



Town of Kill Devil Hills

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

Planning and Inspection Department

BJ2020-271

PROJECT NAME: Sandy Bottom Homes New House
SITE ADDRESS: 528 Palmetto ST W KILL DEVIL HILLS

BUILDING JOINT

ISSUED: 01/05/2021

EXPIRES: 07/04/2021

APPLICANT: H & K Lots LLC
400 Da Vinci Lane
kitty hawk, nc 27949
757-448-8162

OWNER: H & K Lots LLC
400 Da Vinci Lane
kitty hawk, nc 27949
757-448-8162

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

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

License: 67524
Expires: 01/01/2021

PARCEL:

PIN: 987520906155

Parcel Number: 000726002

Address: 528 Palmetto ST W KILL DEVIL HILLS

Zoning:

Addition: VIRGINIA DARE SHORES

Block: 74 **Lot(s):** 31-40

Legal Description:

FEES:	Paid	Due	BUILDING AREA:	
Covered Porch Residential	\$152.25	\$0.00	Covered Porches/Decks	203 SQFT
Open Deck Fee	\$150.00	\$0.00	Open Decks	1 EA
Land Disturbing	\$100.00	\$0.00	Residential Unheated (.40)	131 Sq. Ft
Res. Building Permit Fee	\$1,385.15	\$0.00	Residential Heated Space	1777 sq. Ft.
T-Pole	\$50.00	\$0.00	(.75)	
Totals :	\$1,837.40	\$0.00	# of Temporary Poles	1 EA

PROJECT DESCRIPTION: New 3 Bedroom 3 Bath Single Family Dwelling

Town of Kill Devil Hills

Water Charges

PAID

JAN - 5 2021

BJ2020-271**PROJECT NAME:** Sandy Bottom Homes New House
SITE ADDRESS: 528 Palmetto ST W KILL DEVIL HILLS**BUILDING JOINT****ISSUED:** 01/05/2021**EXPIRES:** 07/04/2021

DETAILS**Permit**

Name	Value
ZONING DISTRICT	RL
FRONT YARD SETBACK	15
REAR YARD SETBACK	20% Depth >30
SIDE YARD SETBACK	6
HEALTH DEPARTMENT PERMIT #	30313
# PARKING SPACES/BEDROOM	3
CAMA PERMIT	N
CAMA EXEMPTION	N
FLOOD ZONE	X
BASE FLOOD ELEVATION	8
Proposed First Floor Elevation	6.80
SUBSTANTIAL IMPROVEMENT	NO
PURPOSE	Residential New
CONSTRUCTION TYPE	V
CONSTRUCTION COST	225000.00
LOT COVERAGE	39.70
SURVEYOR NAME AND NUMBER	Ray Meekins L-2592
ENGINEER AND LICENSE NUMBER	Mike Osteen 032628
CULVERT	N
ROLL OUT CAN	1
DRIVEWAY INVERT 2	Y
OCCUPANCY TYPE	One & Two Family Dwelling



Town of Kill Devil Hills

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Planning and Inspection Department

JAN - 6 2021

BJ2020-270

PROJECT NAME: Sandy Bottom Homes New House
SITE ADDRESS: 501 EDEN ST W Kill Devil Hills

BUILDING JOINT

ISSUED: 01/06/2021

EXPIRES: 07/05/2021

APPLICANT: MANN, Jr, EUGENE
1002 Durham St
Kill Devil Hills, NC 27948

OWNER: MANN, Jr, EUGENE
1002 Durham St
Kill Devil Hills, NC 27948

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

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

License: 67524
Expires: 01/01/2022

PARCEL:

PIN: 987520909400

Parcel Number:

Address: 501 EDEN ST W Kill Devil Hills

Zoning:

Addition:

Block:

Lot(s):

Legal Description: Lots 19 & 20, Block 74, Virginia Dare Shores

FEES:	Paid	Due	BUILDING AREA:	
Res. Building Permit Fee	\$1,377.65	\$0.00	# of Temporary Poles	1 EA
Open Deck Fee	\$150.00	\$0.00	Covered Porches/Decks	203 SQFT
T-Pole	\$50.00	\$0.00	Residential Unheated (.40)	131 Sq. Ft
Covered Porch Residential	\$152.25	\$0.00	Residential Heated Space	1767 sq. Ft.
			(.75)	
Totals :	\$1,729.90	\$0.00	Open Decks	1 EA

Town of Kill Devil Hills

PROJECT DESCRIPTION: New 3 Bedroom 3 Bath Single Family Dwelling

Water Charges

DETAILS

PAID

Water Tap #: T24362

BJ2020-270**PROJECT NAME:** Sandy Bottom Homes New House
SITE ADDRESS: 501 EDEN ST W Kill Devil Hills**BUILDING JOINT****ISSUED:** 01/06/2021**EXPIRES:** 07/05/2021**Permit**

Name	Value
ZONING DISTRICT	RL
FRONT YARD SETBACK	15
REAR YARD SETBACK	20% Depth >30
SIDE YARD SETBACK	6
STREET SIDE SETBACK	7.5
HEALTH DEPARTMENT PERMIT #	30312
# PARKING SPACES/BEDROOM	3
CAMA PERMIT	N
CAMA EXEMPTION	N
FLOOD ZONE	X
BASE FLOOD ELEVATION	8
Proposed First Floor Elevation	6.50
SUBSTANTIAL IMPROVEMENT	NO
PURPOSE	Residential New
CONSTRUCTION TYPE	V
CONSTRUCTION COST	200000.00
LOT COVERAGE	39.70
LIVING SPACE (SQFT)	1767
COVERED PORCHES/DECKS (SQFT)	203
STORAGE (SQFT)	131
OPEN DECK (SQFT)	58
TOTAL SQUARE FOOTAGE	2159
SURVEYOR NAME AND NUMBER	Ray Meekins L-2592
ENGINEER AND LICENSE NUMBER	Mike O'Steen 032628
CULVERT	N
ROLL OUT CAN	1
DRIVEWAY INVERT 2	Y
OCCUPANCY TYPE	One & Two Family Dwelling



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JAN - 7 2021

Planning and Inspection Department

BJ2020-274

PROJECT NAME: Cecil Gilbert
SITE ADDRESS: 1721 CREEK ST KILL DEVIL HILLS

BUILDING JOINT

ISSUED: 01/06/2021

EXPIRES: 07/05/2021

APPLICANT: Dream Builders
PO Box 33
Kill Devil Hills, NC 27948
252-573-8910

OWNER: Gilbert, Cecil
13845 Braddock Springs
Apt F
CENTREVILLE, VA 20121
254-339-6761

GENERAL BUILDING - UNLIMITED: Dream Builders
PO Box 33
Kill Devil Hills, NC 27948
252-573-8910

License: 75296
Expires: 01/01/2022

PARCEL:

PIN: 988410266940

Parcel Number: 002653000

Address: 1721 CREEK ST KILL DEVIL HILLS

Addition: HIGH VIEW - HEDRICKS ADD

Zoning:

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

Legal Description:

FEES:	Paid	Due	BUILDING AREA:	
Open Deck Fee	\$300.00	\$0.00	Open Decks	2 EA
T-Pole	\$50.00	\$0.00	Covered Porches/Decks	238 SQFT
Res. Building Permit Fee	\$1,618.25	\$0.00	# of Temporary Poles	1 EA
Covered Porch Residential	\$178.50	\$0.00	Residential Unheated (.40)	545 Sq. Ft
Totals :	\$2,146.75	\$0.00	Residential Heated Space	1867 sq. Ft.
			(.75)	

PROJECT DESCRIPTION: Proposed 4 bedroom single family dwelling

Town of Kill Devil Hills
Water Charges

PAID

Water Tap #: T24363

BJ2020-274**PROJECT NAME:** Cecil Gilbert**SITE ADDRESS:** 1721 CREEK ST KILL DEVIL HILLS**BUILDING JOINT****ISSUED:** 01/06/2021**EXPIRES:** 07/05/2021

DETAILS**Permit**

Name	Value
ZONING DISTRICT	RL
FRONT YARD SETBACK	30
REAR YARD SETBACK	20% Depth >30
SIDE YARD SETBACK	8
HEALTH DEPARTMENT PERMIT #	29816
# PARKING SPACES/BEDROOM	4
CAMA PERMIT	N
CAMA EXEMPTION	N
FLOOD ZONE	X
SUBSTANTIAL IMPROVEMENT	YES
PURPOSE	Residential New
CONSTRUCTION COST	355000.00
LOT COVERAGE	36.10
LIVING SPACE (SQFT)	1876
COVERED PORCHES/DECKS (SQFT)	238
GARAGE (SQFT)	545
OPEN DECK (SQFT)	248
TOTAL SQUARE FOOTAGE	2898
SURVEYOR NAME AND NUMBER	Michael Robinson
ENGINEER AND LICENSE NUMBER	Mike O'Steen 032628
ARCHITECT NAME AND LICENSE NUMBER	Michael Florez 14163
CULVERT	N
DRIVEWAY INVERT 2	N
OCCUPANCY TYPE	One & Two Family Dwelling



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JAN - 8 2021

Planning and Inspection Department

BJ2020-265	BUILDING JOINT
PROJECT NAME: Dale New House	ISSUED: 01/08/2021
SITE ADDRESS: 126 Bickett St E Kill Devil Hills	EXPIRES: 07/07/2021

APPLICANT: DALE, CHARLES D 1117 White Pine Dr CHESAPEAKE, VA 23323	OWNER: DALE, CHARLES D 1117 White Pine Dr CHESAPEAKE, VA 23323
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CONTRACTOR: FORREST SEAL LLC
PO Box 2333
KITTY HAWK, NC 27949
252-599-2521

GENERAL, UNLIMITED:	FORREST SEAL LLC PO Box 2333 KITTY HAWK, NC 27949 252-599-2521	License: 57289 Expires: 12/31/2021
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PARCEL:

PIN: 988517214265	Parcel Number: 001679000
Address: 126 Bickett St E Kill Devil Hills	
Addition: AVALON BEACH	Zoning:
Legal Description:	Block: 0 Lot(s): 22

FEES:	Paid	Due	BUILDING AREA:	
Covered Porch Residential	\$540.00	\$0.00	Residential Heated Space	2160 sq. Ft.
Open Deck Fee	\$300.00	\$0.00	(.75)	
Res. Building Permit Fee	\$1,747.60	\$0.00	Residential Unheated (.40)	319 Sq. Ft
T-Pole	\$50.00	\$0.00	Covered Porches/Decks	720 SQFT
Land Disturbing	\$100.00	\$0.00	# of Temporary Poles	1 EA
Totals :	\$2,737.60	\$0.00	Open Decks	2 EA

PROJECT DESCRIPTION: New 3 Bedroom Single Family Dwelling

Town of Kill Devil Hills
Water Charges
PAID

BJ2020-265**PROJECT NAME:** Dale New House
SITE ADDRESS: 126 Bickett St E Kill Devil Hills**BUILDING JOINT****ISSUED:** 01/08/2021**EXPIRES:** 07/07/2021

DETAILS**Permit**

Name	Value
ZONING DISTRICT	C
FRONT YARD SETBACK	15
REAR YARD SETBACK	20% Depth >30
SIDE YARD SETBACK	6
HEALTH DEPARTMENT PERMIT #	30074
# PARKING SPACES/BEDROOM	3
CAMA PERMIT	N
CAMA EXEMPTION	N
FLOOD ZONE	X
BASE FLOOD ELEVATION	8
SUBSTANTIAL IMPROVEMENT	NO
PURPOSE	Residential New
CONSTRUCTION TYPE	V
CONSTRUCTION COST	500000.00
LOT COVERAGE	38.30
LIVING SPACE (SQFT)	2346
COVERED PORCHES/DECKS (SQFT)	720
STORAGE (SQFT)	123
OPEN DECK (SQFT)	480
TOTAL SQUARE FOOTAGE	3676
SURVEYOR NAME AND NUMBER	Michael Robinson 18994
ENGINEER AND LICENSE NUMBER	Raymond Pate 13016
ARCHITECT NAME AND LICENSE NUMBER	Michael Florez 14168
CULVERT	N
DRIVEWAY INVERT 2	N
OCCUPANCY TYPE	One & Two Family Dwelling



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JAN 14 2021

Planning and Inspection Department

BJ2021-002

PROJECT NAME: Sandy Bottom Homes
SITE ADDRESS: 600 PALMETTO ST W KILL DEVIL HILLS

BUILDING JOINT

ISSUED: 01/14/2021

EXPIRES: 07/13/2021

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

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

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

License: 67524
Expires: 01/01/2022

PARCEL:

PIN: 987520904054

Parcel Number: 000775008

Address: 600 PALMETTO ST W KILL DEVIL HILLS

Zoning:

Addition: VIRGINIA DARE SH BLK 77 RECOMB

Block: 77 **Lot(s):** 8

Legal Description:

FEES:	Paid	Due	BUILDING AREA:	
Covered Porch Residential	\$63.75	\$0.00	Covered Porches/Decks	85 SQFT
Land Disturbing	\$100.00	\$0.00	Open Decks	1 EA
Open Deck Fee	\$150.00	\$0.00	Residential Unheated (.40)	147 Sq. Ft
Res. Building Permit Fee	\$1,600.80	\$0.00	Residential Heated Space	2056 sq. Ft.
T-Pole	\$50.00	\$0.00	(.75)	
Totals :	\$1,964.55	\$0.00	# of Temporary Poles	1 EA

PROJECT DESCRIPTION: Proposed 4 bedroom single family dwelling

Town of Kill Devil Hills
Water Charges

PAID

Water Tap #: 724364

BJ2021-002**PROJECT NAME:** Sandy Bottom Homes**SITE ADDRESS:** 600 PALMETTO ST W KILL DEVIL HILLS**BUILDING JOINT****ISSUED:** 01/14/2021**EXPIRES:** 07/13/2021

DETAILS**Permit**

Name	Value
ZONING DISTRICT	RL
FRONT YARD SETBACK	30
REAR YARD SETBACK	20% Depth >30
SIDE YARD SETBACK	8
STREET SIDE SETBACK	15
HEALTH DEPARTMENT PERMIT #	30311
# PARKING SPACES/BEDROOM	4
CAMA PERMIT	N
CAMA EXEMPTION	N
FLOOD ZONE	X
SUBSTANTIAL IMPROVEMENT	YES
PURPOSE	Residential New
CONSTRUCTION COST	225000.00
LOT COVERAGE	39.80
LIVING SPACE (SQFT)	2056
COVERED PORCHES/DECKS (SQFT)	85
STORAGE (SQFT)	147
OPEN DECK (SQFT)	116
TOTAL SQUARE FOOTAGE	2404
SURVEYOR NAME AND NUMBER	Seaboard Surveying
ENGINEER AND LICENSE NUMBER	Mike Osteen 032628
CULVERT	N
ROLL OUT CAN	1
DRIVEWAY INVERT 2	Y
OCCUPANCY TYPE	One & Two Family Dwelling



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JAN 22 2021

Planning and Inspection Department

BJ2021-022

PROJECT NAME: Lane Investment Properties NC, LLC
SITE ADDRESS: 704 Seventh Avenue Kill Devil Hills

