Date	e:
Description of Work:	Replace d ground to			evel deck; replac	e deck rails o	on top lev	el and mid- leve	ıl decks; re	place deck	stairs from
Use:			ure/Work Typ	9:						
Single Family			y Structure:			A				
		Poovini Deck:	ot Tub:				essory Building:			
Permit Amount:		Demo:					head (L.F.): (L.F.):			
110.50							se Moving:			
Proposed Area Schedule (S	Sq.Ft.):	Heate	ed: Ur	nheated:	Remodel	Heated:	Re	model Unh	neated: 670)
Proposed Finished Grade (ft.):	N/A:	V	House:	Pool:	Drive	eway:	Parking	j :	Other:
Floodplain Development:		Flood	l Zone: Unsha	aded X Existing	g Elevation: 7	7 Struct	ure Value: Sto	rage Belov	w Existing E	Elevation:
Vegetation Management (S	q.Ft.):	N/A:	Re	quired Coverage	a: 0.0	Area	Preserved:	Requi	ired Planting	gs: 0.0
Project Cost Estimate:			Building	Electrical	Mech	enical	Plumbing	Gas	Other	Total
			\$34,240.00	\$0.00		\$0.00	\$0.00	\$0.00	\$0.00	\$34,240.00
Permit Conditions:										
 Any change or changes in The erection (including ex 7 am and 6 pm, Monday th Repair & maintenance on No change to coverage or 	ccavation), de rough Saturd ly	molitio	on, alteration of	struction or land or repair of any t	use activities ouilding in a r	will requesidentia	ire a re-evaluati l or business dis	on and mo strict other	dification o than betwe	f this permit. en the hours of
Notching of rail posts are through. - Call for final inspection.	prohibited, 2	- 3/8" b	olts required	per post. All spa	cing of open	ings shall	be constructed	so that a	1* sphere c	annot pass
This permit is issued on the e applicable State and Local la whether specified herein or n	ws, ordinance	ndition es and	that all inform regulations.	nation is correct All provisions of	and all work laws and ord	will comp inances g	ly with the State poverning this ty	Building (pe of work	Code and a will be con	ll other nplied with
Applicant Signature	117		Da	ate						





Building/Floodplain Development Permit

Pro	ject Address:	173	SCHOONER	RIDGE DR

Property Owner: MCATEE, RICHARD

PIN #: 985912958785

Mailing Address: 173 SCHOONER RIDGE DR

DUCK, NC 27949

Contractor:

Company Name: Snearer Construction

Phone: (252) 261-2228

Description of Work:

Email: paulsnearerhomes@gmail.com

Contact Name: Paul Snearer

Address: P.O. Box 2875

Kitty Hawk, NC 27949

Classification: General Contractor

NC State License #: 25865 Expiration Date: 12/31/2010

Construct 5 bedroom house and pool as per drawings provided.

Use:

Single Family

Structure/Work Type:

Primary Structure: 1.New Construction

Pool/Hot Tub: Pool Only

Permit Amount:

\$3,238.85

Deck: Demo:

Bukhead (L.F.): Pier (L.F.): House Moving:

Accessory Building:

Proposed Area Schedule (Sq.Ft.):

Heated: 3,271

Unheated: 1,222

Accessory Heated:

Accessory Unheated:

Proposed Finished Grade (ft.):

N/A:

House: 10.1

Pool: 10.1

Driveway:

Parking:

Other:

Fioodplain Development:

Flood Zone: Unshaded X Existing Elevation: 9.3 Structure Value: Storage Below Existing Elevation:

Vegetation Management (Sq.Ft.):

N/A:

Required Coverage: 1877.55

Area Preserved: 2700

Required Plantings: -822.45

Project Cost Estimate:

Buildina

Electrical

Mechanical

Plumbing

Gas

Other

Total

\$497,000.00

\$22,000.00

\$20,000.00

\$20,500.00

\$5,500,00

\$50,000.00

\$615,000.00

Permit Conditions:

The erection (Including excavation), demolition, alteration or repair of any building in a residential or business district other than between the hours of

7 am and 6 pm, Monday through Saturday is prohibited.

- Any change or changes in the plans for development, construction or land use activities will require a re-evaluation and modification of this permit.

- Install properly toed-in erosion control fencing around perimeter of development prior to commencing work; maintain at all times.

- No land disturbing activity within 5 feet of property line.

- No areas of fill, including graded and leveled areas, may exceed 3 in depth.

- Slope of any fill areas from toes of the slope to the final ground elevations can be no greater than 3:1.

- Stabilize all disturbed areas prior to CO.

- Vegetation canopy at completion of development and prior to CO must be greater than or equal to 15% coverage of Net Lot Area. or 1,878 s.f. - All parking outside of 20 feet wide drive aisle to be gravel or semi-permeable material shall be bordered in a manner which retains the stone in the driveway area.
- Pool fence height limited to six (6) feet above adjacent grade.

- Height certificate required prior to CO.

- Elevation Certificate required prior to CO. Regulatory flood protection elevation is 10'.

- Provide Final As-Built Survey with Updated Coverage Breakdown.

This permit is issued on the expressed condition that all information is correct and all work will comply with the State Building Code and all other applicable State and Local laws, ordinances and regulations. All provisions of laws and ordinances governing this type of work will be compiled with whether specified herein or not.



