

TOWN OF NAGS HEAD
PO Box 99 Nags Head, NC 27959
Phone (252) 441-7016 Fax (252) 4414290

Commercial Project Approval
Application # 202100213

Property Address: 3022 SOUTH CROATAN HWY **PIN #:** 989210366847 **Parcel:** 005701000

Lot/Block/Sec: LOT: BLK: SEC: **Subdivision:** SUBDIVISION - NONE

Zoning: GENERAL COMMERCIAL DISTRICT **Land Use:** SHOPPING CENTER

Flood Zone: X **Base Flood Elevation:** 0.0 **Regulatory Flood Elevation:** 9

Map Panel No: 8982 **Map Panel Date:** 06/19/2020 **Suffix:** K **Datum Used:** NAVD-88

Owner Name: PIRATE'S QUAY LLC

Owner Address: P O BOX 120

Contractor Name: 2 GUYS SERVICES **Contractor Phone:** 252-489-8753

Contractor Address: 605 W Archdale St KILL DEVIL HILLS, NC 27948

Description: Install 2 entry doors to next door unit Pirates Quay Waveriders Deli

Construction Value: \$4500 **Classification of Work:** COMMERCIAL REMODEL

BUILDING INFORMATION

Permit #	Permit Description	Total Fees Paid/Due	Approved By:	Approved Date:
CA202100688	COMM ADD-REM-REP-ACC	\$130.00	CT	03/10/2021

Conditions of Approval:

- Permit is for relocation and construction of non-loadbearing walls and installation of fire door in fire barrier between food service area and retail area. Building owner will apply for separate permit to install fire barrier on west end of retail area. ISSUANCE OF THIS PERMIT DOES NOT GUARANTEE ISSUANCE OF CERTIFICATE OF OCCUPANCY FOR EXPANSION UNTIL FIRE SEPARATION ISSUES ARE RESOLVED.

FLOOD INFORMATION

Permit #	Permit Description	Total Fees Paid/Due	Approved By:	Approved Date:
FL202100689	FLOOD PERMIT	\$0.00	CT	03/10/2021

Conditions of Approval:

ZONING INFORMATION

Permit #	Permit Description	Total Fees Paid/Due	Approved By:	Approved Date:
ZN202100690	ZONING PERMIT - COMM	\$0	KW	3/10/2021

Conditions of Approval:

Zoning is approved for interior work only, creating doorway into adjoining unit. No increase in footprint or lot coverage permitted. Final Zoning Inspection required upon completion.

Additional Conditions:

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

PLEASE NOTE:

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

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

As per Town Code, contractors are responsible for any damage caused to Town owned facilities during construction on any site in Nags Head such as, but not limited to: multi-use path, streets, shoulders, swales, drainage facilities, water lines and related facilities.



Residential Project Approval
Application # 202100420

Property Address: 2104 SOUTH CROATAN HWY **PIN #:** 989313121901 **Parcel:** 008360000
Lot/Block/Sec: LOT: 1-3 & 8-10 BLK: 4 SEC: **Subdivision:** FRESH POND BEACHES
Zoning: GENERAL COMMERCIAL DISTRICT **Land Use:** OFFICE/RETAIL
Flood Zone: AE **Base Flood Elevation:** 10.0 **Regulatory Flood Elevation:** 9
Map Panel No: 9893 **Map Panel Date:** 06/19/2020 **Suffix:** K **Datum Used:** NAVD 1988

Owner Name: DARE COUNTY ABC BOARD
Owner Address: P O BOX 1879

Contractor Name: OCEAN BUILDERS, LLC **Contractor Phone:** 252-480-5514
Contractor Address: 349 Water Plant Rd Unit E

Description: Replace decorative brick around one column at front entry of Dare County ABC Store
Construction Value: \$5000 **Classification of Work:** COMMERCIAL REPAIR

BUILDING INFORMATION

Permit #	Permit Description	Total Fees Paid/Due	Approved By:	Approved Date:
CA202100946	COMM ADD-REM-REP-ACC	\$130.00	SS	03/23/2021

Conditions of Approval:
- Call for final inspection

FLOOD INFORMATION

Permit #	Permit Description	Total Fees Paid/Due	Approved By:	Approved Date:
FL202100945	FLOOD PERMIT	\$0.00	SS	03/23/2021

Conditions of Approval:

ZONING INFORMATION

Permit #	Permit Description	Total Fees Paid/Due	Approved By:	Approved Date:
ZN202100944	ZONING PERMIT - COMM	\$0.00	KW	03/23/2021

Conditions of Approval:
Zoning approved to replace bricks around entry column that sustained damage. All work within the existing footprint.

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

PLEASE NOTE:

All work shall conform to all applicable North Carolina State Building codes and Ordinances of the Town of Nags Head and shall be the responsibility of the undersigned applicant.
In accordance with GS160A-418, a permit expires 6 months after the date of Issuance if the work authorized by the permit has not been commenced. If, after commencement, the work is discontinued for a period of 12 months (no inspections have taken place) the permit immediately expires. No work authorized by a permit that has expired may be performed until a new permit has been issued.

(ZONING) RIGHT OF APPEAL

Pursuant to Section 3.9 of the Unified Development Ordinance, Appeals of Administrative Decisions, you have the right to appeal this decision to the Nags Head Board of Adjustment within thirty (30) days of the date of this notice. This decision shall become final and unappealable if not appealed during this thirty (30) day period.

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



Commercial Sign Approval
Application # 202100408

Property Address: 3917 SOUTH CROATAN HWY **PIN #:** 989220813188 **Parcel:** 007706000

Lot/Block/Sec: LOT: BLK: SEC: **Subdivision:** SUBDIVISION - NONE

Zoning: GENERAL COMMERCIAL DISTRICT **Land Use:** OFFICE/RETAIL **Flood Zone:** AE

Owner Name: JOCKEY'S RIDGE CROSSING, LLC

Owner Address: PO BOX 1839

Contractor Name: **Contractor Phone:**

Contractor Address:

Description: 59.95 sq ft sign on West side of building, 32 sq ft sign on East side of building JOCKEY'S RIDGE CROSSING

Construction Value: \$1500 **Classification of Work:** ACCESSORY STRUCTURE (COMMERCIAL SIGN)

BUILDING INFORMATION

Permit #	Permit Description	Total Fees Paid/Due	Approved By:	Approved Date:
SG202100943	BUILDING SIGN PERMIT	\$75.00	SS	03/23/2021

Conditions of Approval:

- Provide address #'s on building if none are present. Pull electrical permit if signs are to be lit. Call for final inspections

ZONING INFORMATION

Permit #	Permit Description	Total Fees Paid/Due	Approved By:	Approved Date:
ZS202100942	ZONING - COMMERCIAL SIGN	\$75.00	KW	03/23/2021

Conditions of Approval:

- Electrical Permit required; Must comply with all conditions of Electrical Permit
- Building Permit required; Must comply with all conditions of Building Permit
- Zoning is approved the two wall non-illuminated wall signs:
- West Side of Building: 59.95 sq. ft. (61 sf. allowed)
- East Side of Building 32 sf. ft.
- If wall signage deviates please seek additional zoning review.
- Final Zoning Inspection required upon completion.

Additional Conditions:

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

PLEASE NOTE:

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

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

(ZONING) RIGHT OF APPEAL

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

Approved with Conditions (See Above)

DECISION: Approved with Conditions (See above)

Responsible Party

Date

TOWN OF NAGS HEAD
PO Box 99 Nags Head, NC 27959
Phone (252) 441-7016 Fax (252) 4414290



Commercial Sign Approval
Application # 202100411

Property Address: 4900 SOUTH CROATAN HWY **PIN #:** 080113132845 **Parcel:** 028843000

Lot/Block/Sec: LOT: 1 BLK: SEC: **Subdivision:** OUTER BANKS MALL

Zoning: VILLAGE COMMERCIAL 1 **Land Use:** SHOPPING CENTER **Flood Zone:** X

Owner Name: NAGS HEAD COMPANY LLC

Owner Address: PO BOX 108

Contractor Name: ADMIRAL SIGNWORKS CORP

Contractor Phone: 757-422-8700

Contractor Address: 1531 EARLY ST

Description: One set of internally illuminated channel letters & custom channel cloud logo "McGrath's Burger Shack"

Construction Value: \$2419 **Classification of Work:** ACCESSORY STRUCTURE (COMMERCIAL SIGN)

BUILDING INFORMATION

Permit #	Permit Description	Total Fees Paid/Due	Approved By:	Approved Date:
SG202100948	BUILDING SIGN PERMIT	\$75.00	SS	03/23/2021

Conditions of Approval:

- Provide proper Address #s on space. Pull electrical permit. Call for final inspection

ZONING INFORMATION

Permit #	Permit Description	Total Fees Paid/Due	Approved By:	Approved Date:
ZS202100947	ZONING - COMMERCIAL SIGN	\$75.00	KW	03/23/2021

Conditions of Approval:

- Electrical Permit required; Must comply with all conditions of Electrical Permit
- Building Permit required; Must comply with all conditions of Building Permit
- Zoning approved for the installation of an internally illuminated wall sign, 40 square feet approved.
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- Final Zoning Inspection required upon completion of installation.

Additional Conditions:

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

PLEASE NOTE:

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

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

(ZONING) RIGHT OF APPEAL

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

Approved with Conditions (See Above)

DECISION: Approved with Conditions (See above)

Responsible Party

Date

TOWN OF NAGS HEAD
PO Box 99 Nags Head, NC 27959
Phone (252) 441-7016 Fax (252) 4414290

Commercial Project Approval
Application # 202100437

Property Address: 8806 SOUTH OLD OREGON INLET RD **PIN #:** 071913142876 **Parcel:** 007972000

Lot/Block/Sec: LOT: PARCEL A BLK: SEC: **Subdivision:** SUBDIVISION - NONE

Zoning: MEDIUM DENSITY RES DISTRICT **Land Use:** FIRE STATION

Flood Zone: AE **Base Flood Elevation:** 11.0 **Regulatory Flood Elevation:** 9

Map Panel No: 0719 **Map Panel Date:** 06/19/2020 **Suffix:** K **Datum Used:** NAVD 1988

Owner Name: TOWN OF NAGS HEAD

Owner Address: P O BOX 99

Contractor Name: A.R. CHESSON CONSTRUCTION COMPANY, INC. **Contractor Phone:** 252-792-4486

Contractor Address: PO Box 1147 Williamston, NC 27892

Description: Improve building envelope efficiency w/insulation & thermal barrier installation; limited mod to mech system

Construction Value: \$105000 **Classification of Work:** COMMERCIAL REMODEL

BUILDING INFORMATION

Permit #	Permit Description	Total Fees Paid/Due	Approved By:	Approved Date:
CA202100980	COMM ADD-REM-REP-ACC	\$0.00	SS	03/25/2021

Conditions of Approval:

- Provide plans and specs on site for all inspections. All subs shall pull trade permits prior to starting work. Call for all required inspections. All trade work shall comply with the NC Codes. Special inspections may be requested. Additional engineering may be requested. Call for final inspection

FLOOD INFORMATION

Permit #	Permit Description	Total Fees Paid/Due	Approved By:	Approved Date:
FL202100979	FLOOD PERMIT	\$0.00	SS	03/25/2021

Conditions of Approval:

ZONING INFORMATION

Permit #	Permit Description	Total Fees Paid/Due	Approved By:	Approved Date:
ZN202100978	ZONING PERMIT - COMM	\$0	KW	3/25/2021

Conditions of Approval:

Zoning approved for interior renovations, all work to be conducting within the existing footprint. No increase in footprint or lot coverage permitted.

Final Zoning Inspection required prior to issuance of CO.

Additional Conditions:

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

PLEASE NOTE:

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

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

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Commercial Project Approval
Application # 202100489

Property Address: 100 EAST DUNN ST **PIN #:** 080109057743 **Parcel:** 008722000
Lot/Block/Sec: LOT: 8 PT 9 BLK: 6 SEC: A **Subdivision:** NAGS HEAD BEACH PLAT A
Zoning: GENERAL COMMERCIAL DISTRICT **Land Use:** OFFICE/RETAIL
Flood Zone: AE **Base Flood Elevation:** 11.0 **Regulatory Flood Elevation:** 9
Map Panel No: 0801 **Map Panel Date:** 06/19/2020 **Suffix:** K **Datum Used:** NAVD 1988

Owner Name: THE OUTER BANKS HOTLINE INCORPORATED
Owner Address: P O BOX 1490

Contractor Name: GARCIA'S TITAN CONSTRUCTION COMPANY INC **Contractor Phone:** 252-216-7283
Contractor Address: 951 WINGINA ST P O BOX 2195 MANTEO, NC 27954

Description: Demo existing deck, rebuild in the same w/todays codes 4'x8' deck w/ new handrails, stairs 4 steps
OUTER BANKS HOTLINE

Construction Value: \$3000 **Classification of Work:** COMMERCIAL REPAIR

BUILDING INFORMATION

Permit #	Permit Description	Total Fees Paid/Due	Approved By:	Approved Date:
CA202101041	COMM ADD-REM-REP-ACC	\$130.00	SS	03/29/2021

Conditions of Approval:

- Stairs and rails shall comply with todays commercial code. Call for piling inspection. Piling tip penetration is 8 feet. Guard height 42 inch min. Handrail height is 34 inch to 38 inch from leading edge of nosing. Handrails on both sides of stairs. Max riser height is 7 inches. Minimum tread depth is 11 inches from leading edge to leading edge of nosing. Call if you have any questions 252 449 2005

FLOOD INFORMATION

Permit #	Permit Description	Total Fees Paid/Due	Approved By:	Approved Date:
FL202101040	FLOOD PERMIT	\$0.00	SS	03/29/2021

Conditions of Approval:

ZONING INFORMATION

Permit #	Permit Description	Total Fees Paid/Due	Approved By:	Approved Date:
ZN202101039	ZONING PERMIT - COMM	\$0	KW	03/29/2021

Conditions of Approval:

Zoning is approved to replace the decking and stairs within the same footprint as previously existed. No increase in the footprint of the decking and stairs, no increase in lot coverage permitted. Any deviation requires additional review and approval.

Final Zoning inspection required prior to issuance of CO.

Additional Conditions:

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

PLEASE NOTE:

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

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

TOWN OF NAGS HEAD
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Commercial Project Approval
Application # 202100454

Property Address: 5002 SOUTH CROATAN HWY **PIN #:** 080113136245 **Parcel:** 029100000

Lot/Block/Sec: LOT: 5 BLK: SEC: **Subdivision:** OUTER BANKS MALL

Zoning: VILLAGE COMMERCIAL 1 **Land Use:** RESTAURANT

Flood Zone: X **Base Flood Elevation:** 0.0 **Regulatory Flood Elevation:**

Map Panel No: **Map Panel Date:** **Suffix: Datum Used:**

Owner Name: NAGS HEAD COMPANY LLC

Owner Address: PO BOX 108

Contractor Name: A.R. CHESSON CONSTRUCTION COMPANY, INC. **Contractor Phone:** 252-792-4486

Contractor Address: PO Box 1147 Williamston, NC 27892

Description: Interior demolition of building, formerly JJ Brewbakers, to prepare for change into OBX Urgent Care. See txt

Construction Value: \$61600 **Classification of Work:** COMMERCIAL REPAIR

BUILDING INFORMATION

Permit #	Permit Description	Total Fees Paid/Due	Approved By:	Approved Date:
CA202101057	COMM ADD-REM-REP-ACC	\$340.00	CT	03/30/2021

Conditions of Approval:

FLOOD INFORMATION

Permit #	Permit Description	Total Fees Paid/Due	Approved By:	Approved Date:
FL202101058	FLOOD PERMIT	\$0.00	CT	03/30/2021

Conditions of Approval:

ZONING INFORMATION

Permit #	Permit Description	Total Fees Paid/Due	Approved By:	Approved Date:
ZN202101056	ZONING PERMIT - COMM	\$0	KW	0.0003/30/2021

Conditions of Approval:

Zoning is approved for interior demolition, window replacement and new roof - all work to be within the existing footprint, no increase in footprint or lot coverage permitted.

If scope of work changes please seek revised zoning approval.

Final Zoning Inspection required prior to issuance of Certificate of Occupancy.

Additional Conditions:

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

PLEASE NOTE:

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

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

As per Town Code, contractors are responsible for any damage caused to Town owned facilities during construction on any site in Nags Head such as, but not limited to: multi-use path, streets, shoulders, swales, drainage facilities, water lines and related facilities.

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



Residential Project Approval
Application # 202100281

Property Address: 4307 SOUTH HESPERIDES DR PIN #: 989112867730 Parcel: 007812000

Lot/Block/Sec: LOT: 64 BLK: SEC: E Subdivision: OLD NAGS HEAD COVE SEC E

Zoning: MEDIUM DENSITY RES DISTRICT Land Use: SINGLE FAMILY DWELLING

Flood Zone: X Base Flood Elevation: 0.0 Regulatory Flood Elevation: 9

Map Panel No: 9891 Map Panel Date: 06/19/2020 Suffix: K Datum Used: NAVD 1988

Owner Name: GUZYNSKI, LEON G - JONES, MARY E

Owner Address: 1612 SUNRISE AVE

Contractor Name: PROPERTY OWNER Contractor Phone:

Contractor Address: See Above

Description: 47'NE property line retaining wall repair/replacement, 4' high -0' over 47' replace posts/lumber hot tub on wall stair

Construction Value: \$7500 Classification of Work: RESIDENTIAL ACC STRUCTURE

BUILDING INFORMATION

Permit #	Permit Description	Total Fees Paid/Due	Approved By:	Approved Date:
RE202101015	RES ADD-REM-REP-ACC	\$160.00	SS	03/29/2021

Conditions of Approval:

Provide address #s on home if none are present. If any portion of retaining wall exceeds 4 feet then engineering is required. Pull electrical permit. Call for trench inspections. All wiring shall comply with Art 680 of the 2017 NEC. No stairs shall comply with the 2018 NC Res Code. Call for final inspection

FLOOD INFORMATION

Permit #	Permit Description	Total Fees Paid/Due	Approved By:	Approved Date:
FL202101014	FLOOD PERMIT	\$0.00	SS	03/29/2021

Conditions of Approval:

ZONING INFORMATION

Permit #	Permit Description	Total Fees Paid/Due	Approved By:	Approved Date:
ZN202101013	ZONING PERMIT - RES	\$0.00	MK	03/29/2021

Conditions of Approval:

Replacement of retaining wall shall remain within property boundaries
silt fencing may be installed if there is land disturbance that is not stable to ensure erosion and sediment control.
Placement of the hot tub and deck shall meet a 5 ft side setback from property line per the email from 3/29/2021 between property owner and zoning administrator. Copy in file
once project is complete please stabilize any areas that were disturbed
call for final zoning inspection 252-449-6045

Additional Conditions:

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

PLEASE NOTE:

All work shall conform to all applicable North Carolina State Building codes and Ordinances of the Town of Nags Head and shall be the responsibility of the undersigned applicant.
In accordance with GS160A-418, a permit expires 6 months after the date of issuance if the work authorized by the permit has not been commenced. If, after commencement, the work is discontinued for a period of 12 months (no inspections have taken place) the permit immediately expires. No work authorized by a permit that has expired may be performed until a new permit has been issued.

TOWN OF NAGS HEAD
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Residential Project Approval
Application # 202001213

Property Address: 319 WEST SANDPIPER TERR TER **PIN #:** 080113033711 **Parcel:** 006286000

Lot/Block/Sec: LOT: 36 BLK: SEC: B **Subdivision:** OLD NAGS HEAD COVE SEC B

Zoning: MEDIUM DENSITY RES DISTRICT **Land Use:** SINGLE FAMILY DWELLING

Flood Zone: X **Base Flood Elevation:** 0.0 **Regulatory Flood Elevation:** 9

Map Panel No: 9891 **Map Panel Date:** 06/19/2020 **Suffix:** J **Datum Used:** NAVD 1988

Owner Name: WHICHARD, WILLIAM A JR

Owner Address: 201 EAST KING ST

Contractor Name: Gibbs Daughters NC, LLC

Contractor Phone: 252-202-5991

Contractor Address: PO Box 2387 Manteo, NC 27954

Description: Deck replacement on bottom & top level Contractor change

Construction Value: \$30000 **Classification of Work:** RESIDENTIAL REPAIR

BUILDING INFORMATION

Permit #	Permit Description	Total Fees Paid/Due	Approved By:	Approved Date:
RE202100850	RES ADD-REM-REP-ACC	\$60.00	SS	03/17/2021

Conditions of Approval:

FLOOD INFORMATION

Permit #	Permit Description	Total Fees Paid/Due	Approved By:	Approved Date:
FL202002134	FLOOD PERMIT	\$0.00	SS	09/01/2020

Conditions of Approval:

Additional Conditions:

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

PLEASE NOTE:

All work shall conform to all applicable North Carolina State Building codes and Ordinances of the Town of Nags Head and shall be the responsibility of the undersigned applicant.
In accordance with GS160A-418, a permit expires 6 months after the date of issuance if the work authorized by the permit has not been commenced. If, after commencement, the work is discontinued for a period of 12 months (no inspections have taken place) the permit immediately expires. No work authorized by a permit that has expired may be performed until a new permit has been issued.

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

DECISION: Approved with Conditions (See above)

Responsible Party _____ Date _____

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



Residential Project Approval
Application # 202100004

Property Address: 8911 SOUTH OLD OREGON INLET RD **PIN #:** 07191324039104 **Parcel:**
007171004

Lot/Block/Sec: LOT: UNIT 4 BLK: SEC: **Subdivision:** VIKING COURT CONDO

Zoning: MEDIUM DENSITY RES DISTRICT **Land Use:** SINGLE FAMILY DWELLING

Flood Zone: VE **Base Flood Elevation:** 11.0 **Regulatory Flood Elevation:** 12

Map Panel No: 0719 **Map Panel Date:** 06/19/2020 **Suffix:** K **Datum Used:** NAVD 1988

Owner Name: REID, PATRICIA V.

Owner Address: 2020 CEDAR CROSS CT

Contractor Name: SALTY SOULS INC

Contractor Phone: 252-564-5101

Contractor Address: P. O. BOX 69 NAGS HEAD, NC 27959

Description: Rebuild E facing deck, replace all joists, decking, handrail s, and stairs no change in footprint

Construction Value: \$10500

Classification of Work: RESIDENTIAL REPAIR

BUILDING INFORMATION

Permit #	Permit Description	Total Fees Paid/Due	Approved By:	Approved Date:
RE202100619	RES ADD-REM-REP-ACC	\$190.00	SS	03/02/2021

Conditions of Approval:

FLOOD INFORMATION

Permit #	Permit Description	Total Fees Paid/Due	Approved By:	Approved Date:
FL202100618	FLOOD PERMIT	\$0.00	SS	03/02/2021

Conditions of Approval:

Additional Conditions:

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

PLEASE NOTE:

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

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

DECISION: Approved with Conditions (See above)

Responsible Party _____

Date _____



Residential Project Approval
Application # 202100069

Property Address: 112 EAST ALTOONA NORTH ST **PIN #:** 071815643972 **Parcel:** 008960000

Lot/Block/Sec: LOT: 6 BLK: SEC: **Subdivision:** OCEAN COLONY SOUTH

Zoning: MEDIUM DENSITY RES DISTRICT **Land Use:** SINGLE FAMILY DWELLING

Flood Zone: VE **Base Flood Elevation:** 11.0 **Regulatory Flood Elevation:** 12

Map Panel No: 0718 **Map Panel Date:** 06/10/2020 **Suffix:** K **Datum Used:** NAVD 1988

Owner Name: LEE, SUSAN H

Owner Address: 839 COUNTRY CLUB DR

Contractor Name: ERMAL SINANAJ

Contractor Phone: 252-480-6468

Contractor Address: 205 W Morning Dove

Description: Construct a deck addition above existing deck see engineered specs

Construction Value: \$19000

Classification of Work: RESIDENTIAL REMODEL

BUILDING INFORMATION

Permit #	Permit Description	Total Fees Paid/Due	Approved By:	Approved Date:
RE202100665	RES ADD-REM-REP-ACC	\$200.00	SS	03/05/2021

Conditions of Approval:

- Provide address #s on home if none are present. Call for piling inspection. Call for final inspection.

FLOOD INFORMATION

Permit #	Permit Description	Total Fees Paid/Due	Approved By:	Approved Date:
FL202100664	FLOOD PERMIT	\$0.00	SS	03/05/2021

Conditions of Approval:

ZONING INFORMATION

Permit #	Permit Description	Total Fees Paid/Due	Approved By:	Approved Date:
ZN202100663	ZONING PERMIT - RES	\$0.00	MK	03/05/2021

Conditions of Approval:

Deck addition and stairs over existing deck - no additional lot coverage
must comply with CAMA Minor Permit
Structurally detached per CAMA , and can be cosmetically attached to the house
Max height 35ft
Call for final inspections 252-449-6045

Additional Conditions:

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

PLEASE NOTE:

All work shall conform to all applicable North Carolina State Building codes and Ordinances of the Town of Nags Head and shall be the responsibility of the undersigned applicant.
In accordance with GS160A-418, a permit expires 6 months after the date of issuance if the work authorized by the permit has not been commenced. If, after commencement, the work is discontinued for a period of 12 months (no inspections have taken place) the permit immediately expires. No work authorized by a permit that has expired may be performed until a new permit has been issued.

(ZONING) RIGHT OF APPEAL



Residential Project Approval
Application # 202100090

Property Address: 208 WEST ALBEMARLE DR **PIN #:** 989208285562 **Parcel:** 005874033
Lot/Block/Sec: LOT: 33 BLK: D SEC: **Subdivision:** VISTA COLONY WEST
Zoning: MEDIUM DENSITY RES DISTRICT **Land Use:** VACANT
Flood Zone: X **Base Flood Elevation:** 0.0 **Regulatory Flood Elevation:** 0
Map Panel No: 9892 **Map Panel Date:** 06/19/2020 **Suffix:** K **Datum Used:** NAVD 1988

Owner Name: JAMES, JASON
Owner Address: P. O. BOX 1771

Contractor Name: ACS-OBX LLC **Contractor Phone:** 252-599-2999
Contractor Address: P O BOX 1771 NAGS HEAD, NC 27959

Description: Construct new single family dwelling, 3 bedrooms, 3 baths
Construction Value: \$250000 **Classification of Work:** NEW RESIDENTIAL

BUILDING INFORMATION

Permit #	Permit Description	Total Fees Paid/Due	Approved By:	Approved Date:
BR202100644	B-RESIDENTIAL NEW CONST SFD	\$2338.93	SS	03/04/2021

Conditions of Approval:

- Building under construction and final flood elevation certificates are required. Top of ground floor living area shall be at or above the 9 Local elevation standard. All subs shall pull permits prior to starting work. Call for all required inspections. Review zoning and storm water permit conditions. Please call with any questions at 252 441 7018

FLOOD INFORMATION

Permit #	Permit Description	Total Fees Paid/Due	Approved By:	Approved Date:
FL202100641	FLOOD PERMIT	\$0.00	SS	03/04/2021

Conditions of Approval:

PUBLIC WORKS INFORMATION

Permit #	Permit Description	Total Fees Paid/Due	Approved By:	Approved Date:
PW202100642	PW APPROVAL RES NEW/ADDITION	\$1482.31	LCN	03/04/2021

Conditions of Approval:

- See Public Works Approval handout for detailed project information
- For Public Works related items (water, trash carts, etc.) please call the Public Works Department at 252-441-1122.
- For Culvert and Driveways (Information and inspections) please call the Planning Department at 252-441-7018.

ZONING INFORMATION

Permit #	Permit Description	Total Fees Paid/Due	Approved By:	Approved Date:
ZN202100640	ZONING PERMIT - RES	\$0.00	MK	03/04/2021

Conditions of Approval:

- Silt fencing required prior to any land disturbance
- Must comply with Land disturbance permit conditions, especially with fill, if 5 ft no fill setback cannot be met, please call the planning department to amend your permit and add a retaining wall etc, as we discussed on site.
- Foundation survey required with post fill elevations at framing inspection
- height certification can be on the foundation or elevation certificate, required at framing inspection
- The driveway apron shall be a minimum of 10' in length, maximum 26' in width, 4" thick 3,000 psi concrete, with a maximum 15' radius, and designed for access purposes only. The driveway apron shall be sloped a minimum of



Residential Project Approval
Application # 202100163

Property Address: 9006 SOUTH OLD OREGON INLET RD **PIN #:** 071913234838 **Parcel:** 007195000
Lot/Block/Sec: LOT: 14 & PT 16 BLK: 13 SEC: 3 **Subdivision:** HOLLYWOOD BEACH SEC 3
Zoning: MEDIUM DENSITY RES DISTRICT **Land Use:** SINGLE FAMILY DWELLING, LARGE
Flood Zone: VE **Base Flood Elevation:** 11.0 **Regulatory Flood Elevation:** 12
Map Panel No: 0719 **Map Panel Date:** 06/19/2020 **Suffix:** K **Datum Used:** NAVD 1988

Owner Name: STAPLETON, JOHN WARREN
Owner Address: 400 5TH AVE

Contractor Name: Aria Construction & Development, Inc. **Contractor Phone:** 252-786-7737
Contractor Address: PO Box 321 Creswell, NC 27928

Description: Build a new single-family dwelling on piling foundation, 9 bedrooms, 10.1 baths, swimming pool & hot tub
Construction Value: \$1340000 **Classification of Work:** NEW RESIDENTIAL

BUILDING INFORMATION

Permit #	Permit Description	Total Fees Paid/Due	Approved By:	Approved Date:
BR202100806	B-RESIDENTIAL NEW CONST SFD	\$5023.19	SS	03/16/2021

Conditions of Approval:

- Review zoning and storm water permit conditions
- All subs shall pull permits prior to starting work
- Call for all required inspections
- 12 foot RFPE to lowest horizontal structural member
- 18 inch minimum free of obstruction below lowest horizontal structural member.
- Building under construction and final elevation certificates required.
- House walls are prohibited from being built to breakaway standards.
- Enclosures are prohibited below the RFPE in the V Zone.
- Pool fence shall be breakaway.
- Concrete under home and around pool area to be frangible (cut in 4 foot by 4 foot sections). Wire mesh is prohibited. Concrete shall not be in contact with pilings.
- Structural house or deck pilings within 8 feet of swimming pool shall require engineer certification and approval.
- All pool equipment to be elevated to Regulatory Flood Elevation of 12 feet.
- Address numbers on property shall meet the Town of Nags Head Ordinance:

FLOOD INFORMATION

Permit #	Permit Description	Total Fees Paid/Due	Approved By:	Approved Date:
FL202100804	FLOOD PERMIT	\$0.00	SS	03/16/2021

Conditions of Approval:

PUBLIC WORKS INFORMATION

Permit #	Permit Description	Total Fees Paid/Due	Approved By:	Approved Date:
PW202100805	PW APPROVAL RES NEW/ADDITION	\$755.00	LCN	03/16/2021

Conditions of Approval:

- See Public Works Approval handout for detailed project information
- For Public Works related items (water, trash carts, etc.) please call the Public Works Department at 252-441-1122.
- For Culvert and Driveways (Information and Inspections) please call the Planning Department at 252-441-7016.
- The driveway apron shall be a minimum of 10' in length, maximum 26' in width, 4" thick 3,000 psi concrete, with a maximum 16' radius, and designed for access purposes only. The driveway apron shall be sloped a minimum of 1/4" per foot from the edge of pavement to a point 8' offset from the edge of pavement, creating a valley section within the driveway, (2" min. drop). Call for PRE-INSPECTION of forms BEFORE pouring concrete. (Margaux Kerr 252-449-8045 or Kate Jones 449-4209) Call for FINAL inspection once pouring is complete. Give 24



Residential Project Approval
Application # 202100228

Property Address: 110 EAST OREGON DR **PIN #:** 071811567310 **Parcel:** 008062000
Lot/Block/Sec: LOT: 28 BLK: SEC: **Subdivision:** HIGH DUNES
Zoning: MEDIUM DENSITY RES DISTRICT **Land Use:** SINGLE FAMILY DWELLING
Flood Zone: VE **Base Flood Elevation:** 11.0 **Regulatory Flood Elevation:** 12
Map Panel No: 0718 **Map Panel Date:** 06/19/2020 **Suffix:** K **Datum Used:** NAVD 1988

Owner Name: SMITH, PHILLIP N III - SMITH, VIRGINIA
Owner Address: 2145 SEASTONE TRCE

Contractor Name: SIMPLESIDE CONSTRUCTION, INC. **Contractor Phone:** 252-564-8307
Contractor Address: 308 W Heiga St

Description: Construct new deck on E side of home below existing top level deck, remove 2 existing windows & install new ext doors

Construction Value: \$20000 **Classification of Work:** RESIDENTIAL REMODEL

BUILDING INFORMATION

Permit #	Permit Description	Total Fees Paid/Due	Approved By:	Approved Date:
RE202100659	RES ADD-REM-REP-ACC	\$200.00	SS	03/05/2021

Conditions of Approval:

- Provide address #s on home if none are present. Need engineering for: new girder and girder attachment. Engineering for new loads added to piling. Deck girders shall not be lower than existing lowest horizontal structural member. New deck required a WR Type GFCI receptacle. Pull electrical permit. Provide engineering before calling for any inspections

FLOOD INFORMATION

Permit #	Permit Description	Total Fees Paid/Due	Approved By:	Approved Date:
FL202100658	FLOOD PERMIT	\$0.00	SS	03/05/2021

Conditions of Approval:

ZONING INFORMATION

Permit #	Permit Description	Total Fees Paid/Due	Approved By:	Approved Date:
ZN202100657	ZONING PERMIT - RES	\$0.00	MK	03/05/2021

Conditions of Approval:

Permit to add 1st level deck under existing deck shall be structurally detached per CAMA and cosmetically attached. Must maintain principle structure setbacks
Stair addition shall not exceed 3 ft in width into the front yard setback
Any land disturbance shall be stabilized
Call for Final zoning and CAMA inspections 252-449-6045

Additional Conditions:

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

PLEASE NOTE:

All work shall conform to all applicable North Carolina State Building codes and Ordinances of the Town of Nags Head and shall be the responsibility of the undersigned applicant.
In accordance with GS160A-418, a permit expires 6 months after the date of issuance if the work authorized by the permit has not been commenced. If, after commencement, the work is discontinued for a period of 12 months (no inspections have taken place) the permit immediately expires. No work authorized by a permit that has expired may be performed until a new permit has been issued.