BUILDING JOINT

ISSUED: 01/21/2021

EXPIRES: 01/18/2022

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

OWNER: Lane Investment Properties LLC
PO Box 329
Kill Devil Hills, NC 27948
252-441-9442

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

License: 34495
Expires: 01/01/2022

PARCEL:

PIN: 988311677204

Parcel Number:

Address: 704 Seventh Avenue Kill Devil Hills

Zoning:

Addition:

Block:

Lot(s):

Legal Description: Lot 2, Block 43, Kill Devil Hill Realty Corp. Addition Subdivision

FEES:	Paid	Due	BUILDING AREA:	
Covered Porch Residential	\$83.25	\$0.00	# of Temporary Poles	1 EA
T-Pole	\$50.00	\$0.00	Residential Heated Space	2002 sq. Ft.
Res. Building Permit Fee	\$1,605.90	\$0.00	(.75)	
			Residential Unheated (.40)	261 Sq. Ft
			Covered Porches/Decks	111 SQFT
Totals :	\$1,739.15	\$0.00		

PROJECT DESCRIPTION: Proposed 4 bedroom single family dwelling

Town of Kill Devil Hills
Water Charges

PAID

Water Tap #: T24411

BJ2021-022**PROJECT NAME:** Lane Investment Properties NC, LLC
SITE ADDRESS: 704 Seventh Avenue Kill Devil Hills**BUILDING JOINT****ISSUED:** 01/21/2021**EXPIRES:** 01/18/2022

DETAILS**Permit**

Name	Value
ZONING DISTRICT	RL
FRONT YARD SETBACK	30
REAR YARD SETBACK	20% Depth >30
SIDE YARD SETBACK	10
HEALTH DEPARTMENT PERMIT #	30412
# PARKING SPACES/BEDROOM	4
CAMA PERMIT	N
CAMA EXEMPTION	N
FLOOD ZONE	X
SUBSTANTIAL IMPROVEMENT	YES
PURPOSE	Residential New
CONSTRUCTION COST	400000.00
LOT COVERAGE	20.10
LIVING SPACE (SQFT)	2002
COVERED PORCHES/DECKS (SQFT)	111
GARAGE (SQFT)	261
TOTAL SQUARE FOOTAGE	2372
SURVEYOR NAME AND NUMBER	Seaboard Surveying
CULVERT	N
ROLL OUT CAN	1
DRIVEWAY INVERT 2	Y
OCCUPANCY TYPE	One & Two Family Dwelling



Town of Kill Devil Hills

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JAN 22 2021

Planning and Inspection Department

BJ2021-023	BUILDING JOINT
PROJECT NAME: East Coast Construction New House	ISSUED: 01/22/2021
SITE ADDRESS: 700 Seventh Ave Kill Devil Hills	EXPIRES: 07/21/2021

APPLICANT: Lane Investment Properties LLC PO Box 329 Kill Devil Hills, NC 27948 252-441-9442	OWNER: Lane Investment Properties LLC PO Box 329 Kill Devil Hills, NC 27948 252-441-9442
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CONTRACTOR: EAST COAST CONSTRUCTION GROUP
 PO Box 329
 KILL DEVIL HILLS, NC 27948
 252-202-1600

GENERAL:	EAST COAST CONSTRUCTION GROUP PO Box 329 KILL DEVIL HILLS, NC 27948 252-202-1600	License: 34495 Expires: 01/01/2022
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PARCEL:

PIN:	988311676337	Parcel Number:
Address:	700 Seventh Ave Kill Devil Hills	
Addition:	Zoning:	Lot(s):
Legal Description:	Block:	
Lot 4 Block 43 Kill Devil Realty Corp		

FEES:	Paid	Due	BUILDING AREA:	
Covered Porch Residential	\$83.25	\$0.00	Covered Porches/Decks	111 SQFT
Land Disturbing	\$100.00	\$0.00	Residential Unheated (.40)	261 Sq. Ft
Res. Building Permit Fee	\$1,605.90	\$0.00	Residential Heated Space	2002 sq. Ft.
Fence	\$100.00	\$0.00	(.75)	
T-Pole	\$50.00	\$0.00	# of Temporary Poles	1 EA
Totals :				
	\$1,939.15	\$0.00		

PROJECT DESCRIPTION: New 4 Bedroom 3.5 bath single family dwelling

Town of Kill Devil Hills

Water Charges

PAID

Water Tap #: T24412

BJ2021-023**PROJECT NAME:** East Coast Construction New House**SITE ADDRESS:** 700 Seventh Ave Kill Devil Hills**BUILDING JOINT****ISSUED:** 01/22/2021**EXPIRES:** 07/21/2021**DETAILS****Permit**

Name	Value
ZONING DISTRICT	RL
FRONT YARD SETBACK	30
REAR YARD SETBACK	20% Depth >30
SIDE YARD SETBACK	10
HEALTH DEPARTMENT PERMIT #	30413
# PARKING SPACES/BEDROOM	4
CAMA PERMIT	N
CAMA EXEMPTION	N
FLOOD ZONE	X
BASE FLOOD ELEVATION	8
SUBSTANTIAL IMPROVEMENT	NO
PURPOSE	Residential New
CONSTRUCTION COST	400000.00
LOT COVERAGE	20.10
SURVEYOR NAME AND NUMBER	Ray Meekins L-2592
CULVERT	N
ROLL OUT CAN	1
DRIVEWAY INVERT 2	Y
OCCUPANCY TYPE	One & Two Family Dwelling

REQUIRED INSPECTIONS

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

CONDITIONS



Town of Kill Devil Hills

PO BOX 1719
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Planning and Inspection Department

BJ2021-013	BUILDING JOINT
PROJECT NAME: Water Oak Residential, LLC	ISSUED: 01/26/2021
SITE ADDRESS: 710 Harmony Lane Kill Devil Hills	EXPIRES: 07/25/2021

APPLICANT: SAGA CONSTRUCTION 1314 S Croatan Hwy, Suite 301 PO Box 90 Kill Devil Hills, NC 27948 252-441-9003	OWNER: Water Oak Residential, LLC PO Box 90 Kill Devil Hills, NC 27948 252-441-9003
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GENERAL BUILDING - LIMITED: SAGA CONSTRUCTION 1314 S Croatan Hwy, Suite 301 PO Box 90 Kill Devil Hills, NC 27948 252-441-9003	License: 62306 Expires: 12/31/2021
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PARCEL:

PIN: 988413129628 **Parcel Number:**

Address: 710 Harmony Lane Kill Devil Hills

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

Legal Description: Lot 14, Phase 1, Water Oak Residential S/D

FEES:	Paid	Due	BUILDING AREA:	
Covered Porch Residential	\$126.00	\$0.00	Covered Porches/Decks	168 SQFT
Pool/Hot Tub	\$200.00	\$0.00	Residential Unheated (.40)	498 Sq. Ft
Res. Building Permit Fee	\$1,498.20	\$0.00	Residential Heated Space	1732 sq. Ft.
T-Pole	\$50.00	\$0.00	(.75)	
Totals :	\$1,874.20	\$0.00	# of Temporary Poles	1 EA

PROJECT DESCRIPTION: Proposed 4 bedroom single family dwelling with pool, pool deck and fence

Town of Kill Devil Hills
Water Charges
PAID
Water Tap #: T24367

PAID
JAN 26 2021

BJ2021-013**PROJECT NAME:** Water Oak Residential, LLC**SITE ADDRESS:** 710 Harmony Lane Kill Devil Hills**BUILDING JOINT****ISSUED:** 01/26/2021**EXPIRES:** 07/25/2021

DETAILS**Permit**

Name	Value
ZONING DISTRICT	RL
FRONT YARD SETBACK	30
REAR YARD SETBACK	20% Depth >30
SIDE YARD SETBACK	10
STREET SIDE SETBACK	15
HEALTH DEPARTMENT PERMIT #	KDHWWT
# PARKING SPACES/BEDROOM	4
CAMA PERMIT	N
CAMA EXEMPTION	N
FLOOD ZONE	X
SUBSTANTIAL IMPROVEMENT	YES
PURPOSE	Residential New
CONSTRUCTION TYPE	V
CONSTRUCTION COST	300000.00
LOT COVERAGE	39.00
LIVING SPACE (SQFT)	1732
COVERED PORCHES/DECKS (SQFT)	168
GARAGE (SQFT)	498
TOTAL SQUARE FOOTAGE	2428
SURVEYOR NAME AND NUMBER	Michael Robinson
ENGINEER AND LICENSE NUMBER	Barrett Crook 027540
CULVERT	Y
ROLL OUT CAN	1
DRIVEWAY INVERT 2	Y
OCCUPANCY TYPE	One & Two Family Dwelling



Town of Kill Devil Hills

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Planning and Inspection Department

BJ2021-006

PROJECT NAME: Fleck Pool
SITE ADDRESS: 3123 BAY DR KILL DEVIL HILLS

BUILDING JOINT

ISSUED: 01/08/2021

EXPIRES: 07/07/2021

APPLICANT: FLECK, ROBERT
4 Michael Ct
COATESVILLE, PA 19320

OWNER: FLECK, ROBERT
4 Michael Ct
COATESVILLE, PA 19320

CONTRACTOR: SOUNDSIDE POOLS
PO Box 2996
Kill Devil Hills, NC 27948
252-256-2684

GENERAL: SOUNDSIDE POOLS
PO Box 2996
Kill Devil Hills, NC 27948
252-256-2684

License: 61128
Expires: 12/31/2021

PARCEL:

PIN: 987516825566

Parcel Number: 001017000

Address: 3123 BAY DR KILL DEVIL HILLS

Addition: MOOR SHORES

Zoning:

Block: 0 **Lot(s):** 71

Legal Description:

FEES:	Paid	Due
Pool/Hot Tub	\$200.00	\$0.00
Totals :	\$200.00	\$0.00

PROJECT DESCRIPTION: add pool to rear yard



PAID
1/18/2021 P4
CK #007565

BJ2021-006

PROJECT NAME: Fleck Pool

SITE ADDRESS: 3123 BAY DR KILL DEVIL HILLS

BUILDING JOINT

ISSUED: 01/08/2021

EXPIRES: 07/07/2021

DETAILS**Permit**

Name	Value
ZONING DISTRICT	RL
FRONT YARD SETBACK	30
REAR YARD SETBACK	20% Depth >30
SIDE YARD SETBACK	8
HEALTH DEPARTMENT PERMIT #	30058
CAMA PERMIT	N
CAMA EXEMPTION	N
FLOOD ZONE	X
SUBSTANTIAL IMPROVEMENT	NO
PURPOSE	Residential Accessory
CONSTRUCTION COST	40000.00
LOT COVERAGE	34.10
SURVEYOR NAME AND NUMBER	Gloria Rogers L-3531
CULVERT	N
DRIVEWAY INVERT 2	N
OCCUPANCY TYPE	One & Two Family Dwelling

REQUIRED INSPECTIONS

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

CONDITIONS

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

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

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

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



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PAID

JAN 20 2021

Planning and Inspection Department

TOWN OF
KILL DEVIL HILLS

BJ2021-020

PROJECT NAME: Bill and Wanda Blevins
SITE ADDRESS: 309 WILBUR CT KILL DEVIL HILLS

BUILDING JOINT

ISSUED: 01/19/2021

EXPIRES: 07/18/2021

APPLICANT: Shane Clark Construction, LLC
607 Indian Dr.
Kill Devil Hills, NC 27948
252-305-2477

OWNER: Blevins, William
309 Wilbur Ct.
Kill Devil Hills, NC 27948

BUILDING: Shane Clark Construction, LLC
607 Indian Dr.
Kill Devil Hills, NC 27948
252-305-2477

License: 1234567
Expires: 01/31/2022

PARCEL:

PIN: 988405282582

Parcel Number: 024073000

Address: 309 WILBUR CT KILL DEVIL HILLS

Addition: WRIGHT'S SHORES

Zoning:

Block: 0 **Lot(s):** 162

Legal Description:

FEES:	Paid	Due
Driveway Permit Fee	\$50.00	\$0.00
Building Permit Fee - Minimum Fee	\$150.00	\$0.00
Totals :	\$200.00	\$0.00

PROJECT DESCRIPTION: Enclose under house for storage, add to parking



PAID

1/19/21

paypal

BJ2021-020**PROJECT NAME:** Bill and Wanda Blevins
SITE ADDRESS: 309 WILBUR CT KILL DEVIL HILLS**BUILDING JOINT****ISSUED:** 01/19/2021**EXPIRES:** 07/18/2021**DETAILS****Permit**

Name	Value
ZONING DISTRICT	RL
FRONT YARD SETBACK	30
REAR YARD SETBACK	20% Depth >30
SIDE YARD SETBACK	10
HEALTH DEPARTMENT PERMIT #	21958
# PARKING SPACES/BEDROOM	4
CAMA PERMIT	N
CAMA EXEMPTION	N
FLOOD ZONE	X
SUBSTANTIAL IMPROVEMENT	NO
PURPOSE	Residential Repair/Remodel
CONSTRUCTION COST	10500.00
LOT COVERAGE	27.74
SURVEYOR NAME AND NUMBER	Gloria Rogers
CULVERT	N
DRIVEWAY INVERT 2	N
OCCUPANCY TYPE	One & Two Family Dwelling

REQUIRED INSPECTIONS

Framing	Final
Rough In	Zoning Final

CONDITIONS

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

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

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

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



Town of Kill Devil Hills

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

PAD

JAN 20 2021

Planning and Inspection Department

TOWN OF
KILL DEVIL HILLS

BJ2021-025

PROJECT NAME:

SITE ADDRESS: 2032 BAY DR KILL DEVIL HILLS

BUILDING JOINT

ISSUED: 01/19/2021

EXPIRES: 07/18/2021

APPLICANT: STEVEN BARLOW
505 Calumet St.
Chesapeake, VA 23322

OWNER: STEVEN BARLOW
505 Calumet St.
Chesapeake, VA 23322

RESIDENTIAL - INTERMEDIATE: JENNINGS, DONALD
P. O. Box 1102
nags head, nc 27959
252-207-4936

License: 32637
Expires: 01/01/2022

PARCEL:

PIN: 987408984238

Parcel Number: 001998000

Address: 2032 BAY DR KILL DEVIL HILLS

Addition: AVALON BEACH ANNEX 2 & 3

Zoning:

Block: 0 **Lot(s):** 1024 & 1026

Legal Description:

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

PROJECT DESCRIPTION: Add roof over existing deck to create new covered porch. Porch requires a light.