Date Issued: 11/16/2020

Permit #: TR20-000287

Mechanical Trade Permit

Project Address: 110 ACORI	N OAK AVE	PIN #:	995006486547	
Property Owner: RSPTI		Mailing Address:	5819 OAK TERRACE DR VIRGINIA BEACH, VA 23464	
Permit Types:				
Plumbing Electrical	Mechanical Ga	s		
Contractor:				
Company Name: North Beach	h Services Heating and Coolir	ng	Contact Name:	Gabby Willis
Phone: (252) 491-2878				PO Box 181
			Address:	
NC State License #:				Kitty Hawk , NC 27949
Description of Work:	Replace HVAC system wi	ith Trane 14 Seer 2.5 ton	heat pump and matching air handler	
Project Cost Estimate: 9,000	.00		Permit Amount: 160.00	
all applicable state and local lav	ws and regulations pertaining ne NC Administrative Code. If	to the work for which this p	ue and accurate to the best of my know ermit is issued, and that I possess all filiated with this project, I will notify the s.	trade contractor licenses required by
Applicant Signature	Date	_		



Date Issued: 11/17/2020

Permit #: TR20-000295

Mechanical Trade Permit

Project Address: 1311 DUCK	RD	PIN #:	995015539901	
Property Owner: SEA SUITE	GROUP LLC	Mailing Address:	2709 CARSONA CT APEX, NC 27502	
Permit Types:				
Plumbing Electrical	Mechanical Ga	as		
Contractor:				
Company Name: Air Handlers	OBX		Contact Name:	Stuart Morris
Phone: (252) 491-8637				8788 Caratoke Hwy
			Address:	
NC State License #: L.23577				Harbinger, NC 27941
Description of Work:	Replace two HVAC syste	oms		
Project Cost Estimate: 12,030	0.00		Permit Amount: 22	20.00
all applicable state and local law	vs and regulations pertaining e NC Administrative Code. If	; to the work for which this p f I resign or am no longer aff	ermit is issued, and that I pos iliated with this project, I will	f my knowledge. I certify that I will comply with seess all trade contractor licenses required by notify the local authority (Town of Duck Building
Applicant Signature	Date			



Date Issued: 11/17/2020

Permit #: TR20-000296

Mechanical Trade Permit

Project Address: 1214 DUCK RD

Property Owner: DUCK UNITED METHODIST

PIN #: 985912758137

Mailing Address: P O BOX 8010

KITTY HAWK, NC 27949

Permit Types:

Plumbing

Electrical

Mechanical

Gas

Contractor:

Company Name: R.A. Hoy Heating & A/C

Phone: (252) 261-2008

Contact Name: Douglas Wakeley

P.O. Box 179

Address:

Kitty Hawk, NC 27949

Description of Work:

NC State License #: 13056

INSTALL MITSUBISHI MULTI ZONE 3T WITH (2) 18K FLOOR MT HEADS MINI SPLIT

Project Cost Estimate: 10,997.00

Permit Amount: 160.00

I hereby certify that all the information provided by me in support of this application is true and accurate to the best of my knowledge. I certify that I will comply with all applicable state and local laws and regulations pertaining to the work for which this permit is issued, and that I possess all trade contractor licenses required by the NC General Statutes and the NC Administrative Code. If I resign or am no longer affiliated with this project, I will notify the local authority (Town of Duck Building Inspector) immediately by phone or in person and in writing within three (3) working days.



Applicant Signature

Department of Community Development PO Box 8369 1200 Duck Road Town of Duck, North Carolina 27949 (252) 255-1234

Building/Floodplain Development Permit

DD=4					PIN #: 995011551519						
DREA	Mail	Mailing Address: 335 N PITT ST ALEXANDRIA, VA 22314									
			ranski								
	Addre										
	15.115.4	Duck, NC 2	7949, 	Expirati	ion Date:						
tion of a freestanding rer, tile, fixtures, and f	tub to the master b looring. Survey lette	athroom. Work w er regarding struc	rill be done in con ctural integrity ava	junction wi illable upoi	th updating exis	sting steam					
Structure/Work Typ	e:										
	Remodel				-						
				, ,							
Demo:	Pier (L.F.): House Moving:										
Heated:	Unheated:	Accessory H	eated:	Acces	sory Unheated:						
N/A: 🔽	House:	Pool:	Driveway:	Pa	rking:	Other:					
Flood Zone: Ur	nshaded X Existin	ng Elevation: 7	Structure Value:	Storage B	elow Existing E	levation:					
N/A: ☑	Required Coverag	je: 0.0	Area Preserved:	R	equired Planting	gs: 0.0					
Building	Electrical	Mechanical	Plumbing	Gas	Other	Tota					
\$8,000.00	\$500.00	\$0.00	\$2,000.00	\$0.00	\$7,758.00	\$18,258.0					
n), demolition, alterati aturday is prohibited. nt. l. ed condition that all in	on or repair of any	building in a residence buildi	dential or busines	s district of	ther than betwe	en the hours of					
nances and regulation	ns. All provisions of	flaws and ordina	nces governing th	is type of v	work will be con	nplied with					
	tion of a freestanding ver, tile, fixtures, and f Structure/Work Typ Primary Structure: 3. Pool/Hot Tub: Deck: Demo: Heated: N/A: Flood Zone: Ur N/A: Building \$8,000.00 Ins for development, on, demolition, alteraticaturday is prohibited. Int. Int. Int. Int. Int. Int. Int. Int	Contact Na Address tion of a freestanding tub to the master between, tile, fixtures, and flooring. Survey letted to the production of a freestanding tub to the master between, tile, fixtures, and flooring. Survey letted to the product of the pro	Contact Name: Andrea Dob Address: POB 8142 Duck, NC 2 tion of a freestanding tub to the master bathroom. Work werer, tile, fixtures, and flooring. Survey letter regarding structure/Work Type: Primary Structure: 3.Remodel Pool/Hot Tub: Deck: Demo: Heated: Unheated: Accessory H N/A: House: Pool: Flood Zone: Unshaded X Existing Elevation: 7 N/A: Required Coverage: 0.0 Building Electrical Mechanical \$8,000.00 \$500.00 \$0.00 ans for development, construction or land use activities wind, demolition, alteration or repair of any building in a resistaturday is prohibited. Int. Int. Int. Ind. Contact Name: Andrea Dob Address: POB 8142 Duck, NC 2 Duck and Survey letter regarding structor. Heater Duck and Survey letter regarding structor. Accessory H N/A: Pool: Heater Double and Survey letter regarding structor. Accessory H N/A: Pool: Heater Duck and Survey letter regarding structor. Accessory H N/A: Pool: Heater Duck and Survey letter regarding structor. Accessory H N/A: Pool: Heater Duck and Survey letter regarding structor. Accessory H N/A: Pool: Heater Duck and Survey letter regarding structor. Accessory H N/A: Pool: Heater Duck and Survey letter regarding structor. Accessory H N/A: Pool: Heater Duck and Survey letter regarding structor. Accessory H N/A: Pool: Heater Duck and Survey letter regarding structor. Accessory H N/A: Pool: Heater Duck and Survey letter regarding structor. Accessory H N/A: Pool: Heater Duck and Survey letter regarding structor. Accessory H N/A: Pool: Heater Duck and Survey letter regarding structor. Accessory H N/A: Pool: Heater Duck and	Contact Name: Andrea Dobranski Address: POB 8142 Duck, NC 27949, tion of a freestanding tub to the master bathroom. Work will be done in conver, tile, fixtures, and flooring. Survey letter regarding structural integrity available. Structure/Work Type: Primary Structure: 3.Remodel Pool/Hot Tub: Deck: Demo: Heated: Unheated: Accessory Heated: N/A: House: Pool: Driveway: Flood Zone: Unshaded X Existing Elevation: 7 Structure Value: N/A: Required Coverage: 0.0 Area Preserved: Building Electrical Mechanical Plumbing \$8,000.00 \$500.00 \$0.00 \$2,000.00 ans for development, construction or land use activities will require a re-evan), demolition, alteration or repair of any building in a residential or busines aturday is prohibited. Int. Int. Int. Int. Int. Int. Int. In	Contact Name: Andrea Dobranski Address: POB 8142 NC Stat Duck, NC 27949, Expiration of a freestanding tub to the master bathroom. Work will be done in conjunction with ver, tile, fixtures, and flooring. Survey letter regarding structural integrity available upon Structure/Work Type: Primary Structure: 3.Remodel Pool/Hot Tub: Deck: Demo: Heated: Unheated: Accessory Heated: Accessory Building: Bukhead (L.F.): House Moving: Heated: Unheated: Accessory Heated:	Contact Name: Andrea Dobranski Address: POB 8142 Duck, NC 27949, Expiration Date: tion of a freestanding tub to the master bathroom. Work will be done in conjunction with updating exister, tile, fixtures, and flooring. Survey letter regarding structural integrity available upon request. Structure/Work Type: Primary Structure: 3.Remodel Pool/Hot Tub: Deck: Bukhead (L.F.): Pler (L.F.): House Moving: Heated: Unheated: Accessory Heated: Accessory Unheated: N/A: Indicate the proof of the proof o					