Residential Project Approval
Application # 202100230

Property Address: 9301 SOUTH OLD OREGON INLET RD **PIN #:** 071918316231 **Parcel:** 026337000

Lot/Block/Sec: LOT: 16 BLK: 4 SEC: 1 **Subdivision:** HOLLYWOOD BEACH SEC 1

Zoning: MEDIUM DENSITY RES DISTRICT **Land Use:**

Flood Zone: VE **Base Flood Elevation:** 11.0 **Regulatory Flood Elevation:** 12

Map Panel No: 0719 **Map Panel Date:** 06/19/2020 **Suffix:** K **Datum Used:** NAVD 1988

Owner Name: BORKAT, JARROD E - BORKAT, ANGELA MARIE

Owner Address: 929 LINSLADE CLOSE

Contractor Name: AFFORDABLE BILL'S, BILL EGER DBA

Contractor Phone:

Contractor Address: 300 Albemarle Dr NAGS HEAD, NC 27959

Description: Install new railings and pickets on the top-level rear deck.

Construction Value: \$300

Classification of Work: RESIDENTIAL REPAIR

BUILDING INFORMATION

Permit #	Permit Description	Total Fees Paid/Due	Approved By:	Approved Date:
RE202100684	RES ADD-REM-REP-ACC	\$100.00	SS	03/10/2021

Conditions of Approval:

- Provide address #s on home if none are present. 4 x 4 shall not be notched. Call for final inspection

FLOOD INFORMATION

Permit #	Permit Description	Total Fees Paid/Due	Approved By:	Approved Date:
FL202100683	FLOOD PERMIT	\$0.00	SS	03/10/2021

Conditions of Approval:

ZONING INFORMATION

Permit #	Permit Description	Total Fees Paid/Due	Approved By:	Approved Date:
ZN202100685	ZONING PERMIT - RES	\$0.00	KW	03/10/2021

Conditions of Approval:

Zoning approved to replace the pickets and rails on the top level deck. All work shall be within the existing footprint. No increase in footprint or lot coverage permitted. Final zoning inspection required prior to issuance of CO.

Additional Conditions:

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

PLEASE NOTE:

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

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

(ZONING) RIGHT OF APPEAL

Pursuant to Section 3.9 of the Unified Development Ordinance, Appeals of Administrative Decisions, you have the right to appeal this decision to the Nags Head Board of Adjustment within thirty (30) days of the date of this notice. This decision shall become final and unappealable if not appealed during this thirty (30) day period.



**Residential Project Approval
Application # 202100236**

Property Address: 9327A EAST OLYMPIC ST **PIN #:** 071918307526 **Parcel:** 007304000
Lot/Block/Sec: LOT: 4 BLK: SEC: **Subdivision:** STANMAR HOMES ESTATES
Zoning: MEDIUM DENSITY RES DISTRICT **Land Use:** SINGLE FAMILY DWELLING
Flood Zone: VE **Base Flood Elevation:** 11.0 **Regulatory Flood Elevation:** 12
Map Panel No: 0719 **Map Panel Date:** 06/19/2020 **Suffix:** K **Datum Used:** NAVD 1988

Owner Name: CARSON, WILLIAM D JR - CARSON, ANNE M
Owner Address: 11506 SINKER CREEK DR

Contractor Name: EMANUELSON & DAD, INC. **Contractor Phone:** 252-261-2212
Contractor Address: PO BOX 448 Nags Head, NC 27959

Description: Replace 7 pilings and replace existing deck/stairs using existing pilings.
Construction Value: \$23500 **Classification of Work:** RESIDENTIAL REPAIR

BUILDING INFORMATION

Permit #	Permit Description	Total Fees Paid/Due	Approved By:	Approved Date:
RE202100710	RES ADD-REM-REP-ACC	\$220.00	SS	03/10/2021

Conditions of Approval:

- Provide address #s on home if none are present. Review deck repair condition handout we have provided. V zone cert needed. Provide detail for deck construction. Call for piling inspection. Call for final inspection

FLOOD INFORMATION

Permit #	Permit Description	Total Fees Paid/Due	Approved By:	Approved Date:
FL202100709	FLOOD PERMIT	\$0.00	SS	03/10/2021

Conditions of Approval:

Additional Conditions:

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

PLEASE NOTE:

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

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

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

DECISION: Approved with Conditions (See above)

Responsible Party _____ Date _____



Residential Project Approval
Application # 202100251

Property Address: 8709A EAST CARIBSEA ST **PIN #:** 071909152757 **Parcel:** 008005000
Lot/Block/Sec: LOT: 2 BLK: SEC: **Subdivision:** HOLLYWOOD BCH S-5 B 1 L 1-3
Zoning: MEDIUM DENSITY RES DISTRICT **Land Use:** SINGLE FAMILY DWELLING
Flood Zone: VE **Base Flood Elevation:** 11.0 **Regulatory Flood Elevation:** 12
Map Panel No: 0719 **Map Panel Date:** 06/19/2020 **Suffix:** K **Datum Used:** NAVD 1988

Owner Name: GLADDEN, WILMA S
Owner Address: 6811 VA DARE TRL

Contractor Name: SHANE O'NEILL **Contractor Phone:** 252-202-8744
Contractor Address: 432 KITTY HAWK BAY DR

Description: Siding windows flooring all new sheetrock update electrical as needed new duct work/units cabinets & appliances trim lit
Construction Value: \$100000 **Classification of Work:** RESIDENTIAL REMODEL

BUILDING INFORMATION

Permit #	Permit Description	Total Fees Paid/Due	Approved By:	Approved Date:
RE202100700	RES ADD-REM-REP-ACC	\$440.00	SS	03/10/2021

Conditions of Approval:

- Provide address #s on home if none are present. Home is non conforming per flood standards and shall brought into FEMA and TONH flood compliance. All flood non conformities shall be removed. All subs shall pull permits prior to starting work. Call for all required inspections. A final flood elevation certificate is required. Call for a site visit to determine additional permit conditions. Provide letter from you and owner stating your knowledge that you will have to remove all flood non conformities.

FLOOD INFORMATION

Permit #	Permit Description	Total Fees Paid/Due	Approved By:	Approved Date:
FL202100699	FLOOD PERMIT	\$0.00	SS	03/10/2021

Conditions of Approval:

ZONING INFORMATION

Permit #	Permit Description	Total Fees Paid/Due	Approved By:	Approved Date:
ZN202100701	ZONING PERMIT - RES	\$0.00	KW	03/10/2021

Conditions of Approval:

Zoning permit approved for siding, windows and various interior projects such as electrical, fixtures, cabinets, flooring, etc. All work is proposed within the existing footprint. No increase in footprint or lot coverage permitted. Final Zoning inspection required prior to issuance of CO.

Additional Conditions:

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

PLEASE NOTE:

All work shall conform to all applicable North Carolina State Building codes and Ordinances of the Town of Nags Head and shall be the responsibility of the undersigned applicant.
In accordance with GS160A-418, a permit expires 6 months after the date of issuance if the work authorized by the permit has not been commenced. If, after commencement, the work is discontinued for a period of 12 months (no inspections have taken place) the permit immediately expires. No work authorized by a permit that has expired may be performed until a new permit has been issued.

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



Residential Project Approval
Application # 202100255

Property Address: 2615 SOUTH WRIGHTSVILLE AVE **PIN #:** 989206395615 **Parcel:** 005483003

Lot/Block/Sec: LOT: 20 BLK: 8 SEC: 2 **Subdivision:** NAGS HEAD SHORES AMENDED SEC 2

Zoning: GENERAL COMMERCIAL DISTRICT **Land Use:** SINGLE FAMILY DWELLING

Flood Zone: AE **Base Flood Elevation:** 10.0 **Regulatory Flood Elevation:** 9

Map Panel No: 9892 **Map Panel Date:** 06/19/2020 **Suffix:** K **Datum Used:** NAVD 1988

Owner Name: PERUSSE, CHARLES E - PERUSE, WENDY M

Owner Address: 1006 NORRIS ST

Contractor Name: RCI CUSTOM CONSTRUCTION, INC

Contractor Phone: 252-202-1097

Contractor Address: 35 SKYLINE RD

Description: Flooring roofing new bath vanity new laundry french drains outside roof over porch rot repairs under deck

Construction Value: \$26000

Classification of Work: RESIDENTIAL REMODEL

BUILDING INFORMATION

Permit #	Permit Description	Total Fees Paid/Due	Approved By:	Approved Date:
RE202100752	RES ADD-REM-REP-ACC	\$220.00	SS	03/12/2021

Conditions of Approval:

- SWO. Call for a site visit to determine permit conditions 252 449 2005

FLOOD INFORMATION

Permit #	Permit Description	Total Fees Paid/Due	Approved By:	Approved Date:
FL202100751	FLOOD PERMIT	\$0.00	SS	03/12/2021

Conditions of Approval:

ZONING INFORMATION

Permit #	Permit Description	Total Fees Paid/Due	Approved By:	Approved Date:
ZN202100753	ZONING PERMIT - RES	\$0.00	MK	03/12/2021

Conditions of Approval:

All work within footprint - deck over porch shall meet all requirements for the zoning C2 district
call for final zoning 252-449-6045

Additional Conditions:

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

PLEASE NOTE:

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

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

(ZONING) RIGHT OF APPEAL

Pursuant to Section 3.9 of the Unified Development Ordinance, Appeals of Administrative Decisions, you have the right to appeal this decision to the Nags Head Board of Adjustment within thirty (30) days of the date of this notice. This decision shall become final and unappealable if not appealed during this thirty (30) day period.



Residential Project Approval
Application # 202100272

Property Address: 4600 SOUTH ROANOKE WAY **PIN #:** 989116847781 **Parcel:** 006345000
Lot/Block/Sec: LOT: 22 & PT 23 BLK: SEC: D **Subdivision:** OLD NAGS HEAD COVE SEC D
Zoning: MEDIUM DENSITY RES DISTRICT **Land Use:** SINGLE FAMILY DWELLING, LARGE
Flood Zone: AE **Base Flood Elevation:** 9.0 **Regulatory Flood Elevation:** 9
Map Panel No: 9891 **Map Panel Date:** 06/19/2020 **Suffix:** K **Datum Used:** NAVD 1988

Owner Name: ELMWOOD REAL ESTATE INVESTMENTS, LLC
Owner Address: 500 WESTOVER DR STE 13000

Contractor Name: SETH JOHNSON CONSTRUCTION, LLC **Contractor Phone:** 252-216-8853
Contractor Address: PO Box 1433

Description: Replace deck boards & railing on existing back deck, replace 2 slider doors
Construction Value: \$5500 **Classification of Work:** RESIDENTIAL REPAIR

BUILDING INFORMATION

Permit #	Permit Description	Total Fees Paid/Due	Approved By:	Approved Date:
RE202100604	RES ADD-REM-REP-ACC	\$160.00	SS	03/01/2021

Conditions of Approval:

FLOOD INFORMATION

Permit #	Permit Description	Total Fees Paid/Due	Approved By:	Approved Date:
FL202100603	FLOOD PERMIT	\$0.00	SS	03/01/2021

Conditions of Approval:

- SWO. Call for final inspection

ZONING INFORMATION

Permit #	Permit Description	Total Fees Paid/Due	Approved By:	Approved Date:
ZN202100602	ZONING PERMIT - RES	0.00	KW	03/01/2021

Conditions of Approval:

Zoning approved to replace deck boards and railings, sliding doors - all work to be within the existing footprint. No increase in footprint or lot coverage approved. Final Zoning Inspection required prior to issuance of CO.

Additional Conditions:

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

PLEASE NOTE:

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

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

(ZONING) RIGHT OF APPEAL

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

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



**Residential Project Approval
Application # 202100278**

Property Address: 5107 SOUTH VA DARE TRL **PIN #:** 080114237097 **Parcel:** 000380027
Lot/Block/Sec: LOT: 10A BLK: SEC: **Subdivision:** DUNERIDGE ESTATES
Zoning: VILLAGE ATTACHED SF 5 **Land Use:** SINGLE FAMILY DWELLING, LARGE
Flood Zone: VE **Base Flood Elevation:** 11.0 **Regulatory Flood Elevation:** 12
Map Panel No: 0801 **Map Panel Date:** 06/19/2020 **Suffix:** K **Datum Used:** NAVD 1988

Owner Name: MITCHELL, MARY ELLEN
Owner Address: 8055 FAIRFAX RD

Contractor Name: PROPERTY OWNER **Contractor Phone:**
Contractor Address: See Above 000, 00 00000

Description: Replace deck boards & rails mid& top decks pool area & walk way to beach replace stairs on deck keeping in existing foot

Construction Value: \$26000 **Classification of Work:** RESIDENTIAL REPAIR

BUILDING INFORMATION

Permit #	Permit Description	Total Fees Paid/Due	Approved By:	Approved Date:
RE202100719	RES ADD-REM-REP-ACC	\$220.00	SS	03/11/2021

Conditions of Approval:

- Provide address #s on home if none are present. Review deck and stair condition handouts we have provided. Call for final inspection

FLOOD INFORMATION

Permit #	Permit Description	Total Fees Paid/Due	Approved By:	Approved Date:
FL202100718	FLOOD PERMIT	\$0.00	SS	03/11/2021

Conditions of Approval:

Additional Conditions:

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

PLEASE NOTE:

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

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

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

DECISION: Approved with Conditions (See above)

Responsible Party _____ Date _____



Residential Project Approval
Application # 202100317

Property Address: 6104 EAST BAYMEADOW DR **PIN #:** 080006482809 **Parcel:** 031007001
Lot/Block/Sec: LOT: 44 BLK: SEC: **Subdivision:** SEASIDE SOUTH SEC 2
Zoning: VILLAGE DET SF 3 **Land Use:** SINGLE FAMILY DWELLING
Flood Zone: AE **Base Flood Elevation:** 9.0 **Regulatory Flood Elevation:** 9
Map Panel No: 0800 **Map Panel Date:** 06/19/2020 **Suffix:** K **Datum Used:** NAVD 1988

Owner Name: MOLNAR, MARK S - MOLNAR, SUE C
Owner Address: 1029 BELVA CT

Contractor Name: Premier Coastal Contracting, LLC **Contractor Phone:** 252-305-8067
Contractor Address: PO Box 2359 Manteo, NC 27954

Description: Window replacement
Construction Value: \$20539 **Classification of Work:** RESIDENTIAL REPAIR

BUILDING INFORMATION

Permit #	Permit Description	Total Fees Paid/Due	Approved By:	Approved Date:
RE202100763	RES ADD-REM-REP-ACC	\$220.00	SS	03/12/2021

Conditions of Approval:

- Provide address #s on home if none are present. Review window permit condition handout. Call for final inspection

FLOOD INFORMATION

Permit #	Permit Description	Total Fees Paid/Due	Approved By:	Approved Date:
FL202100762	FLOOD PERMIT	\$0.00	SS	03/12/2021

Conditions of Approval:

ZONING INFORMATION

Permit #	Permit Description	Total Fees Paid/Due	Approved By:	Approved Date:
ZN202100764	ZONING PERMIT - RES	\$0.00	KW	03/12/2021

Conditions of Approval:

Zoning approved for window replacement - no increase in footprint or lot coverage permitted.

Additional Conditions:

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

PLEASE NOTE:

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

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

(ZONING) RIGHT OF APPEAL

Pursuant to Section 3.9 of the Unified Development Ordinance, Appeals of Administrative Decisions, you have the right to appeal this decision to the Nags Head Board of Adjustment within thirty (30) days of the date of this notice. This decision shall become final and unappealable if not appealed during this thirty (30) day period.

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



Residential Project Approval
Application # 202100309

Property Address: 5318 WEST CAPTAINS WAY **PIN #:** 080117115337 **Parcel:** 024961404
Lot/Block/Sec: LOT: 25 BLK: SEC: **Subdivision:** CAPTAIN'S WATCH
Zoning: VILLAGE ATTACHED SF 4 **Land Use:** SINGLE FAMILY DWELLING
Flood Zone: X **Base Flood Elevation:** 0.0 **Regulatory Flood Elevation:** 9
Map Panel No: 0801 **Map Panel Date:** 06/19/2020 **Suffix:** K **Datum Used:** NAVD 1988

Owner Name: KOMAR, FRANCIS K TTEE - KOMAR, SUSAN I
Owner Address: P.O. BOX 1562

Contractor Name: GranPlan, Inc. **Contractor Phone:** 252-305-6881
Contractor Address: 349C Water Plant Rd Manteo, NC 27954

Description: Reinforce rear deck joists for hot tub support; install 240 AMP branch circ w/GFCI protected 50 AMP weatherproof disconn

Construction Value: \$2520 **Classification of Work:** RESIDENTIAL REPAIR

BUILDING INFORMATION

Permit #	Permit Description	Total Fees Paid/Due	Approved By:	Approved Date:
RE202100740	RES ADD-REM-REP-ACC	\$130.00	SS	03/11/2021

Conditions of Approval:

- Provide address #'s on home if none are present. Pull electrical permit for Hot tub. Provide engineering for deck reinforcement. Call for final inspection

FLOOD INFORMATION

Permit #	Permit Description	Total Fees Paid/Due	Approved By:	Approved Date:
FL202100739	FLOOD PERMIT	\$0.00	SS	03/11/2021

Conditions of Approval:

Additional Conditions:

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

PLEASE NOTE:

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

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

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

DECISION: Approved with Conditions (See above)

Responsible Party Date



**Residential Project Approval
Application # 202100315**

Property Address: 5016 SOUTH VA DARE TRL **PIN #:** 080113233222 **Parcel:** 027839075
Lot/Block/Sec: LOT: 15 BLK: SEC: **Subdivision:** ELLIOTT ESTATES
Zoning: VILLAGE DET RES SF 2 **Land Use:** SINGLE FAMILY DWELLING, LARGE
Flood Zone: AE **Base Flood Elevation:** 9.0 **Regulatory Flood Elevation:** 9
Map Panel No: 0801 **Map Panel Date:** 06/19/2020 **Suffix:** K **Datum Used:** NAVD 1988

Owner Name: DPP PRPERTIES, LLC
Owner Address: 702 PADDINGTON DR

Contractor Name: JASON JOHNSON DBA JOHNSON HOME SERVICES **Contractor Phone:**
252-305-5190
Contractor Address: 504 HOLLY ST

Description: Repair/replace rotten decking sheeting, siding, some trim to doors/windows, deck boards on stairs by pool top deck boards

Construction Value: \$15000 **Classification of Work:** RESIDENTIAL REPAIR

BUILDING INFORMATION

Permit #	Permit Description	Total Fees Paid/Due	Approved By:	Approved Date:
RE202100760	RES ADD-REM-REP-ACC	\$190.00	SS	03/12/2021

Conditions of Approval:

- SWO. Call for final inspection
- Please note that your project is subject to review/approval by the Village at Nags Head POA/ACC. You are strongly encouraged to contact Emily Lewis to discuss 252-480-4707 emilylewis@villagerealtyobx.com prior to commencing construction.

FLOOD INFORMATION

Permit #	Permit Description	Total Fees Paid/Due	Approved By:	Approved Date:
FL202100759	FLOOD PERMIT	\$0.00	SS	03/12/2021

Conditions of Approval:

ZONING INFORMATION

Permit #	Permit Description	Total Fees Paid/Due	Approved By:	Approved Date:
ZN202100761	ZONING PERMIT - RES	\$0.00	KW	03/12/2021

Conditions of Approval:

Zoning approved to replace deck board and siding, replace trim - all work to be completed within the exact same footprint as previous. No increase in footprint or lot coverage permitted. Final Zoning inspection required prior to issuance of CO.

Additional Conditions:

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

PLEASE NOTE:

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

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

(ZONING) RIGHT OF APPEAL

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



Residential Project Approval
Application # 202100318

Property Address: 460 WEST VILLA DUNES DR **PIN #:** 989214320805 **Parcel:** 008543000
Lot/Block/Sec: LOT: 3 BLK: SEC: **Subdivision:** RALPH BUXTON ET ALS
Zoning: SPECIAL ENVIRONMENTAL DISTRICT **Land Use:** SINGLE FAMILY DWELLING, LARGE
Flood Zone: X **Base Flood Elevation:** 0.0 **Regulatory Flood Elevation:** 9
Map Panel No: 9892 **Map Panel Date:** 06/19/2020 **Suffix:** K **Datum Used:** NAVD 1988

Owner Name: WHITE, STANFORD M
Owner Address: BOX 1447

Contractor Name: JES CONSTRUCTION, LLC **Contractor Phone:** 757-337-4166
Contractor Address: 1741 CORPORATE LANDING PKWY STE 101

Description: Stabilize foundation using intellijacks

Construction Value: \$27000 **Classification of Work:** RESIDENTIAL REPAIR

BUILDING INFORMATION

Permit #	Permit Description	Total Fees Paid/Due	Approved By:	Approved Date:
RE202100766	RES ADD-REM-REP-ACC	\$220.00	SS	03/12/2021

Conditions of Approval:

- Call for footing inspection if needed. Call for final inspection. Have detailed plans on site that are readable. Call for final inspection

FLOOD INFORMATION

Permit #	Permit Description	Total Fees Paid/Due	Approved By:	Approved Date:
FL202100765	FLOOD PERMIT	\$0.00	SS	03/12/2021

Conditions of Approval:

ZONING INFORMATION

Permit #	Permit Description	Total Fees Paid/Due	Approved By:	Approved Date:
ZN202100767	ZONING PERMIT - RES	\$0.00	MK	03/12/2021

Conditions of Approval:

All work is within the existing footprint, no additional lot coverage or material proposed
Call for final zoning 252-449-6045

Additional Conditions:

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

PLEASE NOTE:

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

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

(ZONING) RIGHT OF APPEAL

Pursuant to Section 3.9 of the Unified Development Ordinance, Appeals of Administrative Decisions, you have the right to appeal this decision to the Nags Head Board of Adjustment within thirty (30) days of the date of this notice. This decision shall become final and unappealable if not appealed during this thirty (30) day period.



Residential Project Approval
Application # 202100324

Property Address: 6921 SOUTH VA DARE TRL **PIN #:** 080011654754 **Parcel:** 006580001
Lot/Block/Sec: LOT: 11 BLK: 4 SEC: **Subdivision:** WHALEBONE BEACHES - COMP. MAP
Zoning: COMMERCIAL/RESIDENTIAL DISTRICT **Land Use:** SINGLE FAMILY DWELLING
Flood Zone: VE **Base Flood Elevation:** 11.0 **Regulatory Flood Elevation:** 12
Map Panel No: 0800 **Map Panel Date:** 06/19/2020 **Suffix:** K **Datum Used:** NAVD 1988

Owner Name: LOVING, PRESTON B - LOVING, PAMELA F
Owner Address: 111 RIVERSIDE DR

Contractor Name: STAN WHITE CONSTRUCTION, INC. **Contractor Phone:**
Contractor Address: PO Box 1447

Description: Replacing existing deck railing on 1st & 2nd floor E decks, landings & stair railing replace front main door W side

Construction Value: \$11260 **Classification of Work:** RESIDENTIAL REPAIR

BUILDING INFORMATION

Permit #	Permit Description	Total Fees Paid/Due	Approved By:	Approved Date:
RE202100770	RES ADD-REM-REP-ACC	\$190.00	SS	03/15/2021

Conditions of Approval:

- Provide address #s on home if none are present. All work shall comply with current codes. Do not notch 4 x 4 posts. Call for final inspection

FLOOD INFORMATION

Permit #	Permit Description	Total Fees Paid/Due	Approved By:	Approved Date:
FL202100769	FLOOD PERMIT	\$0.00	SS	03/15/2021

Conditions of Approval:

ZONING INFORMATION

Permit #	Permit Description	Total Fees Paid/Due	Approved By:	Approved Date:
ZN202100768	ZONING PERMIT - RES	\$0.00	KW	03/15/2021

Conditions of Approval:

Zoning approved for replacing of deck railings, stair railings and door - all work shall be completed within the existing footprint. No increase in footprint or lot coverage permitted. Final Zoning Inspection required prior to issuance of CO.

Additional Conditions:

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

PLEASE NOTE:

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

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

(ZONING) RIGHT OF APPEAL

Pursuant to Section 3.9 of the Unified Development Ordinance, Appeals of Administrative Decisions, you have the right to appeal this decision to the Nags Head Board of Adjustment within thirty (30) days of the date of this notice. This decision shall become final and unappealable if not appealed during this thirty (30) day period.



**Residential Project Approval
Application # 202100325**

Property Address: 10247F EAST LOON CT **PIN #:** 071815722883 **Parcel:** 007418000

Lot/Block/Sec: LOT: 6 BLK: SEC: **Subdivision:** GLENLEA BEACH

Zoning: MEDIUM DENSITY RES DISTRICT **Land Use:** SINGLE FAMILY DWELLING

Flood Zone: VE **Base Flood Elevation:** 11.0 **Regulatory Flood Elevation:**

Map Panel No: **Map Panel Date:** **Suffix:** **Datum Used:**

Owner Name: BIRINGER, JAMES M JR - BIRINGER, PATRICI

Owner Address: 2305 STEMWELL BLVD

Contractor Name: PROPERTY OWNER **Contractor Phone:**

Contractor Address: See Above 000, 00 00000

Description: Reside whole house w/vinyl siding, repair 2 two story front decks facing S & stairs on W side, repair lights on deck

Construction Value: \$34000 **Classification of Work:** RESIDENTIAL REPAIR

BUILDING INFORMATION

Permit #	Permit Description	Total Fees Paid/Due	Approved By:	Approved Date:
RE202100774	RES ADD-REM-REP-ACC	\$250.00	CT	03/15/2021

Conditions of Approval:

- 1. Wall constructed on west side of carport must be built from salt treated material, and needs to be constructed so the bottom of the wall stops 18 inches above grade (open at bottom).
- 2. Any electrical work must meet the electrical code for wiring in wet locations. Standard NM cable is not approved for exterior use, Exterior circuits should be installed using UF cable, or PVC conduit with single-stranded conductors.

FLOOD INFORMATION

Permit #	Permit Description	Total Fees Paid/Due	Approved By:	Approved Date:
FL202100773	FLOOD PERMIT	\$0.00	CT	03/15/2021

Conditions of Approval:

Additional Conditions:

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

PLEASE NOTE:

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

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

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

DECISION: Approved with Conditions (See above)



Residential Project Approval
Application # 202100284

Property Address: 4721 SOUTH VA DARE TRL **PIN #:** 080109156394 **Parcel:** 008698000
Lot/Block/Sec: LOT: PT 3-4 BLK: 3 SEC: A **Subdivision:** NAGS HEAD BEACH PLAT A
Zoning: COMMERCIAL/RESIDENTIAL DISTRICT **Land Use:** SINGLE FAMILY DWELLING, LARGE
Flood Zone: VE **Base Flood Elevation:** 11.0 **Regulatory Flood Elevation:** 12
Map Panel No: 0801 **Map Panel Date:** 06/19/2020 **Suffix:** K **Datum Used:** NAVD 1988

Owner Name: SUNCOAST VINYL PRODUCTS, LLC
Owner Address: 3380 SHANNON AIRPORT CIR

Contractor Name: PROPERTY OWNER **Contractor Phone:**
Contractor Address: See Above 000, 00 00000

Description: Replace existing decking & railing on existing beach walkway from house
Construction Value: \$6500 **Classification of Work:** RESIDENTIAL REPAIR

BUILDING INFORMATION

Permit #	Permit Description	Total Fees Paid/Due	Approved By:	Approved Date:
RE202100721	RES ADD-REM-REP-ACC	\$160.00	SS	03/11/2021

Conditions of Approval:

- Provide address #s on home if none are present. Review beach walkway condition handout we have provided. Call for final inspection

FLOOD INFORMATION

Permit #	Permit Description	Total Fees Paid/Due	Approved By:	Approved Date:
FL202100720	FLOOD PERMIT	\$0.00	SS	03/11/2021

Conditions of Approval:

Additional Conditions:

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

PLEASE NOTE:

All work shall conform to all applicable North Carolina State Building codes and Ordinances of the Town of Nags Head and shall be the responsibility of the undersigned applicant.
In accordance with GS160A-418, a permit expires 6 months after the date of Issuance if the work authorized by the permit has not been commenced. If, after commencement, the work is discontinued for a period of 12 months (no inspections have taken place) the permit immediately expires. No work authorized by a permit that has expired may be performed until a new permit has been issued.

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

DECISION: Approved with Conditions (See above)

Responsible Party Date



Residential Project Approval
Application # 202100287

Property Address: 207 EAST DRIFTWOOD ST **PIN #:** 989318215830 **Parcel:** 006698000
Lot/Block/Sec: LOT: 1-2 BLK: G SEC: **Subdivision:** NAGS HEAD SHORES REVISED BLK G
Zoning: VILLAGE COMMERCIAL DISTRICT **Land Use:** DUPLEX
Flood Zone: AE **Base Flood Elevation:** 10.0 **Regulatory Flood Elevation:** 9
Map Panel No: 9893 **Map Panel Date:** 06/19/2020 **Suffix:** K **Datum Used:** NAVD 1988

Owner Name: STEWART, G DAVID III - KOWALSKI, GAIL E
Owner Address: 207 DRIFTWOOD ST

Contractor Name: PROPERTY OWNER **Contractor Phone:**
Contractor Address: See Above

Description: Replace deck, add sun shade and screen-in
Construction Value: \$5000 **Classification of Work:** RESIDENTIAL REMODEL

BUILDING INFORMATION

Permit #	Permit Description	Total Fees Paid/Due	Approved By:	Approved Date:
RE202100731	RES ADD-REM-REP-ACC	\$130.00	SS	03/11/2021

Conditions of Approval:

- Provide address #'s on home if none are present. SWO. No further work until a site visit has taken place to determine building permit conditions. Call for final inspection

FLOOD INFORMATION

Permit #	Permit Description	Total Fees Paid/Due	Approved By:	Approved Date:
FL202100729	FLOOD PERMIT	\$0.00	SS	03/11/2021

Conditions of Approval:

ZONING INFORMATION

Permit #	Permit Description	Total Fees Paid/Due	Approved By:	Approved Date:
ZN202100730	ZONING PERMIT - RES	\$0.00	MK	03/11/2021

Conditions of Approval:

Replace deck add screen porch, sunshade.
All work within existing footprint, height max 35 ft
Call for final zoning inspection 252-449-6045

Additional Conditions:

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

PLEASE NOTE:

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

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

(ZONING) RIGHT OF APPEAL

Pursuant to Section 3.9 of the Unified Development Ordinance, Appeals of Administrative Decisions, you have the right to appeal this decision to the Nags Head Board of Adjustment within thirty (30) days of the date of this notice. This decision shall become final and unappealable if not appealed during this thirty (30) day period.



Residential Project Approval
Application # 202100292

Property Address: 210 WEST CAROLINIAN CIR **PIN #:** 989317113093 **Parcel:** 005651000
Lot/Block/Sec: LOT: E BLK: SEC: **Subdivision:** CAROLINIAN COLONY
Zoning: MEDIUM DENSITY RES DISTRICT **Land Use:** SINGLE FAMILY DWELLING
Flood Zone: X **Base Flood Elevation:** 0.0 **Regulatory Flood Elevation:** 9
Map Panel No: 9893 **Map Panel Date:** 06/19/2020 **Suffix:** K **Datum Used:** NAVD 1988

Owner Name: MILLS, DAVID LYNN - MILLS, DANA SHAGEEVA
Owner Address: 210 W CAROLINIAN CIR

Contractor Name: PROPERTY OWNER **Contractor Phone:**
Contractor Address: See Above 000, 00 00000

Description: Ground level enclosure 1 bedroom, 1 bath, vanity shower, toilet, kitchenette, sink, microwave, fridge, cooktop, living rm for a total of 200 heated SF

Construction Value: \$15000 **Classification of Work:** RESIDENTIAL ADDITION

BUILDING INFORMATION

Permit #	Permit Description	Total Fees Paid/Due	Approved By:	Approved Date:
RE202100727	RES ADD-REM-REP-ACC	\$190.00	SS	03/11/2021

Conditions of Approval:

- Provide address #s on home if none are present. All subs shall pull permits prior to starting work. Call for all required inspections. A new finished flood elevation certificate may be required. Provide egress door out of structure. Provide egress window in bedroom. Provide window or fan to code in bathroom. Kitchen and living room shall meet light and ventilation requirements. New heated area shall be zoned separate. Termite treat slab. Smokes an co 2 detectors to code throughout home. Call for final inspection

FLOOD INFORMATION

Permit #	Permit Description	Total Fees Paid/Due	Approved By:	Approved Date:
FL202100725	FLOOD PERMIT	\$0.00	SS	03/11/2021

Conditions of Approval:

PUBLIC WORKS INFORMATION

Permit #	Permit Description	Total Fees Paid/Due	Approved By:	Approved Date:
PW202100726	PW APPROVAL ADDITION	\$25.00	LCN	03/11/2021

Conditions of Approval:

- Additional meter deposit for new bedroom

ZONING INFORMATION

Permit #	Permit Description	Total Fees Paid/Due	Approved By:	Approved Date:
ZN202100728	ZONING PERMIT - RES	\$0.00	MK	03/11/2021

Conditions of Approval:

- Addition of 467 sqft to enclose the carport area, add living, dining, kitchenette, bedroom and bathroom. Existing living per DC Parcel card 1,769 sqft and 476 sqft = 2,245 sqft of habitable space
- Any land disturbance shall be stabilized
- Call for final zoning inspection 252-449-6045

Additional Conditions:

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



**Residential Project Approval
Application # 202100294**

Property Address: 102 HILLSIDE CT **PIN #:** 080117212358 **Parcel:** 024961475
Lot/Block/Sec: LOT: 47 BLK: SEC: 3 **Subdivision:** RIDGES SEC 3,THE
Zoning: VILLAGE DET RES SF 2 **Land Use:** SINGLE FAMILY DWELLING
Flood Zone: X **Base Flood Elevation:** 0.0 **Regulatory Flood Elevation:** 9
Map Panel No: 0801 **Map Panel Date:** 06/19/2020 **Suffix:** K **Datum Used:** NAVD 1988

Owner Name: NIJVELDT, GERRIT-JAN - GOVERS, SANDRA A
Owner Address: 2 BARBARA DR

Contractor Name: James Curtin **Contractor Phone:**
Contractor Address: PO Box 474 Kitty Hawk, NC 27949

Description: Add a 8'x21' deck at East side of dwelling to meet existing deck
Construction Value: \$7500 **Classification of Work:** RESIDENTIAL REMODEL

BUILDING INFORMATION

Permit #	Permit Description	Total Fees Paid/Due	Approved By:	Approved Date:
RE202100743	RES ADD-REM-REP-ACC	\$160.00	SS	03/12/2021

Conditions of Approval:

- Provide address #s on home if none are present. Handrails shall meet the 2018 NC Res Code. Review deck condition handout we have provided. This deck may require a new GCFCI WR type receptacle. Call for piling inspection. Call for final inspection

FLOOD INFORMATION

Permit #	Permit Description	Total Fees Paid/Due	Approved By:	Approved Date:
FL202100742	FLOOD PERMIT	\$0.00	SS	03/12/2021

Conditions of Approval:

ZONING INFORMATION

Permit #	Permit Description	Total Fees Paid/Due	Approved By:	Approved Date:
ZN202100744	ZONING PERMIT - RES	\$0.00	MK	03/12/2021

Conditions of Approval:

- Variance requested and approved through the BOA 12/10/2020
- Deck allowed to encroach into the rear yard setback
- Call for final zoning inspection 252-449-8045

Additional Conditions:

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

PLEASE NOTE:

All work shall conform to all applicable North Carolina State Building codes and Ordinances of the Town of Nags Head and shall be the responsibility of the undersigned applicant.
In accordance with GS160A-418, a permit expires 6 months after the date of issuance if the work authorized by the permit has not been commenced. If, after commencement, the work is discontinued for a period of 12 months (no inspections have taken place) the permit immediately expires. No work authorized by a permit that has expired may be performed until a new permit has been issued.