\$ 50,000.00

BJ2021-025

PROJECT NAME:

SITE ADDRESS: 2032 BAY DR KILL DEVIL HILLS

BUILDING JOINT

ISSUED: 01/19/2021

EXPIRES: 07/18/2021

DETAILS

Permit

Name	Value
ZONING DISTRICT	RL
CAMA PERMIT	N
CAMA EXEMPTION	N
FLOOD ZONE	AE
BASE FLOOD ELEVATION	4
SUBSTANTIAL IMPROVEMENT	NO
COVERED PORCHES/DECKS (SQFT)	135
ENGINEER AND LICENSE NUMBER	Mike Osteen 032628
CULVERT	N
DRIVEWAY INVERT 2	N
OCCUPANCY TYPE	One & Two Family Dwelling

REQUIRED INSPECTIONS

Framing	Final
Rough In	

CONDITIONS

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

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



Town of Kill Devil Hills

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

PAID
JAN 14 2021
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K 11 13

Planning and Inspection Department

BJ2021-018	BUILDING JOINT
PROJECT NAME: Pasternak kitchen remodel	ISSUED: 01/14/2021
SITE ADDRESS: 302 FRESH POND DR E KILL DEVIL HILLS	EXPIRES: 07/13/2021

APPLICANT: Pasternak, Jacob
8312 Gwinnett Rd
Richmond, VA 23229

OWNER: Pasternak, Jacob
8312 Gwinnett Rd
Richmond, VA 23229

BUILDING, REMODELING: Outer Banks Cottage Renovations
P. O. Box 719
kitty hawk, nc 27949
252-207-7269

License: 79322
Expires: 01/26/2021

PARCEL:

PIN: 989313142365

Parcel Number: 004957000

Address: 302 FRESH POND DR E KILL DEVIL HILLS

Addition: LAKE DRIVE DEVELOPMENT SEC 2
Legal Description:

Zoning:
Block: 0 **Lot(s):** 31

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

PROJECT DESCRIPTION: Remodel kitchen, remove 7' wall and install (3) 1.75x14' LVL beam

PAID
CK - 1/14/21
check # 2582

BJ2021-018

PROJECT NAME: Pasternak kitchen remodel
SITE ADDRESS: 302 FRESH POND DR E KILL DEVIL HILLS

BUILDING JOINT

ISSUED: 01/14/2021

EXPIRES: 07/13/2021

DETAILS

Permit

Name	Value
ZONING DISTRICT	C
CAMA PERMIT	N
CAMA EXEMPTION	N
FLOOD ZONE	X
SUBSTANTIAL IMPROVEMENT	NO
PURPOSE	Residential Repair/Remodel
CONSTRUCTION COST	24909.00
CULVERT	N
DRIVEWAY INVERT 2	N

REQUIRED INSPECTIONS

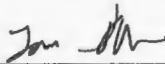
Framing	Final
Rough In	Zoning Final
Insulation	

CONDITIONS

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

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

Issued By: Charles Thuman

Contractor or Authorized Agent:  Date: 01 / 14 / 2021



Town of Kill Devil Hills

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

PAID

JAN 14 2021

Planning and Inspection Department

TOWN OF
KILL DEVIL HILLS

BJ2020-231

PROJECT NAME: Burch Storage Room
SITE ADDRESS: 102 SPORTSMAN DR W KILL DEVIL HILLS

BUILDING JOINT

ISSUED: 01/13/2021

EXPIRES: 07/12/2021

APPLICANT: JODY BURCH
5905 MAYBROOK DR
GLEN ALLEN, VA 23059
804-517-1934

OWNER: JODY BURCH
5905 MAYBROOK DR
GLEN ALLEN, VA 23059
804-517-1934

GENERAL: Self
UNKNOWN
UNKNOWN, XX 00000
000-000-0000

License: Unlicensed
Expires: 12/31/2021

PARCEL:

PIN: 988517106881

Parcel Number: 001739000

Address: 102 SPORTSMAN DR W KILL DEVIL HILLS

Addition: AVALON BEACH

Zoning:
Block: 0 **Lot(s):** 106

Legal Description:

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

PROJECT DESCRIPTION: add storage room underneath existing house

PAID
2/1/21
P.S. P.C.I.

BJ2020-231**PROJECT NAME:** Burch Storage Room**SITE ADDRESS:** 102 SPORTSMAN DR W KILL DEVIL HILLS**BUILDING JOINT****ISSUED:** 01/13/2021**EXPIRES:** 07/12/2021**DETAILS****Permit**

Name	Value
ZONING DISTRICT	RL
FRONT YARD SETBACK	15
REAR YARD SETBACK	20% Depth >30
SIDE YARD SETBACK	6
CAMA PERMIT	N
CAMA EXEMPTION	N
FLOOD ZONE	X
BASE FLOOD ELEVATION	8
Proposed First Floor Elevation	8.30
SUBSTANTIAL IMPROVEMENT	NO
PURPOSE	Residential Accessory
CONSTRUCTION COST	1200.00
LOT COVERAGE	37.70
SURVEYOR NAME AND NUMBER	Doug Styons L-3227
CULVERT	N
DRIVEWAY INVERT 2	N
OCCUPANCY TYPE	One & Two Family Dwelling

REQUIRED INSPECTIONS

Framing	Final
Rough In	Zoning Final
Floor box	

CONDITIONS

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

* A final elevation certificate will be required prior to issuance of a Certificate of Occupancy or a Certificate of Compliance in accordance with 151.41(C).

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

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



Town of Kill Devil Hills

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

PAID

JAN 14 2021

Planning and Inspection Department

TOWN OF
KILL DEVIL HILLS

BJ2021-014

PROJECT NAME: MACGREGOR FENCE, PATIO, HOT TUB
SITE ADDRESS: 1718 SOBLE DR KILL DEVIL HILLS

BUILDING JOINT

ISSUED: 01/12/2021

EXPIRES: 07/11/2021

APPLICANT: MACGREGOR, ROY
1718 SOBLE DR
Kill Devil Hills, NC 27948
617-304-3632

OWNER: MACGREGOR, ROY
1718 SOBLE DR
Kill Devil Hills, NC 27948
617-304-3632

GENERAL: Self
UNKNOWN
UNKNOWN, XX 00000
000-000-0000

License: Unlicensed
Expires: 12/31/2021

PARCEL:

PIN: 988410471222

Parcel Number: 028424000

Address: 1718 SOBLE DR KILL DEVIL HILLS

Addition: HEDRICKS ADD-PAR B CROATAN SH

Zoning:
Block: 0 **Lot(s):** 23 & PT 24

Legal Description:

FEES:	Paid	Due	BUILDING AREA:	
Pool/Hot Tub	\$200.00	\$0.00	Residential Accessory Structure	143 Sq. Ft
Accessory Structure	\$100.00	\$0.00		
Totals :	\$300.00	\$0.00		

PROJECT DESCRIPTION: CONSTRUCT FENCE ALONG REAR PROPERTY LINE, INSTALL HOT TUB AND ASSOCIATED WIRING, GRADE LEVEL WOOD PATIO

PAID
1/13/21
Pj P-1

BJ2021-014**PROJECT NAME:** MACGREGOR FENCE, PATIO, HOT TUB
SITE ADDRESS: 1718 SOBLE DR KILL DEVIL HILLS**BUILDING JOINT****ISSUED:** 01/12/2021**EXPIRES:** 07/11/2021**DETAILS****Permit**

Name	Value
ZONING DISTRICT	RL
FRONT YARD SETBACK	30
REAR YARD SETBACK	20% Depth >30
SIDE YARD SETBACK	10
CAMA PERMIT	N
CAMA EXEMPTION	N
FLOOD ZONE	X
SUBSTANTIAL IMPROVEMENT	NO
PURPOSE	Residential Accessory
CONSTRUCTION TYPE	V
CONSTRUCTION COST	4500.00
CULVERT	N
DRIVEWAY INVERT 2	N
OCCUPANCY TYPE	One & Two Family Dwelling

REQUIRED INSPECTIONS

Slab/Foundation/Piling	Final
Rough In	Zoning Final

CONDITIONS

- * This permit becomes null and void if work or construction authorized is not commenced within 6 months or if construction or work is suspended for a period of 12 months at any time after work has started.
- * Development must meet all aspects of Chapter 151 Flood Damage Prevention Ordinance including use and elevation.
- * As-built survey will be required prior to Certificate of Occupancy or Certificate of Compliance.
- * Construction must meet all aspect of Chapter 153 Zoning including lot coverage and setbacks.
- * Zoning Final Inspection is required.
- * Wood patio to be even with grade and anchored. If constructed above grade, construction shall meet the parameters of 2018 NCRBC Appendix M.



Town of Kill Devil Hills

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

PAID

JAN - 7 2021

TOWN OF
KILL DEVIL HILLS

Planning and Inspection Department

BJ2020-260

PROJECT NAME: McIssac Addition
SITE ADDRESS: 317 JEAN CT KILL DEVIL HILLS

BUILDING JOINT

ISSUED: 01/06/2021

EXPIRES: 07/05/2021

APPLICANT: McISAAC, DANIEL
317 JEAN CT
Kill Devil Hills, NC 27948

OWNER: McISAAC, DANIEL
317 JEAN CT
Kill Devil Hills, NC 27948

CONTRACTOR: COASTAL CONSTRUCTION of NC
7013 Martins Pt. Rd.
kitty hawk, nc 27949
480-5556

GENERAL, UNLIMITED: COASTAL CONSTRUCTION of NC
7013 Martins Pt. Rd.
kitty hawk, nc 27949
480-5556

License: 25529
Expires: 01/01/2022

PARCEL:

PIN: 987516924784

Parcel Number: 000978000

Address: 317 JEAN CT KILL DEVIL HILLS

Addition: MOOR SHORES

Zoning:

Block: 0 **Lot(s):** 9

Legal Description:

FEES:	Paid	Due	BUILDING AREA:	
Res. Building Permit Fee	\$387.75	\$0.00	Residential Heated Space	517 sq. Ft.
Totals :	\$387.75	\$0.00	(.75)	

PROJECT DESCRIPTION: add ground floor addition under house adding bedroom and bathroom



PAID

1/21/2021
CK# 9678

BJ2020-260**PROJECT NAME:** McIssac Addition**SITE ADDRESS:** 317 JEAN CT KILL DEVIL HILLS**BUILDING JOINT****ISSUED:** 01/06/2021**EXPIRES:** 07/05/2021

DETAILS**Permit**

Name	Value
ZONING DISTRICT	RL
FRONT YARD SETBACK	30
REAR YARD SETBACK	20% Depth >30
SIDE YARD SETBACK	10
HEALTH DEPARTMENT PERMIT #	30266
# PARKING SPACES/BEDROOM	4
CAMA PERMIT	N
CAMA EXEMPTION	N
FLOOD ZONE	X
BASE FLOOD ELEVATION	8
SUBSTANTIAL IMPROVEMENT	NO
PURPOSE	Residential Addition
CONSTRUCTION COST	48000.00
LOT COVERAGE	32.80
LIVING SPACE (SQFT)	517
TOTAL SQUARE FOOTAGE	517
SURVEYOR NAME AND NUMBER	Doug Styons L-3227
CULVERT	N
DRIVEWAY INVERT 2	N
OCCUPANCY TYPE	One & Two Family Dwelling

REQUIRED INSPECTIONS

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

CONDITIONS



Town of Kill Devil Hills

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

JAN - 8 2021

Planning and Inspection Department

BJ2021-001

PROJECT NAME: DINTIMAN ADDITION
SITE ADDRESS: 1400 FIRST ST W KILL DEVIL HILLS

BUILDING JOINT

ISSUED: 01/07/2021

EXPIRES: 07/06/2021

APPLICANT: DINTIMAN, GEORGE B
1400 W FIRST STREET
KILL DEVIL HILLS, NC 27948

OWNER: DINTIMAN, GEORGE B
1400 W FIRST STREET
KILL DEVIL HILLS, NC 27948

GENERAL BUILDING-LIMITED: SOUNDSIDE CONSTRUCTION
P. O. Box 956
Manteo, NC 27954
252-305-2526

License: 26579
Expires: 01/01/2022

PARCEL:

PIN: 988417116962

Parcel Number: 004046048

Address: 1400 FIRST ST W KILL DEVIL HILLS

Addition: WRIGHT WOODS

Zoning:

Block: 0 **Lot(s):** 48

Legal Description:

FEES:	Paid	Due	BUILDING AREA:	
Res. Building Permit Fee	\$172.11	\$0.00	Residential Heated Space	229 sq. Ft.
Totals :	\$172.11	\$0.00	(.75)	

PROJECT DESCRIPTION: ENCLOSE 229SQFT. OF COVERED PORCH TO CONVERT TO LIVING SPACE.

BJ2021-001**PROJECT NAME:** DINTIMAN ADDITION**SITE ADDRESS:** 1400 FIRST ST W KILL DEVIL HILLS**BUILDING JOINT****ISSUED:** 01/07/2021**EXPIRES:** 07/06/2021**DETAILS****Permit**

Name	Value
ZONING DISTRICT	RL
FRONT YARD SETBACK	30
REAR YARD SETBACK	CAMA
SIDE YARD SETBACK	10
CAMA PERMIT	N
CAMA EXEMPTION	N
FLOOD ZONE	AE
SUBSTANTIAL IMPROVEMENT	NO
PURPOSE	Residential Addition
CONSTRUCTION TYPE	V
CONSTRUCTION COST	15000.00
CULVERT	N
DRIVEWAY INVERT 2	N
OCCUPANCY TYPE	One & Two Family Dwelling

REQUIRED INSPECTIONS

Framing	Final
Rough In	Zoning Final
Insulation	

CONDITIONS

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



Town of Kill Devil Hills

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

JAN - 4 2021

Planning and Inspection Department

BJ2020-272

PROJECT NAME: DOWNS ADDITION AND REMODEL
SITE ADDRESS: 2025 MEMORIAL BLVD S KILL DEVIL HILLS

BUILDING JOINT

ISSUED: 12/31/2020

EXPIRES: 06/29/2021

APPLICANT: PAUL DOWNS
440 W. WILLIAM ST.
PORT CHESTER, NY 10573
914-319-1153

OWNER: PAUL DOWNS
440 W. WILLIAM ST.
PORT CHESTER, NY 10573
914-319-1153

GENERAL: ANDRUS, PAUL R.
PO Box 687
Kitty Hawk, NC 27949
252-216-8902

License: 13497
Expires:

PARCEL:

PIN: 989313138613

Parcel Number: 008520000

Address: 2025 MEMORIAL BLVD S KILL DEVIL HILLS

Addition: NAGS HEAD SHORES AMENDED SEC 4

Zoning:
Block: 4 **Lot(s):** 12 & PT 11

Legal Description:

FEES:	<u>Paid</u>	<u>Due</u>	BUILDING AREA:	
Res. Building Permit Fee	\$216.00	\$0.00	Remodel/Renovation	384 SQFT
Renovation/Remodel/Relocate	\$172.80	\$0.00	Residential Heated Space	288 sq. Ft.
Totals :	\$388.80	\$0.00	(.75)	

PROJECT DESCRIPTION: ENCLOSE 12'X24' UNDER HOME FOR BEDROOM ADDITION, REMODEL 1ST FLOOR LIVING TO REMOVE ENLARGE 1 BEDROOM AND BATHROOM, HOME REMAINING 4 BEDROOM