Date Issued:

Building/Floodplain Development Permit

Project Address: 123 BUFFELL HEAD RD

Property Owner: UMANA, JOSE

PIN #: 995011659621

Mailing Address: 1212 BALFOUR DR

ARNOLD, MD 21012

Contractor:

Company Name: Todd Coyle Construction, LLC

Phone: (252) 261-9728 Email: todd@choosetcc.com Contact Name: Todd Covle

Address: P O Box 1094

Classification: General Contractor NC State License #: 60830 - U

Expiration Date:

Description of Work:

Remove and replace windows on east side of wall of existing house; remove and replace siding on east wall of house;

Kitty Hawk, NC 27949

install new window trim inside and out, paint new siding and interior of house

Structure/Work Type:

Primary Structure: 4.Repair/Maintenance

Pool/Hot Tub:

Permit Amount:

110.00

Single Family

Use:

Deck: Demo:

Accessory Building: Bukhead (L.F.):

Pier (L.F.): House Moving:

Proposed Area Schedule (Sq.Ft.):

Heated:

Unheated:

Accessory Heated:

Accessory Unheated:

Proposed Finished Grade (ft.):

N/A:

House:

Pool:

Driveway:

Parking:

Other:

Floodplain Development:

Flood Zone: VE 13 Existing Elevation: 15

Structure Value:

Storage Below Existing Elevation:

Vegetation Management (Sq.Ft.):

N/A·

Required Coverage: 0.0

Area Preserved:

Required Plantings: 0.0

Project Cost Estimate:

Building

Electrical

Mechanical

Plumbing

Gas

Other

Total

\$50,000.00

\$0.00

\$0.00

\$0.00

\$0.00

\$0.00

\$50,000.00

Permit Conditions:

- Any change or changes in the plans for development, construction or land use activities will require a re-evaluation and modification of this permit.
- The erection (including excavation), demolition, alteration or repair of any building in a residential or business district other than between the hours of 7 am and 6 pm, Monday through Saturday is prohibited.

- Repair & maintenance only

- No change to coverage or footprint.
- Call for inspection if rot is found; if no rot is found provide letter stating same for CO.
- All new glass will need to meet wind-borne debris provisions of NC Residential Building Code.
- Call for final inspection.

This permit is issued on the expressed condition that all information is correct and all work will comply with the State Building Code and all other applicable State and Local laws, ordinances and regulations. All provisions of laws and ordinances governing this type of work will be complied with whether specified herein or not.



Date Issued	:
11/17	2020
Permit #:	
B20-000240	

Building/Floodplain Development Permit

Project A	ddress:	107	West	SEA	HAWK	DR
Property	Owner:	SCA	FETT	A, AN	IDREV	1

PIN#: 986917013079 Mailing Address: PO BOX 38

COROLLA, NC 27927

Contractor:

Company Name: Olin Finch & Co.

Phone: (252) 202-9879

Email: marcemurray@gmail.com

Contact Name: Marc Murray

Address: 116 Sandy Ridge Road

Duck, NC 27949

Classification: General Contractor

NC State License #: 52567

Expiration Date:

Description of Work:

Permit Amount:

Add Pool, install new septic system in a different location than originally proposed.