(ZONING) RIGHT OF APPEAL

Pursuant to Section 3.9 of the Unified Development Ordinance, Appeals of Administrative Decisions, you have the right to appeal this decision to the Nags Head Board of Adjustment within thirty (30) days of the date of this notice. This decision shall become final and unappealable if not appealed during this thirty (30) day period.

TOWN OF NAGS HEAD
PO Box 99 Nags Head, NC 27959
Phone (252) 441-7018 Fax (252) 441-4290



**Residential Project Approval
Application # 202100298**

Property Address: 113 EAST SEA HOLLY CT **PIN #:** 080008497206 **Parcel:** 030987000
Lot/Block/Sec: LOT: 28 BLK: SEC: **Subdivision:** SEASIDE SOUTH
Zoning: VILLAGE DET SF 3 **Land Use:** SINGLE FAMILY DWELLING
Flood Zone: VE **Base Flood Elevation:** 11.0 **Regulatory Flood Elevation:** 12
Map Panel No: 0800 **Map Panel Date:** 08/19/2020 **Suffix:** K **Datum Used:** NAVD 1988

Owner Name: EVANS, ROBERT C - EVANS, MARY ELIZABETH
Owner Address: 2129 WKENDALL CIR

Contractor Name: Lyn Small, Inc. **Contractor Phone:** 252-473-7895
Contractor Address: 113 Ballast Rock Dr Powells Point, NC 27968

Description: Remove existing & install new beach access in existing foot print -dune deck not included at this time
(CAMA Minor Req'd)

Construction Value: \$28000 **Classification of Work:** RESIDENTIAL REPAIR

BUILDING INFORMATION

Permit #	Permit Description	Total Fees Paid/Due	Approved By:	Approved Date:
RE202100831	RES ADD-REM-REP-ACC	\$220.00	SS	03/17/2021

Conditions of Approval:

- Review beach walkway condition handout we have provided. Call for final inspection

FLOOD INFORMATION

Permit #	Permit Description	Total Fees Paid/Due	Approved By:	Approved Date:
FL202100830	FLOOD PERMIT	\$0.00	SS	03/17/2021

Conditions of Approval:

ZONING INFORMATION

Permit #	Permit Description	Total Fees Paid/Due	Approved By:	Approved Date:
ZN202100829	ZONING PERMIT - RES	\$0.00	MK	03/17/2021

Conditions of Approval:

Beach Accessway repair only, dune deck is not included on this permit until the CAMA Minor Permit is applied for and issued.

BA shall remain within existing footprint, no additional lot coverage proposed
Call for final zoning 252-449-8045

Additional Conditions:

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

PLEASE NOTE:

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

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

(ZONING) RIGHT OF APPEAL

Pursuant to Section 3.9 of the Unified Development Ordinance, Appeals of Administrative Decisions, you have the right to appeal this decision to the Nags Head Board of Adjustment within thirty (30) days of the date of this notice. This decision shall become final and unappealable if not appealed during this thirty (30) day period.

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



**Residential Project Approval
Application # 202100303**

Property Address: 334 WEST VILLA DUNES DR **PIN #:** 989214341508 **Parcel:** 006018000
Lot/Block/Sec: LOT: 16 BLK: SEC: **Subdivision:** KITTY DUNES ESTATES
Zoning: SPECIAL PLANNED DEV DISTRICT **Land Use:** SINGLE FAMILY DWELLING
Flood Zone: X **Base Flood Elevation:** 0.0 **Regulatory Flood Elevation:** 9
Map Panel No: 9892 **Map Panel Date:** 06/19/2020 **Suffix:** K **Datum Used:** NAVD 1988

Owner Name: DAISEY, ANN H - DAISEY, GREGORY R
Owner Address: 208 S CUTTYSARK LN

Contractor Name: DANIEL ANDRONOWITZ DBA D AND B BULKHEADS **Contractor Phone:** 252-455-6322
Contractor Address: 3930 PARKER ST APT B KITTY HAWK, NC 27949

Description: Install 3' retaining landscape wall 6' behind house 60' total length
Construction Value: \$9000 **Classification of Work:** RESIDENTIAL ACC STRUCTURE

BUILDING INFORMATION

Permit #	Permit Description	Total Fees Paid/Due	Approved By:	Approved Date:
RE202100748	RES ADD-REM-REP-ACC	\$160.00	SS	03/12/2021

Conditions of Approval:

- Provide address #s on home if none are present. Call for material check. Call for inspection of wall before backfilling. Call for final inspection.

FLOOD INFORMATION

Permit #	Permit Description	Total Fees Paid/Due	Approved By:	Approved Date:
FL202100747	FLOOD PERMIT	\$0.00	SS	03/12/2021

Conditions of Approval:

Additional Conditions:

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

PLEASE NOTE:

All work shall conform to all applicable North Carolina State Building codes and Ordinances of the Town of Nags Head and shall be the responsibility of the undersigned applicant.
In accordance with GS160A-418, a permit expires 6 months after the date of Issuance If the work authorized by the permit has not been commenced. If, after commencement, the work is discontinued for a period of 12 months (no inspections have taken place) the permit immediately expires. No work authorized by a permit that has expired may be performed until a new permit has been Issued.

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

DECISION: Approved with Conditions (See above)

Responsible Party Date



**Residential Project Approval
Application # 202100303**

Property Address: 334 WEST VILLA DUNES DR **PIN #:** 989214341508 **Parcel:** 006018000
Lot/Block/Sec: LOT: 16 BLK: SEC: **Subdivision:** KITTY DUNES ESTATES
Zoning: SPECIAL PLANNED DEV DISTRICT **Land Use:** SINGLE FAMILY DWELLING
Flood Zone: X **Base Flood Elevation:** 0.0 **Regulatory Flood Elevation:** 9
Map Panel No: 9892 **Map Panel Date:** 06/19/2020 **Suffix:** K **Datum Used:** NAVD 1988

Owner Name: DAISEY, ANN H - DAISEY, GREGORY R
Owner Address: 208 S CUTTYSARK LN

Contractor Name: DANIEL ANDRONOWITZ DBA D AND B BULKHEADS **Contractor Phone:** 252-455-6322
Contractor Address: 3930 PARKER ST APT B KITTY HAWK, NC 27949

Description: Install 3' retaining landscape wall 6' behind house 60' total length

Construction Value: \$9000 **Classification of Work:** RESIDENTIAL ACC STRUCTURE

BUILDING INFORMATION

Permit #	Permit Description	Total Fees Paid/Due	Approved By:	Approved Date:
RE202100748	RES ADD-REM-REP-ACC	\$160.00	SS	03/12/2021

Conditions of Approval:

- Provide address #s on home if none are present. Call for material check. Call for inspection of wall before backfilling. Call for final inspection.

FLOOD INFORMATION

Permit #	Permit Description	Total Fees Paid/Due	Approved By:	Approved Date:
FL202100747	FLOOD PERMIT	\$0.00	SS	03/12/2021

Conditions of Approval:

Additional Conditions:

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

PLEASE NOTE:

All work shall conform to all applicable North Carolina State Building codes and Ordinances of the Town of Nags Head and shall be the responsibility of the undersigned applicant. In accordance with GS160A-418, a permit expires 6 months after the date of issuance if the work authorized by the permit has not been commenced. If, after commencement, the work is discontinued for a period of 12 months (no inspections have taken place) the permit immediately expires. No work authorized by a permit that has expired may be performed until a new permit has been issued.

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

DECISION: Approved with Conditions (See above)

Responsible Party _____ Date _____



Residential Project Approval
Application # 202100305

Property Address: 5710 RIDGE LN **PIN #:** 080117204691 **Parcel:** 024961216
Lot/Block/Sec: LOT: 16 BLK: SEC: 2 **Subdivision:** RIDGES SEC 2,THE
Zoning: VILLAGE DET RES SF 2 **Land Use:** SINGLE FAMILY DWELLING
Flood Zone: AE **Base Flood Elevation:** 9.0 **Regulatory Flood Elevation:** 9
Map Panel No: 0801 **Map Panel Date:** 06/19/2020 **Suffix:** k **Datum Used:** NAVD 1988

Owner Name: KANE, JOHN - KANE, LOUANN
Owner Address: 145 HONORS LN

Contractor Name: SALTY SOULS INC **Contractor Phone:** 252-564-5101
Contractor Address: P. O. BOX 69

Description: Replace existing west facing deck, handrails & stairs, no change in existing footprint, using existing pilings

Construction Value: \$15000 **Classification of Work:** RESIDENTIAL REPAIR

BUILDING INFORMATION

Permit #	Permit Description	Total Fees Paid/Due	Approved By:	Approved Date:
RE202100755	RES ADD-REM-REP-ACC	\$190.00	SS	03/12/2021

Conditions of Approval:

- No plans. Work will be inspected at final. Review deck repair condition handout we have provided. Call for final inspection

FLOOD INFORMATION

Permit #	Permit Description	Total Fees Paid/Due	Approved By:	Approved Date:
FL202100754	FLOOD PERMIT	\$0.00	SS	03/12/2021

Conditions of Approval:

ZONING INFORMATION

Permit #	Permit Description	Total Fees Paid/Due	Approved By:	Approved Date:
ZN202100756	ZONING PERMIT - RES	\$0.00	MK	03/12/2021

Conditions of Approval:

Zoning approved to replace side deck, handrails and stairs. All work shall be within the existing footprint, no increase in footprint or lot coverage permitted. Final zoning inspection required prior to issuance of CO.

Additional Conditions:

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

PLEASE NOTE:

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

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

(ZONING) RIGHT OF APPEAL

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



Residential Project Approval
Application # 202100328

Property Address: 9308 SOUTH OLD OREGON INLET RD **PIN #:** 071918301854 **Parcel:** 007970043

Lot/Block/Sec: LOT: 43 BLK: SEC: **Subdivision:** HOLLYWD BCH RECOMB/SO CREEK AC

Zoning: MEDIUM DENSITY RES DISTRICT **Land Use:** SINGLE FAMILY DWELLING

Flood Zone: AE **Base Flood Elevation:** 11.0 **Regulatory Flood Elevation:** 9

Map Panel No: 0719 **Map Panel Date:** 06/19/2020 **Suffix:** K **Datum Used:** NAVD 1988

Owner Name: RAPPAPORT OBX RENTALS LLC

Owner Address: 16231 WISHARD RD

Contractor Name: SIMPLESIDE CONSTRUCTION, INC.

Contractor Phone: 252-564-8307

Contractor Address: 308 W Helga St

Description: Remove all deck member form the 1st & 2nd level decks except existing 8x8 pilings, install new members in exist footprint

Construction Value: \$29500

Classification of Work: RESIDENTIAL REPAIR

BUILDING INFORMATION

Permit #	Permit Description	Total Fees Paid/Due	Approved By:	Approved Date:
RE202100777	RES ADD-REM-REP-ACC	\$220.00	SS	03/15/2021

Conditions of Approval:

- Review deck repair condition handout. Engineering could be requested. Call for final inspection

FLOOD INFORMATION

Permit #	Permit Description	Total Fees Paid/Due	Approved By:	Approved Date:
FL202100776	FLOOD PERMIT	\$0.00	SS	03/15/2021

Conditions of Approval:

ZONING INFORMATION

Permit #	Permit Description	Total Fees Paid/Due	Approved By:	Approved Date:
ZN202100775	ZONING PERMIT - RES	\$0.00	MK	03/15/2021

Conditions of Approval:

Zoning is approved to replace decking (excluding pilings) within the same footprint as previous. No increase in footprint or lot coverage is permitted. Final Zoning Inspection required prior to issuance of CO.

Additional Conditions:

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

PLEASE NOTE:

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

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

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**Residential Project Approval
Application # 202100331**

Property Address: 10221 SOUTH BODIE ISLE CT **PIN #:** 071815639345 **Parcel:** 007478000
Lot/Block/Sec: LOT: 44 BLK: SEC: **Subdivision:** GOOSE WING
Zoning: MEDIUM DENSITY RES DISTRICT **Land Use:** SINGLE FAMILY DWELLING
Flood Zone: VE **Base Flood Elevation:** 11.0 **Regulatory Flood Elevation:** 12
Map Panel No: 0718 **Map Panel Date:** 06/19/2020 **Suffix:** K **Datum Used:** NAVD 1988

Owner Name: HACKWORTH INVESTMENT GROUP LLC
Owner Address: 513 BRENTMEADE DR

Contractor Name: PROPERTY OWNER **Contractor Phone:**
Contractor Address: See Above 000, 00 00000

Description: Repair/replace lower stairs to match existing stairs; repair any rot
Construction Value: \$2200 **Classification of Work:** RESIDENTIAL REPAIR

BUILDING INFORMATION

Permit #	Permit Description	Total Fees Paid/Due	Approved By:	Approved Date:
RE202100758	RES ADD-REM-REP-ACC	\$100.00	SS	03/12/2021

Conditions of Approval:

- Provide address #s on home if none are present. Stairs shall meet today's code. Call for final inspection

FLOOD INFORMATION

Permit #	Permit Description	Total Fees Paid/Due	Approved By:	Approved Date:
FL202100757	FLOOD PERMIT	\$0.00	SS	03/12/2021

Conditions of Approval:

Additional Conditions:

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

PLEASE NOTE:

All work shall conform to all applicable North Carolina State Building codes and Ordinances of the Town of Nags Head and shall be the responsibility of the undersigned applicant.
In accordance with GS160A-418, a permit expires 6 months after the date of issuance if the work authorized by the permit has not been commenced. If, after commencement, the work is discontinued for a period of 12 months (no inspections have taken place) the permit immediately expires. No work authorized by a permit that has expired may be performed until a new permit has been issued.

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

DECISION: Approved with Conditions (See above)

Responsible Party Date



**Residential Project Approval
Application # 202100333**

Property Address: 200 EAST SEA GULL DR **PIN #:** 071815629917 **Parcel:** 007459000
Lot/Block/Sec: LOT: 26 BLK: SEC: **Subdivision:** GOOSE WING
Zoning: MEDIUM DENSITY RES DISTRICT **Land Use:** SINGLE FAMILY DWELLING
Flood Zone: VE **Base Flood Elevation:** 11.0 **Regulatory Flood Elevation:** 12
Map Panel No: 0718 **Map Panel Date:** 06/19/2020 **Suffix:** K **Datum Used:** NAVD 1988

Owner Name: GARRETT, SHIRLEY B
Owner Address: 102 W CRAIG END CT

Contractor Name: PROPERTY OWNER **Contractor Phone:**
Contractor Address: See Above 000, 00 00000

Description: Replace exterior primary exterior stairs SWO
Construction Value: \$2850 **Classification of Work:** RESIDENTIAL REPAIR

BUILDING INFORMATION

Permit #	Permit Description	Total Fees Paid/Due	Approved By:	Approved Date:
RE202100780	RES ADD-REM-REP-ACC	\$130.00	SS	03/15/2021

Conditions of Approval:
- Provide address #s on home if none are present. Review stair handout we have provided. Call for final inspection

FLOOD INFORMATION

Permit #	Permit Description	Total Fees Paid/Due	Approved By:	Approved Date:
FL202100779	FLOOD PERMIT	\$0.00	SS	03/15/2021

Conditions of Approval:

Additional Conditions:

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

PLEASE NOTE:

All work shall conform to all applicable North Carolina State Building codes and Ordinances of the Town of Nags Head and shall be the responsibility of the undersigned applicant.
In accordance with GS160A-418, a permit expires 6 months after the date of Issuance if the work authorized by the permit has not been commenced. If, after commencement, the work is discontinued for a period of 12 months (no inspections have taken place) the permit immediately expires. No work authorized by a permit that has expired may be performed until a new permit has been issued.

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

DECISION: Approved with Conditions (See above)

Responsible Party Date

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



Residential Project Approval
Application # 202100339

Property Address: 10038 SOUTH COLONY SOUTH DR **PIN #:** 071815548399 **Parcel:** 009055000

Lot/Block/Sec: LOT: 124 BLK: SEC: **Subdivision:** OCEAN COLONY SOUTH

Zoning: MEDIUM DENSITY RES DISTRICT **Land Use:** SINGLE FAMILY DWELLING

Flood Zone: AE **Base Flood Elevation:** 10.0 **Regulatory Flood Elevation:** 9

Map Panel No: 0718 **Map Panel Date:** 06/19/2020 **Suffix:** K **Datum Used:** NAVD 1988

Owner Name: GAZDEK, STEVEN P - GAZDEK, KATHRYN T

Owner Address: 1043 AUMACK RD

Contractor Name: Gibbs Daughters NC, LLC

Contractor Phone: 252-202-5991

Contractor Address: PO Box 2387 Manteo, NC 27954

Description: Demo deck boards and handrails on the top-level deck. Inst all prime treated ground contact deck boards and handrails w

Construction Value: \$6500

Classification of Work: RESIDENTIAL REPAIR

BUILDING INFORMATION

Permit #	Permit Description	Total Fees Paid/Due	Approved By:	Approved Date:
RE202100838	RES ADD-REM-REP-ACC	\$160.00	SS	03/17/2021

Conditions of Approval:

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

FLOOD INFORMATION

Permit #	Permit Description	Total Fees Paid/Due	Approved By:	Approved Date:
FL202100837	FLOOD PERMIT	\$0.00	SS	03/17/2021

Conditions of Approval:

Additional Conditions:

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

PLEASE NOTE:

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

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

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

DECISION: Approved with Conditions (See above)

Responsible Party _____

Date _____

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



Residential Project Approval
Application # 202100368

Property Address: 4707 SOUTH VA DARE TRL **PIN #:** 080109153652 **Parcel:** 008693000
Lot/Block/Sec: LOT: PT 6 BLK: 2 SEC: A **Subdivision:** NAGS HEAD BEACH PLAT A
Zoning: COMMERCIAL/RESIDENTIAL DISTRIC **Land Use:** SINGLE FAMILY DWELLING
Flood Zone: VE **Base Flood Elevation:** 11.0 **Regulatory Flood Elevation:** 12
Map Panel No: 0801 **Map Panel Date:** 06/19/2020 **Suffix:** K **Datum Used:** NAVD 1988

Owner Name: HICKS, JOHN ROBERT JR - HICKS, CAROLYN C
Owner Address: 3718 STRATFORD RD

Contractor Name: BROOKS HOME RENOVATIONS **Contractor Phone:**
Contractor Address: P.O. BOX 395 WANCHESE, NC 27981

Description: Replace decking: boards, hand rails & steps on upper level and ground level decks 4/7 Tearing down/replacing rafters plywood & front wall on and over sunroom, replacing joist on roof deck

Construction Value: \$24800 **Classification of Work:** RESIDENTIAL REPAIR

BUILDING INFORMATION

Permit #	Permit Description	Total Fees Paid/Due	Approved By:	Approved Date:
RE202100843	RES ADD-REM-REP-ACC	\$220.00	CT	03/17/2021

Conditions of Approval:

- Provide address #s on home if none are present. Review deck repair condition handout we have provided. Stairs shall meet code. Call for final inspection

FLOOD INFORMATION

Permit #	Permit Description	Total Fees Paid/Due	Approved By:	Approved Date:
FL202100842	FLOOD PERMIT	\$0.00	CT	03/17/2021

Conditions of Approval:

Additional Conditions:

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

PLEASE NOTE:

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

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

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

DECISION: Approved with Conditions (See above)

Responsible Party _____ Date _____



Residential Project Approval
Application # 202100371

Property Address: 2812 SOUTH LOST COLONY DR . **PIN #:** 989205271616 **Parcel:** 005852032

Lot/Block/Sec: LOT: 32 BLK: C SEC: **Subdivision:** VISTA COLONY WEST

Zoning: MEDIUM DENSITY RES DISTRICT **Land Use:** SINGLE FAMILY DWELLING

Flood Zone: X

Owner Name: MCCONNELL, DAVID J

Owner Address: 104 MARINA DR

Contractor Name: DAVID HARROD DBA SIDING UNLIMITED

Contractor Phone: 252-449-4135

Contractor Address: 2818 S Lost Colony Drive

Description: Remove deteriorating handrails, decking & joists; replace with new treated lumber & SS fasteners

Construction Value: \$4900

Classification of Work: RESIDENTIAL REPAIR

BUILDING INFORMATION

Permit #	Permit Description	Total Fees Paid/Due	Approved By:	Approved Date:
RE202100931	RES ADD-REM-REP-ACC	\$130.00	SS	03/23/2021

Conditions of Approval:

- Provide address #s on home if none are present. All work shall meet current code. Review deck permit condition handout we have provided. Call for final inspection

ZONING INFORMATION

Permit #	Permit Description	Total Fees Paid/Due	Approved By:	Approved Date:
ZN202100930	ZONING PERMIT - RES	\$0.00	KW	03/23/2021

Conditions of Approval:

- Zoning approved to remove and replace deteriorating decking, all work to be within the same footprint - no increase in footprint or lot coverage permitted. Final zoning inspection required prior to issuance of CO.

Additional Conditions:

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

PLEASE NOTE:

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

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

(ZONING) RIGHT OF APPEAL

Pursuant to Section 3.9 of the Unified Development Ordinance, Appeals of Administrative Decisions, you have the right to appeal this decision to the Nags Head Board of Adjustment within thirty (30) days of the date of this notice. This decision shall become final and unappealable if not appealed during this thirty (30) day period.

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

DECISION: Approved with Conditions (See above)

Responsible Party

Date



**Residential Project Approval
Application # 202100379**

Property Address: 9810 EAST SURFSIDE DR **PIN #:** 071811574141 **Parcel:** 008905000
Lot/Block/Sec: LOT: 16 BLK: SEC: **Subdivision:** CHAWANOOK CAY
Zoning: MEDIUM DENSITY RES DISTRICT **Land Use:** SINGLE FAMILY DWELLING
Flood Zone: VE **Base Flood Elevation:** 11.0 **Regulatory Flood Elevation:** 12
Map Panel No: 0718 **Map Panel Date:** 06/19/2020 **Suffix:** K **Datum Used:** NAVD 1988

Owner Name: SANTA MARIA, SALVATORE A III - SANTA MA
Owner Address: 115 CARTER RD

Contractor Name: PROPERTY OWNER **Contractor Phone:**
Contractor Address: See Above 000, 00 00000

Description: Replace railings and deck boards on 1st and 2nd level decks
Construction Value: \$6000 **Classification of Work:** RESIDENTIAL REPAIR

BUILDING INFORMATION

Permit #	Permit Description	Total Fees Paid/Due	Approved By:	Approved Date:
RE202100852	RES ADD-REM-REP-ACC	\$160.00	SS	03/17/2021

Conditions of Approval:

- Provide address #s on home if none are present. All work shall comply with current code. 4 x 4 posts shall not be notched. Max spacing of posts is 8 foot center to center. 2 - 3/8 thru bolt connections. Call for final inspection

FLOOD INFORMATION

Permit #	Permit Description	Total Fees Paid/Due	Approved By:	Approved Date:
FL202100851	FLOOD PERMIT	\$0.00	SS	03/17/2021

Conditions of Approval:

Additional Conditions:

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

PLEASE NOTE:

All work shall conform to all applicable North Carolina State Building codes and Ordinances of the Town of Nags Head and shall be the responsibility of the undersigned applicant. In accordance with GS160A-418, a permit expires 6 months after the date of issuance if the work authorized by the permit has not been commenced. If, after commencement, the work is discontinued for a period of 12 months (no inspections have taken place) the permit immediately expires. No work authorized by a permit that has expired may be performed until a new permit has been issued.

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

DECISION: Approved with Conditions (See above)

Responsible Party _____ Date _____



**Residential Project Approval
Application # 202100376**

Property Address: 5104 SOUTH VA DARE TRL **PIN #:** 080113224974 **Parcel:** 027839070
Lot/Block/Sec: LOT: 10 BLK: SEC: **Subdivision:** ELLIOTT ESTATES
Zoning: VILLAGE DET RES SF 2 **Land Use:** SINGLE FAMILY DWELLING, LARGE
Flood Zone: AE **Base Flood Elevation:** 9.0 **Regulatory Flood Elevation:** 9
Map Panel No: 0801 **Map Panel Date:** 06/19/2020 **Suffix:** K **Datum Used:** NAVD 1988

Owner Name: HICKS, ALAN BRADLEY - HICKS, JANE BLANCH
Owner Address: 12814 HOLLY GROVE CT

Contractor Name: PROPERTY OWNER **Contractor Phone:**
Contractor Address: See Above 000,00 00000

Description: Replace worn out rail on third floor deck; rear of house SWO
Construction Value: \$1500 **Classification of Work:** RESIDENTIAL REPAIR

BUILDING INFORMATION

Permit #	Permit Description	Total Fees Paid/Due	Approved By:	Approved Date:
RE202100848	RES ADD-REM-REP-ACC	\$100.00	SS	03/17/2021

Conditions of Approval:

- SWO. Work complete. 4 x 4 posts shall not be notched. Max post spacing center to center is 8 feet. 2 - 3/8 thru bolts per post connections. Call for final inspections

FLOOD INFORMATION

Permit #	Permit Description	Total Fees Paid/Due	Approved By:	Approved Date:
FL202100847	FLOOD PERMIT	\$0.00	SS	03/17/2021

Conditions of Approval:

Additional Conditions:

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

PLEASE NOTE:

All work shall conform to all applicable North Carolina State Building codes and Ordinances of the Town of Nags Head and shall be the responsibility of the undersigned applicant. In accordance with GS160A-418, a permit expires 6 months after the date of issuance if the work authorized by the permit has not been commenced. If, after commencement, the work is discontinued for a period of 12 months (no inspections have taken place) the permit immediately expires. No work authorized by a permit that has expired may be performed until a new permit has been issued.

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

DECISION: Approved with Conditions (See above)

Responsible Party Date

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



Residential Project Approval
Application # 202100384

Property Address: 6925 SOUTH VA DARE TRL **PIN #:** 080011654687 **Parcel:** 006580003
Lot/Block/Sec: LOT: 13 BLK: 4 SEC: **Subdivision:** WHALEBONE BEACHES - COMP. MAP
Zoning: COMMERCIAL/RESIDENTIAL DISTRIC **Land Use:** SINGLE FAMILY DWELLING
Flood Zone: VE **Base Flood Elevation:** 11.0 **Regulatory Flood Elevation:** 12
Map Panel No: 0800 **Map Panel Date:** 06/19/2020 **Suffix:** K **Datum Used:** NAVD 1988

Owner Name: A/C PROPERTIES LIMITED - LIABILITY COMPA
Owner Address: 225 EVERHART DR

Contractor Name: PHILIP C. KANIS T/A CEDAR SCAPE CONST. C **Contractor Phone:** 252-480-5547
Contractor Address: 713 Colington Drive Kill Devil Hills, NC 27948

Description: Remove & replace 2nd floor east decking (only) replace 3 set s of stairs
Construction Value: \$8700 **Classification of Work:** RESIDENTIAL REPAIR

BUILDING INFORMATION

Permit #	Permit Description	Total Fees Paid/Due	Approved By:	Approved Date:
RE202100939	RES ADD-REM-REP-ACC	\$160.00	SS	03/23/2021

Conditions of Approval:
- Provide address #s on home if none are present. Review deck permit condition handout we have provided. Call for final inspection

FLOOD INFORMATION

Permit #	Permit Description	Total Fees Paid/Due	Approved By:	Approved Date:
FL202100938	FLOOD PERMIT	\$0.00	SS	03/23/2021

Conditions of Approval:

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

PLEASE NOTE:

All work shall conform to all applicable North Carolina State Building codes and Ordinances of the Town of Nags Head and shall be the responsibility of the undersigned applicant.
In accordance with GS160A-418, a permit expires 6 months after the date of Issuance if the work authorized by the permit has not been commenced. If, after commencement, the work is discontinued for a period of 12 months (no inspections have taken place) the permit immediately expires. No work authorized by a permit that has expired may be performed until a new permit has been issued.

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

DECISION: Approved with Conditions (See above)

Responsible Party _____ Date _____



Residential Project Approval
Application # 202100385

Property Address: 117 OVERLOOK CT **PIN #:** 080118207622 **Parcel:** 024961261
Lot/Block/Sec: LOT: 61 BLK: SEC: 2 **Subdivision:** RIDGES SEC 2,THE
Zoning: VILLAGE DET RES SF 2 **Land Use:** SINGLE FAMILY DWELLING
Flood Zone: X **Base Flood Elevation:** 0.0 **Regulatory Flood Elevation:** 9
Map Panel No: 0801 **Map Panel Date:** 06/19/2020 **Suffix:** K **Datum Used:** NAVD 1988

Owner Name: BURGESS, STEPHAN H - BURGESS, ELLEN C
Owner Address: P.O. BOX 728

Contractor Name: PROPERTY OWNER **Contractor Phone:**
Contractor Address: See Above

Description: Construct 13'X14' 1st floor addition on SE side of house; en close 18X14' room on grd level total 434 htd sf see txt

Construction Value: \$55000 **Classification of Work:** RESIDENTIAL ADDITION

BUILDING INFORMATION

Permit #	Permit Description	Total Fees Paid/Due	Approved By:	Approved Date:
RE202101067	RES ADD-REM-REP-ACC	\$310.00	SS	03/30/2021

Conditions of Approval:

- Provide address #s on home if none are present. New ground floor heated space shall be at or above 9 foot RFPE / shall be verified. Call for all required inspections. Pull trade permits prior to starting work. A new flood elevation cert may be required. Call for a site visit prior to starting construction. Call Steve at 252 449 2005

FLOOD INFORMATION

Permit #	Permit Description	Total Fees Paid/Due	Approved By:	Approved Date:
FL202101066	FLOOD PERMIT	\$0.00	SS	03/30/2021

Conditions of Approval:

ZONING INFORMATION

Permit #	Permit Description	Total Fees Paid/Due	Approved By:	Approved Date:
ZN202101065	ZONING PERMIT - RES	\$0.00	MK	03/30/2021

Conditions of Approval:

Addition shall maintain all setbacks
any land disturbance shall require silt fencing and stabilization once complete
as-built may be required prior to final zoning inspection
Call zoning for final inspection 252-449-6045

Additional Conditions:

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

PLEASE NOTE:

All work shall conform to all applicable North Carolina State Building codes and Ordinances of the Town of Nags Head and shall be the responsibility of the undersigned applicant.
In accordance with GS160A-418, a permit expires 6 months after the date of issuance if the work authorized by the permit has not been commenced. If, after commencement, the work is discontinued for a period of 12 months (no inspections have taken place) the permit immediately expires. No work authorized by a permit that has expired may be performed until a new permit has been issued.

(ZONING) RIGHT OF APPEAL



Residential Project Approval
Application # 202100386

Property Address: 2415 SOUTH VA DARE TRL **PIN #:** 989318315522 **Parcel:** 028244008
Lot/Block/Sec: LOT: 8 BLK: SEC: 2 **Subdivision:** CONCH SHELL ESTATES
Zoning: COMMERCIAL/RESIDENTIAL DISTRICT **Land Use:** SINGLE FAMILY DWELLING, LARGE
Flood Zone: VE **Base Flood Elevation:** 11.0 **Regulatory Flood Elevation:** 12
Map Panel No: 9893 **Map Panel Date:** 06/19/2020 **Suffix:** K **Datum Used:** NAVD 1988

Owner Name: ITA NAGS HEAD, LLC
Owner Address: 218 JERNIGAN LN

Contractor Name: Frasca Custom Homes, LLC **Contractor Phone:** 252-480-0515
Contractor Address: 2401 Colington Rd

Description: Remove existing roof installing new Davinci Multiwidth synth etic shake edge 8" roofing system, cap starter ss fasteners
Construction Value: \$86480 **Classification of Work:** RESIDENTIAL REPAIR

BUILDING INFORMATION

Permit #	Permit Description	Total Fees Paid/Due	Approved By:	Approved Date:
RE202100823	RES ADD-REM-REP-ACC	\$400.00	SS	03/17/2021

Conditions of Approval:
- Provide address #s on home if none are present. Call for material check./ Call for final inspection

FLOOD INFORMATION

Permit #	Permit Description	Total Fees Paid/Due	Approved By:	Approved Date:
FL202100822	FLOOD PERMIT	\$0.00	SS	03/17/2021

Conditions of Approval:

ZONING INFORMATION

Permit #	Permit Description	Total Fees Paid/Due	Approved By:	Approved Date:
ZN202100821	ZONING PERMIT - RES	\$0.00	KW	03/17/2021

Conditions of Approval:
Zoning approved for new roof only - no increase in footprint, lot coverage and overall height. Final Zoning Inspection required.

Additional Conditions:

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

PLEASE NOTE:

All work shall conform to all applicable North Carolina State Building codes and Ordinances of the Town of Nags Head and shall be the responsibility of the undersigned applicant.
In accordance with GS160A-418, a permit expires 6 months after the date of issuance if the work authorized by the permit has not been commenced. If, after commencement, the work is discontinued for a period of 12 months (no inspections have taken place) the permit immediately expires. No work authorized by a permit that has expired may be performed until a new permit has been issued.