PAID
1/04/2021
paypal

PAID (\$56.00)
1/6/2021



Town of Kill Devil Hills

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

PAID

JAN 27 2021

Planning and Inspection Department

BP2021-016

PROJECT NAME: BRYANT PILING AND RAILING
SITE ADDRESS: 706 VA DARE TRL N KILL DEVIL HILLS

BUILDING

ISSUED: 01/26/2021

EXPIRES: 07/25/2021

APPLICANT: BRYANT, BENJAMIN
32394 SUNBEAM RD
FRANKLIN, VA 23851
757-630-5742

OWNER: BRYANT, BENJAMIN
32394 SUNBEAM RD
FRANKLIN, VA 23851
757-630-5742

GENERAL: Self
UNKNOWN
UNKNOWN, XX 00000
000-000-0000

License: Unlicensed
Expires: 12/31/2021

PARCEL:

PIN: 988419723460

Parcel Number: 003731000

Address: 706 VA DARE TRL N KILL DEVIL HILLS

Addition: KITTY HAWK SHORES - REVISED

Zoning:
Block: 21 **Lot(s):** 4

Legal Description:

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

PROJECT DESCRIPTION: REPLACE PILINGS SUPPORTING SECOND LEVEL DECK, AND RAILINGS ALONG OPEN DECK AND STAIR

PAID

JB
1/27/21 paypal



Town of Kill Devil Hills

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

PAID

JAN 22 2021

Planning and Inspection Department

BP2021-015

PROJECT NAME: Wayne Klotz
SITE ADDRESS: 1707 CREEK ST KILL DEVIL HILLS

BUILDING

ISSUED: 01/22/2021

EXPIRES: 07/21/2021

APPLICANT: D and B Bulkheads
1505 Goldie St. Unit C
Kill Devil Hills, NC 27948
252-455-6322

OWNER: Klotz, Wayne
1707 Creek St.
Kill Devil Hills, NC 27948
703-966-8220

UNLICENSED BUILDER: D and B Bulkheads
1505 Goldie St. Unit C
Kill Devil Hills, NC 27948
252-455-6322

License: Unlicensed
Expires: 02/01/2021

PARCEL:

PIN: 988410268533

Parcel Number: 002659000

Address: 1707 CREEK ST KILL DEVIL HILLS

Addition: HIGH VIEW - HEDRICKS ADD

Zoning:

Block: B **Lot(s):** 10

Legal Description:

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

PROJECT DESCRIPTION: Replace two pilings

PAID
1/22/21
Pay Per

BP2021-015**PROJECT NAME:** Wayne Klotz**SITE ADDRESS:** 1707 CREEK ST KILL DEVIL HILLS**BUILDING****ISSUED:** 01/22/2021**EXPIRES:** 07/21/2021**DETAILS****Permit**

Name	Value
CAMA PERMIT	N
CAMA EXEMPTION	N
ZONING DISTRICT	RL
PURPOSE	Residential Repair/Remodel
HEALTH DEPARTMENT PERMIT #	30432
FLOOD ZONE	X
FINAL ELEVATION CERTIFICATE	N
CONSTRUCTION COST	1600.00
OCCUPANCY TYPE	One & Two Family Dwelling

REQUIRED INSPECTIONS

Zoning Final

Slab/Foundation/Piling

Final

CONDITIONS

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

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

Issued By: Marty Shaw

Contractor or Authorized Agent: BM **Date:** 01 / 22 / 2021



Town of Kill Devil Hills

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

JAN 20 2021

Planning and Inspection Department

BP2021-010

PROJECT NAME: Davis Deck and stair rebuild
SITE ADDRESS: 118 GREENSBORO ST KILL DEVIL HILLS

BUILDING

ISSUED: 01/18/2021

EXPIRES: 07/17/2021

APPLICANT: DAVIS, RONALD
118 Greensboro Street
Kill Devil Hills, NC 27948

OWNER: DAVIS, RONALD
118 Greensboro Street
Kill Devil Hills, NC 27948

RESIDENTIAL, LIMITED: Emanuelson and Dad
PO Box 448
6705 S. Croatan Hwy.
nags head, nc 27959
252-261-2212

License: 79801
Expires: 01/01/2022

PARCEL:

PIN: 988518208180

Parcel Number: 001868000

Address: 118 GREENSBORO ST KILL DEVIL HILLS

Addition: AVALON BEACH ANNEX 1

Zoning:

Block: 0 **Lot(s):** 422

Legal Description:

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

PROJECT DESCRIPTION: Replace/rebuild new front 6x6 deck and steps.

\$ 7,257.00

PAID
1/20/2021
paypal

BP2021-010**PROJECT NAME:** Davis Deck and stair rebuild
SITE ADDRESS: 118 GREENSBORO ST KILL DEVIL HILLS**BUILDING****ISSUED:** 01/18/2021**EXPIRES:** 07/17/2021**DETAILS****Permit**

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

REQUIRED INSPECTIONS

Zoning Final

Final

CONDITIONS

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

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

Issued By: Charles Thuman

Contractor or Authorized Agent: J. Lewis Date: 01 / 20 / 2021



Town of Kill Devil Hills

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

PAID

JAN 21 2021

Planning and Inspection Department

TOWN OF
KILL DEVIL HILLS

BP2021-013

PROJECT NAME: Beverly Terretta
SITE ADDRESS: 206 SOTHEL ST E KILL DEVIL HILLS

BUILDING

ISSUED: 01/20/2021

EXPIRES: 07/19/2021

APPLICANT: Jimmy Presson
PO Box 1193
kitty hawk, nc 27949
252-489-8220

OWNER: TERRETTA, ERNEST S
P O BOX 93
HOPEWELL, VA 23860

UNLICENSED BUILDER: Jimmy Presson
PO Box 1193
kitty hawk, nc 27949
252-489-8220

License: 00000
Expires:

PARCEL:

PIN: 988513123933

Parcel Number: 002979000

Address: 206 SOTHEL ST E KILL DEVIL HILLS

Zoning:

Addition: VIRGINIA DARE SHORES

Block: 8 **Lot(s):** 23-24

Legal Description:

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

PROJECT DESCRIPTION: Replace steps within existing footprint



PAID
1/21/2021
CK # 2087

BP2021-013

PROJECT NAME: Beverly Terretta

SITE ADDRESS: 206 SOTHEL ST E KILL DEVIL HILLS

BUILDING

ISSUED: 01/20/2021

EXPIRES: 07/19/2021

DETAILS

Permit

Name	Value
CAMA PERMIT	N
CAMA EXEMPTION	N
ZONING DISTRICT	RL
PURPOSE	Residential Repair/Remodel
FRONT YARD SETBACK	15
SIDE YARD SETBACK	6
REAR YARD SETBACK	20% Depth >30
FLOOD ZONE	X
FINAL ELEVATION CERTIFICATE	N
CONSTRUCTION COST	1500.00
CONSTRUCTION TYPE	V
OCCUPANCY TYPE	One & Two Family Dwelling

REQUIRED INSPECTIONS

Zoning Final

Final

CONDITIONS

- * This permit becomes null and void if work or construction authorized is not commenced within 6 months or if construction or work is suspended for a period of 12 months at any time after work has started.
- * Construction must meet all aspect of Chapter 153 Zoning including lot coverage and setbacks.
- * Zoning Final Inspection is required.
- * Permit for steps to be replaced within existing footprint. No changes have been approved.



Town of Kill Devil Hills

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

PAID

JAN 21 2021

Planning and Inspection Department

TOWN OF
KILL DEVIL HILLS

BP2021-014

PROJECT NAME: Stewart Shed
SITE ADDRESS: 903 Swan Street KILL DEVIL HILLS

BUILDING

ISSUED: 01/21/2021

EXPIRES: 07/20/2021

APPLICANT: STEWART, JEREMIAH
903 SWAN ST
Kill Devil Hills, NC 27948
252-305-1922

OWNER: STEWART, JEREMIAH
903 SWAN ST
Kill Devil Hills, NC 27948
252-305-1922

GENERAL: Self
UNKNOWN
UNKNOWN, XX 00000
000-000-0000

License: Unlicensed
Expires: 12/31/2021

PARCEL:

PIN: 988312776265

**Parcel
Number:**

Address: 903 Swan Street KILL DEVIL HILLS

Zoning:

Addition:

Block:

Lot(s):

Legal Description: Lot 9, Block 27, Kill Devil Hill Realty Corp. S/D

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

PROJECT DESCRIPTION: Add 10'x12' shed on property per approved site plan.



PAID

1/21/2021
pay pap

BP2021-014

PROJECT NAME: Stewart Shed

SITE ADDRESS: 903 Swan Street KILL DEVIL HILLS

BUILDING

ISSUED: 01/21/2021

EXPIRES: 07/20/2021

DETAILS

Permit

Name	Value
CAMA PERMIT	N
CAMA EXEMPTION	N
ZONING DISTRICT	RL
PURPOSE	Residential Accessory
FLOOD ZONE	X
FINAL ELEVATION CERTIFICATE	N
CONSTRUCTION COST	8900.00
ACCESSORY STRUCTURE (SQFT)	120
CONSTRUCTION TYPE	V
OCCUPANCY TYPE	One & Two Family Dwelling

REQUIRED INSPECTIONS

Zoning Final

Final

CONDITIONS

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

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

Issued By: Marty Shaw

Contractor or Authorized Agent: [Signature] **Date:** 01 / 21 / 2021



Town of Kill Devil Hills

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

PAID

JAN 21 2021

Planning and Inspection Department

TOWN OF
KILL DEVIL HILLS

BP2020-287

PROJECT NAME:

SITE ADDRESS: 2019 FRANKLIN ST KILL DEVIL HILLS

BUILDING

ISSUED: 12/15/2020

EXPIRES: 06/13/2021

APPLICANT: MOORE, MALVIN E
76 COLOMBIA DR.
NEWPORT NEWS, VA23608

OWNER: MOORE, MALVIN E
76 COLOMBIA DR.
NEWPORT NEWS, VA23608

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

License: Unlicensed
Expires: 01/26/2029

PARCEL:

PIN: 988405193178

Parcel Number: 001427000

Address: 2019 FRANKLIN ST KILL DEVIL HILLS

Addition: AVALON BEACH ANNEX 2 & 3

Zoning:

Block: 0 **Lot(s):** 1292

Legal Description:

FEES:	Paid	Due	BUILDING AREA:	
Covered Porch Residential	\$156.00	\$0.00	Open Decks	2 EA
Open Deck Fee	\$300.00	\$0.00	Covered Porches/Decks	208 SQFT
Totals :	\$456.00	\$0.00		

PROJECT DESCRIPTION: Complete rebuild of side deck, rear porch and rear upper deck.

PAID
1/21/2021
paypal

BP2020-287
PROJECT NAME:
SITE ADDRESS: 2019 FRANKLIN ST KILL DEVIL HILLS

BUILDING
ISSUED: 12/15/2020
EXPIRES: 06/13/2021

DETAILS

Permit

Name	Value
CAMA PERMIT	N
CAMA EXEMPTION	N
ZONING DISTRICT	RL
PURPOSE	Residential Repair/Remodel
FLOOD ZONE	X
FINAL ELEVATION CERTIFICATE	N
CONSTRUCTION COST	24975.00
CONSTRUCTION TYPE	V

REQUIRED INSPECTIONS

Zoning Final

Final

CONDITIONS

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Issued By: Cameron Ray

Contractor or Authorized Agent: D. E. G. Date: 01 / 14 / 2021



Town of Kill Devil Hills

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

PAID

JAN 20 2021

Planning and Inspection Department

TOWN OF
KILL DEVIL HILLS

BP2021-008

PROJECT NAME: SINASKY SHEATHING, WINDOWS, AND SIDING
SITE ADDRESS: 100 BICKETT ST E KILL DEVIL HILLS

BUILDING

ISSUED: 01/14/2021

EXPIRES: 07/13/2021

APPLICANT: SINASKY, MATTHEW
984 SPEIGHT LYONS LOOP
chesapeake, va 23322
757-995-5847

OWNER: SINASKY, MATTHEW
984 SPEIGHT LYONS LOOP
chesapeake, va 23322
757-995-5847

GENERAL: Self
UNKNOWN
UNKNOWN, XX 00000
000-000-0000

License: Unlicensed
Expires: 12/31/2021

PARCEL:

PIN: 988517118037

Parcel Number: 000815000

Address: 100 BICKETT ST E KILL DEVIL HILLS

Addition: VIRGINIA DARE SHORE AMD BLK 24

Zoning:

Block: 24

Lot(s): PT 9 & 10

Legal Description:

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

PROJECT DESCRIPTION: REPLACE OLD T1-11 WITH NEW STRUCTURAL SHEATHING, INSTALL VAPOR BARRIER AND SIDING, REPLACE WINDOWS WITH FRAMING AS NEEDED



PAID

1/15/21

BP2021-008**PROJECT NAME:** SINASKY SHEATHING, WINDOWS, AND SIDING
SITE ADDRESS: 100 BICKETT ST E KILL DEVIL HILLS**BUILDING****ISSUED:** 01/14/2021**EXPIRES:** 07/13/2021

DETAILS**Permit**

Name	Value
CAMA PERMIT	N
CAMA EXEMPTION	N
ZONING DISTRICT	C
PURPOSE	Residential Repair/Remodel
FRONT YARD SETBACK	30
SIDE YARD SETBACK	10
REAR YARD SETBACK	20% Depth >30
STREET SIDE SETBACK	15
FLOOD ZONE	X
FINAL ELEVATION CERTIFICATE	N
CONSTRUCTION COST	5000.00
CONSTRUCTION TYPE	V
OCCUPANCY TYPE	One & Two Family Dwelling

REQUIRED INSPECTIONS

Framing	Final
Zoning Final	

CONDITIONS

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

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



Town of Kill Devil Hills

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

PAID

JAN 13 2021

Planning and Inspection Department

TOWN OF
KILL DEVIL HILLS

BP2021-003

PROJECT NAME: Sterner Deck and Stair replacement
SITE ADDRESS: 2039 NEW BERN ST KILL DEVIL HILLS

BUILDING

ISSUED: 01/11/2021

EXPIRES: 07/10/2021

APPLICANT: STERNER, CHRISTOPHER J
2039 NEW BERN STREET
KILL DEVIL HILLS, NC 27948

OWNER: STERNER, CHRISTOPHER J
2039 NEW BERN STREET
KILL DEVIL HILLS, NC 27948

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

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

License: 18884
Expires:

PARCEL:

PIN: 988518209437

Parcel Number: 001789000

Address: 2039 NEW BERN ST KILL DEVIL HILLS

Addition: AVALON BEACH ANNEX 1

Zoning:

Block: 0 **Lot(s):** 340

Legal Description:

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

PROJECT DESCRIPTION: replace existing stairs and deck to same footprint



PAID
Per 1/13/21
check # 7154

BP2021-003

PROJECT NAME: Sterner Deck and Stair replacement
SITE ADDRESS: 2039 NEW BERN ST KILL DEVIL HILLS

BUILDING

ISSUED: 01/11/2021

EXPIRES: 07/10/2021

DETAILS

Permit

Name	Value
CAMA PERMIT	N
CAMA EXEMPTION	N
ZONING DISTRICT	C
PURPOSE	Residential Repair/Remodel
FRONT YARD SETBACK	30
SIDE YARD SETBACK	8
REAR YARD SETBACK	20% Depth >30
FLOOD ZONE	X
FINAL ELEVATION CERTIFICATE	N
CONSTRUCTION COST	15000.00
LOT COVERAGE	57.00
SURVEYOR NAME AND NUMBER	WC Owen L-3216
OCCUPANCY TYPE	One & Two Family Dwelling