Use: Other

300.00

Structure/Work Type:

Primary Structure:

Pool/Hot Tub: Pool Only

Deck:

Demo:

Accessory Building:

Bukhead (L.F.): Pier (L.F.): House Moving:

Proposed Area Schedule (Sq.Ft.): Heated: Unheated: Accessory Heated:

Accessory Unheated:

Proposed Finished Grade (ft.):

N/A: 🗹

House:

Pool:

Driveway:

Parking:

Other:

Floodplain Development:

Flood Zone: Unshaded X Existing Elevation:

Structure Value:

Storage Below Existing Elevation:

Vegetation Management (Sq.Ft.):

N/A:

Required Coverage: 2393.85 Area Preserved: 2900 Required Plantings: -506.15000000000001

Project Cost Estimate: Plumbing Building Electrical Mechanical Gas \$25,000.00 \$1,200.00 \$0.00 \$0.00 \$0.00

Other Total \$0.00 \$26,200.00

Permit Conditions:

- Any change or changes in the plans for development, construction or land use activities will require a re-evaluation and modification of this permit.
- The erection (Including excavation), demolition, alteration or repair of any building in a residential or business district other than between the hours of 7 am and 6 pm, Monday through Saturday is prohibited.
- No land disturbing activity within 5 feet of property line.
- Stabilize all disturbed areas prior to CO.
- Vegetation canopy at completion of development and prior to CO must be greater than or equal to 15% coverage of Net Lot Area, or 2394 SF.
- Pool fence height limited to six (6) feet above adjacent grade.
- Provide Final As-Built Survey with Updated Coverage Breakdown.
- Conditions associated with permit B20-00185 still apply.
- Excavation of pool cannot take place within the zone of a 45 degree plane to the bottom of foundation
- Call for final inspection.

This permit is Issued on the expressed condition that all information is correct and all work will comply with the State Building Code and all other applicable State and Local laws, ordinances and regulations. All provisions of laws and ordinances governing this type of work will be complied with whether specified herein or not.

Applicant Signature



Applicant Signature

Department of Community Development PO Box 8369 1200 Duck Road Town of Duck, North Carolina 27949 (252) 255-1234 Date Issued:

Permit #: B20-000279

Building/Floodplain Development Permit

Project Address: 101 AZA			PIN #: 9	86917103	3736						
Property Owner: PLESCE, GEORGE J				Mailing Address: 48 UNION ST BRISTOL, RI 02809							
Contractor:											
Company Name: Costin C	reations. I I	C		ontact Name:	Travis Costi	n	Classifica	tion: Gene	ral Contra	ctor	
Phone: (252) 261-5177			Address: 109 Jaycrest Road					License #:		CtO	
Email: travis@costincreat	ions.com				Duck, NC 2		Expiration		00000		
Description of Work:	Remode	el bathroom: van	ity, toile	t, shower; sam	e layout						
Use:		ructure/Work T									
Single Family		imary Structure:	3.Rem	odel							
	-	ol/Hot Tub: ock:					Accessory Bu	•			
Permit Amount:		imo:					Bukhead (L.F. Pier (L.F.):	.):			
110.00							House Moving	g :			
Proposed Area Schedule (Sq.Ft.):		Heated:	Unl	neated:	Accessory Heated:			Accessory Unheated:			
Proposed Finished Grade	(ft.):	N/A:		House:	Pool:	Drive	way:	Parking	:	Other:	
Floodplain Development:		Flood Zone:	Unshad	led X Existing	g Elevation: 9	Structi	ıre Value: Sto	rage Belov	v Existing E	Elevation:	
Vegetation Management (Sq.Ft.):	N/A:	Req	uired Coverage	e: 0.0	Area I	Preserved:	Requi	red Plantin	gs: 0.0	
Project Cost Estimate:		Buil	ding	Electrical	Mecha	nical	Plumbing	Gas	Other	Total	
		\$17,00	-	\$1,458.00	nioon.	\$0.00	\$4,000.00	\$0.00	\$0.00	\$22,458.00	
Permit Conditions: - Any change or changes - The erection (including of the erection of the	excavation), through Satu or footprint.	demolition, alter	ation or	ruction or land repair of any b	use activities uilding in a r	will requi	ire a re-evaluati or business di	ion and mo strict other	dification o	of this permit. een the hours of	
This permit is issued on the applicable State and Local whether specified herein or	laws, ordinar	condition that all nces and regulat	informa ions. Al	ation is correct :	and all work aws and ord	will compl inances g	y with the State overning this ty	Building (pe of work	Code and a will be cor	ill other nplied with	

Date



Applicant Signature

Department of Community Development PO Box 8369 1200 Duck Road Town of Duck, North Carolina 27949 (252) 255-1234 Date Issued:

11-18-2020

Permit #: B20-000280

Building/Floodplain Development Permit

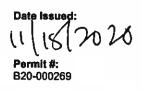
Property Owner: SHEPH		Mailing Address: 311 GEORGE ST FREDERICKSBURG, VA 22401								
Contractor: Company Name: Costin Creations, LLC Phone: (252) 261-5177 Email: travis@costincreations.com						:Travis Costin 109 Jaycrest Road Duck, NC 27949		Classification: General Contract NC State License #: 68905 Expiration Date:		
Description of Work:	Remodel	bathroo	m: vanity ar	nd toilet same lay	out; tub into sh	ower				
Use: Single Family Permit Amount: 110.00	Structure Primary S Pool/Hot Deck: Demo:	Structure		Maintenance			Bukhe Pier (L	sory Buildii ad (L.F.): F.): Moving:	ng: 🔲	
Proposed Area Schedule (Sq.Ft.): Heated:		d: l	Unheated: Access		y Heated:		Accessory Unheated:		:	
Proposed Finished Grade	e (ft.):	N/A:	Ÿ.	House:	Pool:	Drive	way:	Parking	j :	Other:
Floodplain Development:		Flood	Zone: Unsh	naded X Existing	g Elevation: 15	Structi	ure Value: Sto	orage Belov	w Existing	Elevation:
Vegetation Management	(Sq.Ft.):	N/A:	R	equired Coverage	ge: 0.0 Area Pre:		Preserved:	reserved: Required Planti		gs: 0.0
Project Cost Estimate:		-	Building	Electrical	Mechai	nical	Plumbing	Gas	Other	Tota
		;	\$10,000.00	\$1,000.00	\$	0.00	\$5,000.00	\$0.00	\$0.00	\$16,000.00
Permit Conditions: - Any change or changes - The erection (including 7 am and 6 pm, Monday - No change to coverage - Typical trade inspection - Call for final inspection.	excavation), d through Satun or footprint. s required.	emolitior day is pr	n, alteration ohibited	or repair of any b	oullding in a re	sidential	or business di	strict other	than betwe	een the hours of
This permit is issued on the applicable State and Local whether specified berein or	laws, ordinand	es and i	nat all informations.	mation is correct : All provisions of l	and all work w laws and ordin	ill comply ances go	y with the State overning this ty	Building (pe of work	Code and a will be cor	II other nplied with