(ZONING) RIGHT OF APPEAL

Pursuant to Section 3.9 of the Unified Development Ordinance, Appeals of Administrative Decisions, you have the right to appeal this decision to the Nags Head Board of Adjustment within thirty (30) days of the date of this notice. This decision shall become final and unappealable if not appealed during this thirty (30) day period.

TOWN OF NAGS HEAD
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Residential Project Approval
Application # 202100406

Property Address: 3328 SOUTH MEMORIAL AVE **PIN #:** 989211655770 **Parcel:** 016551008
Lot/Block/Sec: LOT: 5 BLK: SEC: **Subdivision:** OLD NAGS HEAD PLACE
Zoning: HIGH DENSITY RES DISTRICT **Land Use:** SINGLE FAMILY DWELLING, LARGE
Flood Zone: AE **Base Flood Elevation:** 10.0 **Regulatory Flood Elevation:** 9
Map Panel No: 9892 **Map Panel Date:** 08/19/2020 **Suffix:** K **Datum Used:** NAVD 1988

Owner Name: MEADS PROPERTIES, INC
Owner Address: 147 PELICAN POINT DR

Contractor Name: DARRELL MARSHALL **Contractor Phone:** 252-256-3652
Contractor Address: 1165 Collington Rd

Description: Resurface back deck/rails
Construction Value: \$9000 **Classification of Work:** RESIDENTIAL REPAIR

BUILDING INFORMATION

Permit #	Permit Description	Total Fees Paid/Due	Approved By:	Approved Date:
RE202100935	RES ADD-REM-REP-ACC	\$160.00	SS	03/23/2021

Conditions of Approval:

- Review deck repair permit condition handout we have provided. Call for final inspection

FLOOD INFORMATION

Permit #	Permit Description	Total Fees Paid/Due	Approved By:	Approved Date:
FL202100934	FLOOD PERMIT	\$0.00	SS	03/23/2021

Conditions of Approval:

ZONING INFORMATION

Permit #	Permit Description	Total Fees Paid/Due	Approved By:	Approved Date:
ZN202100933	ZONING PERMIT - RES	\$0.00	KW	03/23/2021

Conditions of Approval:

Zoning is approved to resurface deck and install new handrails, all work to be within the existing footprint, no increase in footprint or lot coverage permitted.

Final Zoning Inspection required prior to issuance of CO.

Additional Conditions:

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

PLEASE NOTE:

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

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

(ZONING) RIGHT OF APPEAL

Pursuant to Section 3.9 of the Unified Development Ordinance, Appeals of Administrative Decisions, you have the right to appeal this decision to the Nags Head Board of Adjustment within thirty (30) days of the date of this notice. This decision shall become final and unappealable if not appealed during this thirty (30) day period.

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Residential Project Approval
Application # 202100412

Property Address: 9814 EAST SURFSIDE DR **PIN #:** 071811574083 **Parcel:** 008906000
Lot/Block/Sec: LOT: 17 BLK: SEC: **Subdivision:** CHAWANOOK CAY
Zoning: MEDIUM DENSITY RES DISTRICT **Land Use:** SINGLE FAMILY DWELLING
Flood Zone: VE **Base Flood Elevation:** 11.0 **Regulatory Flood Elevation:** 9
Map Panel No: 0718 **Map Panel Date:** 06/19/2020 **Suffix:** K **Datum Used:** NAVD 1988

Owner Name: KIMM, DEBRA J
Owner Address: 6757 LEOPOLDS TRL

Contractor Name: PROPERTY OWNER **Contractor Phone:**
Contractor Address: See Above 000, 00 00000

Description: Repair/replace deck rails where needed
Construction Value: \$3000 **Classification of Work:** RESIDENTIAL REPAIR

BUILDING INFORMATION

Permit #	Permit Description	Total Fees Paid/Due	Approved By:	Approved Date:
RE202100901	RES ADD-REM-REP-ACC	\$130.00	SS	03/19/2021

Conditions of Approval:

- Provide address #'s on home if none are present. Review deck repair condition handout we have provided. Call for final inspection

FLOOD INFORMATION

Permit #	Permit Description	Total Fees Paid/Due	Approved By:	Approved Date:
FL202100900	FLOOD PERMIT	\$0.00	SS	03/19/2021

Conditions of Approval:

Additional Conditions:

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

PLEASE NOTE:

All work shall conform to all applicable North Carolina State Building codes and Ordinances of the Town of Nags Head and shall be the responsibility of the undersigned applicant. In accordance with GS160A-418, a permit expires 6 months after the date of issuance if the work authorized by the permit has not been commenced. If, after commencement, the work is discontinued for a period of 12 months (no inspections have taken place) the permit immediately expires. No work authorized by a permit that has expired may be performed until a new permit has been issued.

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

DECISION: Approved with Conditions (See above)

Responsible Party _____ Date _____



Residential Project Approval
Application # 202100418

Property Address: 212 WEST ALBEMARLE DR **PIN #:** 989205284456 **Parcel:** 005875000

Lot/Block/Sec: LOT: 31 BLK: D SEC: **Subdivision:** VISTA COLONY WEST

Zoning: MEDIUM DENSITY RES DISTRICT **Land Use:** SINGLE FAMILY DWELLING

Flood Zone: X **Base Flood Elevation:** 0.0 **Regulatory Flood Elevation:**

Map Panel No: **Map Panel Date:** **Suffix:** **Datum Used:**

Owner Name: ESTRADA, FRANCISCO A - ESTRADA, SANDICA

Owner Address: P. O. BOX 2730

Contractor Name: PROPERTY OWNER

Contractor Phone:

Contractor Address: See Above

000, 00 00000

Description: 611 htd SF addition: enclose upper lvl front porch to expand living room & kitchen; on ground level, expand the laundry room and add a bedroom and bathroom; expand deck on west side of house for an additional 52.2 SF

Construction Value: \$15000

Classification of Work: RESIDENTIAL ADDITION

BUILDING INFORMATION

Permit #	Permit Description	Total Fees Paid/Due	Approved By:	Approved Date:
RE202101029	RES ADD-REM-REP-ACC	\$190.00	CT	03/29/2021

Conditions of Approval:

FLOOD INFORMATION

Permit #	Permit Description	Total Fees Paid/Due	Approved By:	Approved Date:
FL202101028	FLOOD PERMIT	\$0.00	CT	03/29/2021

Conditions of Approval:

PUBLIC WORKS INFORMATION

Permit #	Permit Description	Total Fees Paid/Due	Approved By:	Approved Date:
PW202101083	PW APPROVAL RES ADD	\$25.00	LCN	03/29/2021

Conditions of Approval:

ZONING INFORMATION

Permit #	Permit Description	Total Fees Paid/Due	Approved By:	Approved Date:
ZN202101027	ZONING PERMIT - RES	\$0.00	MK	03/29/2021

Conditions of Approval:

- Additional bedroom proposed
- All work shall maintain setbacks
- Call for final zoning 252-449-6045

Additional Conditions:

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

PLEASE NOTE:

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



Residential Project Approval
Application # 202100420

Property Address: 2104 SOUTH CROATAN HWY **PIN #:** 989313121901 **Parcel:** 008360000
Lot/Block/Sec: LOT: 1-3 & 8-10 BLK: 4 SEC: **Subdivision:** FRESH POND BEACHES
Zoning: GENERAL COMMERCIAL DISTRICT **Land Use:** OFFICE/RETAIL
Flood Zone: AE **Base Flood Elevation:** 10.0 **Regulatory Flood Elevation:** 9
Map Panel No: 9893 **Map Panel Date:** 06/19/2020 **Suffix:** K **Datum Used:** NAVD 1988

Owner Name: DARE COUNTY ABC BOARD
Owner Address: P O BOX 1879

Contractor Name: OCEAN BUILDERS, LLC **Contractor Phone:** 252-480-5514
Contractor Address: 349 Water Plant Rd Unit E

Description: Replace decorative brick around one column at front entry of Dare County ABC Store
Construction Value: \$5000 **Classification of Work:** COMMERCIAL REPAIR

BUILDING INFORMATION

Permit #	Permit Description	Total Fees Paid/Due	Approved By:	Approved Date:
CA202100946	COMM ADD-REM-REP-ACC	\$130.00	SS	03/23/2021

Conditions of Approval:
- Call for final inspection

FLOOD INFORMATION

Permit #	Permit Description	Total Fees Paid/Due	Approved By:	Approved Date:
FL202100945	FLOOD PERMIT	\$0.00	SS	03/23/2021

Conditions of Approval:

ZONING INFORMATION

Permit #	Permit Description	Total Fees Paid/Due	Approved By:	Approved Date:
ZN202100944	ZONING PERMIT - COMM	\$0.00	KW	03/23/2021

Conditions of Approval:
Zoning approved to replace bricks around entry column that sustained damage. All work within the existing footprint.

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

PLEASE NOTE:

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

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

(ZONING) RIGHT OF APPEAL

Pursuant to Section 3.9 of the Unified Development Ordinance, Appeals of Administrative Decisions, you have the right to appeal this decision to the Nags Head Board of Adjustment within thirty (30) days of the date of this notice. This decision shall become final and unappealable if not appealed during this thirty (30) day period.

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

TOWN OF NAGS HEAD
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Residential Project Approval
Application # 202100428

Property Address: 4201 SOUTH THIRTEENTH ST **PIN #:** 989112765706 **Parcel:** 026838003
Lot/Block/Sec: LOT: 3 BLK: SEC: **Subdivision:** NAGS HEAD HOTEL PROPERTY
Zoning: MEDIUM DENSITY RES DISTRICT **Land Use:** SINGLE FAMILY DWELLING
Flood Zone: AE **Base Flood Elevation:** 9.0 **Regulatory Flood Elevation:** 9
Map Panel No: 9891 **Map Panel Date:** 06/19/2020 **Suffix:** K **Datum Used:** NAVD 1988

Owner Name: COSTULIS, JOHN ARTHUR - COSTULIS, PHYLLI
Owner Address: 4201 S THIRTEENTH ST

Contractor Name: Forrest Seal, LLC **Contractor Phone:** 252-599-2521
Contractor Address: PO Box 2333 Killy Hawk, NC 27949

Description: Complete the necessary work to install an in ground fiber- glass pool; add crush & run for boat parking
Construction Value: \$41200 **Classification of Work:** RESIDENTIAL ACC STRUCTURE

BUILDING INFORMATION

Permit #	Permit Description	Total Fees Paid/Due	Approved By:	Approved Date:
RE202101003	RES ADD-REM-REP-ACC	\$0.00	SS	03/26/2021

Conditions of Approval:

- Pull electrical permit. Call for all bonding inspections. Pool barrier shall meet Appendix V. Equipment shall be elevated at 9 feet or greater. Call for final inspections

POOL INFORMATION

Permit #	Permit Description	Total Fees Paid/Due	Approved By:	Approved Date:
SP202101002	SWIMMING POOL	\$250.00	SS	03/26/2021

FLOOD INFORMATION

Permit #	Permit Description	Total Fees Paid/Due	Approved By:	Approved Date:
FL202101001	FLOOD PERMIT	\$0.00	SS	03/26/2021

Conditions of Approval:

ZONING INFORMATION

Permit #	Permit Description	Total Fees Paid/Due	Approved By:	Approved Date:
ZN202101000	ZONING PERMIT - RES	\$0.00	MK	03/26/2021

Conditions of Approval:

- All work shall remain within property boundaries and meet required setbacks
- Excavated pool material is being used as fill around pool to raise pool deck, etc. approved fill cannot exceed the elevation of 6.0' based on existing elevations provided on surveys.
- Fill shall meet a 3:1 slope with a 5ft NO fill setback
- Pool barrier, shall not exceed 6 ft in height measured from grade, construction side of fence shall face inward. Must remain within property boundaries
- Stormwater approval must be adhered to and in place prior to final inspections
As-built survey required
Stabilization of land disturbance required
Call for final zoning inspections 252-449-6045

Additional Conditions:

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



Residential Project Approval
Application # 202100429

Property Address: 2606 SOUTH MEMORIAL AVE **PIN #:** 989206395950 **Parcel:** 005486000
Lot/Block/Sec: LOT: 9 BLK: 8 SEC: 2 **Subdivision:** NAGS HEAD SHORES AMENDED SEC 2
Zoning: GENERAL COMMERCIAL DISTRICT **Land Use:** SINGLE FAMILY DWELLING
Flood Zone: AE **Base Flood Elevation:** 10.0 **Regulatory Flood Elevation:** 9
Map Panel No: 9892 **Map Panel Date:** 06/19/2020 **Suffix:** K **Datum Used:** NAVD 1988

Owner Name: CARRARA, DEBORAH A
Owner Address: 2113 NOBLE RD

Contractor Name: PROPERTY OWNER **Contractor Phone:**
Contractor Address: See Above

Description: Construct 10x16 work studio on pilings with 20ft setback via approved variance
Construction Value: \$15000 **Classification of Work:** RESIDENTIAL ACC STRUCTURE

BUILDING INFORMATION

Permit #	Permit Description	Total Fees Paid/Due	Approved By:	Approved Date:
RE202101052	RES ADD-REM-REP-ACC	\$190.00	SS	03/30/2021

Conditions of Approval:

- Call for piling inspection. Lets discuss pile depth before calling for a piling inspection. A final flood elevation certificate is required. The bottom of floor joist shall be at or above the 9 foot RFPE. All framing of the structure shall comply with the 2018 NC Residential Code. All trade permits shall be obtained prior to starting any work. Call for any trench inspections. Call for all required inspections. Call for final inspection

FLOOD INFORMATION

Permit #	Permit Description	Total Fees Paid/Due	Approved By:	Approved Date:
FL202101051	FLOOD PERMIT	\$0.00	SS	03/30/2021

Conditions of Approval:

ZONING INFORMATION

Permit #	Permit Description	Total Fees Paid/Due	Approved By:	Approved Date:
ZN202101050	ZONING PERMIT - RES	\$0.00	MK	03/30/2021

Conditions of Approval:

Permit for construction of work studio approved by BOA Variance
Must maintain a 20 ft rear yard setback and a 8 ft side setback
Final as-built may be required but check with Zoning
Stabilization if land has been disturbed
call for final zoning 252-449-6045

Additional Conditions:

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

PLEASE NOTE:

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

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

(ZONING) RIGHT OF APPEAL

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



**Residential Project Approval
Application # 202100439**

Property Address: 9311 SOUTH OLD OREGON INLET RD PIN #: 071918307938 Parcel: 007285000

Lot/Block/Sec: LOT: 11 BLK: 4 SEC: 1 Subdivision: HOLLYWOOD BEACH SEC 1

Zoning: MEDIUM DENSITY RES DISTRICT Land Use: SINGLE FAMILY DWELLING

Flood Zone: VE Base Flood Elevation: 11.0 Regulatory Flood Elevation: 12

Map Panel No: 0719 Map Panel Date: 06/19/2020 Suffix: K Datum Used: NAVD 1988

Owner Name: SCHLICHTERLE, RAINER MARTIN - SCHLICHTH

Owner Address: 2303 BREAM DR

Contractor Name: K.I.C.Z. MAINTENANCE & REMODELING INC Contractor Phone: 252-819-2599

Contractor Address: P O BOX 875 GRANDY, NC 27939

Description: Replacing broken/worn out deck/walk boards, stringers if necessary, handrails & pickets where needed

Construction Value: \$17000 Classification of Work: RESIDENTIAL REPAIR

BUILDING INFORMATION

Permit #	Permit Description	Total Fees Paid/Due	Approved By:	Approved Date:
RE202100841	RES ADD-REM-REP-ACC	\$190.00	SS	03/23/2021

Conditions of Approval:

- Review deck repair condition handout. Call for final inspection

FLOOD INFORMATION

Permit #	Permit Description	Total Fees Paid/Due	Approved By:	Approved Date:
FL202100840	FLOOD PERMIT	\$0.00	SS	03/23/2021

Conditions of Approval:

Additional Conditions:

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

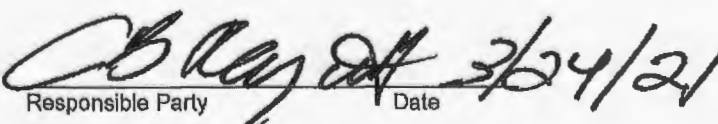
PLEASE NOTE:

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

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

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

DECISION: Approved with Conditions (See above)


Responsible Party Date 3/24/21



Residential Project Approval
Application # 202100441

Property Address: 107 EAST PROTEUS CT **PIN #:** 071815649588 **Parcel:** 009014000
Lot/Block/Sec: LOT: 75 BLK: SEC: **Subdivision:** OCEAN COLONY SOUTH
Zoning: MEDIUM DENSITY RES DISTRICT **Land Use:** SINGLE FAMILY DWELLING
Flood Zone: VE **Base Flood Elevation:** 11.0 **Regulatory Flood Elevation:** 12
Map Panel No: 0718 **Map Panel Date:** 08/19/2020 **Suffix:** K **Datum Used:** NAVD 1988

Owner Name: HILL, EDWARD B - HILL, DEBRA S
Owner Address: 101 WATERSIDE DR

Contractor Name: EMANUELSON & DAD, INC. **Contractor Phone:** 252-261-2212
Contractor Address: PO BOX 448 Nags Head, NC 27959

Description: REPLACE 7 PILINGS
Construction Value: \$10500 **Classification of Work:** RESIDENTIAL REPAIR

BUILDING INFORMATION

Permit #	Permit Description	Total Fees Paid/Due	Approved By:	Approved Date:
RE202101018	RES ADD-REM-REP-ACC	\$190.00	SS	03/29/2021

Conditions of Approval:
- Provide address #s on home if none are present. Call for piling inspection. Provide V zone cert prior to scheduling inspection. Call for final inspection

FLOOD INFORMATION

Permit #	Permit Description	Total Fees Paid/Due	Approved By:	Approved Date:
FL202101018	FLOOD PERMIT	\$0.00	SS	03/29/2021

Conditions of Approval:

Additional Conditions:

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

PLEASE NOTE:

All work shall conform to all applicable North Carolina State Building codes and Ordinances of the Town of Nags Head and shall be the responsibility of the undersigned applicant. In accordance with GS180A-418, a permit expires 6 months after the date of issuance if the work authorized by the permit has not been commenced. If, after commencement, the work is discontinued for a period of 12 months (no inspections have taken place) the permit immediately expires. No work authorized by a permit that has expired may be performed until a new permit has been issued.

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

DECISION: Approved with Conditions (See above)

J. Lewis (Emanuelson) 3.29.21
Responsible Party Date

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



Residential Project Approval
Application # 202100444

Property Address: 5309 WEST CAPTAINS WAY **PIN #:** 080117115668 **Parcel:** 024961384
Lot/Block/Sec: LOT: 5 BLK: SEC: **Subdivision:** CAPTAIN'S WATCH
Zoning: VILLAGE ATTACHED SF 4 **Land Use:** SINGLE FAMILY DWELLING
Flood Zone: X **Base Flood Elevation:** 0.0 **Regulatory Flood Elevation:** 9
Map Panel No: 0801 **Map Panel Date:** 06/19/2020 **Suffix:** K **Datum Used:** NAVD 1988

Owner Name: JENKINS, ALAN DELOSS - JENKINS, BARBARA
Owner Address: 310 E MAIN ST

Contractor Name: Gallop Roofing & Remodeling, Inc. **Contractor Phone:** 252-473-2888
Contractor Address: PO Box 157 WANCHESE, NC 27981

Description: Remove and replace cedar shake roof.

Construction Value: \$35890 **Classification of Work:** RESIDENTIAL REMODEL

BUILDING INFORMATION

Permit #	Permit Description	Total Fees Paid/Due	Approved By:	Approved Date:
RE202100929	RES ADD-REM-REP-ACC	\$250.00	SS	03/23/2021

Conditions of Approval:

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

FLOOD INFORMATION

Permit #	Permit Description	Total Fees Paid/Due	Approved By:	Approved Date:
FL202100928	FLOOD PERMIT	\$0.00	SS	03/23/2021

Conditions of Approval:

ZONING INFORMATION

Permit #	Permit Description	Total Fees Paid/Due	Approved By:	Approved Date:
ZN202100927	ZONING PERMIT - RES	\$0.00	KW	03/23/2021

Conditions of Approval:

Zoning approved to replace cedar shake roof. All work within the same footprint, no increase in footprint, lot coverage or overall height approved.

Additional Conditions:

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

PLEASE NOTE:

All work shall conform to all applicable North Carolina State Building codes and Ordinances of the Town of Nags Head and shall be the responsibility of the undersigned applicant.
In accordance with GS160A-418, a permit expires 6 months after the date of issuance if the work authorized by the permit has not been commenced. If, after commencement, the work is discontinued for a period of 12 months (no inspections have taken place) the permit immediately expires. No work authorized by a permit that has expired may be performed until a new permit has been issued.

(ZONING) RIGHT OF APPEAL

Pursuant to Section 3.9 of the Unified Development Ordinance, Appeals of Administrative Decisions, you have the right to appeal this decision to the Nags Head Board of Adjustment within thirty (30) days of the date of this notice. This decision shall become final and unappealable if not appealed during this thirty (30) day period.



**Residential Project Approval
Application # 202100445**

Property Address: 5700 SOUTH SANDBAR DR **PIN #:** 080118303683 **Parcel:** 000380117
Lot/Block/Sec: LOT: 15 BLK: SEC: **Subdivision:** DOLPHIN RUN
Zoning: VILLAGE DET RES SF 2 **Land Use:** SINGLE FAMILY DWELLING
Flood Zone: AE **Base Flood Elevation:** 9.0 **Regulatory Flood Elevation:** 9
Map Panel No: 0801 **Map Panel Date:** 06/19/2020 **Suffix:** K **Datum Used:** NAVD 1988

Owner Name: HAMMER, ANDREW L - HAMMER, STACI T
Owner Address: 8218 S JACKSON ST

Contractor Name: Gallop Roofing & Remodeling, Inc. **Contractor Phone:** 252-473-2888
Contractor Address: PO Box 157 WANCHESE, NC 27981

Description: Remove and replace cedar shake roof
Construction Value: \$20750 **Classification of Work:** RESIDENTIAL REMODEL

BUILDING INFORMATION

Permit #	Permit Description	Total Fees Paid/Due	Approved By:	Approved Date:
RE202100926	RES ADD-REM-REP-ACC	\$220.00	SS	03/23/2021

Conditions of Approval:
- Provide address #s on home if none are present. Call for material check. Call for final inspection

FLOOD INFORMATION

Permit #	Permit Description	Total Fees Paid/Due	Approved By:	Approved Date:
FL202100925	FLOOD PERMIT	\$0.00	SS	03/23/2021

Conditions of Approval:

ZONING INFORMATION

Permit #	Permit Description	Total Fees Paid/Due	Approved By:	Approved Date:
ZN202100924	ZONING PERMIT - RES	\$0.00	KW	03/23/2021

Conditions of Approval:
Zoning is approved for a new cedar shake roof. All work shall be within the existing footprint. No increase in footprint, lot coverage or over all height approved.

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

PLEASE NOTE:

All work shall conform to all applicable North Carolina State Building codes and Ordinances of the Town of Nags Head and shall be the responsibility of the undersigned applicant.
In accordance with GS160A-418, a permit expires 6 months after the date of issuance if the work authorized by the permit has not been commenced. If, after commencement, the work is discontinued for a period of 12 months (no inspections have taken place) the permit immediately expires. No work authorized by a permit that has expired may be performed until a new permit has been issued.

(ZONING) RIGHT OF APPEAL

Pursuant to Section 3.9 of the Unified Development Ordinance, Appeals of Administrative Decisions, you have the right to appeal this decision to the Nags Head Board of Adjustment within thirty (30) days of the date of this notice. This decision shall become final and unappealable if not appealed during this thirty (30) day period.



Residential Project Approval
Application # 202100446

Property Address: 5315 WEST CAPTAINS WAY **PIN #:** 080117116429 **Parcel:** 024961386
Lot/Block/Sec: LOT: 7 BLK: SEC: **Subdivision:** CAPTAIN'S WATCH
Zoning: VILLAGE ATTACHED SF 4 **Land Use:** SINGLE FAMILY DWELLING
Flood Zone: X **Base Flood Elevation:** 0.0 **Regulatory Flood Elevation:** 9
Map Panel No: 0801 **Map Panel Date:** 06/19/2020 **Suffix:** K **Datum Used:** NAVD 1988

Owner Name: HIDALGO, MELVIN PEREZ - LOPEZ-RUBIO, ERI
Owner Address: P. O. BOX 1671

Contractor Name: AFFORDABLE FRAMING, LLC **Contractor Phone:** 252-256-0557
Contractor Address: P O BOX

Description: 115' of fencing backyard for pool, above ground pool 9x8 ground level modify lower back deck railing & irrigation/wel

Construction Value: \$5000 **Classification of Work:** RESIDENTIAL ACC STRUCTURE

BUILDING INFORMATION

Permit #	Permit Description	Total Fees Paid/Due	Approved By:	Approved Date:
RE202101082	RES ADD-REM-REP-ACC	\$0.00	SS	03/31/2021

Conditions of Approval:

Provide address #'s on home if none are present. Pull electrical work shall conform to Art 680 of the 2017 NEC. Pool shall comply with all aspects of Appendix V of the 2018 NC RES CODE. Call for all required inspections

- Please note that your permit is subject to review/approval by the Village at Nags Head POA/ACC. You are strongly encouraged to contact Emily Lewis to discuss 252-480-4707 emilylewis@villagerealtyobx.com prior to commencing construction

POOL INFORMATION

Permit #	Permit Description	Total Fees Paid/Due	Approved By:	Approved Date:
SP202101081	SWIMMING POOL	\$250.00	SS	03/31/2021

FLOOD INFORMATION

Permit #	Permit Description	Total Fees Paid/Due	Approved By:	Approved Date:
FL202101080	FLOOD PERMIT	\$0.00	SS	03/31/2021

Conditions of Approval:

ZONING INFORMATION

Permit #	Permit Description	Total Fees Paid/Due	Approved By:	Approved Date:
ZN202101079	ZONING PERMIT - RES	\$0.00	MK	03/31/2021

Conditions of Approval:

- Pool shall maintain setbacks, above ground pool, may be temporary but would like it to be permanent
- Pool barrier shall remain within property boundaries, construction side of fence shall face inward, may height shall be 6 ft
- As-built may be required call zoning
- Stabilization if any land disturbance
- call for final zoning 252-449-6045

Additional Conditions:

CALL FOR ALL REQUIRED INSPECTIONS; All new work to meet current code; FINAL INSPECTION REQUIRED PRIOR



Residential Project Approval
Application # 202100449

Property Address: 214 SOUTH MEADOW GREEN **PIN #:** 080006383267 **Parcel:** 024961034
Lot/Block/Sec: LOT: 34 BLK: SEC: **Subdivision:** BAYMEADOW PARCEL A
Zoning: VILLAGE DET RES SF 1 **Land Use:** SINGLE FAMILY DWELLING
Flood Zone: AE **Base Flood Elevation:** 9.0 **Regulatory Flood Elevation:** 9
Map Panel No: 0800 **Map Panel Date:** 06/19/2020 **Suffix:** K **Datum Used:** NAVD 1988

Owner Name: GORMAN, JANET L - GORMAN, MICHAEL P
Owner Address: 624 BLAUVELT DR

Contractor Name: STEVEN REYNOLDO DELEON **Contractor Phone:** 252-202-7049
Contractor Address: P O BOX 1684

Description: Remove wood rails & decking top floor replace w/trex w/vinyl rails, add 8x10 area onto existing deck add 1 8x8 for support

Construction Value: \$15000 **Classification of Work:** RESIDENTIAL REMODEL

BUILDING INFORMATION

Permit #	Permit Description	Total Fees Paid/Due	Approved By:	Approved Date:
RE202100998	RES ADD-REM-REP-ACC	\$190.00	SS	03/26/2021

Conditions of Approval:

- Provide address #s on home if none are present. Review deck permit condition handout we have provided. Call for piling inspection. Call for final inspection

FLOOD INFORMATION

Permit #	Permit Description	Total Fees Paid/Due	Approved By:	Approved Date:
FL202100997	FLOOD PERMIT	\$0.00	SS	03/26/2021

Conditions of Approval:

ZONING INFORMATION

Permit #	Permit Description	Total Fees Paid/Due	Approved By:	Approved Date:
ZN202100996	ZONING PERMIT - RES	\$0.00	MK	03/26/2021

Conditions of Approval:

Addition to deck meets all setbacks
call for final zoning inspection 252-449-6045

Additional Conditions:

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

PLEASE NOTE:

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

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

(ZONING) RIGHT OF APPEAL

Pursuant to Section 3.9 of the Unified Development Ordinance, Appeals of Administrative Decisions, you have the right to appeal this decision to the Nags Head Board of Adjustment within thirty (30) days of the date of this notice. This decision shall become final and unappealable if not appealed during this thirty (30) day period.



Residential Project Approval
Application # 202100450

Property Address: 4310 SOUTH VA DARE TRL **PIN #:** 080105071552 **Parcel:** 008732001
Lot/Block/Sec: LOT: 1 BLK: SEC: **Subdivision:** SEAFARE
Zoning: GENERAL COMMERCIAL DISTRICT **Land Use:** SINGLE FAMILY DWELLING, LARGE
Flood Zone: AE **Base Flood Elevation:** 10.0 **Regulatory Flood Elevation:** 9
Map Panel No: 0801 **Map Panel Date:** 06/19/2020 **Suffix:** K **Datum Used:** NAVD 1988

Owner Name: MAHON, EARL P - MAHON, ALLYSON
Owner Address: 206 W STUTTER RD

Contractor Name: RMF Mechanical & Construction **Contractor Phone:**
Contractor Address: PO Box 2063 Kill Devil Hills, NC 27948

Description: Extend pool fence
Construction Value: \$6000 **Classification of Work:** RESIDENTIAL REMODEL

BUILDING INFORMATION

Permit #	Permit Description	Total Fees Paid/Due	Approved By:	Approved Date:
RE202101012	RES ADD-REM-REP-ACC	\$160.00	SS	03/29/2021

Conditions of Approval:

FLOOD INFORMATION

Permit #	Permit Description	Total Fees Paid/Due	Approved By:	Approved Date:
FL202101011	FLOOD PERMIT	\$0.00	SS	03/29/2021

Conditions of Approval:

- Pool barrier shall meet Appendix V of the 2018 NC RES CODE. Call for final inspection

ZONING INFORMATION

Permit #	Permit Description	Total Fees Paid/Due	Approved By:	Approved Date:
ZN202101010	ZONING PERMIT - RES	\$0.00	MK	03/29/2021

Conditions of Approval:

fence shall remain within property boundaries, construction side of the fence shall face inward, max height 6 ft for rear yard 4 ft max in front yard
call for final zoning inspection 252-449-6045

Additional Conditions:

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

PLEASE NOTE:

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

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

(ZONING) RIGHT OF APPEAL

Pursuant to Section 3.9 of the Unified Development Ordinance, Appeals of Administrative Decisions, you have the right to appeal this decision to the Nags Head Board of Adjustment within thirty (30) days of the date of this notice. This decision shall become final and unappealable if not appealed during this thirty (30) day period.

TOWN OF NAGS HEAD
PO Box 99 Nags Head, NC 27959
Phone (252) 441-7018 Fax (252) 441-4290



Residential Project Approval
Application # 202100451

Property Address: 3331 SOUTH MEMORIAL AVE **PIN #:** 989211568764 **Parcel:** 016881104

Lot/Block/Sec: LOT: 408 BLK: SEC: **Subdivision:** GEO T STRONACH

Zoning: GENERAL COMMERCIAL DISTRICT **Land Use:** SINGLE FAMILY DWELLING, LARGE

Flood Zone: AE **Base Flood Elevation:** 10.0 **Regulatory Flood Elevation:** 9

Map Panel No: 9892 **Map Panel Date:** 08/19/2020 **Suffix:** K **Datum Used:** NAVD 1988

Owner Name: WILLIAMS, LARRY W - WILLIAMS, SHERRY I

Owner Address: 2820 WIND RIVER RD

Contractor Name: PROPERTY OWNER **Contractor Phone:**

Contractor Address: See Above

Description: Deck repair, steps, hand rails, deck boards, landing

Construction Value: \$4000 **Classification of Work:** RESIDENTIAL REPAIR

BUILDING INFORMATION

Permit #	Permit Description	Total Fees Paid/Due	Approved By:	Approved Date:
RE202100960	RES ADD-REM-REP-ACC	\$130.00	SS	03/24/2021

Conditions of Approval:

- All work shall meet current code. Review deck repair condition handout we have provided.
- Call for final inspection.

FLOOD INFORMATION

Permit #	Permit Description	Total Fees Paid/Due	Approved By:	Approved Date:
FL202100959	FLOOD PERMIT	\$0.00	SS	03/24/2021

Conditions of Approval:

ZONING INFORMATION

Permit #	Permit Description	Total Fees Paid/Due	Approved By:	Approved Date:
ZN202100958	ZONING PERMIT - RES	\$0.00	KW	03/24/2021

Conditions of Approval:

Zoning approved to replace decking, all work shall be within the existing footprint, no increase in footprint or lot coverage permitted.

Final Zoning inspection required upon completion.

Additional Conditions:

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

PLEASE NOTE:

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

In accordance with GS180A-418, a permit expires 6 months after the date of issuance if the work authorized by the permit has not been commenced. If, after commencement, the work is discontinued for a period of 12 months (no inspections have taken place) the permit immediately expires. No work authorized by a permit that has expired may be performed until a new permit has been issued.

(ZONING) RIGHT OF APPEAL

Pursuant to Section 3.9 of the Unified Development Ordinance, Appeals of Administrative Decisions, you have the right to appeal this decision to the Nags Head Board of Adjustment within thirty (30) days of the date of this notice. This decision shall become final and unappealable if not appealed during this thirty (30) day period.