REQUIRED INSPECTIONS

Zoning Final

Final

CONDITIONS

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



Town of Kill Devil Hills

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Phone: 252-449-5318 Fax: 252-441-4102

PAID

JAN 13 2021

Planning and Inspection Department

RECEIVED
KILL DEVIL HILLS

BP2021-002	BUILDING
PROJECT NAME:	ISSUED: 01/05/2021
SITE ADDRESS: 1812 BAY DR KILL DEVIL HILLS	EXPIRES: 07/04/2021

APPLICANT: Matyiko, James 909 Montebello CIR chesapeake, va 23322 757-651-0729	OWNER: Matyiko, James 909 Montebello CIR chesapeake, va 23322 757-651-0729
--	--

GENERAL:	Self UNKNOWN UNKNOWN, XX 00000 000-000-0000	License: Unlicensed Expires: 12/31/2021
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PARCEL:

PIN: 988409060298	Parcel Number: 002542000
Address: 1812 BAY DR KILL DEVIL HILLS	Zoning:
Addition: CROATAN SHORES INC SEC 1	Block: 21 Lot(s): 8
Legal Description:	

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

PROJECT DESCRIPTION: Rebuild/relocated front steps

PAID
Pa 1/13/21
check # 6769

BP2021-002

PROJECT NAME:

SITE ADDRESS: 1812 BAY DR KILL DEVIL HILLS

BUILDING

ISSUED: 01/05/2021

EXPIRES: 07/04/2021

DETAILS

Permit

Name	Value
CAMA PERMIT	N
CAMA EXEMPTION	N
ZONING DISTRICT	RL
PURPOSE	Residential Repair/Remodel
FLOOD ZONE	AE
BASE FLOOD ELEVATION	4
FINAL ELEVATION CERTIFICATE	N
CONSTRUCTION COST	300.00
CONSTRUCTION TYPE	V
OCCUPANCY TYPE	One & Two Family Dwelling

REQUIRED INSPECTIONS

Zoning Final

Final

CONDITIONS

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Issued By: Marty Shaw

Contractor or Authorized Agent: Jim Matijko Date: 01 / 05 / 2021



Town of Kill Devil Hills

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

PAID

JAN 12 2021

TOWN OF
KILL DEVIL HILLS

Planning and Inspection Department

BP2020-292

PROJECT NAME: RECHENBACH STAIR AND LANDING
SITE ADDRESS: 111 SPORTSMAN DR E KILL DEVIL HILLS

BUILDING

ISSUED: 12/22/2020

EXPIRES: 06/20/2021

APPLICANT: RECHENBACH, RONALD C
1602 PALMYRA AVENUE
RICHMOND, VA 23227

OWNER: RECHENBACH, RONALD C
1602 PALMYRA AVENUE
RICHMOND, VA 23227

UNLICENSED - REMODELING: GARROTT, RYAN
311 SIR CHANDLER DR
Kill Devil Hills, NC 27948
252-305-7248

License: XXXXXX
Expires: 12/31/2030

PARCEL:

PIN: 988517201994

Parcel Number: 001709000

Address: 111 SPORTSMAN DR E KILL DEVIL HILLS

Addition: AVALON BEACH

Zoning:

Block: 0

Lot(s): 56

Legal Description:

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

PROJECT DESCRIPTION: REBUILD STAIR AND LANDING TO SECOND LEVEL DECK



PAID

1/8/21 pay pal

BP2020-292

PROJECT NAME: RECHENBACH STAIR AND LANDING
SITE ADDRESS: 111 SPORTSMAN DR E KILL DEVIL HILLS

BUILDING

ISSUED: 12/22/2020

EXPIRES: 06/20/2021

DETAILS

Permit

Name	Value
CAMA PERMIT	N
CAMA EXEMPTION	N
ZONING DISTRICT	C
PURPOSE	Residential Repair/Remodel
FRONT YARD SETBACK	15
SIDE YARD SETBACK	6
REAR YARD SETBACK	20% Depth >30
FLOOD ZONE	X
FINAL ELEVATION CERTIFICATE	N
CONSTRUCTION COST	21000.00
CONSTRUCTION TYPE	V
OCCUPANCY TYPE	One & Two Family Dwelling

REQUIRED INSPECTIONS

Zoning Final

Final

CONDITIONS

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



Town of Kill Devil Hills

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

PAID

JAN 12 2021

Planning and Inspection Department

BP2021-007	BUILDING
PROJECT NAME: Stone deck and step repair	ISSUED: 01/12/2021
SITE ADDRESS: 1621 SIR WALTER RD KILL DEVIL HILLS	EXPIRES: 07/11/2021

APPLICANT: STONE, WALTER H 9419 OWL TRACE DRIVE CHESTERFIELD, VA 23838-8919	OWNER: STONE, WALTER H 9419 OWL TRACE DRIVE CHESTERFIELD, VA 23838-8919
--	--

GENERAL BUILDING INTERMEDIATE: Sea Country Homes OBX, LLC 1508 Captains Ln. Kill Devil Hills, NC 27948 252-207-8338	License: 73029 Expires: 01/01/2022
---	---

PARCEL:

PIN: 988410469634	Parcel Number: 003164000
Address: 1621 SIR WALTER RD KILL DEVIL HILLS	Zoning:
Addition: W R DEATON - DELRAY BEACH	Block: C Lot(s): 27 & 1/2 28
Legal Description:	

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

PROJECT DESCRIPTION: Replace decking and handrails, remove and replace steps "as is where is", replace slider

PAID
Rc 1/12/21
Pg Pa 1

BP2021-007

PROJECT NAME: Stone deck and step repair
SITE ADDRESS: 1621 SIR WALTER RD KILL DEVIL HILLS

BUILDING

ISSUED: 01/12/2021

EXPIRES: 07/11/2021

DETAILS

Permit

Name	Value
CAMA PERMIT	N
CAMA EXEMPTION	N
ZONING DISTRICT	RL
PURPOSE	Residential Repair/Remodel
FLOOD ZONE	X
FINAL ELEVATION CERTIFICATE	N
CONSTRUCTION COST	10745.00
OCCUPANCY TYPE	One & Two Family Dwelling

REQUIRED INSPECTIONS

Zoning Final

Final

CONDITIONS

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* Zoning Final Inspection is required.

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

Issued By: Charles Thuman

Contractor or Authorized Agent: [Signature] Date: 01 / 12 / 2021



Town of Kill Devil Hills

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

PAID

JAN 12 2021

TOWN OF
KILL DEVIL HILLS

Planning and Inspection Department

BP2021-004	BUILDING
PROJECT NAME: Denis Heiry	ISSUED: 01/08/2021
SITE ADDRESS: 2022 VA DARE TRL N KILL DEVIL HILLS	EXPIRES: 07/07/2021

APPLICANT: OUTER BANKS DECK AND FENCE P.O. Box 1734 Kill Devil Hills, NC 27948 252-261-9888	OWNER: HEIRY, DENIS D 1459 Hollywood Blvd. HOLLYWOOD, FL 33020 804-677-5977
---	---

PARCEL:

PIN: 988518302138	Parcel Number: 030654000
Address: 2022 VA DARE TRL N KILL DEVIL HILLS	Zoning:
Addition:	Block: 0 Lot(s): 36 & 36A
Legal Description:	

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

PROJECT DESCRIPTION: Repair and replace deck and steps within existing footprint

PAID
1/8/21
By Pal

BP2021-004**PROJECT NAME:** Denis Heiry**SITE ADDRESS:** 2022 VA DARE TRL N KILL DEVIL HILLS**BUILDING****ISSUED:** 01/08/2021**EXPIRES:** 07/07/2021**DETAILS****Permit**

Name	Value
CAMA PERMIT	N
CAMA EXEMPTION	N
ZONING DISTRICT	C
PURPOSE	Residential Repair/Remodel
FRONT YARD SETBACK	30
SIDE YARD SETBACK	8
REAR YARD SETBACK	20% Depth >30
HEALTH DEPARTMENT PERMIT #	30362
FLOOD ZONE	X
FINAL ELEVATION CERTIFICATE	N
CONSTRUCTION COST	18000.00
SURVEYOR NAME AND NUMBER	Gloria Rogers
OCCUPANCY TYPE	One & Two Family Dwelling

REQUIRED INSPECTIONS

Zoning Final

Final

CONDITIONS

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



Town of Kill Devil Hills

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

JAN - 6 2021

Planning and Inspection Department

BP2021-001

PROJECT NAME: Myers Decking
SITE ADDRESS: 210 EIGHTH ST E KILL DEVIL HILLS

BUILDING

ISSUED: 01/04/2021

EXPIRES: 07/03/2021

APPLICANT: MYERS, JAMES C JR
2026A CHAMBERLAYNE AVE
RICHMOND, VA 23222

OWNER: MYERS, JAMES C JR
2026A CHAMBERLAYNE AVE
RICHMOND, VA 23222

BUILDING UNLIMITED: MACKO OBX CONSTRUCTION, INC
P.O. BOX 3689
Kill Devil Hills, NC 27948
252-480-6411

License: 81540
Expires: 01/01/2022

PARCEL:

PIN: 989313137425

Parcel Number: 004845000

Address: 210 EIGHTH ST E KILL DEVIL HILLS

Zoning:

Addition:

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

Legal Description:

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

PROJECT DESCRIPTION: Replace decking and handrails on both decks replace stairs if needed "as is where is"

PAID
1/6/2021 DC
CK# 001486

BP2021-001

PROJECT NAME: Myers Decking

SITE ADDRESS: 210 EIGHTH ST E KILL DEVIL HILLS

BUILDING

ISSUED: 01/04/2021

EXPIRES: 07/03/2021

DETAILS

Permit

Name	Value
CAMA PERMIT	N
CAMA EXEMPTION	N
ZONING DISTRICT	C
PURPOSE	Residential Repair/Remodel
FLOOD ZONE	X
FINAL ELEVATION CERTIFICATE	N
CONSTRUCTION COST	25000.00
OCCUPANCY TYPE	One & Two Family Dwelling

REQUIRED INSPECTIONS

Zoning Final

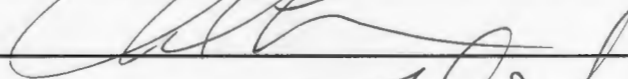
Final

CONDITIONS

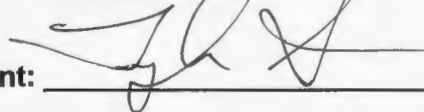
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I hereby certify that I have read and examined this application and know the same to be true and correct. All provisions of Laws and Ordinances governing this type of work will be complied with whether specified herein or not. The granting of a permit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

Issued By:



Contractor or Authorized Agent:



Date:

1/6/21



Town of Kill Devil Hills

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

PAID

JAN - 5 2021

Planning and Inspection Department

BJ2021-003

PROJECT NAME: Gray Bath Remodel
SITE ADDRESS: 322 PINE GROVE TRL KILL DEVIL HILLS

BUILDING JOINT

ISSUED: 01/04/2021

EXPIRES: 07/03/2021

APPLICANT: GRAY, JANE ELLEN
P.O. BOX 999
NAGS HEAD, NC 27959

OWNER: GRAY, JANE ELLEN
P.O. BOX 999
NAGS HEAD, NC 27959

GENERAL: Self
UNKNOWN
UNKNOWN, XX 00000
000-000-0000

License: Unlicensed
Expires: 12/31/2021

PARCEL:

PIN: 988316842333

Parcel Number: 027000010

Address: 322 PINE GROVE TRL KILL DEVIL HILLS

Addition: WHISPERING PINES SEC 2 & 3

Zoning:

Block: D **Lot(s):** 10 & 11

Legal Description:

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

PROJECT DESCRIPTION: Remodel bathroom with walk-in bathtub.

BJ2021-003**PROJECT NAME:** Gray Bath Remodel**SITE ADDRESS:** 322 PINE GROVE TRL KILL DEVIL HILLS**BUILDING JOINT****ISSUED:** 01/04/2021**EXPIRES:** 07/03/2021**DETAILS****Permit**

Name	Value
ZONING DISTRICT	RL
FRONT YARD SETBACK	30
REAR YARD SETBACK	20% Depth >30
SIDE YARD SETBACK	15
CAMA PERMIT	N
CAMA EXEMPTION	N
FLOOD ZONE	X
SUBSTANTIAL IMPROVEMENT	NO
PURPOSE	Residential Repair/Remodel
CONSTRUCTION COST	17000.00
CULVERT	N
DRIVEWAY INVERT 2	N
OCCUPANCY TYPE	One & Two Family Dwelling

REQUIRED INSPECTIONS

Rough In

Final

CONDITIONS

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

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



Town of Kill Devil Hills

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

PAID

JAN - 4 2021

Planning and Inspection Department

TC 1107
KILL DEVIL HILLS

BP2020-294

PROJECT NAME: David Byrne
SITE ADDRESS: 2029 YORKTOWN KILL DEVIL HILLS

BUILDING

ISSUED: 12/31/2020

EXPIRES: 06/29/2021

APPLICANT: Mark Edwards
1400 Harrington Ave.
Kill Devil Hills, NC 27948
252-996-0099

OWNER: BYRNE, DAVID & DEBORAH
4122 HILLCREST RD
RICHMOND, VA 23225
804-347-2980

BUILDING: Mark Edwards
1400 Harrington Ave.
Kill Devil Hills, NC 27948
252-996-0099

License: 1234567
Expires: 12/31/2021

PARCEL:

PIN: 988405190228

Parcel Number: 001466000

Address: 2029 YORKTOWN KILL DEVIL HILLS

Addition: AVALON BEACH ANNEX 2 & 3

Zoning:

Block: 0 **Lot(s):** 1338

Legal Description:

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

PROJECT DESCRIPTION: Replace steps, decking, railings

PAID
1/4/2021 De
CK #1592

BP2020-294**PROJECT NAME:** David Byrne**SITE ADDRESS:** 2029 YORKTOWN KILL DEVIL HILLS**BUILDING****ISSUED:** 12/31/2020**EXPIRES:** 06/29/2021**DETAILS****Permit**

Name	Value
CAMA PERMIT	N
CAMA EXEMPTION	N
ZONING DISTRICT	RL
PURPOSE	Residential Repair/Remodel
FRONT YARD SETBACK	15
SIDE YARD SETBACK	6
FLOOD ZONE	X
FINAL ELEVATION CERTIFICATE	N
CONSTRUCTION COST	4000.00
CONSTRUCTION TYPE	V
OCCUPANCY TYPE	One & Two Family Dwelling

REQUIRED INSPECTIONS

Zoning Final

Final

CONDITIONS

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

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

Issued By: Marty Shaw

Contractor or Authorized Agent: MTE **Date:** 12 / 31 / 2020



Town of Kill Devil Hills

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

JAN 13 2021

Planning and Inspection Department

OP2021-003

PROJECT NAME: Nick and Aleka Bakopoulos
SITE ADDRESS: 506 West Eden Street Kill Devil Hills