Date



Applicant Signature

Department of Community Development PO Box 8369 1200 Duck Road Town of Duck, North Carolina 27949 (252) 255-1234



Building/Floodplain Development Permit

Project Address: 123 MARTIN LN		PIN #: 995114330788								
Property Owner: TURBIDY, MICHAE	L	Mailing Address: 42276 MAGISTRATE CT CHANTILLY, VA 20152								
Contractor:										
Company Name: Ken Green & Assoc	ziates	C	ontact Name:					neral Cont	ractor	
Phone: (252) 491-8127				: P.O. Box 372 No			e License	#: 68343		
Email: kgreen@kg-a.com		Harbinger, NC 27941 Exp					on Date:			
Description of Work: Removand de	ve and replace de ocking on landing	and replace deck railings on Second floor east deck; remove and replace railings, stair stringers, step-tread ing on landings; remove one door and windows and replace with new								
Use:	Structure/Wo	ork Type:								
Single Family	Primary Struc									
	Pool/Hot Tub:					sory Building:				
Permit Amount:	Deck: Repair Demo:					ead (L.F.):				
110.00	Demo.			Pier (I House	L.F.): Moving:					
Proposed Area Schedule (Sq.Ft.):	Heated:	Unheated:		Remodel Heated:		R	Remodel Unheated: (4	
Proposed Finished Grade (ft.):	N/A:		House:	Pool:	Drivew	/ay:	Parking	j :	Other:	
Floodplain Development:	Flood Zone:	: Unshade	ed X Existing	Elevation: 7	Structur	e Value: Sto	rage Belov	v Existing E	Elevation:	
Vegetation Management (Sq.Ft.):	N/A: ✓	Requ	ired Coverage	: 0.0	Area Pr	reserved:	Requi	red Plantin	gs: 0.0	
Project Cost Estimate:	Bull	tallas as	El-st-l-sl			Di				
	\$22,59	iding 90.00	Electrical \$0.00	Mecha	nicai 60.00	Plumbing \$0.00	Gas \$0.00	Other \$0.00	Total \$22,590.00	
Bowell Co 4/41	\$ 22,53	90.00	\$0,00		•U.UU	\$0.00	\$0.00	\$0.00	\$22,590.00	
Permit Conditions: - Any change or changes in the plan - The erection (including excavation) 7 am and 6 pm, Monday through Sa - No change to coverage or footprint - Repair & maintenance only - Notching of rail posts are prohibited through. - Call for final inspection.	, demolition, alte turday is prohibite	ration or 1 ed.	repair of any b	uilding in a re	sidential c	or business dis	strict other	than betwe	een the hours of	
This permit is issued on the expressed applicable State and Local laws, ordina whether specified herein or not.	condition that all ances and regula	l informat itions. All	ion is correct a provisions of la	nd all work waws and ordin	rill comply nances go	with the State verning this ty	Building C pe of work	Code and a will be cor	ill other nplied with	

Date



Date Issued:	2020
Permit #: B20-000270	

Building/Floodplain Development Permit

Project A	ddress:	128 C	CEAN	BAY	BLVD
Property	Owner:	CAPU	ITO, S	ΓΕΥΕ	ΝV

PIN #: 995007585866 Mailing Address: 152 SOUTHPORT

Tropolly Owner. On 010	OILVENT		WILLIAMSBURG, VA 23188							
Contractor: Company Name: DeBoy Construction & Remodeling, LLC Phone: (252) 480-9921 Email: outerbankscontractor@gmail.com				Name: John R. Iress: 303 Eaç Kill Dev	Classification NC State Li	cense #: 6	al Contractor 11498			
Description of Work:	Kitchen re	enovation, master	bath and wet bar re	enovation, add	new can lights and	pendant light	s at kitcher	1		
Use: Single Family Permit Amount: 130.00		e/Work Type: Structure: 4.Repair Tub:	/Maintenance		Bul Pie	cessory Buildi khead (L.F.): r (L.F.): use Moving:	ng:			
Proposed Area Schedule (Sq.Ft.):	Heated:	Unheated:	Remodel He	ated: 240	Remod	del Unheate	ed:		
Proposed Finished Grade	(ft.):	N/A:	House:	Pool:	Driveway:	Parking	g:	Other:		
Floodplain Development:	plain Development: Flood Zone: VE- 12		Existing Elevation: 12	Structure Value: \$192,600.00		Storage Below Existing Elevation:		ng Elevation:		
Vegetation Management (S	iq.Ft.):	N/A: 🗹	Required Coverage	o: 0.0	Area Preserved:	Requi	ired Plantin	igs: 0.0		
Project Cost Estimate:		Building \$64,450.50		Mechan \$(ical Plumbin 0.00 \$0.0	_	Other \$0.00	Total		
Permit Conditions: - Any change or changes i - The erection (including eram and 6 pm, Monday the Repair & maintenance or eram or trade inspections).	xcavation), d nrough Satur nly nr footprint.	emolition, alteratio	enstruction or land under the second of the	use activities w uilding in a res	ill require a re-eval Idential or business	uation and mo	odification of than between	of this permit.		
This permit is issued on the capicable State and Local lawhether specified herein or r	iws, ordinanc	ondition that all info ces and regulations	rmation is correct as. All provisions of l	and all work wil aws and ordina	I comply with the S ances governing thi	tate Building (s type of work	Code and a will be con	all other mplied with		
Applicant Signature		I	Date							



Date Issued: 11/18/2020

Permit #: B20-000286

Building/Floodplain Development Permit

Project Address: 165 MANTOAC CT Property Owner: STANLEY, GEORGE PfN #: 986913140615

Mailing Address: 1253 EDENBRIDGE CT

CUMMING, VA 30041

Contractor:

Company Name: Dan Osman Phone: (252) 202-4599 Contact Name: Dan Osman Address: PO Box 7403

Classification: General Contractor

Email: osmandanny@gmail.com

Kill Devil Hills, NC 27948

NC State License #: 76259 Expiration Date: 12/31/2015

Description of Work:

Remove and replace windows, doors, siding, and replace on east side; replace rusted steel beam on east side of house

Use:

\$110.00

Structure/Work Type:

Single Family

Primary Structure: 4.Repair/Maintenance

Pool/Hot Tub:

Permit Amount:

Deck: Demo: Accessory Building:

Bukhead (L.F.); Pier (L.F.); House Moving:

Proposed Area Schedule (Sq.Ft.):

Heated:

Unheated:

Accessory Heated:

Accessory Unheated:

Proposed Finished Grade (ft.):

N/A:

House:

Pool:

Driveway:

Parking:

Other:

Floodplain Development:

Flood Zone: VE

Existing Elevation: 13 Structure Value: \$77,900.00

Storage Below Existing Elevation:

Vegetation Management (Sq.Ft.):

N/A:

Required Coverage: N/A

Area Preserved: N/A

Required Plantings: N/A

Project Cost Estimate:

Building

Electrical

Mechanical

Plumbing

Gas

Other

Total \$35.000.00

\$35,000.00

\$0.00

\$0.00

\$0.00

\$0.00

\$0.00

Permit Conditions:

- Any change or changes in the plans for development, construction or land use activities will require a re-evaluation and modification of this permit.
- The erection (including excavation), demolition, alteration or repair of any building in a residential or business district other than between the hours of 7 am and 6 pm, Monday through Saturday is prohibited.
- Repair & maintenance only.
- No change to coverage or footprint.
- Call for inspection if rot is found: if no rot is found provide letter stating same for CO.
- All new glass will need to meet wind-borne debris provisions of NC Residential Building Code,
- Call for final inspection.
- Pursuant to GS 113-103 (5)(B)(5) and CAMA 15A NCAC 7K.0209 structures may be repaired in a similar manner, size and location as the original structure without a CAMA Minor Permit. No expansions or additions are permissible and repairs are limited to 50% of the physical value of the existing structure.

This permit is issued on the expressed condition that all information is correct and all work will comply with the State Building Code and all other applicable State and Local laws, ordinances and regulations. All provisions of laws and ordinances governing this type of work will be complied with whether specified herein or not.

Applicant Signature

11-18-2020



Date Issued: 11/18/2020

Permit #: TR20-000294

Mechanical Trade Permit

Malling Address:	1204 FIRTH OF LORNE CIR FORT WASHINGTON, MD 20744	
	Contact Name:	Michael Brynteson
		128 Oberlin rd
	Address:	
		Wanchese, NC 27981
handler		
	Permit Amount: 160.00	
work for which this an or am no longer a	permit is issued, and that I possess all fillated with this project. I will notify the	trade contractor licenses required by
-		
	of this application is to be work for which this on or am no longer a	Address:



Date Issued: 11/23/2020

Permit #: TR20-000301

Mechanical Trade Permit

Project Address: 134 2D PLOVER DR

Project Address: 134 2D PLOVER DR	PIN #:	9869171264212D					
Property Owner: FAIKS, ROBERT	Mailing Address:	Mailing Address: 5812 S TAFT WAY LITTLETON, CO 80127					
Permit Types:							
Plumbing Electrical Mechanical	Gas						
Contractor:							
Company Name: One Hour Heating & Air Conditioning	9	Contact Name:	Brian McDonald				
Phone: (252) 441-1740			P.O. Box 1415				
		Address:					
NC State License #: 12643			Nags Head, NC 27959				
Description of Work: Replace Hvac with 1	4 seer 2.5 ton Carrier air h	andler and heat pump					
Project Cost Estimate: 6,469.00		Permit Amount: 160.00					
I hereby certify that all the information provided by me in all applicable state and local laws and regulations perta the NC General Statutes and the NC Administrative Co- Inspector) immediately by phone or in person and in wri	іліng to the work for which th de. If I resign or am no longe	is permit is issued, and that I possess a r affiliated with this project. I will notify the	all trade contractor licenses required by				
Applicant Signature Date							



Date Issued: 11/23/2020

Permit #: TR20-000297

Mechanical Trade Permit

Project Address: 118 CANVAS BACK DR	PIN #:	995011654551	
Property Owner: HENDERSON, PATRICIA	Mailing Address:	1000 QUEENE ANNE DR FREDERICKSBURG, VA 22406	
Permit Types:		11.11	
Plumbing Electrical Mechanical Gas	3		
Contractor:			
Company Name: Comfort First Heating and Cooling		Contact Name:	Joel Worsham
Phone: (919) 935-0307			7001 Lark Lane
		Address:	
NC State License #: U.21474			Sanford, NC 279932
Description of Work: Replace 4.0 Ton heat purn	p and air handler		
Project Cost Estimate: 1,472.00		Permit Amount: 160.00	
I hereby certify that all the information provided by me in supp all applicable state and local laws and regulations pertaining t the NC General Statutes and the NC Administrative Code, if I Inspector) immediately by phone or in person and in writing w	to the work for which this pe resign or am no longer affi	rmit is issued, and that I possess all liated with this project, I will notify the	trade contractor licenses required by
Applicant Signature Date			