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



Residential Project Approval
Application # 202100463

Property Address: 110 EAST PIONEER ST **PIN #:** 071815645364 **Parcel:** 009006000
Lot/Block/Sec: LOT: 65 & PT 54 BLK: SEC: **Subdivision:** OCEAN COLONY SOUTH
Zoning: MEDIUM DENSITY RES DISTRICT **Land Use:** SINGLE FAMILY DWELLING
Flood Zone: VE **Base Flood Elevation:** 11.0 **Regulatory Flood Elevation:** 12
Map Panel No: 0718 **Map Panel Date:** 06/19/2020 **Suffix:** K **Datum Used:** NAVD 1988

Owner Name: VALOROSE, MICHAEL B - VALOROSE, ELIZABET
Owner Address: 8202 WHITTINGTON DR

Contractor Name: Bear Rock Electric Inc **Contractor Phone:** 252-439-5278
Contractor Address: P O Box 1604 Kitty Hawk, NC 27949

Description: Installation of a new 22 kilowatt Generac Generator with ser vice rated transfer switch stand 46"x32"
Construction Value: \$11000 **Classification of Work:** RESIDENTIAL ACC STRUCTURE

BUILDING INFORMATION

Permit #	Permit Description	Total Fees Paid/Due	Approved By:	Approved Date:
RE202101032	RES ADD-REM-REP-ACC	\$190.00	SS	03/29/2021

Conditions of Approval:

- Pull electrical permit. Pull gas permit. Call for trench inspections. Lowest horizontal structural member of generator stand shall be 12 foot RFPE. Secure gas tank from flooding. Review zoning permit conditions. Call for final inspection

FLOOD INFORMATION

Permit #	Permit Description	Total Fees Paid/Due	Approved By:	Approved Date:
FL202101031	FLOOD PERMIT	\$0.00	SS	03/29/2021

Conditions of Approval:

ZONING INFORMATION

Permit #	Permit Description	Total Fees Paid/Due	Approved By:	Approved Date:
ZN202101030	ZONING PERMIT - RES	\$0.00	MK	03/29/2021

Conditions of Approval:

must maintain setbacks
call for final zoning inspection 252-449-6045

Additional Conditions:

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

PLEASE NOTE:

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

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

(ZONING) RIGHT OF APPEAL

Pursuant to Section 3.9 of the Unified Development Ordinance, Appeals of Administrative Decisions, you have the right to appeal this decision to the Nags Head Board of Adjustment within thirty (30) days of the date of this notice. This decision shall become final and unappealable if not appealed during this thirty (30) day period.



Residential Project Approval
Application # 202100464

Property Address: 9030 SOUTH OLD OREGON INLET RD **PIN #:** 071913222833 **Parcel:** 007970000

Lot/Block/Sec: LOT: 1 BLK: SEC: **Subdivision:** SOUTH CREEK ACRES PH 2

Zoning: MEDIUM DENSITY RES DISTRICT **Land Use:** SINGLE FAMILY DWELLING

Flood Zone: AE **Base Flood Elevation:** 11.0 **Regulatory Flood Elevation:** 9

Map Panel No: 0719 **Map Panel Date:** 06/19/2020 **Suffix:** K **Datum Used:** NAVD 1988

Owner Name: LAMONT, NANCY JO

Owner Address: 111 RICHARD MINE RD

Contractor Name: STAN WHITE CONSTRUCTION, INC.

Contractor Phone:

Contractor Address: PO Box 1447

Description: Replace deck boards, deck railing & benches on existing W side 2nd floor deck, no enlargement of existing deck

Construction Value: \$8585

Classification of Work: RESIDENTIAL REPAIR

BUILDING INFORMATION

Permit #	Permit Description	Total Fees Paid/Due	Approved By:	Approved Date:
RE202100972	RES ADD-REM-REP-ACC	\$160.00	SS	03/25/2021

Conditions of Approval:

- Review deck repair condition handout we have provided. Call for final inspection

FLOOD INFORMATION

Permit #	Permit Description	Total Fees Paid/Due	Approved By:	Approved Date:
FL202100971	FLOOD PERMIT	\$0.00	SS	03/25/2021

Conditions of Approval:

ZONING INFORMATION

Permit #	Permit Description	Total Fees Paid/Due	Approved By:	Approved Date:
ZN202100970	ZONING PERMIT - RES	\$0.00	KW	03/25/2021

Conditions of Approval:

Zoning approved to replace decking, rails, benches, etc. All work to be within the existing footprint, no increase in footprint or lot coverage.

Final Zoning inspection required prior to issuance of CO.

Additional Conditions:

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

PLEASE NOTE:

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

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

(ZONING) RIGHT OF APPEAL

Pursuant to Section 3.9 of the Unified Development Ordinance, Appeals of Administrative Decisions, you have the right to appeal this decision to the Nags Head Board of Adjustment within thirty (30) days of the date of this notice. This decision shall become final and unappealable if not appealed during this thirty (30) day period.

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



Residential Project Approval
Application # 202100474

Property Address: 3201 SOUTH WRIGHTSVILLE AVE **PIN #:** 989211560699 **Parcel:** 005535000

Lot/Block/Sec: LOT: 15 BLK: 2 SEC: 3 **Subdivision:** NAGS HEAD SHORES AMENDED SEC 3

Zoning: HIGH DENSITY RES DISTRICT **Land Use:** SINGLE FAMILY DWELLING

Flood Zone: AE **Base Flood Elevation:** 10.0 **Regulatory Flood Elevation:** 9

Map Panel No: 9892 **Map Panel Date:** 06/19/2020 **Suffix:** K **Datum Used:** NAVD 1988

Owner Name: GINS, RICHARD H - GINS, JUANITA L

Owner Address: 11720 GLEN CT

Contractor Name: ACS-OBX LLC **Contractor Phone:** 252-599-2999

Contractor Address: P O BOX 1771

Description: Add 400 SF heated of new three-season room on rear of house with we ather deck above

Construction Value: \$29000 **Classification of Work:** RESIDENTIAL REMODEL

BUILDING INFORMATION

Permit #	Permit Description	Total Fees Paid/Due	Approved By:	Approved Date:
RE202101049	RES ADD-REM-REP-ACC	\$230.00	SS	03/30/2021

Conditions of Approval:

- Provide address #s on home if none are present. All subs shall pull permits prior to starting work. Call for all required inspections. Provide engineered building plans. New room may need to be zoned separate from house. Smoke detectors and co2 detectors to code throughout home. Provide for ventilation of roof / deck. Call for final inspection

FLOOD INFORMATION

Permit #	Permit Description	Total Fees Paid/Due	Approved By:	Approved Date:
FL202101048	FLOOD PERMIT	\$0.00	SS	03/30/2021

Conditions of Approval:

ZONING INFORMATION

Permit #	Permit Description	Total Fees Paid/Due	Approved By:	Approved Date:
ZN202101047	ZONING PERMIT - RES	\$0.00	MK	03/30/2021

Conditions of Approval:

Addition shall meet setbacks
silt fencing if any land disturbance
as-built survey maybe required call zoning
stabilization once complete
call for final inspection 252-449-6045

Additional Conditions:

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

PLEASE NOTE:

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

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

(ZONING) RIGHT OF APPEAL



**Residential Project Approval
Application # 202100491**

Property Address: 101 EAST BLUEWATER DR **PIN #:** 080118305790 **Parcel:** 000380108
Lot/Block/Sec: LOT: 6 BLK: SEC: **Subdivision:** DOLPHIN RUN
Zoning: VILLAGE DET RES SF 2 **Land Use:** SINGLE FAMILY DWELLING
Flood Zone: AE **Base Flood Elevation:** 9.0 **Regulatory Flood Elevation:** 9
Map Panel No: 0801 **Map Panel Date:** 06/19/2020 **Suffix:** K **Datum Used:** NAVD 1988

Owner Name: STETS, ROBERT J JR
Owner Address: 55 DOUD DR

Contractor Name: MUELLER BUILDERS LLC **Contractor Phone:** 252-378-2090
Contractor Address: 4001 W Hundred Rd

Description: Remove existing cedar shake roof and replace with new
Construction Value: \$24000 **Classification of Work:** RESIDENTIAL REPAIR

BUILDING INFORMATION

Permit #	Permit Description	Total Fees Paid/Due	Approved By:	Approved Date:
RE202101022	RES ADD-REM-REP-ACC	\$220.00	SS	03/29/2021

Conditions of Approval:
- Provide address #s on home if none are present. Call for material check. Call for final inspection

FLOOD INFORMATION

Permit #	Permit Description	Total Fees Paid/Due	Approved By:	Approved Date:
FL202101021	FLOOD PERMIT	\$0.00	SS	03/29/2021

Conditions of Approval:

ZONING INFORMATION

Permit #	Permit Description	Total Fees Paid/Due	Approved By:	Approved Date:
ZN202101020	ZONING PERMIT - RES	\$0.00	KW	03/29/2021

Conditions of Approval:
Zoning approved to replace cedar shake roof - no increase in footprint, lot coverage or overall height.

Additional Conditions:

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

PLEASE NOTE:

All work shall conform to all applicable North Carolina State Building codes and Ordinances of the Town of Nags Head and shall be the responsibility of the undersigned applicant.
In accordance with GS160A-418, a permit expires 6 months after the date of issuance if the work authorized by the permit has not been commenced. If, after commencement, the work is discontinued for a period of 12 months (no inspections have taken place) the permit immediately expires. No work authorized by a permit that has expired may be performed until a new permit has been issued.

(ZONING) RIGHT OF APPEAL

Pursuant to Section 3.9 of the Unified Development Ordinance, Appeals of Administrative Decisions, you have the right to appeal this decision to the Nags Head Board of Adjustment within thirty (30) days of the date of this notice. This decision shall become final and unappealable if not appealed during this thirty (30) day period.

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



County of Dare
 Planning Office
 PO Box Drawer 1000
 Manteo NC 27954

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

RESIDENTIAL BUILDING PERMIT

BUILDING PERMIT#: R-3859

03/05/2021

Parcel Number: 027494000
 Location: 198 JONES CIR – MANTEO
 Subdivision: JONES HEIGHTS
 Legal Description: LOT: 31 BLK: SEC:

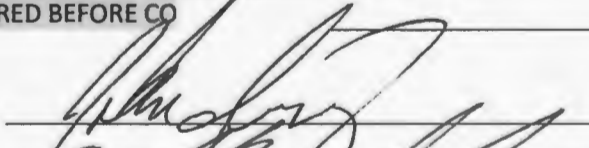
Owner Name: JAMES A JR MCCLEAVE
 Owner Mail Address: 101 JONES CIR MANTEO, NC 27954
 Owner Phone and email:

Contractor Name: SOUND AND SHORE BUILDERS INC
 Contractor Mail Address: 1851 W EHRINGHAUS ST, ELIZABETH CITY, NC 27909
 Contractor Phone: 252-333-5357 Contractor NC License#: 56500

BUILDING INFORMATION

Proposed Construction Use:	SINGLE FAMILY DWELLING NEW , NEW CONSTRUCTION SFD		
Proposed Construction Type:	SFD	Cost of Construction:	\$168,000
Finished Square Footage:	1437	CAMA Permit#:	NA
Unfinished Square Footage:	0	Septic Permit#:	30552
Stories:	1.0	Septic Permit Date:	2/23/2021
Building Height:	0	Survey/Site Plan:	YES
Total Rooms:	5	Water Tap#:	53143
Footing Type:	CONCRETE	Water Type:	Central Water
Exterior Finish:	VINYL SIDING	Flood Zone:	AE
Proposed Finished Floor Elevation:	10.2	Base Flood Elevation:	8.0
Bedrooms:	3	Lot/Ground Elevation:	6.5
		Baths/half baths:	2.00/0

Comments: Any deviation from the building plan or site plan requires prior approval.	PERMIT FEE	\$1,078.00
LOCAL ELEVATION STANDARD OF 8' APPLIES, FLOOD VENTS REQUIRED IN AREAS BELOW 8', UNDER CONSTRUCTION ELEVATION CERTIFICATE REQUIRED FOR ROUGH IN, FINISHED CONSTRUCTION ELEVATION CERTIFICATE AND AS BUILT SURVEY REQUIRED BEFORE CO	HOME OWNERS RECOVERY FEE	10.00
	RESIDENTIAL ZONING APPROVAL	100.00
	TOTAL FEES:	\$1,188.00

Applicant Signature:  SOUND AND SHORE BUILDERS INC

Inspector Signature:  ALD



County of Dare
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Manteo: (252) 475-5080
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 Frisco: (252) 475-5878

RESIDENTIAL BUILDING PERMIT

BUILDING PERMIT#: R-3876

03/08/2021

Parcel Number: 024423033
 Location: 132 CHICORA CT – MANTEO
 Subdivision: CROATAN WOODS DEVELOPMENT INC
 Legal Description: LOT: 31 BLK: SEC:

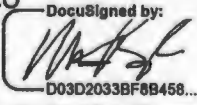
Owner Name: BARKER & BARKER CUSTOM HOMES, LLC
 Owner Mail Address: 112 WALTER CT MANTEO, NC 27954
 Owner Phone and email: 252-333-5449

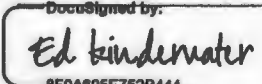
Contractor Name: BARKER & BARKER CUSTOM HOMES, LLC
 Contractor Mail Address: 112 WALTER CT, MANTEO, NC 27954
 Contractor Phone: 2523335449 Contractor NC License#: 84173

BUILDING INFORMATION

Proposed Construction Use:	SINGLE FAMILY DWELLING NEW , NEW CONSTRUCTION SFD		
Proposed Construction Type:	SFD	Cost of Construction:	\$508,000
Finished Square Footage:	2748	CAMA Permit#:	NA
Unfinished Square Footage:	4022	Septic Permit#:	30588
Stories:	2.0	Septic Permit Date:	3/4/2021
Building Height:	0	Survey/Site Plan:	YES
Total Rooms:	6	Water Tap#:	NA
Footing Type:	CONCRETE	Water Type:	Central Water
Exterior Finish:	LAP SIDING	Flood Zone:	AE
Proposed Finished Floor Elevation:	10.00	Base Flood Elevation:	8.0
Bedrooms:	4	Lot/Ground Elevation:	6.0
		Baths/half baths:	3.00/1

Comments: Any deviation from the building plan or site plan requires prior approval.	PERMIT FEE	\$3,670.00
LOCAL ELEVATION STANDARD OF 8' APPLIES, FLOOD VENTS REQUIRED IN AREAS BELOW 8', UNDER CONSTRUCTION ELEVATION CERTIFICATE REQUIRED BEFORE ROUGH IN, FINISHED CONSTRUCTION EC AND AS BUILT SURVEY REQUIRED BEFORE CO	HOME OWNERS RECOVERY FEE	10.00
	RESIDENTIAL ZONING APPROVAL	100.00
	TOTAL FEES:	\$3,780.00

DocuSigned by: 
 Applicant Signature: 3/8/2021 BARKER & BARKER CUSTOM HOMES, LLC

DocuSigned by: 
 Inspector Signature: 3/8/2021 ALD



County of Dare
 Planning Office
 PO Box Drawer 1000
 Manteo NC 27954

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

RESIDENTIAL BUILDING PERMIT

BUILDING PERMIT#: R-3928

03/16/2021

Parcel Number: 030054000
 Location: 151 N FEARING PL – MANTEO
 Subdivision: BRAKEWOOD SEC. 3
 Legal Description: LOT: 55 BLK: SEC: 3

Owner Name: MARTIN J KNIZNER
 Owner Mail Address: 8058 WINSTEAD MANOR DR LORTON, VA 22079
 Owner Phone and email:

Contractor Name: MARTIN J KNIZNER
 Contractor Mail Address: 8058 WINSTEAD MANOR DR, LORTON, VA 22079
 Contractor Phone: 7039735409 Contractor NC License#: UNLICENSED

BUILDING INFORMATION

Proposed Construction Use:	SINGLE FAMILY DWELLING NEW , NEW CONSTRUCTION SFD		
Proposed Construction Type:	SFD	Cost of Construction:	\$500,000
Finished Square Footage:	2771	CAMA Permit#:	NA
Unfinished Square Footage:	1645	Septic Permit#:	30613
Stories:	1.5	Septic Permit Date:	3/11/2021
Building Height:	0	Survey/Site Plan:	YES
Total Rooms:	9	Water Tap#:	53121
Footing Type:	CONCRETE	Water Type:	Central Water
Exterior Finish:	VINYL SIDING	Flood Zone:	X
Proposed Finished Floor Elevation:	14.6	Base Flood Elevation:	8.0
Bedrooms:	4	Lot/Ground Elevation:	10.2
		Baths/half baths:	3.00/1

Comments: Any deviation from the building plan or site plan requires prior approval.	PERMIT FEE	\$2,736.00
AS BUILT SURVEY REQUIRED BEFORE CO	HOME OWNERS RECOVERY FEE	10.00
	RESIDENTIAL ZONING APPROVAL	100.00

TOTAL FEES: \$2,846.00

DocuSigned by:
 Applicant Signature: Martin Knizner MARTIN J KNIZNER
 4B00888721CF471... 3/16/2021

DocuSigned by:
 Inspector Signature: Ed Kinder ALD
 8F0A888721CF471... 3/16/2021



County of Dare
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Manteo: (252) 475-5080
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RESIDENTIAL BUILDING PERMIT

BUILDING PERMIT#: R-3979

03/23/2021

Parcel Number: 025394000
 Location: 115 SCARBOROUGH ST – MANTEO
 Subdivision: SUBDIVISION - NONE
 Legal Description: LOT: BLK: SEC:

Owner Name: OMERO RIOS RESENDIZ
 Owner Mail Address: P O BOX 3253 KILL DEVIL HILLS, NC 27948
 Owner Phone and email:

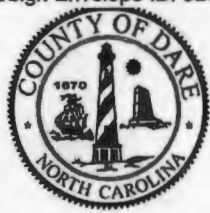
Contractor Name: OMERO RIOS RESENDIZ
 Contractor Mail Address: P O BOX 3253, P O BOX 3253 KILL DEVIL HILLS, NC 27948
 Contractor Phone: 2525739585 Contractor NC License#: UNLICENSED

BUILDING INFORMATION

Proposed Construction Use:	SINGLE FAMILY DWELLING NEW , NEW CONSTRUCTION SFD		
Proposed Construction Type:	SFD	Cost of Construction:	\$150,000
Finished Square Footage:	2114	CAMA Permit#:	NA
Unfinished Square Footage:	788	Septic Permit#:	30587
Stories:	1.0	Septic Permit Date:	03042021
Building Height:	0	Survey/Site Plan:	YES
Total Rooms:	8	Water Tap#:	3592266
Footing Type:	PILING	Water Type:	Central Water
Exterior Finish:	LAP SIDING	Flood Zone:	X
Proposed Finished Floor Elevation:	18	Base Flood Elevation:	8.0
Bedrooms:	3	Lot/Ground Elevation:	6.5
		Baths/half baths:	2.00/0

Comments: Any deviation from the building plan or site plan requires prior approval.	PERMIT FEE	\$1,900.70
LOCAL ELEVATION STANDARD OF 8' APPLIES, IF ENCLOSED AREAS BELOW 8' FLOOD VENTS REQUIRED, UNDER CONSTRUCTION ELEVATION CERTIFICATE REQUIRED BEFORE ROUGH IN, FINISHED CONSTRUCTION ELEVATION CERTIFICATE AND AS BUILT SURVEY REQUIRED BEFORE CO	HOME OWNERS RECOVERY FEE	11 10.00
	RESIDENTIAL ZONING APPROVAL	100.00
	TOTAL FEES:	\$2,010.70

Applicant Signature: Omero Rios Resendiz OMERO RIOS RESENDIZ
 Inspector Signature: E. Aldred ALD



County of Dare
 Planning Office
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 Manteo NC 27954

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

RESIDENTIAL BUILDING PERMIT

BUILDING PERMIT#: R-3987

03/25/2021

Parcel Number: 024432015
 Location: 143 MADELINE DR – MANTEO
 Subdivision: ALDER BRANCH ESTATES
 Legal Description: LOT: 15 BLK: SEC:

Owner Name: MARY JOANNA MCGINNIS
 Owner Mail Address: 121 FORT HUGAR WAY MANTEO, NC 27954
 Owner Phone and email:


Contractor Name: BARKER & BARKER CUSTOM HOMES, LLC
 Contractor Mail Address: 112 WALTER CT, MANTEO, NC 27954
 Contractor Phone: 2523335449 Contractor NC License#: 84173

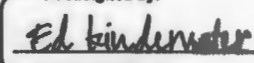
BUILDING INFORMATION

Proposed Construction Use:	SINGLE FAMILY DWELLING NEW , NEW CONSTRUCTION SFD		
Proposed Construction Type:	SFD	Cost of Construction:	\$603,000
Finished Square Footage:	3085	CAMA Permit#:	
Unfinished Square Footage:	1081	Septic Permit#:	30662
Stories:	2.0	Septic Permit Date:	03252021
Building Height:	0	Survey/Site Plan:	
Total Rooms:	10	Water Tap#:	03192021
Footing Type:	CONCRETE	Water Type:	
Exterior Finish:	LAP SIDING	Flood Zone:	X
Proposed Finished Floor Elevation:		Base Flood Elevation:	8.0
Bedrooms:	4	Lot/Ground Elevation:	
		Baths/half baths:	3.00/0

Comments: Any deviation from the building plan or site plan requires prior approval.	PERMIT FEE	\$2,746.00
AS BUILT SURVEY REQUIRED BEFORE CO	HOME OWNERS RECOVERY FEE	10.00
	RESIDENTIAL ZONING APPROVAL	100.00

TOTAL FEES: \$2,856.00

DocuSigned by:
 Applicant Signature:  BARKER & BARKER CUSTOM HOMES, LLC
 D03D2033BF8B458... 3/25/2021

DocuSigned by:
 Inspector Signature:  ALD
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County of Dare
 Planning Office
 PO Box Drawer 1000
 Manteo NC 27954

Manteo: (252) 475-5080
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RESIDENTIAL BUILDING PERMIT

BUILDING PERMIT#: R-4011

03/26/2021

Parcel Number: 028158004
 Location: 2732 NC 345 – WANCHESE
 Subdivision: GEORGE MANN TRACT 2
 Legal Description: LOT: 5 BLK: SEC:

Owner Name: JERI MICHELLE ALLEN
 Owner Mail Address: 2753 CARATOKE HWY CURRITUCK, NC 27929
 Owner Phone and email:

Contractor Name: JD JOHNSON REALTY CONSTRUCTION LLC
 Contractor Mail Address: PO BOX 340, MANTEO, NC 27954
 Contractor Phone: 252-305-9982 Contractor NC License#: 73168

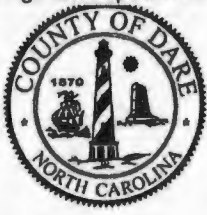
BUILDING INFORMATION

Proposed Construction Use:	SINGLE FAMILY DWELLING NEW , NEW CONSTRUCTION SFD		
Proposed Construction Type:	SFD	Cost of Construction:	\$270,000
Finished Square Footage:	1410	CAMA Permit#:	NA
Unfinished Square Footage:	300	Septic Permit#:	30662
Stories:	1.0	Septic Permit Date:	3/25/2021
Building Height:	0	Survey/Site Plan:	YES
Total Rooms:	5	Water Tap#:	53190
Footing Type:	PILING	Water Type:	Central Water
Exterior Finish:	LAP SIDING	Flood Zone:	AE
Proposed Finished Floor Elevation:	8.5	Base Flood Elevation:	8.0
Bedrooms:	3	Lot/Ground Elevation:	2.4
		Baths/half baths:	2.00/0

Comments: Any deviation from the building plan or site plan requires prior approval.	PERMIT FEE	\$1,178.00
UNDER CONSTRUCTION ELEVATION CERTIFICATE REQUIRED BEFORE ROUGH IN, FINISHED CONSTRUCTION ELEVATION CERTIFICATE AND AS BUILT SURVEY REQUIRED BEFORE CO	FLOOD DEVELOPMENT BLDG PERMIT	75.00
	HOME OWNERS RECOVERY FEE	10.00
	RESIDENTIAL ZONING APPROVAL	100.00
	TOTAL FEES:	\$1,363.00

DocuSigned by:
 Applicant Signature: Jonathan Johnson JD JOHNSON REALTY CONSTRUCTION LLC
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DocuSigned by:
 Inspector Signature: Ed Kindervater ALD
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County of Dare
 Planning Office
 PO Box Drawer 1000
 Manteo NC 27954

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

RESIDENTIAL BUILDING PERMIT

BUILDING PERMIT#: R-3996

03/26/2021

Parcel Number: 026548024
 Location: 154 ARBOR DR – MANTEO
 Subdivision: ARBOR WAY
 Legal Description: LOT: 24 BLK: SEC: 2

Owner Name: ANADAM LLC
 Owner Mail Address: P O BOX 520 MANTEO, NC 27954
 Owner Phone and email:

Contractor Name: ADP SWIMMING POOLS & CONSTRUCTION LLC
 Contractor Mail Address: 801 INDIAN DR, KILL DEVIL HILLS, NC 27948
 Contractor Phone: 252-305-8088 Contractor NC License#: 53785

BUILDING INFORMATION

Proposed Construction Use:	SINGLE FAMILY DWELLING NEW , NEW CONSTRUCTION SFD		
Proposed Construction Type:	SFD	Cost of Construction:	\$300,000
Finished Square Footage:	2123	CAMA Permit#:	NA
Unfinished Square Footage:	221	Septic Permit#:	29283
Stories:	2.0	Septic Permit Date:	12/19/2019
Building Height:	0	Survey/Site Plan:	YES
Total Rooms:	10	Water Tap#:	NA
Footing Type:	PILING	Water Type:	Central Water
Exterior Finish:	VINYL SIDING	Flood Zone:	X
Proposed Finished Floor Elevation:	8.5	Base Flood Elevation:	8.0
Bedrooms:	3	Lot/Ground Elevation:	8
		Baths/half baths:	3.00/0

Comments: Any deviation from the building plan or site plan requires prior approval.	PERMIT FEE	\$1,680.00
LOCAL ELEVATION STANDARD OF 8' APPLIES, AREAS BELOW 8' REQUIRE FLOOD VENTS, UNDER CONSTRUCTION ELEVATION CERTIFICATE REQUIRED BEFORE ROUGH IN, AS BUILT SURVEY REQUIRED BEFORE CO (IF LOT GRADE IS BELOW 8', FINISHED CONSTRUCTION ELEVATION CERTIFICATE REQUIRED)	HOME OWNERS RECOVERY FEE	10.00
	RESIDENTIAL ZONING APPROVAL	141 100.00
	TOTAL FEES:	\$1,790.00

DocuSigned by: *Adrian Pitts*
 C135823DF4844F3...
 Applicant Signature: _____ 3/26/2021 ADP SWIMMING POOLS & CONSTRUCTION LLC

DocuSigned by: *Ed Kindemater*
 8F0A895E752B444...
 Inspector Signature: _____ 3/26/2021 ALD



County of Dare
 Planning Office
 PO Box Drawer 1000
 Manteo NC 27954

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

ACCESSORY PERMIT

ACCESSORY PERMIT#: ACC-3816

03/01/2021

Parcel Number: 024899000
 Location: 273 THE LANE – WANCHESE
 Subdivision: SUBDIVISION - NONE
 Legal Description: LOT: BLK: SEC:

Owner Name: AARON B HOUSTON
 Owner Mail Address: 5149 WOODSIDE LN GRIFTON, NC 28530
 Owner Phone and email:

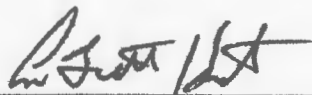
Contractor Name: AARON B HOUSTON
 Contractor Mail Address: 273 THE LANE WANCHESE, NC 27981
 Contractor Phone: Contractor NC License#: OWNER CONTRACTOR / UNLICENCED

ACCESSORY INFORMATION

Proposed Construction: RESIDENTIAL - ACCESSORY STRUCT OVER 12 FT, ACC
 Description of Work: CONSTRUCT 24X32' STORAGE SHED
 Septic Permit Date: 02/16/2021 Cost of Construction: \$50,000
 Septic Permit #: 30530 CAMA Permit#: NA
 Footing Type: Flood Zone: AE
 Finished Square Footage: 0 Base Flood Elevation: 8.0
 Unfinished Square Footage: 1611 Lot/Ground Elevation: 3.2

Comments: FINISH CONST ELEVATION CERTIFICATE, AS BUILT SURVEY REQUIRED BEFORE CO	PERMIT FEE	\$644.00
	FLOOD DEVELOPMENT BLDG PERMIT	75.00

TOTAL FEES: \$719.00

Applicant Signature:  AARON B HOUSTON

Inspector Signature: ED KINDERVATER / AD  ALD



County of Dare
 Planning Office
 PO Box Drawer 1000
 Manteo NC 27954

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

ACCESSORY PERMIT

ACCESSORY PERMIT#: ACC-3906

03/11/2021

Parcel Number: 025194020
 Location: 108 KAY CT – MANTEO
 Subdivision: KELLAM ESTATES
 Legal Description: LOT: 20 BLK: SEC:

Owner Name: JOEL VICK KEITH
 Owner Mail Address: 108 KAY CT MANTEO, NC 27954
 Owner Phone and email:

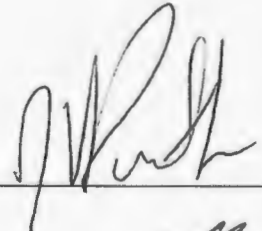
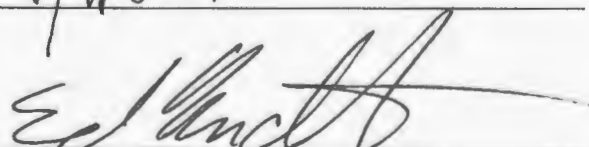
Contractor Name: JOEL VICK KEITH
 Contractor Mail Address: 108 KAY CT MANTEO, NC 27954
 Contractor Phone: Contractor NC License#: OWNER CONTRACTOR

ACCESSORY INFORMATION

Proposed Construction: RESIDENTIAL - SWIMMING POOLS;HOT TUBS, SFD
 Description of Work: ADD 12X25 IN GROUND SWIMMING POOL
 Septic Permit Date: 02/25/2021 Cost of Construction: \$29,500
 Septic Permit #: 30563 CAMA Permit#: X
 Flood Zone: X
 Base Flood Elevation: 8.0
 Lot/Ground Elevation:

Comments: AS BUILT SURVEY REQUIRED BEFORE PERMIT FEE \$300.00
 CO

TOTAL FEES: \$300.00

Applicant Signature:  JOEL VICK KEITH
 Inspector Signature:  ALD



County of Dare
Planning Office
PO Box Drawer 1000
Manteo NC 27954

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

ACCESSORY PERMIT

ACCESSORY PERMIT#: ACC-3905

03/11/2021

Parcel Number: 025072001
Location: 264 AIRPORT RD – MANTEO
Subdivision: EVANSVILLE SUBDIV
Legal Description: LOT: 47 BLK: SEC:

Owner Name: TANYA J WHITE
Owner Mail Address: P O BOX 2512 MANTEO, NC 27954
Owner Phone and email:

Contractor Name: TO THE T CONSTRUCTION
Contractor Mail Address: 209 GREENS DR, MANTEO, NC 27954
Contractor Phone: 252-216-8991 Contractor NC License#: 63750

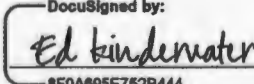
ACCESSORY INFORMATION

Proposed Construction: RESIDENTIAL - ACCESSORY STRUCT OVER 12 FT, ACC
Description of Work: CONSTRUCT SINGLE STORY DETACHED 24X26 GARAGE
Septic Permit Date: 01/26/2021 Cost of Construction: \$50,000
Septic Permit #: 30452 CAMA Permit#: NA
Footing Type: CONCRETE Flood Zone: X
Finished Square Footage: 0 Base Flood Elevation: 8.0
Unfinished Square Footage: 624 Lot/Ground Elevation: NA

Comments: AS BUILT SURVEY REQUIRED BEFORE PERMIT FEE \$250.00
CO, FLOOD VENTS REQUIRED IF GRADE BELOW 8'

TOTAL FEES: \$250.00

Applicant Signature:  TO THE T CONSTRUCTION
3/11/2021

Inspector Signature:  ALD
3/11/2021



County of Dare
 Planning Office
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 Manteo NC 27954

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

ACCESSORY PERMIT

ACCESSORY PERMIT#: ACC-3927

03/16/2021

Parcel Number: 025016003
 Location: 170 OLD NC 345 – MANTEO
 Subdivision: SUBDIVISION - NONE
 Legal Description: LOT: 3 BLK: SEC:

Owner Name: JERRY R TILLET
 Owner Mail Address: 246 CROATAN WOODS TRL MANTEO, NC 27954
 Owner Phone and email:

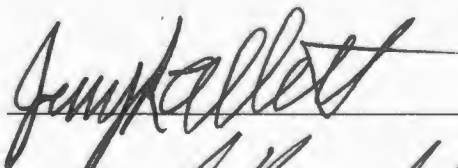
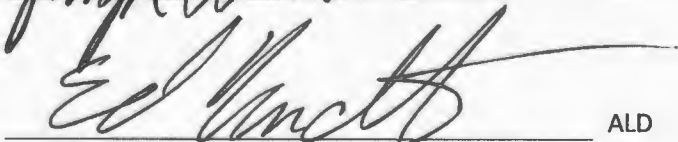
Contractor Name: JERRY R TILLET
 Contractor Mail Address: 246 CROATAN WOODS TRL, MANTEO, NC 27954
 Contractor Phone: 2524231998 Contractor NC License#: UNLICENSED

ACCESSORY INFORMATION

Proposed Construction: RESIDENTIAL - ACCESSORY STRUCT OVER 12 FT, ACC
 Description of Work: CONSTRUCT METAL BARN
 Septic Permit Date: Cost of Construction: \$13,550
 Septic Permit #: NA CAMA Permit#: NA
 Footing Type: Flood Zone:
 Finished Square Footage: 0 Base Flood Elevation: 0.0
 Unfinished Square Footage: 1092 Lot/Ground Elevation: 10

Comments: AS-BUILT SURVEY REQUIRED MUST PERMIT FEE \$437.00
 MAINTAIN PRINCIPLE USE SETBACKS
 25 FRONT
 10 SIDES
 25 REAR

TOTAL FEES: \$437.00

Applicant Signature:  JERRY R TILLET
 Inspector Signature:  ALD



County of Dare
 Planning Office
 PO Box Drawer 1000
 Manteo NC 27954

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

ACCESSORY PERMIT

ACCESSORY PERMIT#: ACC-3921

03/16/2021

Parcel Number: 024342000
 Location: 149 DOGWOOD CIR – MANTEO
 Subdivision: MOTHER VINEYARD EXT
 Legal Description: LOT: 13 BLK: SEC:

Owner Name: KARA L BEATTY
 Owner Mail Address: 149 DOGWOOD CIR MANTEO, NC 27954
 Owner Phone and email:

Contractor Name: JES CONSTRUCTION LLC
 Contractor Mail Address: 1741 CORPORATE LANDING PKWY STE 101, VIRGINIA BEACH, VA 23454
 Contractor Phone: 757-558-9909 Contractor NC License#: 69678

ACCESSORY INFORMATION

Proposed Construction: RESIDENTIAL - MISC ACCESSORY,
 Description of Work ENCAPSULATE CRAWLSPACE
 Septic Permit Date: Cost of Construction: \$11,000
 Septic Permit #: CAMA Permit#: Flood Zone:
 Base Flood Elevation: 0.0
 Lot/Ground Elevation:

Comments: PERMIT FEE \$150.00

TOTAL FEES: \$150.00

Applicant Signature: Chelsea Wrobel JES CONSTRUCTION LLC
DocuSigned by: Chelsea Wrobel
24DD42AF084417... 3/18/2021

Inspector Signature: Ed Kindervater ALD
DocuSigned by: Ed Kindervater
8F0A880E782B444... 3/16/2021



County of Dare
Planning Office
PO Box Drawer 1000
Manteo NC 27954

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

ACCESSORY PERMIT

ACCESSORY PERMIT#: ACC-3949

03/18/2021

Parcel Number: 017585000
Location: 5913 HWY 64/264 – MANNS HARBOR
Subdivision: SUBDIVISION - NONE
Legal Description: LOT: BLK: SEC:

Owner Name: JERALD G CRADDOCK
Owner Mail Address: P O BOX 156 MANNS HARBOR, NC 27953
Owner Phone and email:

Contractor Name: CROATAN CONTRACTORS, INC
Contractor Mail Address: 7380 US HIGHWAY 64/264, MANNS HARBOR, NC 24953
Contractor Phone: 2524758081 Contractor NC License#: UNLICENSED

ACCESSORY INFORMATION

Proposed Construction: RESIDENTIAL - DOCKS;PIERS;BULKHDS, BOATLFTS,
Description of Work: INSTALL 900 LINEAR FT VINYL BULKHEAD ALONG DITCH & ADD 30X30 CULVERT FOR DRIVEWAY

Cost of Construction: \$20,490
CAMA Permit#: NA
Flood Zone:
Base Flood Elevation: 0.0
Lot/Ground Elevation:

Comments: PERMIT FEE \$250.00

TOTAL FEES: \$250.00

DocuSigned by:
Tanner Hux
Applicant Signature: EA300F1882B14E4... 3/18/2021 CROATAN CONTRACTORS, INC

DocuSigned by:
Ed kindemater
Inspector Signature: 8F0A885E792B444... 3/18/2021 ALD



County of Dare
 Planning Office
 PO Box Drawer 1000
 Manteo NC 27954

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

ACCESSORY PERMIT

ACCESSORY PERMIT#: ACC-3950

03/18/2021

Parcel Number: 017581000
 Location: 5897 HWY 64/264 – MANNS HARBOR
 Subdivision: SUBDIVISION - NONE
 Legal Description: LOT: BLK: SEC:

Owner Name: JAMES R CRADDOCK
 Owner Mail Address: 5897 HWY 64/264 MANNS HARBOR, NC 27953
 Owner Phone and email:

Contractor Name: CROATAN CONTRACTORS, INC
 Contractor Mail Address: 7380 US HIGHWAY 64/264, MANNS HARBOR, NC 24953
 Contractor Phone: 2524758081 Contractor NC License#: UNLICENSED

ACCESSORY INFORMATION

Proposed Construction: RESIDENTIAL - DOCKS;PIERS;BULKHDS, BOATLFTS,
 Description of Work INSTALL 80 LINEAR FT VINYL BULKHEAD ALONG DITCH

Cost of Construction: \$12,400
 CAMA Permit#:
 Flood Zone:
 Base Flood Elevation: 0.0
 Lot/Ground Elevation:

Comments: PERMIT FEE \$250.00

TOTAL FEES: \$250.00

Applicant Signature: *Tanner Hise* CROATAN CONTRACTORS, INC
DocuSigned by: EA308F1082B14E4... 3/18/2021

Inspector Signature: *Ed Kinderwater* ALD
DocuSigned by: 8F0A608E792B444... 3/18/2021



County of Dare
 Planning Office
 PO Box Drawer 1000
 Manteo NC 27954

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

ACCESSORY PERMIT

ACCESSORY PERMIT#: ACC-3984

03/25/2021

Parcel Number: 025973000
 Location: 854 E R DANIELS RD – WANCHESE
 Subdivision: SUBDIVISION - NONE
 Legal Description: LOT: BLK: SEC:

Owner Name: KENNETH L MANN
 Owner Mail Address: P O BOX 431 WANCHESE, NC 27981
 Owner Phone and email:

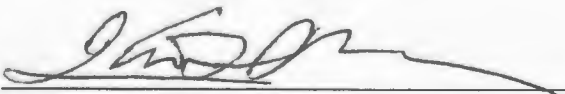
Contractor Name: KENNETH L MANN
 Contractor Mail Address: P O BOX 431 WANCHESE, NC 27981
 Contractor Phone: Contractor NC License#: UNLICENSED

ACCESSORY INFORMATION

Proposed Construction:	RESIDENTIAL - ACCESSORY STRUCT OVER 12 FT, ACC		
Description of Work	INSTALL 30X50 CARPORT BACK RIGHT SIDE OF PROPERTY		
Septic Permit Date:	03/18/2021	Cost of Construction:	\$30,000
Septic Permit #:	30641	CAMA Permit#:	NA
Footing Type:	CONCRETE	Flood Zone:	X
Finished Square Footage:	0	Base Flood Elevation:	0.0
Unfinished Square Footage:	1500	Lot/Ground Elevation:	NA

Comments: AS BUILT SURVEY REQUIRED BEFORE PERMIT FEE \$600.00
 CO

TOTAL FEES: \$600.00

Applicant Signature:  KENNETH L MANN

Inspector Signature: Ed Kindervater / AD  ALD



County of Dare
Planning Office
PO Box Drawer 1000
Manteo NC 27954

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

ACCESSORY PERMIT

ACCESSORY PERMIT#: ACC-4009

03/26/2021

Parcel Number: 025212003
Location: 119 SUNNYSIDE DR – MANTEO
Subdivision: SUNNYSIDE
Legal Description: LOT: 3 BLK: SEC:

Owner Name: CHRISTOPHER T JR MAGEE
Owner Mail Address: 119 SUNNYSIDE DR MANTEO, NC 27954
Owner Phone and email:

Contractor Name: CHRISTOPHER T JR MAGEE
Contractor Mail Address: 119 SUNNYSIDE DR, MANTEO, NC 27954
Contractor Phone: 2523058633 Contractor NC License#: UNLICENSED

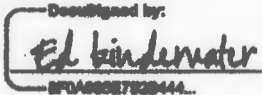
ACCESSORY INFORMATION

Proposed Construction: RESIDENTIAL - ACCESSORY STRUCT OVER 12 FT, ACC
Description of Work: CONSTRUCT 18X40 CARPORT ON BACK LEFT SIDE OF PROPERTY
Septic Permit Date: 03/19/2021 Cost of Construction: \$8,000
Septic Permit #: 30642 CAMA Permit#: NA
Footing Type: CONCRETE Flood Zone: AE
Finished Square Footage: 0 Base Flood Elevation: 8.0
Unfinished Square Footage: 720 Lot/Ground Elevation: NA

Comments: AS BUILT SURVEY REQUIRED BEFORE PERMIT FEE \$288.00
CO

TOTAL FEES: \$288.00

Applicant Signature:  CHRISTOPHER T JR MAGEE
3/26/2021

Inspector Signature:  ALD
3/26/2021



County of Dare
Planning Office
PO Box Drawer 1000
Manteo NC 27954

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

ACCESSORY PERMIT

ACCESSORY PERMIT#: ACC-3973

03/23/2021

Parcel Number: 025839002
Location: 431 TOLER RD – MANTEO
Subdivision: EAGLE A COLLINS
Legal Description: LOT: B BLK: SEC:

Owner Name: EAGLE A COLLINS
Owner Mail Address: 431 TOLER RD MANTEO, NC 27954
Owner Phone and email:

Contractor Name: M&K CONSTRUCTION INC
Contractor Mail Address: P.O. BOX 43, CRESWELL, NC 27928
Contractor Phone: 2525061236 Contractor NC License#:

ACCESSORY INFORMATION

Proposed Construction: RESIDENTIAL - MISC ACCESSORY,
Description of Work PLATFORM LIFT
Septic Permit Date: Cost of Construction: \$1,600
Septic Permit #: CAMA Permit#:
Flood Zone:
Base Flood Elevation: 0.0
Lot/Ground Elevation:

Comments: PERMIT FEE \$150.00

TOTAL FEES: \$150.00

Applicant Signature: Phillip Leigh M&K CONSTRUCTION INC
DocuSigned by: EBFD1FE5F927430... 3/31/2021

Inspector Signature: Ed Kindemater ALD
DocuSigned by: 8F0A88E78B441... 3/23/2021



County of Dare
Planning Office
PO Box Drawer 1000
Manteo NC 27954

Manteo: (252) 475-5870
Northern Beach: (252) 475-5871
Frisco: (252) 475-5878

MECHANICAL PROJECT

MECHANICAL PROJECT#: MECH-3912

03/12/2021

Parcel Number: 030059000
Location: 154 N FEARING PL – MANTEO
Subdivision: BRAKEWOOD SEC. 3
Legal Description: LOT: 60 BLK: SEC: 3

Owner Name: JEFFREY C TTEE COHEN
Owner Mail Address: 154 N FEARING PL - MANTEO, NC 27954
Owner Contact Information:

Contractor Name: ANDERSON HEATING & COOLING LLC
Contractor Mail Address: PO BOX 396 - KITTY HAWK, NC 27949
Contractor Phone: 252-619-3105
Contractor NC License#: 314838

DETAILS RESIDENTIAL

UNITS: 1.00 Cost of Job: \$6,872
Electrical Contractor ID: 30003
Units 1 MECHANICAL PROJECT FEE: \$150.00

Comments: Replace the existing furnace with a Carrier Comfort 92% AFU E 60000 Btuh Multipoise Gas Furnace

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

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

DocuSigned by:
Applicant Signature Ed Anderson Anderson Heating and Cooling ANDERSON HEATING & COOLING LLC
AD7B3D084CFF428... 3/12/2021 contact@andersonheatingandcooling.com

DocuSigned by:
Inspector Signature Ed Anderson ALD
8F0A88E782B44... 3/12/2021



County of Dare
 Planning Office
 PO Box Drawer 1000
 Manteo NC 27954

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

RESIDENTIAL BUILDING PERMIT

BUILDING PERMIT#: REMD-3881

03/09/2021

Parcel Number: 025046000
 Location: 184 ROGERS RD – MANTEO
 Subdivision: SUBDIVISION - NONE
 Legal Description: LOT: BLK: SEC:

Owner Name: NANCY HIRSCH BROWN
 Owner Mail Address: 372 THE LANE WANCHESE, NC 27981
 Owner Phone and email:

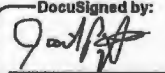
Contractor Name: CORNERSTONE MARINE & REMODELING, LLC
 Contractor Mail Address: PO BOX 2371, MANTEO, NC 27954
 Contractor Phone: 2524550960 Contractor NC License#: 84441

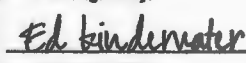
BUILDING INFORMATION

Proposed Construction Use:	REMODEL RES OR COM , REMODEL KITCHEN & UPSTAIRS BATH		
Proposed Construction Type:	SFD	Cost of Construction:	\$20,000
Finished Square Footage:	0	CAMA Permit#:	
Unfinished Square Footage:	0	Septic Permit#:	
Stories:	0.0	Septic Permit Date:	
Building Height:	0	Survey/Site Plan:	
Total Rooms:	0	Water Tap#:	
Footing Type:		Water Type:	
Exterior Finish:		Flood Zone:	
Proposed Finished Floor Elevation:		Base Flood Elevation:	0.0
Bedrooms:	0	Lot/Ground Elevation:	
		Baths/half baths:	0.00/0

Comments: Any deviation from the building plan or site plan requires prior approval. PERMIT FEE \$200.00

TOTAL FEES: \$200.00

DocuSigned by:
 Applicant Signature:  CORNERSTONE MARINE & REMODELING, LLC
 FE2DB07E25684B9... 3/9/2021

DocuSigned by:
 Inspector Signature:  ALD
 8F0A685E752B444... 3/9/2021



County of Dare
 Planning Office
 PO Box Drawer 1000
 Manteo NC 27954

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

RESIDENTIAL BUILDING PERMIT

BUILDING PERMIT#: R-3888

03/10/2021

Parcel Number: 024118000
 Location: 297 BAYVIEW DR – STUMPY POINT
 Subdivision: SUBDIVISION - NONE
 Legal Description: LOT: PARCEL 1 BLK: SEC:

Owner Name: BRANDON C HOLDER
 Owner Mail Address: 297 BAYVIEW DR STUMPY POINT, NC 27978
 Owner Phone and email:

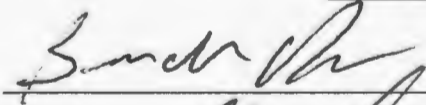
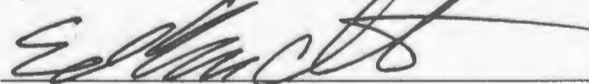
Contractor Name: BRANDON C HOLDER
 Contractor Mail Address: 297 BAYVIEW DR, STUMPY POINT, NC 27978
 Contractor Phone: 9803098206 Contractor NC License#:

BUILDING INFORMATION

Proposed Construction Use:	RESIDENTIAL ADDITION , RESIDENTIAL ADDITION		
Proposed Construction Type:	SFD	Cost of Construction:	\$25,000
Finished Square Footage:	400	CAMA Permit#:	NA
Unfinished Square Footage:	0	Septic Permit#:	NA
Stories:	2.0	Septic Permit Date:	N/A
Building Height:	0	Survey/Site Plan:	
Total Rooms:	3	Water Tap#:	
Footing Type:	PILING	Water Type:	
Exterior Finish:	LAP SIDING	Flood Zone:	
Proposed Finished Floor Elevation:		Base Flood Elevation:	0.0
Bedrooms:	1	Lot/Ground Elevation:	
		Baths/half baths:	1.00/1

Comments: Any deviation from the building plan or site plan requires prior approval.	PERMIT FEE	\$300.00
FINISHED CONSTRUCTION ELVATION	FLOOD DEVELOPMENT BLDG PERMIT	75.00
CERTIFICATE AND AS-BUILT SURVEY REQUIRED BEFORE CO	PENALTY NO PERMIT	450.00

TOTAL FEES: \$825.00

Applicant Signature:  BRANDON C HOLDER
 Inspector Signature:  ALD



County of Dare
 Planning Office
 PO Box Drawer 1000
 Manteo NC 27954

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

RESIDENTIAL BUILDING PERMIT

BUILDING PERMIT#: R-3966

03/19/2021

Parcel Number: 024948001
 Location: 1168 BURNSIDE RD – MANTEO
 Subdivision: SUBDIVISION - NONE
 Legal Description: LOT: PAR 1 BLK: SEC:

Owner Name: JAMES HORNING
 Owner Mail Address: 1168 BURNSIDE RD MANTEO, NC 27954
 Owner Phone and email:

Contractor Name: JAMES HORNING
 Contractor Mail Address: 1168 BURNSIDE RD, MANTEO, NC 27954
 Contractor Phone: 2522058748 Contractor NC License#: UNLICENSED

BUILDING INFORMATION

Proposed Construction Use:	RESIDENTIAL ADDITION , REMODEL EXISTING HOUSE W/ TWO ADDITIONS		
Proposed Construction Type:	SFD	Cost of Construction:	\$315,000
Finished Square Footage:	936	CAMA Permit#:	2021-07
Unfinished Square Footage:	417	Septic Permit#:	30558
Stories:	2.0	Septic Permit Date:	2/25/2021
Building Height:	0	Survey/Site Plan:	YES
Total Rooms:	0	Water Tap#:	NA
Footing Type:	PILING	Water Type:	
Exterior Finish:	VINYL SIDING	Flood Zone:	AE
Proposed Finished Floor Elevation:	8.6	Base Flood Elevation:	8.0
Bedrooms:	0	Lot/Ground Elevation:	NA
		Baths/half baths:	0.00/0

Comments: Any deviation from the building plan or site plan requires prior approval.	PERMIT FEE	\$869.00
LOCAL ELEVATION STANDARD OF 8' APPLIES, ANY AREAS BELOW 8' REQUIRE FLOOD VENTS, FINISHED CONSTRUCTION ELEVATION CERTIFICATE AND AS BUILT SURVEY REQUIRED FOR CO, (NOT TO EXCEED 30% LOT COVERAGE)	FLOOD DEVELOPMENT BLDG PERMIT	75.00
	HOME OWNERS RECOVERY FEE	10.00
	TOTAL FEES:	\$954.00

DocuSigned by:
 Applicant Signature: *J. Horning* JAMES HORNING
A6073C8863D9478... 3/21/2021

DocuSigned by:
 Inspector Signature: *Ed Kinderwater* ALD
8F0A895E752B444... 3/19/2021



County of Dare
 Planning Office
 PO Box Drawer 1000
 Manteo NC 27954

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

RESIDENTIAL BUILDING PERMIT

BUILDING PERMIT#: REMD-3994

03/26/2021

Parcel Number: 025961000
 Location: 11 PUGH RD – WANCHESE
 Subdivision: SUBDIVISION - NONE
 Legal Description: LOT: BLK: SEC:

Owner Name: JEAN GASKILL HEIRS OF DUNN
 Owner Mail Address: 5440 CHADWICK RD FAIRWAY, KS 66205
 Owner Phone and email:

Contractor Name: PAUL CREEF
 Contractor Mail Address: 1318 US HWY 64, MANTEO, NC 27954
 Contractor Phone: 2524806053 Contractor NC License#: 28283

BUILDING INFORMATION

Proposed Construction Use:	REMODEL RES OR COM , KITCHEN & BATH REMD W/ ELEC UPGRADE & NEW PANEL		
Proposed Construction Type:		Cost of Construction:	\$20,000
Finished Square Footage:	0	CAMA Permit#:	
Unfinished Square Footage:	0	Septic Permit#:	
Stories:	0	Septic Permit Date:	
Building Height:	0	Survey/Site Plan:	
Total Rooms:	0	Water Tap#:	
Footing Type:		Water Type:	
Exterior Finish:		Flood Zone:	
Proposed Finished Floor Elevation:		Base Flood Elevation:	0.0
Bedrooms:	0	Lot/Ground Elevation:	
		Baths/half baths:	0/0

Comments: Any deviation from the building plan or site plan requires prior approval. PERMIT FEE \$200.00

TOTAL FEES: \$200.00

DocuSigned by:
 Applicant Signature: Paul Creef PAUL CREEF
 051BF48E995E473... 3/26/2021

DocuSigned by:
 Inspector Signature: Ed Kinderwater ALD
 8F0A099E762B444... 3/26/2021



County of Dare
Planning Office
PO Box Drawer 1000
Manteo NC 27954

Lucy

Manteo: (252) 475-5870
Northern Beach: (252) 475-5871
Frisco: (252) 475-5878

ELECTRICAL PERMIT

ELECTRICAL PERMIT#: ELEC-3948

03/18/2021

Parcel Number: 024855003
Location: 920 HARBOR RD – WANCHESE
Subdivision: SUBDIVISION - NONE
Legal Description: LOT: LEASEHOLD LT 18~19~ 19A BLK: SEC:

Owner Name: BLUEWATER OUTER BANKS
Owner Mail Address: 1 MARINA RD - HAMPTON, VA 23669
Owner Contact Information:

Contractor Name: ACE MECHANICAL OBX INC
Contractor Mail Address: PO BOX 160 - MANNS HARBOR, NC 27953
Contractor Phone: 2524735063
Contractor NC License#: U-14118

DETAILS COMMERCIAL

Amp Increase: 0
Service Amps: 200
Cost of Job: \$1,000
ELECTRICAL PERMIT FEE: \$150.00

Comments: REPLACE BACK BOARD FOR WATER TOWER ELEC SERVICE

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

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

Applicant Signature: *Tommy Twiddy* 3/18/2021 ACE MECHANICAL OBX INC
171EA0FC89E848D... acemechanicalobx@charter.net

Inspector Signature: *Ed Binder* 3/18/2021 ALD
8F0A08E752B444...

Maggie



County of Dare
Planning Office
PO Box Drawer 1000
Manteo NC 27954

Manteo: (252) 475-5870
Northern Beach: (252) 475-5871
Frisco: (252) 475-5878

ELECTRICAL PERMIT

ELECTRICAL PERMIT#: ELEC-3843

03/03/2021

Parcel Number: 023459000
Location: 76 HOOKER RD – WANCHESE
Subdivision: SUBDIVISION - NONE
Legal Description: LOT: BLK: SEC:

Owner Name: MIKE BRYNTESON
Owner Mail Address: 128 OBERLIN RD - WANCHESE, NC 27981
Owner Contact Information:

Contractor Name: BEACON ELECTRICAL CONTRACTOR
Contractor Mail Address: 129 SCUPPERNONG RD - MANTEO, NC 27954
Contractor Phone: 2524895680
Contractor NC License#: I-28692

DETAILS RESIDENTIAL

Amp Increase: 100
Service Amps: 0
Cost of Job: \$600
ELECTRICAL PERMIT FEE: \$150.00

Comments: PROJECT# 10440746 TEMP POLE

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

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

Applicant Signature: Jason Turner 3/3/2021 BEACON ELECTRICAL CONTRACTOR
C838089E882A4EC... beaonelectric@hotmail.com

Inspector Signature: Ed Binderwater 3/3/2021 ALD
8F0A086E752B444...

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



Residential Trade Contractor Permit

Date February 19, 2021

**TP21-000032
Mechanical Trade Permit**

**Project Address: 283 N DOGWOOD TRL
Property Owner: HEAD, JOHN H TTEE**

**PIN #: 021450000
Mailing Address: 283 N DOGWOOD TRL
SOUTHERN SHORES, NC 27949**

Permit Types:

Plumbing Electrical Mechanical Gas

Contractor:

**Company Name: Norris Mechanical, LLC
Phone: (252) 491-2673
N. C. License Number: 11100**

**Qualifier: Stephanie Gardner
Address: 100 Freedom Avenue
Powells Point, NC 27966**

Description of Work: Installation of new Mini Split

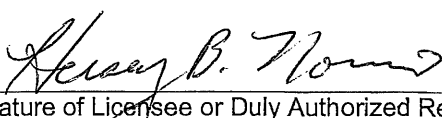
Project Cost Estimate: \$5,430.00

Permit Amount: 100.00

Payment:

Date Type Reference Receipt Received From Amount

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


Signature of Licensee or Duly Authorized Representative 3-2-21 Date


Signature of Permit Official 3-2-2021 Date
mb



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

**RESIDENTIAL
BUILDING/FLOODPLAIN
DEVELOPMENT PERMIT**

BUILDING PERMIT # DPA21-000043

Parcel:	022624001	Owner:	HUBER, STEPHEN L
PIN:	986716948767	Address:	612 MADISON AVE SUFFOLK, VA 23434
Location:	56 OCEAN BLVD	Phone #:	757-617-9481
District:	R1 - Low Density Residential District		
Subdiv	SO/SH AMENDED SECTION 1		
Lot-Block-Sect:	LOT: 7,8 BLK: 5 SEC: 1		

BUSINESS NAME:	Sandmark Custom Homes, Inc.	NC G.C. LICENSED CONTRACTOR:	
CONTRACTOR'S NAME:	Mark Martin	NC G.C. LICENSE NUMBER:	75383
ADDRESS:	191 Wax Myrtle Trail	LIMITATION:	
CITY, STATE, ZIP:	Southern Shores, NC 27949	CLASSIFICATION:	
OFFICE#:	(252) 261-1123	QUALIFIER:	
CELL#		LIEN AGENT NAME:	STEWART TITLE GUARANTY COMPANY
FAX#:		ENTRY#:	1412320
EMAIL:	mark@outerbanksbuilders.com	LIEN AGENT ADDRESS:	223 S. WEST ST SUITE 900 RALEIGH N.C 27603

DESCRIPTION OF WORK – (Any deviation from the Building Plan or Site Plan requires prior approval): ADDITION/REMODEL- REMOVE PORTION OF EXTERIOR DECK IN THE VE ZONE 78 SQ FT. ADD 54 SQ FT. DECK TO SOUTH SIDE OF DECK. FINISH OFF THE EXISTING ENCLOSER ON GROUND FLOOR FOR REC ROOM & HOME OFFICE
SPECIAL CONDITIONS -

TYPE OF CONSTRUCTION: <input type="checkbox"/> New Construction - <input checked="" type="checkbox"/> Addition / Expansion - <input checked="" type="checkbox"/> Remodel / Renovation / Repair - <input type="checkbox"/> Accessory - <input type="checkbox"/> Other <input type="checkbox"/> Bulkhead - <input type="checkbox"/> Piers/Docks - <input type="checkbox"/> Retaining Wall - <input type="checkbox"/> Beach Access Walkway/Stairs - <input type="checkbox"/> Swimming Pools - <input type="checkbox"/> Workshop - <input type="checkbox"/> Gazebo <input type="checkbox"/> Detached Garage - <input type="checkbox"/> Accessory Storage Building - <input type="checkbox"/> Dune Deck - <input type="checkbox"/> Generator		
OCCUPANCY: 8	TYPE OF FOUNDATION: Pile	PERMIT TYPE: Residential
HEATED/LIVING AREAS (SqFt): 814.0	HEAT: Heat Pump	RESIDENCE TYPE: 2nd Home
NON-HEATED AREAS (SqFt): 54	A/C: Heat Pump	BUILDING USE: Single Family
NUMBER OF STORIES:	INTERIOR WALLS: Drywall	ZONING DISTRICT: R1 - Low Density Residential District
BEDROOMS: 4	EXTERIOR WALLS: Cedar Shakes	ZONING PERMIT #: ZP21-000022
SEPTIC CAP. # OF PERSONS:	FIREPLACE:	DATE APPROVED: 03/03/2021
BATHS: 4 ½ BATHS: 1	ROOF:	PERMITTED/CONDITIONAL USE: Single Family Dwelling
GARAGE - DETACHED: ATTACHED:	INSULATION: Batt	CAMA PERMIT #: 2021-02
STORAGE ENCLOSURE:	ELEVATOR (SqFt):	DATE ISSUED: 02/22/2021
POOL: SHED:	DECKS (SqFt): 54	
FLOOD ZONE: Unshaded X	WINDOWS MAKE:	SEPTIC PERMIT #:
BASE FLOOD ELEVATION: LES 8ft	WINDOWS TYPE:	DATE ISSUED:

TOTAL CONSTRUCTION COST: \$35,450.00	
PERMIT FEES:	
Description	Total Cost
Heated/Living Area Fee (Single Family)	488.40
Non-Heated Areas Fee (Single Family)	16.20
Remodel / Renovation / Repair Fee	360.00
Homeowners Recovery Fund	10.00
TOTAL FEE:	874.60

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

Mark Martin
Applicant - Owner/Contractor (Please print and sign name)

03/03/2021

Date Approved

Kevin Clark
Building/Code/Zoning Official *Bymb*

3-3-2021
Date Issued



**TOWN OF SOUTHERN SHORES
PLANNING AND CODE ENFORCEMENT**
5375 N Virginia Dare Trail, Southern Shores, NC 27949
(252) 261-2394 Ext 4 - Office (252) 255-0876 - Fax
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**RESIDENTIAL
BUILDING/FLOODPLAIN
DEVELOPMENT PERMIT**

BUILDING PERMIT # DPA21-000041

Parcel: 022346000
PIN: 986706288292
Location: 62 FAIRWAY DR
District: RS1 - Single Family Residential District
Subdiv SO/SH COMMUNITY BLK 118
Lot-Block-Sect: LOT: 6 BLK: 118 SEC:

Owner: BRADLEY, GREGORY
Address: 62 FAIRWAY DR
KITTY HAWK, NC 27949
Phone #: 518-708-7388

BUSINESS NAME: Soundside Pools
CONTRACTOR'S NAME: Jason Conley
ADDRESS: 155 Foxx Grape Lane
CITY, STATE, ZIP: Kill Devil Hills, NC 27948
OFFICE#: (252) 449-2600
CELL#
FAX#:
EMAIL: jason@soundsidepools.com

NC G.C. LICENSED CONTRACTOR:
NC G.C. LICENSE NUMBER: 61128
LIMITATION:
CLASSIFICATION:
QUALIFIER:
LIEN AGENT NAME: Investors Title
ENTRY#: 1410781
LIEN AGENT ADDRESS: 223 S West St Raleigh

DESCRIPTION OF WORK – (Any deviation from the Building Plan or Site Plan requires prior approval): Add Swimming pool
SPECIAL CONDITIONS -

TYPE OF CONSTRUCTION: <input type="checkbox"/> New Construction - <input type="checkbox"/> Addition / Expansion - <input type="checkbox"/> Remodel / Renovation / Repair - <input type="checkbox"/> Accessory - <input type="checkbox"/> Other <input type="checkbox"/> Bulkhead - <input type="checkbox"/> Piers/Docks - <input type="checkbox"/> Retaining Wall - <input type="checkbox"/> Beach Access Walkway/Stairs - <input type="checkbox"/> Swimming Pools - <input type="checkbox"/> Workshop - <input type="checkbox"/> Gazebo <input type="checkbox"/> Detached Garage - <input type="checkbox"/> Accessory Storage Building - <input type="checkbox"/> Dune Deck - <input type="checkbox"/> Generator		
OCCUPANCY:	TYPE OF FOUNDATION:	PERMIT TYPE: Residential
HEATED/LIVING AREAS (SqFt): 0.0	HEAT:	RESIDENCE TYPE: Residence
NON-HEATED AREAS (SqFt): 0	A/C:	BUILDING USE: Single Family
NUMBER OF STORIES:	INTERIOR WALLS:	ZONING DISTRICT: RS1 - Single Family Residential District
BEDROOMS:	EXTERIOR WALLS:	ZONING PERMIT #: ZP21-000021
SEPTIC CAP. # OF PERSONS: 6	FIREPLACE:	DATE APPROVED: 03/01/2021
BATHS: ½ BATHS:	ROOF:	PERMITTED/CONDITIONAL USE: Single Family Dwelling
GARAGE - DETACHED: ATTACHED:	INSULATION:	CAMA PERMIT #:
STORAGE ENCLOSURE:	ELEVATOR (SqFt):	DATE ISSUED:
POOL: 352 SHED:	DECKS (SqFt):	
FLOOD ZONE: AE - 4 ft	WINDOWS MAKE:	SEPTIC PERMIT #: 30527
BASE FLOOD ELEVATION: LES 8 ft	WINDOWS TYPE:	DATE ISSUED: 02/16/2021

PERMIT FEES:		TOTAL CONSTRUCTION COST: \$35,000.00
Description		Total Cost
Swimming Pools		125.00
		TOTAL FEE: 125.00

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

Jason Conley

Applicant - Owner/Contractor (Please print and sign name)

03/01/2021
Date Approved

Kevin Clark

Building/Code/Zoning Official *By MB*

3-5-2021
Date Issued



**TOWN OF SOUTHERN SHORES
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**RESIDENTIAL
BUILDING/FLOODPLAIN
DEVELOPMENT PERMIT**

BUILDING PERMIT # DPA21-000042

Parcel:	005071078	Owner:	WISEBAKER, MEIKA MEIGGS WISEBAKER, PEYTON YANCEY
PIN:	986707773714	Address:	129 CLAM SHELL TRL SOUTHERN SHORES, NC 27949
Location:	129 CLAM SHELL TRL	Phone #:	757-285-9543
District:	RS1 - Single Family Residential District		
Subdiv	CHICHAUK		
Lot-Block-Sect:	LOT: 78 BLK: SEC:		

BUSINESS NAME:		NC G.C. LICENSED CONTRACTOR:	
CONTRACTOR'S NAME:	Payton Wisenbaker	NC G.C. LICENSE NUMBER:	
ADDRESS:	129 Clam Shell Trail	LIMITATION:	
CITY, STATE, ZIP:	Southern Shores, NC 27949	CLASSIFICATION:	
OFFICE#:		QUALIFIER:	
CELL#:		LJEN AGENT NAME:	
FAX#:		ENTRY#:	
EMAIL:	boardhouse@verizon.net	LJEN AGENT ADDRESS:	

DESCRIPTION OF WORK – (Any deviation from the Building Plan or Site Plan requires prior approval): ADDITION-Finish detached garage and above living space.
SPECIAL CONDITIONS - ALL WOOD BELOW RFPE (8) FT. SHALL BE TREATED

TYPE OF CONSTRUCTION: <input type="checkbox"/> New Construction - <input type="checkbox"/> Addition / Expansion - <input type="checkbox"/> Remodel / Renovation / Repair - <input type="checkbox"/> Accessory - <input type="checkbox"/> Other <input type="checkbox"/> Bulkhead - <input type="checkbox"/> Piers/Docks - <input type="checkbox"/> Retaining Wall - <input type="checkbox"/> Beach Access Walkway/Stairs - <input type="checkbox"/> Swimming Pools - <input type="checkbox"/> Workshop - <input type="checkbox"/> Gazebo <input type="checkbox"/> Detached Garage - <input type="checkbox"/> Accessory Storage Building - <input type="checkbox"/> Dune Deck - <input type="checkbox"/> Generator		
OCCUPANCY: 1	TYPE OF FOUNDATION:	PERMIT TYPE: Residential
HEATED/LIVING AREAS (SqFt): 1600.0	HEAT: Electric	RESIDENCE TYPE: Residence
NON-HEATED AREAS (SqFt): 0	A/C: Electric	BUILDING USE: Single Family
NUMBER OF STORIES: 2	INTERIOR WALLS: wood/drywall	ZONING DISTRICT: RS1 - Single Family Residential District
BEDROOMS: 1	EXTERIOR WALLS:	ZONING PERMIT #: ZP21-000023
SEPTIC CAP. # OF PERSONS: 10	FIREPLACE:	DATE APPROVED: 03/04/2021
BATHS: 1 ½ BATHS: 0	ROOF:	PERMITTED/CONDITIONAL USE: Single Family Dwelling
GARAGE - DETACHED: ATTACHED:	INSULATION: Batt	CAMA PERMIT #:
STORAGE ENCLOSURE: 200	ELEVATOR (SqFt):	DATE ISSUED:
POOL: SHED:	DECKS (SqFt):	
FLOOD ZONE: Unshaded X	WINDOWS MAKE:	SEPTIC PERMIT #: 29920
BASE FLOOD ELEVATION: LES 8ft	WINDOWS TYPE:	DATE ISSUED: 08/24/2020