OCCUPANCY

ISSUED: 01/13/2021

EXPIRES:

PARENT PERMIT #: BJ2020-144

APPLICANT: BAKOPOULOS, NICHOLAS
107 ST CLAIR RD
KILL DEVIL HILLS, NC 27948

OWNER: BAKOPOULOS, NICHOLAS
107 ST CLAIR RD
KILL DEVIL HILLS, NC 27948

CONTRACTOR: Hughes, Ryland James
3945 Pineway Drive
kitty hawk, nc 27949
252-202-4111

BUILDING LIMITED: Hughes, Ryland James
3945 Pineway Drive
kitty hawk, nc 27949
252-202-4111

License: 76503
Expires: 01/01/2022

PARCEL:

PIN: 987520907581

Parcel Number:

Address: 506 West Eden Street Kill Devil Hills

Zoning:

Addition:

Block:

Lot(s):

Legal Description: Lots 23 and 24, Block 73, Virginia Dare Shores

FEES:	Paid	Due
Certificate of Occupancy Fee	\$50.00	\$0.00
Residential Trash Can	\$106.75	\$0.00
Totals :	\$156.75	\$0.00

PROJECT DESCRIPTION: Proposed 3 bedroom single family dwelling

JAN 13 2021

OP2021-003

PROJECT NAME: Nick and Aleka Bakopoulos
SITE ADDRESS: 506 West Eden Street Kill Devil Hills

OCCUPANCY

ISSUED: 01/13/2021

EXPIRES:

DETAILS

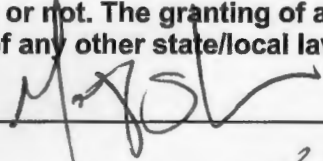
Permit

Name	Value
# OF TRASH CANS	1
PURPOSE	Residential New
ZONING DISTRICT	RL
FLOOD ZONE	X
OCCUPANCY TYPE	One & Two Family Dwelling

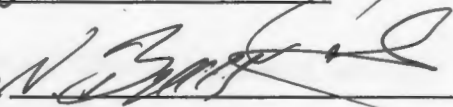
CONDITIONS

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

Issued By: _____



Contractor or Authorized Agent: _____



Date: _____

1-13-21



Town of Kill Devil Hills

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

JAN 13 2021

PAID

Planning and Inspection Department

OP2021-002	OCCUPANCY
PROJECT NAME: East Coast Construction New SFD	ISSUED: 01/13/2021
SITE ADDRESS: 803 Sixth Avenue Kill Devil Hills	EXPIRES:

PARENT PERMIT #: BJ2020-176

APPLICANT: Lane Investment Properties NC, LLC PO Box 329 Kill Devil Hills, NC 27948 252-202-1600	OWNER: Lane Investment Properties NC, LLC PO Box 329 Kill Devil Hills, NC 27948 252-202-1600
--	--

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

GENERAL:	EAST COAST CONSTRUCTION GROUP PO Box 329 KILL DEVIL HILLS, NC 27948 252-202-1600	License: 34495 Expires: 01/01/2022
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PARCEL:			
PIN: 988311772319	Parcel Number:		
Address: 803 Sixth Avenue Kill Devil Hills		Zoning:	
Addition:		Block:	Lot(s):
Legal Description: Lot 9, Block 32 Kill Devil Hills Realty Corp Addition			

FEES:	Paid	Due
Certificate of Occupancy Fee	\$50.00	\$0.00
Residential Trash Can	\$106.75	\$0.00
Totals :	\$156.75	\$0.00

PROJECT DESCRIPTION: New 4 Bedroom 3.5 Bath Single family dwelling with fence

OP2021-002

PROJECT NAME: East Coast Construction New SFD
SITE ADDRESS: 803 Sixth Avenue Kill Devil Hills

OCCUPANCY

ISSUED: 01/13/2021

EXPIRES:

DETAILS

Permit

Name	Value
# OF TRASH CANS	1
PURPOSE	Residential New
ZONING DISTRICT	RL
FLOOD ZONE	X
OCCUPANCY TYPE	One & Two Family Dwelling

CONDITIONS

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

Issued By: _____

Contractor or Authorized Agent: _____

Date: 1-13-2021



Town of Kill Devil Hills

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

DEC 31 2020

Planning and Inspection Department

OP2020-084	OCCUPANCY
PROJECT NAME: OBX Cottages LLC	ISSUED: 12/30/2020
SITE ADDRESS: 619 W. Palmetto Street Kill Devil Hills	EXPIRES:

PARENT PERMIT #: BJ2020-143

APPLICANT: FRANK SOLES/SANDY BOTTOM HOMES 400 DaVinci Lane kitty hawk, nc 27949 757-448-8162	OWNER: OBX COTTAGES LLC 200 EAST BLACKMAN ST nags head, nc 27959 252-207-5475
--	---

CONTRACTOR: FRANK SOLES/SANDY BOTTOM HOMES 400 DaVinci Lane kitty hawk, nc 27949 757-448-8162	License: LEGACY UNKNOWN Expires: 12/31/2020
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CONTRACTOR: FRANK SOLES/SANDY BOTTOM HOMES 400 DaVinci Lane kitty hawk, nc 27949 757-448-8162	License: LEGACY UNKNOWN Expires: 12/31/2020
---	--

PARCEL:

PIN: 987408993707 **Parcel Number:**

Address: 619 W. Palmetto Street Kill Devil Hills

Addition: **Zoning:**

Legal Description: Lots 7&8, Block 76, Dare Shores Subdivision **Block:** **Lot(s):**

FEES:	<u>Paid</u>	<u>Due</u>
Certificate of Occupancy Fee	\$50.00	\$0.00
Residential Trash Can	\$106.75	\$0.00
Totals :	\$156.75	\$0.00

PROJECT DESCRIPTION: Proposed 4 bedroom single family dwelling

OP2020-084

PROJECT NAME: OBX Cottages LLC
SITE ADDRESS: 619 W. Palmetto Street Kill Devil Hills

OCCUPANCY

ISSUED: 12/30/2020

EXPIRES:

DETAILS

Permit

Name	Value
# OF TRASH CANS	1
PURPOSE	Residential New
ZONING DISTRICT	RL
FLOOD ZONE	X
OCCUPANCY TYPE	One & Two Family Dwelling

CONDITIONS

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

Issued By: Marty Shaw

Contractor or Authorized Agent: Zh Sl Date: 12-31-2020



Town of Kill Devil Hills

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

Planning and Inspection Department

DW2021-001	DRIVEWAY
PROJECT NAME: Conner Driveway	ISSUED: 01/08/2021
SITE ADDRESS: 705 SPORTSMAN DR W KILL DEVIL HILLS	EXPIRES: 07/07/2021

APPLICANT: CONNER, BRENDA 1881 Ashburn Rd SUFFOLK, VA 23434	OWNER: CONNER, BRENDA 1881 Ashburn Rd SUFFOLK, VA 23434
--	--

CONTRACTOR: DAVIS, JONATHAN
2921 Pinewood Dr
VIRGINIA BEACH, VA 23452
757-779-1655

UNLICENSED BUILDER:	DAVIS, JONATHAN 2921 Pinewood Dr VIRGINIA BEACH, VA 23452 757-779-1655	License: 12345 Expires:
----------------------------	---	--

PARCEL:

PIN: 988405094903	Parcel Number: 001575000
Address: 705 SPORTSMAN DR W KILL DEVIL HILLS	Zoning:
Addition: AVALON BEACH	Block: 0 Lot(s): 217
Legal Description:	

FEES:	Paid	Due
Driveway Permit Fee	\$50.00	\$0.00
Totals :	\$50.00	\$0.00

PROJECT DESCRIPTION: replace exsiting driveway to same footprint

PAID
1/8/21
Mary Gram # 20973609798



Town of Kill Devil Hills

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

JAN 18 2021

Planning and Inspection Department

OP2021-004

PROJECT NAME: Patricia Young
SITE ADDRESS: 221 Gunas Drive Kill Devil Hills

OCCUPANCY

ISSUED: 01/18/2021

EXPIRES:

PARENT PERMIT #: BJ2020-158

APPLICANT: C & T CONTRACTING
1700 Bell Ave.
Kill Devil Hills, NC 27948
252-202-9943

OWNER: Young, Patricia
116 Discovery Lane
WILLIAMSBURG, VA 23185
757-253-1522

BUILDING LIMITED: C & T CONTRACTING
1700 Bell Ave.
Kill Devil Hills, NC 27948
252-202-9943

License: 45367
Expires: 01/01/2022

BUILDING LIMITED: C & T CONTRACTING
1700 Bell Ave.
Kill Devil Hills, NC 27948
252-202-9943

License: 45367
Expires: 01/01/2022

PARCEL:

PIN: 988316937862

**Parcel
Number:**

Address: 221 Gunas Drive Kill Devil Hills

Zoning:

Addition:

Block:

Lot(s):

Legal Description: Lot 11, Block D, Ocean Acres, Tract 3, Section 1

FEES:	Paid	Due
Certificate of Occupancy Fee	\$50.00	\$0.00
Residential Trash Can	\$106.75	\$0.00
Totals :	\$156.75	\$0.00

PROJECT DESCRIPTION: Proposed 3 bedroom single family

OP2021-004

PROJECT NAME: Patricia Young

SITE ADDRESS: 221 Gunas Drive Kill Devil Hills

OCCUPANCY

ISSUED: 01/18/2021

EXPIRES:

DETAILS

Permit

Name	Value
# OF TRASH CANS	1
PURPOSE	Residential New
ZONING DISTRICT	RL
FLOOD ZONE	X
OCCUPANCY TYPE	One & Two Family Dwelling

CONDITIONS

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

Issued By: _____

Contractor or Authorized Agent: _____ Date: 1/18/21



Town of Kill Devil Hills

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

Comm

Planning and Inspection Department

BP2021-005

PROJECT NAME: JACK BROWNS STAGE
SITE ADDRESS: 800 VA DARE TRL S. KILL DEVIL HILLS

BUILDING

ISSUED: 01/08/2021

EXPIRES: 07/07/2021

APPLICANT: BJM
252 Woodland Dr.
Kitty Hawk, NC 00000

OWNER: BJM
252 Woodland Dr.
Kitty Hawk, NC 00000

GENERAL BUILDING INTERMEDIATE: Sea Country Homes OBX, LLC
1508 Captains Ln.
Kill Devil Hills, NC 27948
252-207-8338

License: 73029
Expires: 01/01/2022

PARCEL:

PIN: 988308898018

Parcel Number: 008132000

Address: 800 VA DARE TRL S. KILL DEVIL HILLS

Addition: SUBDIVISION - NONE

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

Legal Description:

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

PROJECT DESCRIPTION: REMOVE 3 ROOF STRUCTURES FROM REAR YARD, CONSTRUCT NEW ROOF STRUCTURE PER ENGINEERED PLAN, STAGE SUPPORTED BY GRADE BELOW PER ENGINEER

PAID

JAN - 8 2021

BP2021-005**PROJECT NAME:** JACK BROWNS STAGE**SITE ADDRESS:** 800 VA DARE TRL S. KILL DEVIL HILLS**BUILDING****ISSUED:** 01/08/2021**EXPIRES:** 07/07/2021**DETAILS****Permit**

Name	Value
CAMA PERMIT	N
CAMA EXEMPTION	N
ZONING DISTRICT	C
PURPOSE	Commercial Accessory
FRONT YARD SETBACK	30
SIDE YARD SETBACK	10
REAR YARD SETBACK	30
STREET SIDE SETBACK	15
FLOOD ZONE	X
FINAL ELEVATION CERTIFICATE	N
CONSTRUCTION COST	15000.00
CONSTRUCTION TYPE	V
OCCUPANCY TYPE	Assembly

REQUIRED INSPECTIONS

Zoning Final

Slab/Foundation/Piling

Final

CONDITIONS

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

* Zoning Final Inspection is required.

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

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



Town of Kill Devil Hills

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

A

Planning and Inspection Department

BP2021-009	BUILDING
PROJECT NAME:	ISSUED: 01/14/2021
SITE ADDRESS: 201 PINE GROVE TRL KILL DEVIL HILLS	EXPIRES: 07/13/2021

APPLICANT: McVeary, Mike 2508 S Va Dare Trl nags head, nc 27959 252-573-8644	OWNER: McVeary, Mike 2508 S Va Dare Trl nags head, nc 27959 252-573-8644
--	--

BUILDING LIMITED:	McVeary, Mike 2508 S Va Dare Trail nags head, nc 27959 252-573-8644	License: 49911 Expires: 04/03/2021
--------------------------	--	---

PARCEL:

PIN: 988312954127	Parcel Number: 005132000
Address: 201 PINE GROVE TRL KILL DEVIL HILLS	Zoning:
Addition: WHISPERING PINES SEC 1	Block: B Lot(s): 21
Legal Description:	

FEES:	Paid	Due
Accessory Residential (MIN)	\$100.00	\$0.00
Accessory Residential (MIN)	\$100.00	\$0.00
Accessory Residential (MIN)	\$100.00	\$0.00
Fence	\$100.00	\$0.00
Totals :	\$400.00	\$0.00

PROJECT DESCRIPTION: Install 3 ground level patios and fence

PAID
1/18/2021
CK# 1265

BP2021-009

PROJECT NAME:

SITE ADDRESS: 201 PINE GROVE TRL KILL DEVIL HILLS

BUILDING

ISSUED: 01/14/2021

EXPIRES: 07/13/2021

DETAILS

Permit

Name	Value
CAMA PERMIT	N
CAMA EXEMPTION	N
ZONING DISTRICT	RL
PURPOSE	Residential Accessory
FLOOD ZONE	X
FINAL ELEVATION CERTIFICATE	N
CONSTRUCTION COST	1500.00

REQUIRED INSPECTIONS

Zoning Final

Final

CONDITIONS

- * This permit becomes null and void if work or construction authorized is not commenced within 6 months or if construction or work is suspended for a period of 12 months at any time after work has started.
- * As-built survey will be required prior to Certificate of Occupancy or Certificate of Compliance.
- * Construction must meet all aspect of Chapter 153 Zoning including lot coverage and setbacks.
- * Min 4 ground anchors required on each patio

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

Issued By: Charles Thuman

Contractor or Authorized Agent: *Mel Miller* **Date:** 1/17/21



Town of Kill Devil Hills

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

Planning and Inspection Department

MC2021-015

PROJECT NAME: PAULS HVAC
SITE ADDRESS: 429 WILKINSON ST W KILL DEVIL HILLS

MECHANICAL

ISSUED: 01/27/2021

EXPIRES: 07/26/2021

APPLICANT: JAMIE & MEGHANN PAULS
429 W. Wilkinson St.
Kill Devil Hills, NC 27949

OWNER: JAMIE & MEGHANN PAULS
429 W. Wilkinson St.
Kill Devil Hills, NC 27949

MECHANICAL: DELTA T
162 Yaupon Tr.
Kitty Hawk, NC 27949
252-261-0404

License: 23299
Expires: 12/31/2021

PARCEL:

PIN: 987520921194

Parcel Number: 000673000

Address: 429 WILKINSON ST W KILL DEVIL HILLS

Addition: VIRGINIA DARE SHORES

Zoning:

Block: 58 **Lot(s):** 6-8

Legal Description:

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

PROJECT DESCRIPTION: HVAC CHANGE OUT 2 TON/14 SEER

PAID

1/29/21 *DJ*
CK #9649

MC2021-015

PROJECT NAME: PAULS HVAC

SITE ADDRESS: 429 WILKINSON ST W KILL DEVIL HILLS

MECHANICAL

ISSUED: 01/27/2021

EXPIRES: 07/26/2021

DETAILS**Permit**

Name	Value
PURPOSE	Residential Repair/Remodel
CONSTRUCTION COST	3000.00
CONSTRUCTION TYPE	V
FLOOD ZONE	X
NATURAL GAS SIGNOFF	N
OCCUPANCY TYPE	One & Two Family Dwelling

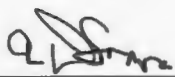
REQUIRED INSPECTIONS

Final

CONDITIONS

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

Issued By: Marty ShawContractor or Authorized Agent:  Date: 01 / 27 / 2021



Town of Kill Devil Hills

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

Planning and Inspection Department

MC2021-017	MECHANICAL
PROJECT NAME:	ISSUED: 01/27/2021
SITE ADDRESS: 3121 SEAGATE CT KILL DEVIL HILLS	EXPIRES: 07/26/2021


APPLICANT: DAGG, GEORGE KYLE 14924 BLACKBURN ROAD WOODBIDGE, VA 22191	OWNER: DAGG, GEORGE KYLE 14924 BLACKBURN ROAD WOODBIDGE, VA 22191
--	--

MECHANICAL:	DELTA T 162 Yaupon Tr. Kitty Hawk, NC 27949 252-261-0404	License: 23299 Expires: 12/31/2021
--------------------	---	---

PARCEL:			
PIN:	988513130873	Parcel Number:	000967000
Address:	3121 SEAGATE CT KILL DEVIL HILLS		
Addition:		Zoning:	
Legal Description:		Block:	0 Lot(s): 13

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

PROJECT DESCRIPTION: HVAC replacement

 **PAID**
1/29/21 DK
CK #9649

MC2021-017

PROJECT NAME:

SITE ADDRESS: 3121 SEAGATE CT KILL DEVIL HILLS

MECHANICAL

ISSUED: 01/27/2021

EXPIRES: 07/26/2021

DETAILS

Permit

Name	Value
PURPOSE	Residential Repair/Remodel
CONSTRUCTION COST	3000.00
CONSTRUCTION TYPE	V
FLOOD ZONE	X
NATURAL GAS SIGNOFF	N
OCCUPANCY TYPE	One & Two Family Dwelling

REQUIRED INSPECTIONS

Final

CONDITIONS

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

Issued By: Marty Shaw

Contractor or Authorized Agent: [Signature] **Date:** 01 / 27 / 2021



Town of Kill Devil Hills

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

PAID

JAN 27 2021

Planning and Inspection Department

RECEIVED
KILL DEVIL HILLS

MC2021-014

PROJECT NAME: Todd Burns
SITE ADDRESS: 1633 SIR WALTER RD KILL DEVIL HILLS

MECHANICAL

ISSUED: 01/26/2021

EXPIRES: 07/25/2021

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

OWNER: MR. TODD BURNS
1633 Sir Walter Rd
Kill Devil Hills, NC 00000

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

License: 13056
Expires: 12/31/2021

PARCEL:

PIN: 988410468816

Parcel Number: 003160000

Address: 1633 SIR WALTER RD KILL DEVIL HILLS

Addition: W R DEATON - DELRAY BEACH

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

Legal Description:

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

PROJECT DESCRIPTION: HVAC

PAID
1/26/21
By Paul

MC2021-014

PROJECT NAME: Todd Burns

SITE ADDRESS: 1633 SIR WALTER RD KILL DEVIL HILLS

MECHANICAL

ISSUED: 01/26/2021

EXPIRES: 07/25/2021

DETAILS

Permit

Name	Value
PURPOSE	Residential Repair/Remodel
CONSTRUCTION COST	6970.00
FLOOD ZONE	X
NATURAL GAS SIGNOFF	N
OCCUPANCY TYPE	One & Two Family Dwelling

REQUIRED INSPECTIONS

Final

CONDITIONS

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

Issued By: Marty Shaw

Contractor or Authorized Agent: Jaclyn Slater Date: 01 / 26 / 2021

PAD



Town of Kill Devil Hills

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

JAN 22 2021

T 10:07
K 10:07

Planning and Inspection Department

MC2021-012	MECHANICAL
PROJECT NAME:	ISSUED: 01/22/2021
SITE ADDRESS: 1501 WRIGHTSVILLE BLVD KILL DEVIL HILLS	EXPIRES: 07/21/2021

APPLICANT: GRANT, ARTHUR V 10866 BURR OAK WAY BURKE, VA 22015	OWNER: GRANT, ARTHUR V 10866 BURR OAK WAY BURKE, VA 22015
--	--

MECHANICAL:	ALL SEASONS HEATING & COOLING P.O. Box 244 Point Harbor, NC 27964 491-9232	License: 19091 Expires: 12/31/2021
--------------------	---	---

PARCEL:

PIN: 989309053658	Parcel Number: 004736018
Address: 1501 WRIGHTSVILLE BLVD KILL DEVIL HILLS	Zoning:
Addition: KILL DEVIL BEACH SEC 1 REVISED	Block: H Lot(s): 18
Legal Description:	

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

PROJECT DESCRIPTION: HVAC replacement

PAID
1/22/21
Res Per

MC2021-012

PROJECT NAME:

SITE ADDRESS: 1501 WRIGHTSVILLE BLVD KILL DEVIL HILLS

MECHANICAL

ISSUED: 01/22/2021

EXPIRES: 07/21/2021

DETAILS

Permit

Name	Value
PURPOSE	Residential Repair/Remodel
CONSTRUCTION COST	6580.00
CONSTRUCTION TYPE	V
FLOOD ZONE	X
NATURAL GAS SIGNOFF	N
OCCUPANCY TYPE	One & Two Family Dwelling

REQUIRED INSPECTIONS

Final

CONDITIONS

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Issued By: Marty Shaw

Contractor or Authorized Agent: Joe Sip Date: 01 / 22 / 2021



Town of Kill Devil Hills

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

PAID

JAN 20 2021

Planning and Inspection Department

TOWN OF
KILL DEVIL HILLS

MC2021-011

PROJECT NAME: Esinhart HVAC
SITE ADDRESS: 409 HOLLY ST W KILL DEVIL HILLS

MECHANICAL

ISSUED: 01/20/2021

EXPIRES: 07/19/2021

APPLICANT: Esinhart, Brad
409 WEST Holly ST
Kill Devil Hills, NC 27948
252-473-0117

OWNER: Esinhart, Brad
409 WEST Holly ST
Kill Devil Hills, NC 27948
252-473-0117

CONTRACTOR: One Hour Heating and Air Conditioning
701 Fresh Pond West
Kill Devil Hills, NC 27948
441-1740

H3, CLASS 1: One Hour Heating and Air Conditioning
701 Fresh Pond West
Kill Devil Hills, NC 27948
441-1740

License: 12643
Expires: 12/31/2021

PARCEL:

PIN: 988312857194

Parcel Number: 008217000

Address: 409 HOLLY ST W KILL DEVIL HILLS

Addition: KILL DEVIL BEACH EXTENDED

Zoning:
Block: X **Lot(s):** 4-5

Legal Description:

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

PROJECT DESCRIPTION: hvac changeout

PAID
1/20/2021 DL
CK# 1903

MC2021-011

PROJECT NAME: Esinhart HVAC

SITE ADDRESS: 409 HOLLY ST W KILL DEVIL HILLS

MECHANICAL

ISSUED: 01/20/2021

EXPIRES: 07/19/2021

DETAILS

Permit

Name	Value
PURPOSE	Residential Repair/Remodel
CONSTRUCTION COST	6061.00
FLOOD ZONE	X
NATURAL GAS SIGNOFF	N
OCCUPANCY TYPE	One & Two Family Dwelling

REQUIRED INSPECTIONS

Final

CONDITIONS

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Issued By: Marty Shaw

Contractor or Authorized Agent: Tom McDonald Date: 01 / 20 / 2021



Town of Kill Devil Hills

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

JAN 13 2021

Planning and Inspection Department

MC2021-006

PROJECT NAME: BARBIE MINI SPLIT
SITE ADDRESS: 305 FOURTH ST W KILL DEVIL HILLS

MECHANICAL

ISSUED: 01/06/2021

EXPIRES: 07/05/2021

APPLICANT: JAMES & DIANE BARBIE
1806 Riggers Station Dr.
COLONIAL HEIGHTS, VA 23834

OWNER: JAMES & DIANE BARBIE
1806 Riggers Station Dr.
COLONIAL HEIGHTS, VA 23834

MECHANICAL H-3, CLASS 1: Anderson Heating and Cooling Co., LLC
PO Box 396
Kitty Hawk, NC 27949
252-619-3105

License: 31438
Expires: 12/31/2021

PARCEL:

PIN: 988405284074

Parcel Number: 007720000

Address: 305 FOURTH ST W KILL DEVIL HILLS

Addition: WRIGHT'S SHORES SEC 2

Zoning:
Block: 0 **Lot(s):** 7

Legal Description:

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

PROJECT DESCRIPTION: INSTALL MINISPLIT SYSTEM

PAID
20
1/12/21

MC2021-006

PROJECT NAME: BARBIE MINI SPLIT

SITE ADDRESS: 305 FOURTH ST W KILL DEVIL HILLS

MECHANICAL

ISSUED: 01/06/2021

EXPIRES: 07/05/2021

DETAILS

Permit

Name	Value
PURPOSE	Residential Repair/Remodel
CONSTRUCTION COST	5959.00
CONSTRUCTION TYPE	V
FLOOD ZONE	X
NATURAL GAS SIGNOFF	N
OCCUPANCY TYPE	One & Two Family Dwelling

REQUIRED INSPECTIONS

Final

CONDITIONS

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Issued By: Jordan Blythe

Contractor or Authorized Agent: Gil Anderson **Date:** 01 / 06 / 2021



Town of Kill Devil Hills

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

PAID

JAN 12 2021

Planning and Inspection Department

TOWN OF
KILL DEVIL HILLS

MC2021-010

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

MECHANICAL

ISSUED: 01/11/2021

EXPIRES: 07/10/2021

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

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

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

License: 15578
Expires: 12/31/2021

PARCEL:

PIN: 988406370503

Parcel Number: 027170000

Address: 206 THIRD ST W KILL DEVIL HILLS

Addition: HEDRICKS ADDITION - CROATAN SH

Zoning:

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

Legal Description:

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

PROJECT DESCRIPTION: Install Mini Split system

PAID
1/11/2021 DK
pay pap

MC2021-010

PROJECT NAME: Long HVAC

SITE ADDRESS: 206 THIRD ST W KILL DEVIL HILLS

MECHANICAL

ISSUED: 01/11/2021

EXPIRES: 07/10/2021

DETAILS**Permit**

Name	Value
PURPOSE	Residential Repair/Remodel
CONSTRUCTION COST	5150.00
CONSTRUCTION TYPE	V
FLOOD ZONE	X
NATURAL GAS SIGNOFF	N
OCCUPANCY TYPE	One & Two Family Dwelling

REQUIRED INSPECTIONS

Final

CONDITIONS

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Issued By: Charles ThumanContractor or Authorized Agent: Mark Coleman Date: 01/11/2021



Town of Kill Devil Hills

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

PAID

JAN - 7 2021

Planning and Inspection Department

TOWN OF
KILL DEVIL HILLS

MC2021-008

PROJECT NAME: PODRUCHNY HVAC
SITE ADDRESS: 112 GREENSBORO ST KILL DEVIL HILLS

MECHANICAL

ISSUED: 01/06/2021

EXPIRES: 07/05/2021

APPLICANT: PODRUCHNY, GLORIA
112 GREENSBORO ST
Kill Devil Hills, NC 27948
757-749-1084

OWNER: Podruchny, Gloria
112 Greensboro St
Kill Devil Hills, NC 27948

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

License: 13056
Expires: 12/31/2021

PARCEL:

PIN: 988518207052

Parcel Number: 001870000

Address: 112 GREENSBORO ST KILL DEVIL HILLS

Addition: AVALON BEACH ANNEX 1

Zoning:

Block: 0 **Lot(s):** 425

Legal Description:

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

PROJECT DESCRIPTION: HVAC CHANGE OUT

PAID
1/7/2021
pay roll

MC2021-008

PROJECT NAME: PODRUCHNY HVAC

SITE ADDRESS: 112 GREENSBORO ST KILL DEVIL HILLS

MECHANICAL

ISSUED: 01/06/2021

EXPIRES: 07/05/2021

DETAILS

Permit

Name	Value
PURPOSE	Residential Repair/Remodel
CONSTRUCTION COST	5766.00
CONSTRUCTION TYPE	V
FLOOD ZONE	X
NATURAL GAS SIGNOFF	N
OCCUPANCY TYPE	One & Two Family Dwelling

REQUIRED INSPECTIONS

Final

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Issued By: Charles Thuman

Contractor or Authorized Agent: Jaclyn Slater Date: 01 / 07 / 2021



Town of Kill Devil Hills

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

JAN - 6 2021

Planning and Inspection Department

MC2020-279	MECHANICAL
PROJECT NAME: Overheim HVAC	ISSUED: 09/30/2020
SITE ADDRESS: 1917 BAY DR KILL DEVIL HILLS	EXPIRES: 03/29/2021

APPLICANT: OVERHEIM, DAVID C 3736 FARNSWORTH DRIVE CHESAPEAKE, VA 23321	OWNER: OVERHEIM, DAVID C 3736 FARNSWORTH DRIVE CHESAPEAKE, VA 23321
--	--

CONTRACTOR: HERITAGE HTG. & CLG.
209 W MORNING DOVE LN
nags head, nc 27959
252-489-3319

H-3, CLASS I:	HERITAGE HTG. & CLG. 209 W MORNING DOVE LN nags head, nc 27959 252-489-3319	License: 22994 Expires: 12/31/2020
----------------------	--	---

PARCEL:

PIN: 988409071269	Parcel Number: 002166000
Address: 1917 BAY DR KILL DEVIL HILLS	Zoning:
Addition: WRIGHT'S SHORES	Block: 0 Lot(s): 66
Legal Description:	

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

PROJECT DESCRIPTION: 2.5 ton hvac changeout and duct changeout

PAID
1/6/2021 DE
CK# 529

MC2020-279

PROJECT NAME: Overheim HVAC

SITE ADDRESS: 1917 BAY DR KILL DEVIL HILLS

MECHANICAL

ISSUED: 09/30/2020

EXPIRES: 03/29/2021

DETAILS

Permit

Name	Value
PURPOSE	Residential Repair/Remodel
CONSTRUCTION COST	10000.00
FLOOD ZONE	X
NATURAL GAS SIGNOFF	N
OCCUPANCY TYPE	One & Two Family Dwelling