Date Issued: Permit #: B20-000281

Building/Floodplain Development Permit

Project A	ddress:	135	SEA	BREEZ	E DR	
Property	Owner:	GRA	NT	CORNE	TIALOV	E

PIN #: 986917118685

Mailing Address: 8601 CYPRESS LAKE DR #102 RALEIGH, NC 27615

Contractor: Company Name: Sharp Homes, Inc. Phone: (252) 489-1682 Email: sharphomes@live.com		Cont	act Name: Ker Address: 501 Ma		•	Classification NC State Lice Expiration Da	nse #:	ed Contract	tor
Description of Work: Replac	e decking boards	, handr	ails, stair tread	ls					
Use: Single Family	Structure/Wor Primary Struct Pool/Hot Tub:):			essory Building			
Permit Amount: 100.00	Deck: Repair Demo:				Pie	thead (L.F.): r (L.F.): use Moving:			
Proposed Area Schedule (Sq.Ft.):	Heated:	Unl	neated:	Remode	l Heated:	Re	model Unh	eated: 500	
Proposed Finished Grade (ft.):	N/A:		House:	Pool:	Driv	eway:	Parking	g:	Other:
Floodplain Development:	Flood Zone:	AO-1*	Existing Ele	vation: 10	Structure	e Value: Store	ige Below I	Existing Ele	evation:
Vegetation Management (Sq.Ft.):	N/A: 🗸	Required Coverage: 0.0		Area	Preserved:	Requi	equired Plantings: 0.0		
Project Cost Estimate:	Build	_	Electrical	Mec	hanical	Plumbing	Gas	Other	Tota
	\$13,50	0.00	\$0.00		\$0.00	\$0.00	\$0.00	\$0.00	\$13,500.0
Permit Conditions: - Any change or changes in the plans - The erection (including excavation), 7 am and 6 pm, Monday through Sat - Repair & maintenance only - No change to coverage or footprint. - Notching of rail posts are prohibited through. - Call for final inspection.	, demolition, alter urday is prohibite	ation or d.	repair of any l	building in a	residentia	al or business di	strict other	than betwe	een the hours of
This permit is issued on the expressed applicable State and Local laws, ordina whether specified herein or not.	condition that all nces and regulati	Informa ions. Al	ation is correct Il provisions of	and all work laws and or	k will com dinances	oly with the State governing this ty	e Building (/pe of work	Code and a	ill other nplied with
Applicant Signature		Dat	æ						





Building Permit

Project Address: 111 TRINITIE DR Property Owner: ASKEW, GEORGE W			PIN #: Mailing Ad	20 B	011562790 BEVERLY HILI VPORT NEWS	06			
Contractor/Company Name: Olin F Phone: (252) 202-9879 Email: marcemurray@gmail.com	inch & Co.		contact Name: address:	116 Sandy Ridge Road I			Classification: General Contractor NC State License #: 52567 Expiration Date:		
Description of Work: Add living	pace to enlarg	e bedrooi	n, convert screene	d porch	to dining and	d entertainme	nt area an	d add elev	ator
Use: Single Family Permit Amount: \$1,072.30	Structure/Wo Primary Struc Pool/Hot Tub; Deck: Demo:	ture: 2.Ac	ldition			Accessory B Bukhead (L. Pier (L.F.): House Movie	F.):		
Proposed Area Schedule (Sq.Ft.):	Heated.	1,312	Unheated:	Re	emodel Heate	ed: 269	Re	model Uni	neated:
Proposed Finished Grade (ft.):	N/A:	ĭ	House: no change		Pool:	Driveway		Parking:	Other.
Vegetation Management (Sq.Ft.):	N/A:	Area	Preserved: not pro	ovided	Required (Coverage: 1,9	83.0 F	equired Pla	antings: 1,983.0
Project Cost Estimate:		iding ,000.00	Electrical \$14,000.00		hanical ,000.00	Plumbing \$12,000.00	Gas \$0.00	Other \$0.00	Total \$273,000.00
Permit Conditions:									
 Any change or changes in the plant The erection (including excavation) Am and 6 pm, Monday through 5 No land disturbing activity within Stabilize all disturbed areas prior Vegetation canopy at completion All principal and accessory struct Typical trade inspections required Elevation Certificate required prior Provide Final As-Built Survey wit Call for final inspection. 	n), demolition, Saturday is prof 5 feet of proper to CO. of developmer ures must mee 3. or to CO.	alteration nibited. rty line. nt and prio et MBL se	or repair of any bu or to CO must be gr backs.	iilding ir	n a residentia	l or business	district oth	er than bet	ween the hours of
This permit is issued on the express applicable State and Local laws, ord whether specified herein or not.	ed condition that inances and re-	at all infor gulations.	mation is correct a All provisions of la	nd all w ws and	ork will comp ordinances ç	oly with the Sta governing this	ate Buildin type of w	g Code and	d all other complied with
Applicant Signature	Date		_						



Date Issued: 11/24/2020

Permit #: TN20-000007

Tent Permit

Project Address: 1240 DUCK RD
Property Owner: ALLIS HOLDINGS LLC

PIN #: 985911761465

Mailing Address: P O BOX 1544

VIRGINIA BEACH, VA 23451

Applicant:

Company Name: Barr-ee Station

Phone: 252-261-1650

Address: 1240 Duck Road

Duck, NC 27949

Contractor:

Company Name: Ocean Atlantic Rentals

Phone: 252-261-4346

Contact Name: Ben Fulton

1194 Duck Road

Classification:

NC State License #:

Email: benfulton@hotmail.com

Address: Duck, NC 27949

Expiration Date:

Description of Work:

TEMPORARY TENT (11/28//2020 - 11/29/2020)

Tent Size:

800 (square feet)

Tent Dates:

11/28/2020 - 11/29/2020

Estimated Project Cost:

750

Permit Conditions:

- Temporary Tent only on dates defined above;
- No smoking signs must be posted;
- Two portable fire extinguishers required;
- 4. Tent may not be used for cooking;
- 5. All illumination and outside outlets must be GFI protected;
- Exits must posted & emergency exit lights in place;
- 7. Qualified staff on duty.

This permit is issued on the expressed condition that all information is correct and all work will comply with the State Building Code and all other applicable State and Local laws, ordinances and regulations. All provisions of laws and ordinances governing this type of work will be complied with whether specified herein or not.

Applicant Signature	Date



Date Issued: 11/24/2020

Permit #: TR20-000302

Electrical Trade Permit

Project Address: 139 SCHOONER RIDGE DR	PIN#:	986909050278
Property Owner: KAVIT, GARY S	Mailing Address:	715 KANAWAH RUN YORKTOWN, VA 23693
Permit Types:	****	
Plumbing Electrical Mechanical Gas		
Contractor:		
Company Name: Advanced Electrical		Contact Name:
Phone: (252) 573-9284		P.O. box 1359
		Address:
NC State License #: 27966-L		Kitty Hawk, NC 27949
Description of Work: Add circuit for outdoor storage	ge rooms and fridge	
Project Cost Estimate: 1,000.00		Permit Amount: 130.00
all applicable state and local laws and regulations pertaining to the	ne work for which this pern sign or am no longer affilia	and accurate to the best of my knowledge. I certify that I will comply with nit is issued, and that I possess all trade contractor licenses required by ted with this project, I will notify the local authority (Town of Duck Building
Applicant Signature Date		