TOTAL CONSTRUCTION COST: \$20,000.00	
PERMIT FEES:	Total Cost
Description	960.00
Heated/Living Area Fee (Single Family)	TOTAL FEE: 960.00

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Payton Wisenbaker *Payton Wisenbaker*
 Applicant - Owner/Contractor (Please print and sign name)

03/04/2021

Date Approved

Kevin Clark
 Building/Code/Zoning Official *By MB*

3-8-2021

Date Issued



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**RESIDENTIAL
BUILDING/FLOODPLAIN
DEVELOPMENT PERMIT**

BUILDING PERMIT # DPA21-000044

Parcel: 021501000
PIN: 986818324464
Location: 244 HILLCREST DR
District: RS1 - Single Family Residential District
Subdiv: SO/SH BEACH BLK 84
Lot-Block-Sect: LOT: 24 BLK: 84 SEC:

Owner: CHUANG, JOHN H
Address: 244 HILLCREST DR
SOUTHERN SHORES, NC 27949
Phone #: 252-715-0593

BUSINESS NAME: J B Sims Construction Co Inc
CONTRACTOR'S NAME: James Sims
ADDRESS: 262 Wax Myrtle Trl
CITY, STATE, ZIP: Southern Shores, NC 27949
OFFICE#: (757) 748-2150
CELL#:
FAX#:
EMAIL: 88ChrisSims@gmail.com

NC G.C. LICENSED CONTRACTOR: Licensed General Contractor
NC G.C. LICENSE NUMBER: 39307
LIMITATION: Limited
CLASSIFICATION: Residential
QUALIFIER: James Boyd Sims
LIEN AGENT NAME: Investors Title Insurance Co
ENTRY#: 1410507
LIEN AGENT ADDRESS: 223 S. West Street, Suite 900,
Raleigh, NC27603

DESCRIPTION OF WORK – (Any deviation from the Building Plan or Site Plan requires prior approval): ADDITION- Add to the front of the existing garage.
SPECIAL CONDITIONS - ALL WOOD BELOW RFPE () FT. SHALL BE TREATED

TYPE OF CONSTRUCTION: New Construction - <input type="checkbox"/> Addition / Expansion - <input type="checkbox"/> Remodel / Renovation / Repair - <input type="checkbox"/> Accessory - <input type="checkbox"/> Other <input type="checkbox"/> <input type="checkbox"/> Bulkhead - <input type="checkbox"/> Piers/Docks - <input type="checkbox"/> Retaining Wall - <input type="checkbox"/> Beach Access Walkway/Stairs - <input type="checkbox"/> Swimming Pools - <input type="checkbox"/> Workshop - <input type="checkbox"/> Gazebo <input type="checkbox"/> Detached Garage - <input type="checkbox"/> Accessory Storage Building - <input type="checkbox"/> Dune Deck - <input type="checkbox"/> Generator		
OCCUPANCY:	TYPE OF FOUNDATION: Monolithic slab	PERMIT TYPE: Residential
HEATED/LIVING AREAS (SqFt): 336.0	HEAT: Other	RESIDENCE TYPE: Residence
NON-HEATED AREAS (SqFt): 0	A/C: Other	BUILDING USE: Single Family
NUMBER OF STORIES: 1	INTERIOR WALLS: drywall	ZONING DISTRICT: RS1 - Single Family Residential District
BEDROOMS:	EXTERIOR WALLS: vinyl lap siding	ZONING PERMIT #: ZP21-000024
SEPTIC CAP. # OF PERSONS: 6	FIREPLACE:	DATE APPROVED: 03/04/2021
BATHS: ½ BATHS:	ROOF: Asphalt	PERMITTED/CONDITIONAL USE: Single Family Dwelling
GARAGE - DETACHED: ATTACHED: 336	INSULATION: Batt	CAMA PERMIT #:
STORAGE ENCLOSURE:	ELEVATOR (SqFt):	DATE ISSUED:
POOL: SHED:	DECKS (SqFt):	
FLOOD ZONE: Unshaded X	WINDOWS MAKE:	SEPTIC PERMIT #: 30580
BASE FLOOD ELEVATION: LES 8ft	WINDOWS TYPE: PVC insulated	DATE ISSUED: 03/03/2021

TOTAL CONSTRUCTION COST: \$74,750.00	
PERMIT FEES:	Total Cost
Description	201.60
Heated/Living Area Fee (Single Family)	10.00
Homeowners Recovery Fund	TOTAL FEE: 211.60

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

JB Sims [Signature] 3/8/21
Applicant - Owner/Contractor (Please print and sign name)

03/05/2021
Date Approved

Kevin Clark
Building/Code/Zoning Official By MB

Date Issued

**TOWN OF SOUTHERN SHORES
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Residential Trade Contractor Permit

Date March 04, 2021

TP21-000037
Mechanical Trade Permit

Project Address: 219 OCEAN BLVD
Property Owner: CANTRELL, JERRY W

PIN #: 022105000
Mailing Address: 230 GRAPEVINE RUN
ATLANTA, GA 30350

Permit Types:

Plumbing Electrical Mechanical Gas

Contractor:

Company Name: Surfside Heating and Air Conditioning, Inc
Phone: (252) 261-4949
N. C. License Number: L.20077

Qualifier: Robert K Eike
Address: 124 Fox Knoll Dr
Harbinger , NC 27941

Description of Work: CHANGEOUT 3.5 TON 14 SEER HEAT PUMP WITH CARRIER

Project Cost Estimate: \$4,500.00

Permit Amount: 100.00

Payment:

Date Type Reference Receipt Received From Amount

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



Signature of Licensee or Duly Authorized Representative 3/5/21 Date



Signature of Permit Official *By MB* 3-8-2021 Date

This document is now complete.

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3/8/2021

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Residential Trade Contractor Permit

Date March 08, 2021

**TP21-000038
Mechanical Trade Permit**

**Project Address: 105 DUCK WOODS DR
Property Owner: GIBBS, JERRY MICHAEL**

**PIN #: 030178000
Mailing Address: 105 DUCK WOODS DR
SOUTHERN SHORES, NC 27949**

Permit Types:

Plumbing Electrical Mechanical Gas

Contractor:

**Company Name: Comfort First Heating & Cooling, Inc
Phone: (252) 772-9991
N. C. License Number: 33486**

**Qualifier: Arthur Harmon
Address: 148 Irie Ln
Powells Point, NC 27966**

Description of Work: REPLACE 1 TON MINI SPLIT

Project Cost Estimate: \$752.00

Permit Amount: 100.00

Payment:

Date Type Reference Receipt Received From Amount

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

DocuSigned by:

0A02F07393E7440...

3/8/2021

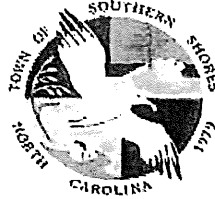
Signature of Licensee or Duly Authorized Representative Date

Kevin Clark 3-8-2021
Signature of Permit Official Date
By MB

3/10/2021

Permit Detail

**TOWN OF SOUTHERN SHORES
PLANNING AND CODE ENFORCEMENT**
5375 N Virginia Dare Trail, Southern Shores, NC 27949
(252) 261-2394 - Office (252) 255-0876 - Fax
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Residential Trade Contractor Permit

Date March 10, 2021

**TP21-000041
Mechanical Trade Permit**

Project Address: 163 BAYBERRY TRL
Property Owner: ERNST, AIDA C

PIN #: 022063000
Mailing Address: 3716 HARDWICK TER
CHESAPEAKE, VA 23321

Permit Types:

Plumbing Electrical Mechanical Gas

Contractor:

Company Name: Brian Jefferson McDonald DBA/One Hour Heating & Air Conditioning
Phone: (252) 441-1740
N. C. License Number: 12634

Qualifier: Brian McDonald
Address: P.O. Box 1415
Nags Head, NC 27959

Description of Work: Replace airhandler with 14 seer 3 ton Carrier airhandler

Project Cost Estimate: \$3,807.00

Permit Amount: 100.00

Payment:

Date Type Reference Receipt Received From Amount

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

Brian McDonald 3-10-21

Signature of Licensee or Duly Authorized Representative

Date

Kevin Clark 3-10-2021

Signature of Permit Official

Date

*By
KCS*

**TOWN OF SOUTHERN SHORES
PLANNING AND CODE ENFORCEMENT**
5375 N Virginia Dare Trail, Southern Shores, NC 27949
(252) 261-2394 - Office (252) 255-0876 - Fax
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**Trade Contractor Permit**

Date March 10, 2021

**TP21-000042
Mechanical Trade Permit**

Project Address: 218 SEA OATS TRL

PIN #: 021823000

Property Owner: SENDEL, KEN

Mailing Address: 5 SUNNY CT
SOMERSET, NJ 08873**Permit Types:**

Plumbing Electrical Mechanical Gas

Contractor:

Company Name: R.A. Hoy Heating & A/C
Phone: (252) 261-2008
N. C. License Number: 13056

Qualifier: Douglas Wakeley
Address: P.O. Box 179
Kitty Hawk, NC 27949

Description of Work: REPLACING DOWNSTAIRS 14 SEER 2.5 TON TRANE SYSTEM

Project Cost Estimate: \$6,355.00

Permit Amount: 100.00

Payment:

Date Type Reference Receipt Received From Amount

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

JACLYN SLATER

03/10/2021

Signature of Licensee or Duly Authorized Representative Date

Kevin Clark

3-10-2021

Signature of Permit Official Date

By MB

3/3/2021

Permit Detail

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



Residential Trade Contractor Permit

Date March 03, 2021

TP21-000036
Mechanical Trade Permit

Project Address: 139 YAUPON TRL
Property Owner: ROUGHTON, MILDRED (MILLIE) HILL

PIN #: 021692000
Mailing Address: 139 YAUPON TRL
KITTY HAWK, NC 27949

Permit Types:

Plumbing Electrical Mechanical Gas
Contractor:

Company Name: Master Heating & Cooling
Phone: (252) 255-0095
N. C. License Number: L.18066

Qualifier: Anthony Pritchett
Address: P.O. Box 707
Kitty Hawk, NC 27949

Description of Work: REMOVE OLD & INSTALL NEW 3 TON 14 SEER LENNOX HEAT PUMP SYSTEM

Project Cost Estimate: \$6,050.00

Permit Amount: 100.00

Payment:

Date Type Reference Receipt Received From Amount

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


Signature of Licensee or Duly Authorized Representative 3/3/21
Date

 3-10-2021
Signature of Permit Official By Date
me



**TOWN OF SOUTHERN SHORES
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**RESIDENTIAL
BUILDING/FLOODPLAIN
DEVELOPMENT PERMIT**

BUILDING PERMIT # DPA21-000045

Parcel:	022383051	Owner:	IAN & SUNDAY HILL
PIN:	986707782362	Address:	218 SPARROW ROAD
Location:	140 CLAM SHELL TRL		CHESAPEAKE, VA 23325
District:	RS1 - Single Family Residential District	Phone #:	757-536-3599
Subdiv	CHICHAUK		
Lot-Block-Sect:	LOT: 51 BLK: SEC:		

BUSINESS NAME:	SAGA Construction, Inc	NC G.C. LICENSED CONTRACTOR:	
CONTRACTOR'S NAME:	Amit Gupta	NC G.C. LICENSE NUMBER:	62306
ADDRESS:	PO Box 90	LIMITATION:	
CITY, STATE, ZIP:	Kill Devil Hills, NC 27948	CLASSIFICATION:	
OFFICE#:	(252) 441-9003	QUALIFIER:	
CELL#:		LIEN AGENT NAME:	Fidelity National Title Company, LLC
FAX#:		ENTRY#:	1408017
EMAIL:	agupta@icrsaga.com	LIEN AGENT ADDRESS:	223 S. WEST ST SUITE 900 RALEIGH N.C 27603

DESCRIPTION OF WORK – (Any deviation from the Building Plan or Site Plan requires prior approval): NEW SFD- NEW CONSTRUCTION 7 BEDROOM HOME WITH 7 FULL BATHS & 3 1/2 bath SFD WITH 2 CAR GARAGE, CONCRETE POOL, CONCRETE POOL DECK, AREA FOR GRILL WITH ROOF & FIRE PIT AND HOT TUB

SPECIAL CONDITIONS - ALL WOOD BELOW RFPE () FT. SHALL BE TREATED

TYPE OF CONSTRUCTION: <input checked="" type="checkbox"/> New Construction - <input type="checkbox"/> Addition / Expansion - <input type="checkbox"/> Remodel / Renovation / Repair - <input type="checkbox"/> Accessory - <input type="checkbox"/> Other		
<input type="checkbox"/> Bulkhead - <input type="checkbox"/> Piers/Docks - <input type="checkbox"/> Retaining Wall - <input type="checkbox"/> Beach Access Walkway/Stairs - <input type="checkbox"/> Swimming Pools - <input type="checkbox"/> Workshop - <input type="checkbox"/> Gazebo		
<input type="checkbox"/> Detached Garage - <input type="checkbox"/> Accessory Storage Building - <input type="checkbox"/> Dune Deck - <input type="checkbox"/> Generator		
OCCUPANCY: 14	TYPE OF FOUNDATION: Pile	PERMIT TYPE: Residential
HEATED/LIVING AREAS (SqFt): 4534.0	HEAT: Heat Pump	RESIDENCE TYPE: 2nd Home
NON-HEATED AREAS (SqFt): 1,415	A/C: Heat Pump	BUILDING USE: Single Family
NUMBER OF STORIES: 3	INTERIOR WALLS: Drywall	ZONING DISTRICT: RS1 - Single Family Residential District
BEDROOMS: 7	EXTERIOR WALLS: COMBINATION	ZONING PERMIT #: ZP21-000027
SEPTIC CAP. # OF PERSONS: 14	FIREPLACE: Gas	DATE APPROVED: 03/09/2021
BATHS: 7 1/2 BATHS: 3	ROOF: Metal	PERMITTED/CONDITIONAL USE: Single Family Dwelling
GARAGE - DETACHED: ATTACHED: 515	INSULATION: Batt	CAMA PERMIT #:
STORAGE ENCLOSURE: 156	ELEVATOR (SqFt): 67	DATE ISSUED:
POOL: 480 SHED:	DECKS (SqFt): 677	
FLOOD ZONE: Unshaded X	WINDOWS MAKE:	SEPTIC PERMIT #: 30583
BASE FLOOD ELEVATION: LES 8ft	WINDOWS TYPE:	DATE ISSUED: 03/03/2021

TOTAL CONSTRUCTION COST: \$700,000.00

PERMIT FEES:	Total Cost
Description	
Plan Review Fee - Single Family New Construction	150.00
Heated/Living Area Fee (Single Family)	2,720.40
Non-Heated Areas Fee (Single Family)	424.50
Homeowners Recovery Fund	10.00
TOTAL FEE:	3,304.90

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

Gracelyn Mirick
04E83F8707AB4D6...
Applicant - Owner/Contractor (Please print and sign name)

03/09/2021

Date Approved

Kevin Clark

3-10-2021

Date Issued

Building/Code/Zoning Official *By mg*



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

**RESIDENTIAL
BUILDING/FLOODPLAIN
DEVELOPMENT PERMIT**

BUILDING PERMIT # DPA21-000040

Parcel: 022865000
PIN: 986716922634
Location: 51 SKYLINE RD
District: RS1 - Single Family Residential District
Subdiv: SO/SH AMENDED PORTION SEC 1
Lot-Block-Sect: LOT: 6 BLK: B SEC: 1

Owner: DUNN, MATTHEW RYAN
Address: 15030 RANKIN DR
MIDLOTHIAN, VA 23112
Phone #: 609-892-5734

BUSINESS NAME: Simpleside Construction, Inc
CONTRACTOR'S NAME: Grant Smith
ADDRESS: 308 W Helga St
CITY, STATE, ZIP: Kill Devil Hills, NC 27948
OFFICE#: (252) 564-8307
CELL#
FAX#:
EMAIL: grant@simplesideobx.com

NC G.C. LICENSED CONTRACTOR:
NC G.C. LICENSE NUMBER: 78583
LIMITATION: LIMITED
CLASSIFICATION: RESIDENTIAL
QUALIFIER:
LIEN AGENT NAME: Fidelity National Title Company
ENTRY#: 1410110
223 S. West Street, Suite 900
Raleigh, NC 27603
LIEN AGENT ADDRESS:

DESCRIPTION OF WORK – (Any deviation from the Building Plan or Site Plan requires prior approval): NEW CONSTRUCTION- NEW 3 BEDROOM SFD HOME WITH 2 FULL BATHS

Pool that is currently on site plan is not to be constructed at this time.
SPECIAL CONDITIONS - ALL WOOD BELOW RFPE (8) FT. SHALL BE TREATED

TYPE OF CONSTRUCTION: <input checked="" type="checkbox"/> New Construction - <input type="checkbox"/> Addition / Expansion - <input type="checkbox"/> Remodel / Renovation / Repair - <input type="checkbox"/> Accessory - <input type="checkbox"/> Other <input type="checkbox"/> Bulkhead - <input type="checkbox"/> Piers/Docks - <input type="checkbox"/> Retaining Wall - <input type="checkbox"/> Beach Access Walkway/Stairs - <input type="checkbox"/> Swimming Pools - <input type="checkbox"/> Workshop - <input type="checkbox"/> Gazebo <input type="checkbox"/> Detached Garage - <input type="checkbox"/> Accessory Storage Building - <input type="checkbox"/> Dune Deck - <input type="checkbox"/> Generator		
OCCUPANCY: 8	TYPE OF FOUNDATION: Pile	PERMIT TYPE: Residential
HEATED/LIVING AREAS (SqFt): 1478.0	HEAT: Heat Pump	RESIDENCE TYPE: 2nd Home
NON-HEATED AREAS (SqFt): 92	A/C: Electric	BUILDING USE: Single Family
NUMBER OF STORIES: 1	INTERIOR WALLS: Drywall	ZONING DISTRICT: RS1 - Single Family Residential District
BEDROOMS: 3	EXTERIOR WALLS: Vinyl Siding	ZONING PERMIT #:
SEPTIC CAP. # OF PERSONS: 8	FIREPLACE:	DATE APPROVED:
BATHS: 2 1/2 BATHS:	ROOF: Asphalt	PERMITTED/CONDITIONAL USE: Single Family Dwelling
GARAGE - DETACHED: ATTACHED:	INSULATION: Batt	CAMA PERMIT #:
STORAGE ENCLOSURE:	ELEVATOR (SqFt):	DATE ISSUED:
POOL: SHED:	DECKS (SqFt):	
FLOOD ZONE: Unshaded X	WINDOWS MAKE: Viwinco	SEPTIC PERMIT #: 30550
BASE FLOOD ELEVATION: LES 8ft	WINDOWS TYPE: Vinyl S-Series	DATE ISSUED: 02/22/2021

TOTAL CONSTRUCTION COST: \$230,000.00

PERMIT FEES:	Total Cost
Description	
Plan Review Fee - Single Family New Construction	150.00
Heated/Living Area Fee (Single Family)	886.80
Non-Heated Areas Fee (Single Family)	27.60
Homeowners Recovery Fund	10.00
TOTAL FEE:	1,074.40

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

[Signature]
Applicant - Owner/Contractor
Grant Smith
(Please print and sign name)

03/09/2021

Date Approved

Kevin Clark
Building/Code/Zoning Official *By nbs*

3-10-2021
Date Issued



**TOWN OF SOUTHERN SHORES
PLANNING AND CODE ENFORCEMENT**
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**RESIDENTIAL
BUILDING/FLOODPLAIN
DEVELOPMENT PERMIT**

BUILDING PERMIT # DPA21-000049

Parcel: 022819009
PIN: 987717018978
Location: 8 OCEAN BLVD
District: C - General Commercial District
Subdiv: SO/SH AMENDED PORTION SEC 1
Lot-Block-Sect: LOT: 1-R BLK: 9 SEC: 1

Owner: MESHANSKI, JOE
Address: 335 WASHINGTON ST.
MOUNT PLEASANT, PA 15666
Phone #: 412-298-5143

BUSINESS NAME:
CONTRACTOR'S NAME: Joe Meshanski
ADDRESS: 335 Washington Street
CITY, STATE, ZIP: Mount Pleasant, PA 15666
OFFICE#:
CELL#: 724-547-4256
FAX#:
EMAIL: jmeshanski@diamondmeds.com

NC G.C. LICENSED CONTRACTOR:
NC G.C. LICENSE NUMBER:
LIMITATION:
CLASSIFICATION:
QUALIFIER:
LIEN AGENT NAME:
ENTRY#:
LIEN AGENT ADDRESS:

DESCRIPTION OF WORK – (Any deviation from the Building Plan or Site Plan requires prior approval): ADDITION-Projects:

1. replace existing pool gravel area with concrete (19 ft 2 in x 32 ft 3 in)
2. remove existing pool fence and expand concrete (6 ft x 59 ft 10 in)
3. restore original fence along pool where new concrete poured (59 ft 10 in long)
4. pour new concrete to expand parking area concrete (6 ft x 21 ft 10 in)
5. pour new concrete pad next to car port for trash cans (7 ft x 15 ft)
6. enclose north side of house car port (14 ft 8 in x 18 ft 10 in)
7. add fence inside pool area to separate house from pool (approx. 27 ft)
8. add fence on north back corner of house to neighbor fence (approx 35 ft)
9. add fence along road side of house for noise control (approx 175 ft)
10. Not sure if this one is required, but we are replacing the existing irrigation system because it is old and brittle and we are adding some sod to area behind the house.

SPECIAL CONDITIONS - ALL WOOD BELOW RFPE (8) FT. SHALL BE TREATED

TYPE OF CONSTRUCTION: <input type="checkbox"/> New Construction - <input checked="" type="checkbox"/> Addition / Expansion - <input type="checkbox"/> Remodel / Renovation / Repair - <input type="checkbox"/> Accessory - <input type="checkbox"/> Other <input type="checkbox"/> Bulkhead - <input type="checkbox"/> Piers/Docks - <input type="checkbox"/> Retaining Wall - <input type="checkbox"/> Beach Access Walkway/Stairs - <input checked="" type="checkbox"/> Swimming Pools - <input type="checkbox"/> Workshop - <input type="checkbox"/> Gazebo <input type="checkbox"/> Detached Garage - <input type="checkbox"/> Accessory Storage Building - <input type="checkbox"/> Dune Deck - <input type="checkbox"/> Generator		
OCCUPANCY:	TYPE OF FOUNDATION:	PERMIT TYPE: Residential
HEATED/LIVING AREAS (SqFt): 285.0	HEAT:	RESIDENCE TYPE: Rental > 30 days
NON-HEATED AREAS (SqFt): 1,498	A/C:	BUILDING USE: Single Family
NUMBER OF STORIES:	INTERIOR WALLS:	ZONING DISTRICT: C - General Commercial District
BEDROOMS:	EXTERIOR WALLS:	ZONING PERMIT #: ZP21-000029
SEPTIC CAP. # OF PERSONS:	FIREPLACE:	DATE APPROVED: 03/10/2021
BATHS: ½ BATHS:	ROOF:	PERMITTED/CONDITIONAL USE: Single Family Dwelling
GARAGE - DETACHED: ATTACHED:	INSULATION:	CAMA PERMIT #:
STORAGE ENCLOSURE:	ELEVATOR (SqFt):	DATE ISSUED:
POOL: 977 SHED:	DECKS (SqFt):	
FLOOD ZONE: AO - 1 ft	WINDOWS MAKE:	SEPTIC PERMIT #:
BASE FLOOD ELEVATION: LES 8ft	WINDOWS TYPE:	DATE ISSUED:

TOTAL CONSTRUCTION COST: \$23,500.00	
PERMIT FEES:	Total Cost
Description	
Heated/Living Area Fee (Single Family)	171.00
Non-Heated Areas Fee (Single Family)	449.40
Swimming Pools	125.00
	TOTAL FEE: 745.40

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Joe Meshanski **JOE MESHANSKI**

Applicant - Owner/Contractor (Please print and sign name)

03/10/2021

Date Approved

Kevin Clark
Building/Codes/Zoning Official *By MB*

3-10-2021
Date Issued

3/9/2021

View File

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



Residential Trade Contractor Permit

Date March 09, 2021

**TP21-000039
Mechanical Trade Permit**

Project Address: 31 SKYLINE DR
Property Owner: ROBERT & CINDY TATE

PIN #: 029116000
Mailing Address: 196 PETTITE DRIVE
STANLEY, VA 22851

Permit Types:

Plumbing Electrical Mechanical Gas

Contractor:

Company Name: AIR-O-SMITH, INC.
Phone: (252) 261-5238
N. C. License Number: 30070

Qualifier: STEVE SMITH
Address: P.O. BOX 2472
KITTY HAWK, NC 27949

Description of Work: REPLACE 14 SEER UNIT WITH 2 -TON HEAT PUMP & AIR HANDLER WITH NEW LINE SET & LOW VOLTAGE WIRING


Project Cost Estimate: \$11,000.00

Permit Amount: 100.00

Payment:

Date Type Reference Receipt Received From Amount


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



Signature of Licensee or Duly Authorized Representative

3/10/2021

Date

Kevin Clark


Signature of Permit Official
MB

3-11-2021

Date

**TOWN OF SOUTHERN SHORES
PLANNING AND CODE ENFORCEMENT**
5375 N Virginia Dare Trail, Southern Shores, NC 27949
(252) 261-2394 - Office (252) 255-0876 - Fax
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Residential Trade Contractor Permit

Date March 09, 2021

**TP21-000040
Mechanical Trade Permit**

Project Address: 97 DUCK WOODS DR
Property Owner: HAWK, ROBERT J

PIN #: 030174000
Mailing Address: 97 DUCK WOODS DR
KITTY HAWK, NC 27949

Permit Types:

Plumbing Electrical Mechanical Gas
Contractor:

Company Name: AIR-O-SMITH, INC.
Phone: (252) 261-5238
N. C. License Number: 30070

Qualifier: STEVE SMITH
Address: P.O. BOX 2472
KITTY HAWK, NC 27949

Description of Work: REPLACE 3 TON 20 SEER HEAT PUMP & AIR HANDLER WITH NEW LINE SET & LOW VOLTAGE WIRING

Project Cost Estimate: \$15,300.00

Permit Amount: 100.00

Payment:
Date Type Reference Receipt Received From Amount

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



Signature of Licensee or Duty Authorized Representative 3/10/2021
Date



Signature of Permit Official 3-11-2021
Date



**TOWN OF SOUTHERN SHORES
PLANNING AND CODE ENFORCEMENT**
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**RESIDENTIAL
BUILDING/FLOODPLAIN
DEVELOPMENT PERMIT**

BUILDING PERMIT # DPA21-000046

Parcel: 022536000
PIN: 986708873752
Location: 118 OCEAN BLVD
District: R1 - Low Density Residential District
Subdiv: SO/SH SEC 2
Lot-Block-Sect: LOT: 9 10 BLK: 18 SEC: 2

Owner: LEWIS, MARY JANE
Address: 10114 TAMARACK DR
VIENNA, VA 22182
Phone #: 703-477-4017

BUSINESS NAME: Beachcraft, LLC
CONTRACTOR'S NAME: Brian McIver
ADDRESS: 604 W. Landing Drive
CITY, STATE, ZIP: Kill Devil Hills, NC 27948
OFFICE#: (252) 441-0718
CELL#:
FAX#:
EMAIL: beachcraftllc@yahoo.com

NC G.C. LICENSED CONTRACTOR:
NC G.C. LICENSE NUMBER: 58810
LIMITATION:
CLASSIFICATION:
QUALIFIER:
LIEN AGENT NAME:
ENTRY#:
LIEN AGENT ADDRESS:

DESCRIPTION OF WORK - (Any deviation from the Building Plan or Site Plan requires prior approval): REMODEL- REPAIR, REPLACE, CORNICE & SIDING. REPLACE EXISTING (7) WINDOWS WITH PELLAS UNITS. REPLACE LOAD SIDE WIRE FROM METER TO PANEL
SPECIAL CONDITIONS - ALL WOOD BELOW RFPE (8) FT. SHALL BE TREATED

TYPE OF CONSTRUCTION: <input type="checkbox"/> New Construction - <input type="checkbox"/> Addition / Expansion - <input checked="" type="checkbox"/> Remodel / Renovation / Repair - <input type="checkbox"/> Accessory - <input type="checkbox"/> Other <input type="checkbox"/> Bulkhead - <input type="checkbox"/> Piers/Docks - <input type="checkbox"/> Retaining Wall - <input type="checkbox"/> Beach Access Walkway/Stairs - <input type="checkbox"/> Swimming Pools - <input type="checkbox"/> Workshop - <input type="checkbox"/> Gazebo <input type="checkbox"/> Detached Garage - <input type="checkbox"/> Accessory Storage Building - <input type="checkbox"/> Dune Deck - <input type="checkbox"/> Generator		
OCCUPANCY:	TYPE OF FOUNDATION:	PERMIT TYPE: Residential
HEATED/LIVING AREAS (SqFt): 0.0	HEAT:	RESIDENCE TYPE: Rental > 30 days
NON-HEATED AREAS (SqFt): 0	A/C:	BUILDING USE: Single Family
NUMBER OF STORIES:	INTERIOR WALLS:	ZONING DISTRICT: R1 - Low Density Residential District
BEDROOMS:	EXTERIOR WALLS: HARDI PLANK	ZONING PERMIT #:
SEPTIC CAP. # OF PERSONS:	FIREPLACE:	DATE APPROVED:
BATHS: ½ BATHS:	ROOF:	PERMITTED/CONDITIONAL USE: Single Family Dwelling
GARAGE - DETACHED: ATTACHED:	INSULATION:	CAMA PERMIT #:
STORAGE ENCLOSURE:	ELEVATOR (SqFt):	DATE ISSUED:
POOL: SHED:	DECKS (SqFt):	
FLOOD ZONE: Unshaded X	WINDOWS MAKE: PELLA	SEPTIC PERMIT #:
BASE FLOOD ELEVATION: LES 8ft	WINDOWS TYPE: Double Hung	DATE ISSUED:

TOTAL CONSTRUCTION COST: \$25,000.00	
PERMIT FEES:	Total Cost
Description	250.00
Remodel / Renovation / Repair Fee	TOTAL FEE: 250.00

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Brian P. McIver - *Brian P. McIver*

Applicant - Owner/Contractor (Please print and sign name)

03/09/2021

Date Approved

Kevin Clark

3-12-2021
Date Issued

Building/Code/Zoning Official *By me*



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**RESIDENTIAL
BUILDING/FLOODPLAIN
DEVELOPMENT PERMIT**

BUILDING PERMIT # DPA21-000047

Parcel:	022714000	Owner:	BURNS, ROBERT M
PIN:	986715624786	Address:	8 SWEET GUM LN
Location:	8 SWEETGUM LN		SOUTHERN SHORES, NC 27949
District:	R1 - Low Density Residential District	Phone #:	703-338-0127
Subdiv	SO/SH SOUND SIDE BLKS 170-175		
Lot-Block-Sect:	LOT: 1R BLK: 170 SEC:		

BUSINESS NAME:	Gulfstream Pools	NC G.C. LICENSED CONTRACTOR:	
CONTRACTOR'S NAME:	Travis Byrum	NC G.C. LICENSE NUMBER:	60217
ADDRESS:	P.O. Box 2318	LIMITATION:	
CITY, STATE, ZIP:	Kity Hawk, NC 27949	CLASSIFICATION:	
OFFICE#:	(252) 255-1192	QUALIFIER:	
CELL#:		LIEN AGENT NAME:	Fidelity National Title Company, LLC
FAX#:		ENTRY#:	1417333
EMAIL:	gulfstreampools@aol.com	LIEN AGENT ADDRESS:	223 S. West Street, Suite 900 / Raleigh, NC 27603

DESCRIPTION OF WORK – (Any deviation from the Building Plan or Site Plan requires prior approval): ACCESSORY- Installation of fiberglass swimming pool, concrete deck, and fence
SPECIAL CONDITIONS -

TYPE OF CONSTRUCTION: <input type="checkbox"/> New Construction - <input type="checkbox"/> Addition / Expansion - <input type="checkbox"/> Remodel / Renovation / Repair - <input type="checkbox"/> Accessory - <input type="checkbox"/> Other <input type="checkbox"/> Bulkhead - <input type="checkbox"/> Piers/Docks - <input type="checkbox"/> Retaining Wall - <input type="checkbox"/> Beach Access Walkway/Stairs - <input type="checkbox"/> Swimming Pools - <input type="checkbox"/> Workshop - <input type="checkbox"/> Gazebo <input type="checkbox"/> Detached Garage - <input type="checkbox"/> Accessory Storage Building - <input type="checkbox"/> Dune Deck - <input type="checkbox"/> Generator		
OCCUPANCY:	TYPE OF FOUNDATION:	PERMIT TYPE: Residential
HEATED/LIVING AREAS (SqFt): 0.0	HEAT:	RESIDENCE TYPE: Residence
NON-HEATED AREAS (SqFt): 0	A/C:	BUILDING USE: Single Family
NUMBER OF STORIES:	INTERIOR WALLS:	ZONING DISTRICT: R1 - Low Density Residential District
BEDROOMS:	EXTERIOR WALLS:	ZONING PERMIT #:
SEPTIC CAP. # OF PERSONS: 8	FIREPLACE:	DATE APPROVED:
BATHS: ½ BATHS:	ROOF:	PERMITTED/CONDITIONAL USE: Single Family Dwelling
GARAGE - DETACHED: ATTACHED:	INSULATION:	CAMA PERMIT #:
STORAGE ENCLOSURE:	ELEVATOR (SqFt):	DATE ISSUED:
POOL: 1,364 SHED:	DECKS (SqFt):	
FLOOD ZONE: Shaded X	WINDOWS MAKE:	SEPTIC PERMIT #: 30576
BASE FLOOD ELEVATION: LES 8ft	WINDOWS TYPE:	DATE ISSUED: 03/01/2021