REQUIRED INSPECTIONS

Final

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Issued By: Marty Shaw

Contractor or Authorized Agent: David **Date:** 10 / 12 / 2020



Town of Kill Devil Hills

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

PAID

JAN - 6 2021

Planning and Inspection Department

TOWN OF
KILL DEVIL HILLS

MC2021-003	MECHANICAL
PROJECT NAME:	ISSUED: 01/05/2021
SITE ADDRESS: 406 PINE CONE CT KILL DEVIL HILLS	EXPIRES: 07/04/2021

APPLICANT: Muller, John & Aida
406 Pine Cone CT
Kill Devil Hills, NC 27948

OWNER: Muller, John & Aida
406 Pine Cone CT
Kill Devil Hills, NC 27948

MECHANICAL, H-3, I:

MASTER HEATING AND COOLING
P.O. Box 707
Kitty Hawk, NC 27949
255-0095

License: 18066
Expires: 12/31/2021

PARCEL:

PIN: 988316747093

Parcel Number: 004890306

Address: 406 PINE CONE CT KILL DEVIL HILLS

Addition: WHISPERING PINES SEC 2 & 3

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

Legal Description:

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

PROJECT DESCRIPTION: HVAC replacement



PAID
1/6/2021 DE
paypal

MC2021-003
PROJECT NAME:
SITE ADDRESS: 406 PINE CONE CT KILL DEVIL HILLS

MECHANICAL
ISSUED: 01/05/2021
EXPIRES: 07/04/2021

DETAILS

Permit

Name	Value
PURPOSE	Residential Repair/Remodel
CONSTRUCTION COST	6850.00
CONSTRUCTION TYPE	V
FLOOD ZONE	X
NATURAL GAS SIGNOFF	N
OCCUPANCY TYPE	One & Two Family Dwelling

REQUIRED INSPECTIONS

Final

CONDITIONS

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Issued By: Marty Shaw

Contractor or Authorized Agent: H. W. Francis Date: 01 / 05 / 2021



Town of Kill Devil Hills

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

JAN - 6 2021

Planning and Inspection Department

MC2021-004

PROJECT NAME:

SITE ADDRESS: 1302 Virginia Dare Trail Tr. S. Kill Devil Hills

MECHANICAL

ISSUED: 01/05/2021

EXPIRES: 07/04/2021

APPLICANT: Sanders, John & Stacy
3 Edgewater DR
EARLEVILLE, MD 21919
302-438-1382

OWNER: Sanders, John & Stacy
3 Edgewater DR
EARLEVILLE, MD 21919
302-438-1382

MECHANICAL, H-3, I:

MASTER HEATING AND COOLING
P.O. Box 707
Kitty Hawk, NC 27949
255-0095

License: 18066
Expires: 12/31/2021

PARCEL:

PIN: 989309064536

Parcel Number: 004700001

Address: 1302 Virginia Dare Trail Tr. S. Kill Devil Hills

Zoning:

Addition: KILL DEVIL BEACH SEC 1 REVISED

Block: D **Lot(s):** 2

Legal Description:

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

PROJECT DESCRIPTION: HVAC replacement - 2 SYSTEMS

PAID
1/6/2021
paypal

MC2021-004

PROJECT NAME:

SITE ADDRESS: 1302 Virginia Dare Trail Tr. S. Kill Devil Hills

MECHANICAL

ISSUED: 01/05/2021

EXPIRES: 07/04/2021

DETAILS

Permit

Name	Value
PURPOSE	Residential Repair/Remodel
CONSTRUCTION COST	12200.00
CONSTRUCTION TYPE	V
FLOOD ZONE	X
NATURAL GAS SIGNOFF	N
OCCUPANCY TYPE	One & Two Family Dwelling

REQUIRED INSPECTIONS

Final

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Issued By: Marty Shaw

Contractor or Authorized Agent: H. W. Francis Date: 01 / 05 / 2021



Town of Kill Devil Hills

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

PAID

JAN - 5 2021

Planning and Inspection Department

TO WIDE
PLANNING

MC2021-002

PROJECT NAME:

SITE ADDRESS: 1714 VA DARE TRL N KILL DEVIL HILLS

MECHANICAL

ISSUED: 01/05/2021

EXPIRES: 07/04/2021

APPLICANT: Evanoff, CATHERINE
266 Mashoes Rd.
4049 VIRGINIA RD
Manns Harbor, NC 27953
252-207-1539

OWNER: Evanoff, CATHERINE
266 Mashoes Rd.
4049 VIRGINIA RD
Manns Harbor, NC 27953
252-207-1539

MECHANICAL H2 AND H3:

DAVID ARMSTRONG SERVICES
Rt. 2, box 2-1A
Creswell, NC 27928
252-394-5315

License: 21460
Expires: 12/31/2021

PARCEL:

PIN: 988410476484

Parcel Number: 002889000

Address: 1714 VA DARE TRL N KILL DEVIL HILLS

Addition: CROATAN SHORES

Zoning:

Block: H **Lot(s):** 11 & PT 12

Legal Description:

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

PROJECT DESCRIPTION: HVAC replacement



PAID
1/5/21
Ray Pal

MC2021-002

PROJECT NAME:

SITE ADDRESS: 1714 VA DARE TRL N KILL DEVIL HILLS

MECHANICAL

ISSUED: 01/05/2021

EXPIRES: 07/04/2021

DETAILS

Permit

Name	Value
PURPOSE	Residential Repair/Remodel
CONSTRUCTION COST	5300.00
CONSTRUCTION TYPE	V
FLOOD ZONE	X
NATURAL GAS SIGNOFF	N
OCCUPANCY TYPE	One & Two Family Dwelling

REQUIRED INSPECTIONS

Final

CONDITIONS

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Issued By: Marty Shaw

Contractor or Authorized Agent: David Armstrong Date: 01/05/2021



Town of Kill Devil Hills

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

PAID

JAN 5 2021

Planning and Inspection Department

TOWN OF
KILL DEVIL HILLS

MC2021-001

PROJECT NAME: Nichols HVAC
SITE ADDRESS: 1805 CREEK ST KILL DEVIL HILLS

MECHANICAL

ISSUED: 01/04/2021

EXPIRES: 07/03/2021

APPLICANT: Nichols, Michelle
17460 US HWY 64
ROPER, NC 27970

OWNER: Nichols, Michelle
17460 US HWY 64
ROPER, NC 27970

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

License: 15578
Expires: 12/31/2021

PARCEL:

PIN: 988409274311

Parcel Number: 002456000

Address: 1805 CREEK ST KILL DEVIL HILLS

Addition: SEA HOLLY RIDGE

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

Legal Description:

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

PROJECT DESCRIPTION: C/O 2.5 Ton HVAC System

PAID
Jan 1/5/21
Res Per

MC2021-001

PROJECT NAME: Nichols HVAC

SITE ADDRESS: 1805 CREEK ST KILL DEVIL HILLS

MECHANICAL

ISSUED: 01/04/2021

EXPIRES: 07/03/2021

DETAILS

Permit

Name	Value
PURPOSE	Residential Repair/Remodel
CONSTRUCTION COST	6000.00
CONSTRUCTION TYPE	V
FLOOD ZONE	X
NATURAL GAS SIGNOFF	N
OCCUPANCY TYPE	One & Two Family Dwelling

REQUIRED INSPECTIONS

Final

CONDITIONS

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

Issued By: Charles Thuman

Contractor or Authorized Agent: Paul Smith Date: 01 / 04 / 2021



Town of Kill Devil Hills

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

Planning and Inspection Department

MC2021-016	MECHANICAL
PROJECT NAME:	ISSUED: 01/27/2021
SITE ADDRESS: 1401 3-C VA DARE TRL N KILL DEVIL HILLS	EXPIRES: 07/26/2021

APPLICANT: Matthews, Jack and Donna 3114 Three Bridges RD MIDLOTHIAN, VA 23112	OWNER: Matthews, Jack and Donna 3114 Three Bridges RD MIDLOTHIAN, VA 23112
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MECHANICAL:	DELTA T 162 Yaupon Tr. Kitty Hawk, NC 27949 252-261-0404	License: 23299 Expires: 12/31/2021
--------------------	---	---

PARCEL:			
PIN:	98841165410709	Parcel Number:	028123000
Address:	1401 3-C VA DARE TRL N KILL DEVIL HILLS		
Addition:		Zoning:	
Legal Description:		Block: 0	Lot(s): UNIT 3-C

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

PROJECT DESCRIPTION: HVAC replacement

PAID
1/29/21 *DB*
CK #9649

MC2021-016
PROJECT NAME:
SITE ADDRESS: 1401 3-C VA DARE TRL N KILL DEVIL HILLS

MECHANICAL
ISSUED: 01/27/2021
EXPIRES: 07/26/2021

DETAILS

Permit

Name	Value
PURPOSE	Residential Repair/Remodel
CONSTRUCTION COST	5600.00
CONSTRUCTION TYPE	V
FLOOD ZONE	VE
BASE FLOOD ELEVATION	11
NATURAL GAS SIGNOFF	N
OCCUPANCY TYPE	Residential

REQUIRED INSPECTIONS

Final

CONDITIONS

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Issued By: Marty Shaw

Contractor or Authorized Agent: [Signature] Date: 01 / 27 / 2021



Town of Kill Devil Hills

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

PAID

JAN 25 2021

Planning and Inspection Department

TRIMBLE
KILL DEVIL HILLS

MC2021-013	MECHANICAL
PROJECT NAME: Brooks HVAC	ISSUED: 01/25/2021
SITE ADDRESS: 700 F9 FIRST ST W KILL DEVIL HILLS	EXPIRES: 07/24/2021

APPLICANT: Brooks, Marcia 700 WEST First ST F9 Kill Devil Hills, NC 27948 703-501-0185	OWNER: Brooks, Marcia 700 WEST First ST F9 Kill Devil Hills, NC 27948 703-501-0185
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CONTRACTOR: One Hour Heating and Air Conditioning 701 Fresh Pond West Kill Devil Hills, NC 27948 441-1740
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H3, CLASS 1:	One Hour Heating and Air Conditioning 701 Fresh Pond West Kill Devil Hills, NC 27948 441-1740	License: 12643 Expires: 12/31/2021
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PARCEL:	
PIN: 98841314042679	Parcel Number: 008075609
Address: 700 F9 FIRST ST W KILL DEVIL HILLS	
Addition:	Zoning:
	Block: 0 Lot(s): UT 9 BLDG F
Legal Description:	

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

PROJECT DESCRIPTION: hvac changeout

PAID
1/25/2021 DW
CK# 1919

MC2021-013

PROJECT NAME: Brooks HVAC

SITE ADDRESS: 700 F9 FIRST ST W KILL DEVIL HILLS

MECHANICAL

ISSUED: 01/25/2021

EXPIRES: 07/24/2021

DETAILS

Permit

Name	Value
PURPOSE	Residential Repair/Remodel
CONSTRUCTION COST	6396.00
FLOOD ZONE	AE
BASE FLOOD ELEVATION	8
NATURAL GAS SIGNOFF	N
OCCUPANCY TYPE	Residential

REQUIRED INSPECTIONS

Final

CONDITIONS

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

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

Issued By: Marty Shaw

Contractor or Authorized Agent: Tom McDonald Date: 01 / 25 / 2021



Town of Kill Devil Hills

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

X

PAID

JAN 12 2021

Planning and Inspection Department

TOWN OF
KILL DEVIL HILLS

MC2021-009

PROJECT NAME:

SITE ADDRESS: 815 S Va Dare Trl Kill Devil Hills

MECHANICAL

ISSUED: 01/08/2021

EXPIRES: 07/07/2021

APPLICANT: FIRST FLIGHT RETREAT
815 South Virginia Dare Trail
Kill Devil Hills, NC 27948

OWNER: FIRST FLIGHT RETREAT
815 South Virginia Dare Trail
Kill Devil Hills, NC 27948

MECHANICAL, H-2, H-3:

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

License: 34340
Expires: 12/31/2021

PARCEL:

PIN: 98830899420300

**Parcel
Number:**

Address: 815 S Va Dare Trl Kill Devil Hills

Zoning:

Addition:

Block:

Lot(s):

Legal Description: First Flight Retreat Condos

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

PROJECT DESCRIPTION: North Hallway HVAC replacement



PAID
1/8/21
Ray Pal

MC2021-009

PROJECT NAME:

SITE ADDRESS: 815 S Va Dare Trl Kill Devil Hills

MECHANICAL

ISSUED: 01/08/2021

EXPIRES: 07/07/2021

DETAILS

Permit

Name	Value
PURPOSE	Residential Repair/Remodel
CONSTRUCTION COST	9000.00
CONSTRUCTION TYPE	V
FLOOD ZONE	AE
BASE FLOOD ELEVATION	8
NATURAL GAS SIGNOFF	N
OCCUPANCY TYPE	Residential

REQUIRED INSPECTIONS

Final

CONDITIONS

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Issued By: Marty Shaw

Contractor or Authorized Agent: Andrew L Buchanan Date: 01 / 08 / 2021

Comm

PAID

JAN - 6 2021

TOWN OF
KILL DEVIL HILLS



Town of Kill Devil Hills

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

Planning and Inspection Department

MC2021-005	MECHANICAL
PROJECT NAME: Town of KDH	ISSUED: 01/05/2021
SITE ADDRESS: 1634 CROATAN HWY N KILL DEVIL HILLS	EXPIRES: 07/04/2021

APPLICANT: TOWN OF KILL DEVIL HILLS P O BOX 1719 102 Town Hall Drive KILL DEVIL HILLS, NC 27948	OWNER: TOWN OF KILL DEVIL HILLS P O BOX 1719 102 Town Hall Drive KILL DEVIL HILLS, NC 27948
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MECHANICAL, H-3, I:	MASTER HEATING AND COOLING P.O. Box 707 Kitty Hawk, NC 27949 255-0095	License: 18066 Expires: 12/31/2021
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PARCEL:

PIN: 988410369451	Parcel Number: 008129000
Address: 1634 CROATAN HWY N KILL DEVIL HILLS	Zoning:
Addition: SUBDIVISION - NONE	Block: 0 Lot(s): 0
Legal Description:	

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

PROJECT DESCRIPTION: HVAC replacement

PAID
1/6/2021 DE
no charge

MC2021-005

PROJECT NAME: Town of KDH

SITE ADDRESS: 1634 CROATAN HWY N KILL DEVIL HILLS

MECHANICAL

ISSUED: 01/05/2021

EXPIRES: 07/04/2021

DETAILS

Permit

Name	Value
PURPOSE	Commercial Repair/Remodel
CONSTRUCTION COST	6500.00
CONSTRUCTION TYPE	III
FLOOD ZONE	X
NATURAL GAS SIGNOFF	N
OCCUPANCY TYPE	Business

REQUIRED INSPECTIONS

Final

CONDITIONS

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Issued By: Marty Shaw

Contractor or Authorized Agent: H. W. Francis **Date:** 01 / 05 / 2021