Building/Floodplain Development Permit

Project Address: 111 SCARBOROUGH LN Property Owner: MARSHALL, JOHN			PIN #: 985916933372 Mailing Address: 111 SCARBOROUGH LN DUCK, NC 27949							
Contractor: Company Name: Sandmark Custom Homes, Inc. Phone: (252) 261-1123 Email: mark@outerbanksbuilders.com		Contact Name: Mark Martin Address: P.O. Box 3219 Kitty Hawk, NC 27949					Classification: General Contractor NC State License #: 75383 Expiration Date:			
Description of Work:	Install ele	evator in existir	ng shaft	inside of house	; build 6 x 8	3 bathroon	n under house i	n the existi	ng shower	location
Use: Single Family		e/Work Type: Structure: 4.Re Tub:		aintenance			Acces	sory Buildi	ing:	
Permit Amount: 135.00	Deck: Demo:						Bukhe Pier (I	ead (L.F.):		
Proposed Area Schedule	(Sq.Ft.):	Heated:	Un	heated:	Remode	l Heated:	48	Remode	el Unheated	d:
Proposed Finished Grade	e (ft.):	N/A: 🗹		House:	Pool:	Drive	eway:	Parkin	g:	Other:
Floodplain Development:		Flood Zone:	Unshad	ded X Existing	Elevation:	30 Struc	ture Value: St	orage Belo	w Existing	Elevation:
Vegetation Management	(Sq.Ft.):	N/A:	Req	uired Coverage	o: 0.0	Area	Preserved:	Requi	ired Plantin	gs: 0.0
Project Cost Estimate:		Bull \$76,00	lding	Electrical \$3,000.00	Mech	nanical	Plumbing \$5,000.00	Gas \$0.00	Other \$0.00	Tota \$84,000.00
Permit Conditions: - Any change or changes - The erection (including 7 am and 6 pm, Monday - No change to coverage - Typical trade inspection - Elevation Certificate rec - Call for final inspection.	excavation), d through Satur or footprint. is required. quired prior to	emolition, alter day is prohibite	ration o	ruction or land or repair of any b	use activitie uliding in a	s will requ residentia	ire a re-evaluat	ion and mo	adification o	of this narmit
This permit is issued on the applicable State and Local whether specified herein or	iaws, ordinand	ondition that all ces and regular	informations. A	ation is correct a	and all work aws and on	will comp	ly with the State governing this ty	e Building (ype of work	Code and a will be cor	ill other nplied with
Applicant Signature	-27		Dat	te						



B20-000289

Building/Floodplain Development Permit

Project Address: 135 4 GEORGETOWN SANDS RD

Property Owner: PRITCHARD, GLENN C

PIN #: 986917117919 Mailing Address: 72 SACHI MEWS

MINERAL, VA 23117

Contractor:

Company Name: Beach Construction Group, LLC

Phone: (252) 441 8224

Email: liz@beachpainting.com

Contact Name: Liz Brauer

Address: 1496 Colington Rd.

Kill Devil Hills, NC 27948

Classification: General Contractor

NC State License #: 77114

Expiration Date:

Description of Work:

Remove existing deck boards, har drails, stair stringers, and stair treads. Install new stair stringers per NC Building Code Install new posts, deck boards, handrails, band boards, and stair treads per NC Building Code. Lumber to be premium

treated and fasteners to be stainless steel.

Use:

Mult Family

Structure/Work Type:

Primary Structure: 4.Repair/Maintenance

Pool/Hot Tub: Deck Repair

Permit Amount: 176.05

Demo.

Accessory Building: Bukhead (L.F.):

Pier (L.F.): House Moving

Proposed Area Schedule (Sq.Ft.):

Heated

Unheated

Remodel Heated

Remodel Unheated 369

Proposed Finished Grade (ft.):

N/A:

House

Pool:

Driveway:

Parking.

Other

Floodplain Development:

Flood Zone: Unshaded X Existing Elevation: 7

Structure Value

Storage Below Existing Elevation:

Vegetation Management (Sq.Ft.):

N/A: 📆

Required Coverage: 0 0

Area Preserved:

Required Plantings: 0.0

Project Cost Estimate:

Building \$15,890.00 **Electrical** \$0.00

Mechanical

\$0.00

Plumbing \$0.00

Gas \$0.00 Other \$0.00

Total \$15,890.00

Permit Conditions:

- Any change or changes in the plans for development, construction or land use activities will require a re-evaluation and modification of this permit.

- The erection (including excavation), demolition, alteration or repair of any building in a residential or business district other than between the hours of 7 am and 6 pm, Monday through Saturday is prohibited

- Repair & maintenance only

- No change to coverage or footprint.

- Notching of rail posts are prohibited, 2-3/8" bolts required per post. All spacing of openings shall be constructed so that a 4" sphere cannot pass through.

- Call for final inspection

This permit is issued on the expressed condition that all information is correct and all work will comply with the State Building Code and all other applicable State and Local laws, ordinances and regulations. All provisions of laws and ordinances governing this type of work will be complied with whether specified herein or not.



PIN #: 986913046634

Date Issued: 11/25/2020

Permit #: TR20-000300

Mechanical Trade Permit

Project Address: 156 CHEROKEE CT

Property Owner: TATUM, ROBERT W Mailing Add	ress: 6708 ROUNDABOUT WAY CHESTERFIELD, VA 23832
Permit Types:	
Plumbing Electrical Mechanical Gas	
Contractor:	
Company Name: Surfside Heating and Air Conditioning, Inc.	Contact Name: Robert Eike
Phone: 252-261-4949	P.O. Box 3057
	Address:
NC State License #:	Kill Devil Hills, NC 27948
Description of Work: replace 2 heat pumps and 1 air handler	
Project Cost Estimate: 9,000.00	Permit Amount: 190.00
all applicable state and local laws and regulations pertaining to the work for which	on is true and accurate to the best of my knowledge. I certify that I will comply with the this permit is issued, and that I possess all trade contractor licenses required by nger affiliated with this project, I will notify the local authority (Town of Duck Building ing days.
Applicant Signature Date	