TOTAL CONSTRUCTION COST: \$40,340.00	
PERMIT FEES:	Total Cost
Description	125.00
Swimming Pools	TOTAL FEE: 125.00

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D. Murray
 Applicant - Owner/Contractor (Please print and sign name)

03/10/2021
 Date Approved

Kevin Clark
 Building/Code/Zoning Official

3-12-2021
 Date Issued



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**RESIDENTIAL
BUILDING/FLOODPLAIN
DEVELOPMENT PERMIT**

BUILDING PERMIT # DPA21-000052

Parcel:	021868000	Owner:	MURPHREY, W EVERETTE IV
PIN:	986708797252	Address:	301 N MAIN ST SUITE 2452 WINSTON SALEM, NC 27101
Location:	4 BLUEFIN LN	Phone #:	336-816-8045
District:	RS1 - Single Family Residential District		
Subdiv	SO/SH AMENDED PLAT B SEC 3		
Lot-Block-Sect:	LOT: C BLK: 25 SEC: 3		

BUSINESS NAME:	Honey-Do Services	NC G.C. LICENSED CONTRACTOR:	
CONTRACTOR'S NAME:	Mike Gard	NC G.C. LICENSE NUMBER:	
ADDRESS:	107 Fearing Place	LIMITATION:	
CITY, STATE, ZIP:	Manteo, NC 27954	CLASSIFICATION:	
OFFICE#:	(252) 573-9416	QUALIFIER:	
CELL#		LIEN AGENT NAME:	
FAX#:		ENTRY#:	
EMAIL:	gardmichael0@gmail.com	LIEN AGENT ADDRESS:	

DESCRIPTION OF WORK – (Any deviation from the Building Plan or Site Plan requires prior approval): ACCESSORY- BUILD NEW DECK & WALKWAY WITH STAIRS TO THE OCEAN
SPECIAL CONDITIONS - ALL WOOD BELOW RFPE (14) FT. SHALL BE TREATED

TYPE OF CONSTRUCTION: <input type="checkbox"/> New Construction - <input type="checkbox"/> Addition / Expansion - <input type="checkbox"/> Remodel / Renovation / Repair - <input checked="" type="checkbox"/> Accessory - <input type="checkbox"/> Other <input type="checkbox"/> Bulkhead - <input type="checkbox"/> Piers/Docks - <input type="checkbox"/> Retaining Wall - <input checked="" type="checkbox"/> Beach Access Walkway/Stairs - <input type="checkbox"/> Swimming Pools - <input type="checkbox"/> Workshop - <input type="checkbox"/> Gazebo <input type="checkbox"/> Detached Garage - <input type="checkbox"/> Accessory Storage Building - <input checked="" type="checkbox"/> Dune Deck - <input type="checkbox"/> Generator		
OCCUPANCY:	TYPE OF FOUNDATION:	PERMIT TYPE: Residential
HEATED/LIVING AREAS (SqFt): 0.0	HEAT:	RESIDENCE TYPE: 2nd Home
NON-HEATED AREAS (SqFt): 0	A/C:	BUILDING USE: Single Family
NUMBER OF STORIES:	INTERIOR WALLS:	ZONING DISTRICT: RS1 - Single Family Residential District
BEDROOMS:	EXTERIOR WALLS:	ZONING PERMIT #: ZP21-000032
SEPTIC CAP. # OF PERSONS:	FIREPLACE:	DATE APPROVED: 03/15/2021
BATHS: ½ BATHS:	ROOF:	PERMITTED/CONDITIONAL USE: Single Family Dwelling
GARAGE - DETACHED: ATTACHED:	INSULATION:	CAMA PERMIT #: 2021-01
STORAGE ENCLOSURE:	ELEVATOR (SqFt):	DATE ISSUED: 01/15/2021
POOL: SHED:	DECKS (SqFt):	
FLOOD ZONE: VE - 14 ft	WINDOWS MAKE:	SEPTIC PERMIT #:
BASE FLOOD ELEVATION: Plus 3 ft of Freeboard	WINDOWS TYPE:	DATE ISSUED:

TOTAL CONSTRUCTION COST: \$10,000.00	
PERMIT FEES:	Total Cost
Description	100.00
Minimum Permit Fee	TOTAL FEE: 100.00

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<i>Michael Gard</i>	<i>Michael Gard</i>	<i>3-15-21</i>	
Applicant - Owner/Contractor	(Please print and sign name)	03/15/2021	Date Approved
<i>Kevin H. Clark</i>		<i>3-15-21</i>	Date Issued
Building/Code/Zoning Official			

**TOWN OF SOUTHERN SHORES
PLANNING AND CODE ENFORCEMENT**
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Residential Trade Contractor Permit

Date March 10, 2021

**TP21-000043
Mechanical Trade Permit**

Project Address: 15 FIRST AVE
Property Owner: SEUFER, PAUL M

PIN #: 021020000
Mailing Address: 1623 PARKLAND DR
LYNCHBURG, VA 24503

Permit Types:

Plumbing Electrical Mechanical Gas

Contractor:

Company Name: R.A. Hoy Heating & A/C
Phone: (252) 261-2008
N. C. License Number: 13056

Qualifier: Douglas Wakeley
Address: P.O. Box 179
Kitty Hawk, NC 27949

Description of Work: REPLACING UPSTAIRS 16 SEER 2 TON TRANE SYSTEM

Project Cost Estimate: \$6,293.00

Permit Amount: 100.00

Payment:

Date Type Reference Receipt Received From Amount

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

Signature of Licensee or Duly Authorized Representative Date

Signature of Permit Official Date

**TOWN OF SOUTHERN SHORES
 PLANNING AND CODE ENFORCEMENT**
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 (252) 261-2394 - Office (252) 255-0876 - Fax
www.southernshores-nc.gov



Residential Trade Contractor Permit

Date March 11, 2021

**TP21-000045
 Electrical Trade Permit**

Project Address: 2 MOCKINGBIRD LN
Property Owner: TADDEO, PETER M

PIN #: 021638000
Mailing Address: 8 OCEAN VIEW LOOP
 SOUTHERN SHORES, NC 27949

Permit Types:

Plumbing Electrical Mechanical Gas

Contractor:

Company Name: Monte Hooker Electric
Phone:
N. C. License Number: L15910

Qualifier: Monte Hooker
Address: 5121 The Woods Rd.
 Kitty Hawk, NC 27949

Description of Work: Replace rusted disconnects next to meter base.

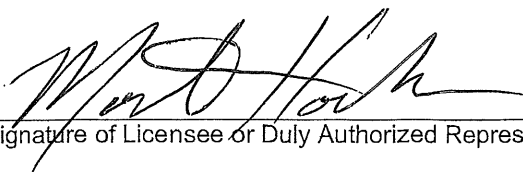
Project Cost Estimate: \$1,500.00

Permit Amount: 100.00

Payment:

Date Type Reference Receipt Received From Amount

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

 3-15-2021
 Signature of Licensee or Duly Authorized Representative Date

 3-16-2021
 Signature of Permit Official Date
 BymB

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



Residential Trade Contractor Permit

Date March 16, 2021

**TP21-000046
Mechanical Trade Permit**

Project Address: 59 GINGUITE TRL
Property Owner: GINGUITE CREEK GETAWAY LLC

PIN #: 027298000
Mailing Address: 59 GINGUITE TRL
SOUTHERN SHORES, NC 27949

Permit Types:

Plumbing Electrical Mechanical Gas

Contractor:

Company Name: R.A. Hoy Heating & A/C
Phone: (252) 261-2008
N. C. License Number: 13056

Qualifier: Douglas Wakeley
Address: P.O. Box 179
Kitty Hawk, NC 27949

Description of Work: REPLACING 18 SEER OUTDOOR AND INDOOR MITSUBISHI MINI SPLIT UNITS FOR GUEST ROOM.

Project Cost Estimate: \$7,978.00

Permit Amount: 100.00

Payment:

Date **Reference Receipt Received** **From** **Amount**

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

JACLYN SLATER

3/16/2021

Signature of Licensee or Duly Authorized Representative

Date

Kevin Clark
Signature of Permit Official

3-16-2021
Date

By NB



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**RESIDENTIAL
BUILDING/FLOODPLAIN
DEVELOPMENT PERMIT**

BUILDING PERMIT # DPA21-000054

Parcel:	021935000	Owner:	FRIEDMAN, MEI
PIN:	986819615020	Address:	406 JOHN CARLYLE ST
Location:	189 OCEAN BLVD		ALEXANDRIA, VA 22314
District:	R1 - Low Density Residential District	Phone #:	202-658-9098
Subdiv	SO/SH AMENDED PLAT B SEC 3		
Lot-Block-Sect:	LOT: 19R BLK: 31 SEC: 3		

BUSINESS NAME:		NC G.C. LICENSED CONTRACTOR:	
CONTRACTOR'S NAME:	JERE YOUNG	NC G.C. LICENSE NUMBER:	
ADDRESS:	PO BOX 1429	LIMITATION:	
CITY, STATE, ZIP:	KITTY HAWK, NC 27949	CLASSIFICATION:	
OFFICE#:		QUALIFIER:	
CELL#:	(434) 363-1973	LIEN AGENT NAME:	
FAX#:		ENTRY#:	
EMAIL:	JEREYOUNG6@GMAIL.COM	LIEN AGENT ADDRESS:	

DESCRIPTION OF WORK – (Any deviation from the Building Plan or Site Plan requires prior approval): ADDITION- ENCLOSE GROUND LEVEL AREA AS A LIVING SPACE, BUT NOT ANY BEDROOMS. STAYING INSIDE THE EXISTING STRUCTURE AND WILL NOT INCREASE THE EXISTING FOOTPRINT
SPECIAL CONDITIONS - ALL WOOD BELOW RFPE (8) FT.

TYPE OF CONSTRUCTION: <input type="checkbox"/> New Construction - <input checked="" type="checkbox"/> Addition / Expansion - <input type="checkbox"/> Remodel / Renovation / Repair - <input type="checkbox"/> Accessory - <input type="checkbox"/> Other <input type="checkbox"/> Bulkhead - <input type="checkbox"/> Piers/Docks - <input type="checkbox"/> Retaining Wall - <input type="checkbox"/> Beach Access Walkway/Stairs - <input type="checkbox"/> Swimming Pools - <input type="checkbox"/> Workshop - <input type="checkbox"/> Gazebo <input type="checkbox"/> Detached Garage - <input type="checkbox"/> Accessory Storage Building - <input type="checkbox"/> Dune Deck - <input type="checkbox"/> Generator		
OCCUPANCY:	TYPE OF FOUNDATION:	PERMIT TYPE: Residential
HEATED/LIVING AREAS (SqFt): 800.0	HEAT: Heat Pump	RESIDENCE TYPE: 2nd Home
NON-HEATED AREAS (SqFt): 0	A/C: Heat Pump	BUILDING USE: Single Family
NUMBER OF STORIES:	INTERIOR WALLS: Drywall	ZONING DISTRICT: R1 - Low Density Residential District
BEDROOMS:	EXTERIOR WALLS: HARDI PLANK	ZONING PERMIT #:
SEPTIC CAP. # OF PERSONS:	FIREPLACE:	DATE APPROVED:
BATHS: ½ BATHS:	ROOF:	PERMITTED/CONDITIONAL USE: Single Family Dwelling
GARAGE - DETACHED: ATTACHED:	INSULATION:	CAMA PERMIT #:
STORAGE ENCLOSURE:	ELEVATOR (SqFt):	DATE ISSUED:
POOL: SHED:	DECKS (SqFt):	
FLOOD ZONE: Unshaded X	WINDOWS MAKE:	SEPTIC PERMIT #:
BASE FLOOD ELEVATION: LES 8ft	WINDOWS TYPE:	DATE ISSUED:

TOTAL CONSTRUCTION COST: \$15,000.00	
PERMIT FEES:	Total Cost
Description	480.00
Heated/Living Area Fee (Single Family)	TOTAL FEE: 480.00

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

Applicant - Owner/Contractor	(Please print and sign name)	03/16/2021 Date Approved
		3-17-2021 Date Issued
Building/Code/Zoning Official		



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**RESIDENTIAL
BUILDING/FLOODPLAIN
DEVELOPMENT PERMIT**

BUILDING PERMIT # DPA21-000056

Parcel:	020917000	Owner:	STOREY, THOMAS C STOREY, CAROL J
PIN:	986805181609	Address:	15 FOX RUN
Location:	362 SEA OATS TRL		WAPPINGERS FALLS, NY 12590
District:	RS1 - Single Family Residential District	Phone #:	845-453-6316
Subdiv	SO/SH BLK 60		
Lot-Block-Sect:	LOT: 73 BLK: 60 SEC:		

BUSINESS NAME:	COLONY REALTY CORP	NC G.C. LICENSED CONTRACTOR:
CONTRACTOR'S NAME:	DALE SMITH	NC G.C. LICENSE NUMBER:
ADDRESS:	3118 N CROATAN HWY	LIMITATION:
CITY, STATE, ZIP:	KILL DEVIL HILLS, NC 27948	CLASSIFICATION:
OFFICE#:	(252) 441-3051	QUALIFIER:
CELL#:		LIEN AGENT NAME:
FAX#:		ENTRY#:
EMAIL:	DALE@COLONYREALTYCORP.COM	LIEN AGENT ADDRESS:

DESCRIPTION OF WORK - (Any deviation from the Building Plan or Site Plan requires prior approval): REPAIR- REBUILD EXISTING STEPS TO FRONT OF HOUSE & SECURE HANDRAILS ON FRONT DECK
SPECIAL CONDITIONS - ALL WOOD BELOW RFPE (8) FT. SHALL BE TREATED

TYPE OF CONSTRUCTION: <input type="checkbox"/> New Construction - <input type="checkbox"/> Addition / Expansion - <input checked="" type="checkbox"/> Remodel / Renovation / Repair - <input type="checkbox"/> Accessory - <input type="checkbox"/> Other <input type="checkbox"/> Bulkhead - <input type="checkbox"/> Piers/Docks - <input type="checkbox"/> Retaining Wall - <input type="checkbox"/> Beach Access Walkway/Stairs - <input type="checkbox"/> Swimming Pools - <input type="checkbox"/> Workshop - <input type="checkbox"/> Gazebo <input type="checkbox"/> Detached Garage - <input type="checkbox"/> Accessory Storage Building - <input type="checkbox"/> Dune Deck - <input type="checkbox"/> Generator		
OCCUPANCY:	TYPE OF FOUNDATION:	PERMIT TYPE: Residential
HEATED/LIVING AREAS (SqFt): 0.0	HEAT:	RESIDENCE TYPE: 2nd Home
NON-HEATED AREAS (SqFt): 0	A/C:	BUILDING USE: Single Family
NUMBER OF STORIES:	INTERIOR WALLS:	ZONING DISTRICT: RS1 - Single Family Residential District
BEDROOMS:	EXTERIOR WALLS:	ZONING PERMIT #:
SEPTIC CAP. # OF PERSONS:	FIREPLACE:	DATE APPROVED:
BATHS: 1/2 BATHS:	ROOF:	PERMITTED/CONDITIONAL USE: Single Family Dwelling
GARAGE - DETACHED: ATTACHED:	INSULATION:	CAMA PERMIT #:
STORAGE ENCLOSURE:	ELEVATOR (SqFt):	DATE ISSUED:
POOL: SHED:	DECKS (SqFt):	
FLOOD ZONE: Unshaded X	WINDOWS MAKE:	SEPTIC PERMIT #:
BASE FLOOD ELEVATION: LES 8ft	WINDOWS TYPE:	DATE ISSUED:

PERMIT FEES:		TOTAL CONSTRUCTION COST: \$5,000.00
Description		Total Cost
Remodel / Renovation / Repair Fee		50.00
Minimum Permit Fee		50.00
TOTAL FEE:		100.00

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Dale A Smith (Please print and sign name)

03/16/2021

Date Approved

Kevin Clark
Building/Code/Zoning Official

3-17-2021
Date Issued



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**RESIDENTIAL
BUILDING/FLOODPLAIN
DEVELOPMENT PERMIT**

BUILDING PERMIT # DPA21-000034

Parcel: 022736000
PIN: 986719722367
Location: 1 YUCCA LN
District: RS1 - Single Family Residential District
Subdiv: SO/SH SOUNDSSIDE BLKS 170-175
Lot-Block-Sect: LOT: 4 BLK: 174 SEC:

Owner: KALLIO, WILLIAM C
Address: 3409 STRATFORD RD
RICHMOND, VA 23225
Phone #: 804-323-3012

BUSINESS NAME: Two Guys Services
CONTRACTOR'S NAME: Eric Maurer
ADDRESS: 605 W. Archdale Street
CITY, STATE, ZIP: Kill Devil Hills, NC 27948
OFFICE#: (252) 489-8753
CELL#:
FAX#:
EMAIL: 2GUYSSERVICES@CHARTER.NET

NC G.C. LICENSED CONTRACTOR:
NC G.C. LICENSE NUMBER: 75144
LIMITATION:
CLASSIFICATION:
QUALIFIER:
LIEN AGENT NAME: Fidelity National Title company
ENTRY#: 1405268
LIEN AGENT ADDRESS: 223 S West St. suite 900 Raleigh
NC 27603

DESCRIPTION OF WORK - (Any deviation from the Building Plan or Site Plan requires prior approval): ADDITION- garage creating 2 bedrooms and 1.5 bathrooms and 12x12 utility room, add 5'x24' shed to front of existing garage, install new 4 bedroom septic system removing old septic system
SPECIAL CONDITIONS - ALL WOOD BELOW RFPE (8) FT. SHALL BE TREATED

TYPE OF CONSTRUCTION: <input type="checkbox"/> New Construction - <input checked="" type="checkbox"/> Addition / Expansion - <input type="checkbox"/> Remodel / Renovation / Répair - <input type="checkbox"/> Accessory - <input type="checkbox"/> Other <input type="checkbox"/> Bulkhead - <input type="checkbox"/> Piers/Docks - <input type="checkbox"/> Retaining Wall - <input type="checkbox"/> Beach Access Walkway/Stairs - <input type="checkbox"/> Swimming Pools - <input type="checkbox"/> Workshop - <input type="checkbox"/> Gazebo <input type="checkbox"/> Detached Garage - <input type="checkbox"/> Accessory Storage Building - <input type="checkbox"/> Dune Deck - <input type="checkbox"/> Generator		
OCCUPANCY: 8	TYPE OF FOUNDATION:	PERMIT TYPE: Residential
HEATED/LIVING AREAS (SqFt): 1932.0	HEAT: Heat Pump	RESIDENCE TYPE: 2nd Home
NON-HEATED AREAS (SqFt): 576	A/C: Heat Pump	BUILDING USE: Single Family
NUMBER OF STORIES:	INTERIOR WALLS: Sheetrock	ZONING DISTRICT: RS1 - Single Family Residential District
BEDROOMS: 2	EXTERIOR WALLS:	ZONING PERMIT #: ZP21-000033
SEPTIC CAP. # OF PERSONS: 8	FIREPLACE:	DATE APPROVED: 03/15/2021
BATHS: 1 1/2 BATHS: 1	ROOF:	PERMITTED/CONDITIONAL USE: Single Family Dwelling
GARAGE - DETACHED: ATTACHED: 576	INSULATION: Batt	CAMA PERMIT #:
STORAGE ENCLOSURE:	ELEVATOR (SqFt):	DATE ISSUED:
POOL: SHED:	DECKS (SqFt):	
FLOOD ZONE: Unshaded X	WINDOWS MAKE: Pella	SEPTIC PERMIT #: 30535
BASE FLOOD ELEVATION: LES 8ft	WINDOWS TYPE: Double Hungs	DATE ISSUED: 02/17/2021

TOTAL CONSTRUCTION COST: \$52,000.00	
PERMIT FEES:	
Description	Total Cost
Heated/Living Area Fee (Single Family)	1,159.20
Non-Heated Areas Fee (Single Family)	172.80
Homeowners Recovery Fund	10.00
	TOTAL FEE: 1,342.00

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[Signature] *[Signature]* ERIC MAURER 3/17/21

Applicant - Owner/Contractor (Please print and sign name)

03/15/2021

Date Approved

Kevin Clark
Building/Code/Zoning Official *[Signature]*

3-17-2021
Date Issued



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**RESIDENTIAL
BUILDING/FLOODPLAIN
DEVELOPMENT PERMIT**

BUILDING PERMIT # DPA21-000051

Parcel:	029113000	Owner:	SWICK, DEBORAH SUE
PIN:	986715631434	Address:	2104 DOGWOOD ST EAST STROUDSBURG, PA 18301
Location:	59 DEER PATH LN	Phone #:	570-269-5636
District:	RS1 - Single Family Residential District		
Subdiv	CHICHAUK		
Lot-Block-Sect:	LOT: 422 BLK: SEC:		

BUSINESS NAME:	Affordable Bill's House Maintenance	NC G.C. LICENSED CONTRACTOR:	
CONTRACTOR'S NAME:	Bill Eger	NC G.C. LICENSE NUMBER:	
ADDRESS:	300 Albemarle Drive	LIMITATION:	
CITY, STATE, ZIP:	Nags Head, NC 27959	CLASSIFICATION:	
OFFICE#:	252-489-9555	QUALIFIER:	
CELL#:		LIEN AGENT NAME:	n/a
FAX#:		ENTRY#:	n/a
EMAIL:	affordablebills@gmail.com	LIEN AGENT ADDRESS:	n/a

DESCRIPTION OF WORK – (Any deviation from the Building Plan or Site Plan requires prior approval): We will be installing one boat lift and 2 pilings. No electric connection included.
SPECIAL CONDITIONS - ALL WOOD BELOW RFPE (8) FT. SHALL BE TREATED

TYPE OF CONSTRUCTION: <input type="checkbox"/> New Construction - <input type="checkbox"/> Addition / Expansion - <input type="checkbox"/> Remodel / Renovation / Repair - <input type="checkbox"/> Accessory - <input checked="" type="checkbox"/> Other <input type="checkbox"/> Bulkhead - <input type="checkbox"/> Piers/Docks - <input type="checkbox"/> Retaining Wall - <input type="checkbox"/> Beach Access Walkway/Stairs - <input type="checkbox"/> Swimming Pools - <input type="checkbox"/> Workshop - <input type="checkbox"/> Gazebo <input type="checkbox"/> Detached Garage - <input type="checkbox"/> Accessory Storage Building - <input type="checkbox"/> Dune Deck - <input type="checkbox"/> Generator		
OCCUPANCY:	TYPE OF FOUNDATION:	PERMIT TYPE: Residential
HEATED/LIVING AREAS (SqFt): 0.0	HEAT:	RESIDENCE TYPE: Rental > 30 days
NON-HEATED AREAS (SqFt): 0	A/C:	BUILDING USE: Single Family
NUMBER OF STORIES:	INTERIOR WALLS:	ZONING DISTRICT: RS1 - Single Family Residential District
BEDROOMS:	EXTERIOR WALLS:	ZONING PERMIT #: ZP21-000030
SEPTIC CAP. # OF PERSONS:	FIREPLACE:	DATE APPROVED: 03/10/2021
BATHS: ½ BATHS:	ROOF:	PERMITTED/CONDITIONAL USE: Single Family Dwelling
GARAGE - DETACHED: ATTACHED:	INSULATION:	CAMA PERMIT #: 78002
STORAGE ENCLOSURE:	ELEVATOR (SqFt):	DATE ISSUED: 02/22/2021
POOL: SHED:	DECKS (SqFt):	
FLOOD ZONE: AE - 4 ft	WINDOWS MAKE:	SEPTIC PERMIT #:
BASE FLOOD ELEVATION: LES 8ft	WINDOWS TYPE:	DATE ISSUED:

TOTAL CONSTRUCTION COST: \$5,000.00	
PERMIT FEES:	Total Cost
Description	100.00
Minimum Permit Fee	TOTAL FEE: 100.00

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

William Eger _____ **William Eger**
Applicant - Owner/Contractor (Please print and sign name)

Kevin Clark _____
Building/Code/Zoning Official *Bymb*

03/10/2021
Date Approved
3-16-2021
Date Issued



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**RESIDENTIAL
BUILDING/FLOODPLAIN
DEVELOPMENT PERMIT**

BUILDING PERMIT # DPA21-000038

Parcel:	029702911	Owner:	SOUTHERN SHORES CIVIC ASSOC INC
PIN:	986810466137	Address:	5377 VIRGINIA DARE TRL N
Location:	0 FIFTH AVE		KITTY HAWK, NC 27949
District:	C - General Commercial District	Phone #:	252-261-8617
Subdiv	SEA CREST VILLAGE		
Lot-Block-Sect:	LOT: COMMON AREA BLK: SEC:		

BUSINESS NAME:	RKM PROPERTY MAINTENANCE	NC G.C. LICENSED CONTRACTOR:
CONTRACTOR'S NAME:	KEN FREDERICK	NC G.C. LICENSE NUMBER:
ADDRESS:		LIMITATION:
CITY, STATE, ZIP:	Southern Shores, NC	CLASSIFICATION:
OFFICE#:		QUALIFIER:
CELL#:		LIEN AGENT NAME:
FAX#:		ENTRY#:
EMAIL:	CPTKOLAR@GMAIL.COM	LIEN AGENT ADDRESS:

**DESCRIPTION OF WORK – (Any deviation from the Building Plan or Site Plan requires prior approval): REPLACE BEACH CROSSOVER
SPECIAL CONDITIONS - ALL WOOD BELOW RFPE () FT. SHALL BE TREATED**

TYPE OF CONSTRUCTION: <input type="checkbox"/> New Construction - <input type="checkbox"/> Addition / Expansion - <input type="checkbox"/> Remodel / Renovation / Repair - <input type="checkbox"/> Accessory - <input type="checkbox"/> Other <input type="checkbox"/> Bulkhead - <input type="checkbox"/> Piers/Docks - <input type="checkbox"/> Retaining Wall - <input type="checkbox"/> Beach Access Walkway/Stairs - <input type="checkbox"/> Swimming Pools - <input type="checkbox"/> Workshop - <input type="checkbox"/> Gazebo <input type="checkbox"/> Detached Garage - <input type="checkbox"/> Accessory Storage Building - <input type="checkbox"/> Dune Deck - <input type="checkbox"/> Generator		
OCCUPANCY:	TYPE OF FOUNDATION:	PERMIT TYPE: Commercial
HEATED/LIVING AREAS (SqFt): 0.0	HEAT:	RESIDENCE TYPE:
NON-HEATED AREAS (SqFt): 0	A/C:	BUILDING USE: Commercial
NUMBER OF STORIES:	INTERIOR WALLS:	ZONING DISTRICT: C - General Commercial District
BEDROOMS:	EXTERIOR WALLS:	ZONING PERMIT #:
SEPTIC CAP. # OF PERSONS:	FIREPLACE:	DATE APPROVED:
BATHS: ½ BATHS:	ROOF:	PERMITTED/CONDITIONAL USE: Other
GARAGE - DETACHED: ATTACHED:	INSULATION:	CAMA PERMIT #:
STORAGE ENCLOSURE:	ELEVATOR (SqFt):	DATE ISSUED:
POOL: SHED:	DECKS (SqFt):	
FLOOD ZONE: VE - 11 ft	WINDOWS MAKE:	SEPTIC PERMIT #:
BASE FLOOD ELEVATION: Plus 3 ft of Freeboard	WINDOWS TYPE:	DATE ISSUED:

PERMIT FEES:		TOTAL CONSTRUCTION COST: \$6,500.00
Description		Total Cost
Remodel / Renovation / Repair Fee		70.00
Minimum Permit Fee		30.00
		TOTAL FEE: 100.00

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Kevin Clark *Kenneth M. Fowler*
 Applicant - Owner/Contractor (Please print and sign name)

02/24/2021

Date Approved

Kevin Clark
 Building/Code/Zoning Official *By mcb*

3-18-2021
 Date Issued



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**RESIDENTIAL
BUILDING/FLOODPLAIN
DEVELOPMENT PERMIT**

BUILDING PERMIT # DPA21-000039

Parcel: 029702942
PIN: 986708872888
Location: 120A OCEAN BLVD
District: C - General Commercial District
Subdiv
Lot-Block-Sect:

Owner: SOUTHERN SHORES CIVIC ASSOC.
Address: 5377 NORTH VIRGINIA DARE TRAIL
SOUTHERN SHORES, NC 27949
Phone #: 252-261-8617

BUSINESS NAME: RKM Property Maintenance
CONTRACTOR'S NAME: Ken Frederick
ADDRESS: 180 Charleston Drive
CITY, STATE, ZIP: Grandy, NC 27939
OFFICE#:
CELL#
FAX#:
EMAIL: cptrolar@gmail.com

NC G.C. LICENSED CONTRACTOR:
NC G.C. LICENSE NUMBER:
LIMITATION:
CLASSIFICATION:
QUALIFIER:
LIEN AGENT NAME:
ENTRY#:
LIEN AGENT ADDRESS:

DESCRIPTION OF WORK - (Any deviation from the Building Plan or Site Plan requires prior approval): REPLACE BEACH CROSSOVER
SPECIAL CONDITIONS - ALL WOOD BELOW RFPE () FT. SHALL BE TREATED

TYPE OF CONSTRUCTION: <input type="checkbox"/> New Construction - <input type="checkbox"/> Addition / Expansion - <input type="checkbox"/> Remodel / Renovation / Repair - <input type="checkbox"/> Accessory - <input type="checkbox"/> Other <input type="checkbox"/> Bulkhead - <input type="checkbox"/> Piers/Docks - <input type="checkbox"/> Retaining Wall - <input type="checkbox"/> Beach Access Walkway/Stairs - <input type="checkbox"/> Swimming Pools - <input type="checkbox"/> Workshop - <input type="checkbox"/> Gazebo <input type="checkbox"/> Detached Garage - <input type="checkbox"/> Accessory Storage Building - <input type="checkbox"/> Dune Deck - <input type="checkbox"/> Generator		
OCCUPANCY:	TYPE OF FOUNDATION:	PERMIT TYPE: Commercial
HEATED/LIVING AREAS (SqFt): 0.0	HEAT:	RESIDENCE TYPE:
NON-HEATED AREAS (SqFt): 0	A/C:	BUILDING USE: Commercial
NUMBER OF STORIES:	INTERIOR WALLS:	ZONING DISTRICT: C - General Commercial District
BEDROOMS:	EXTERIOR WALLS:	ZONING PERMIT #:
SEPTIC CAP. # OF PERSONS:	FIREPLACE:	DATE APPROVED:
BATHS: 1/2 BATHS:	ROOF:	PERMITTED/CONDITIONAL USE: Other
GARAGE - DETACHED: ATTACHED:	INSULATION:	CAMA PERMIT #:
STORAGE ENCLOSURE:	ELEVATOR (SqFt):	DATE ISSUED:
POOL: SHED:	DECKS (SqFt):	
FLOOD ZONE: VE - 11 ft	WINDOWS MAKE:	SEPTIC PERMIT #:
BASE FLOOD ELEVATION: Plus 3 ft of Freeboard	WINDOWS TYPE:	DATE ISSUED:

PERMIT FEES:		TOTAL CONSTRUCTION COST: \$8,500.00
Description		Total Cost
Remodel / Renovation / Repair Fee		90.00
Minimum Permit Fee		10.00
		TOTAL FEE: 100.00

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

Ken Frederick *Ken Frederick*
Applicant - Owner/Contractor (Please print and sign name)

02/24/2021
Date Approved

Kevin Clark
Building/Code/Zoning Official *KMB*

3-18-2021
Date Issued

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Residential Trade Contractor Permit

Date March 18, 2021

**TP21-000047
Mechanical Trade Permit**

Project Address: 83 GRAVEY POND LN
Property Owner: NGEONJUKLIN, SCOTT N NGEONJUKLIN,
LAKKANA

PIN #: 022518000
Mailing Address: 4501 BEACHAM LN
KITTY HAWK, NC 27949

Permit Types:

Plumbing Electrical Mechanical Gas

Contractor:

Company Name: R.A. Hoy Heating & A/C
Phone: (252) 261-2008
N. C. License Number: 13056

Qualifier: Douglas Wakeley
Address: P.O. Box 179
Kitty Hawk, NC 27949

Description of Work: REPLACING UPSTAIRS 16 SEER 2.5 TON TRANE SYSTEM AND GROUND FLOOR 16 SEER 3 TON TRANE SYSTEM

Project Cost Estimate: \$15,650.00

Permit Amount: 100.00

Payment:

Date Type Reference Receipt Received From Amount

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

JACLYN SLATER

03/18/2021

Signature of Licensee or Duly Authorized Representative

Date

Kevin Clark

3-18-2021

Signature of Permit Official

Date

By MB



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

**RESIDENTIAL
BUILDING/FLOODPLAIN
DEVELOPMENT PERMIT**

BUILDING PERMIT # DPA21-000057

Parcel:	021560000	Owner:	RITTER, EDWARD G RITTER, KAREN M
PIN:	986814434972	Address:	18807 PARK GROVE LN
Location:	41 CIRCLE DR		DALLAS, TX 75287
District:	RS1 - Single Family Residential District	Phone #:	405-850-0226
Subdiv	SO/SH BEACH BLK 38 AMENDED		
Lot-Block-Sect:	LOT: 47 BLK: 38 SEC:		

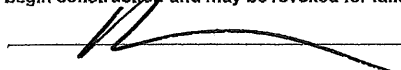
BUSINESS NAME:	Richard Scott Noble	NC G.C. LICENSED CONTRACTOR:	Licensed General Contractor
CONTRACTOR'S NAME:	Richard S Noble	NC G.C. LICENSE NUMBER:	
ADDRESS:	3121 Maryhill Court	LIMITATION:	limited
CITY, STATE, ZIP:	Kill Devil Hills, NC 27948	CLASSIFICATION:	Residential
OFFICE#:	(252) 202-2453	QUALIFIER:	Richard Scott Noble
CELL#:	(252) 202-2453	LIEN AGENT NAME:	
FAX#:		ENTRY#:	
EMAIL:	nobilo777@msn.com	LIEN AGENT ADDRESS:	

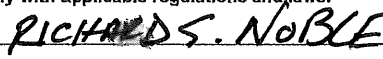
DESCRIPTION OF WORK – (Any deviation from the Building Plan or Site Plan requires prior approval): REMODEL/REPAIR - New deck boards on top deck and handrails on entire house, build new steps from second floor porch down to Pool w/ gate at the pool fence
SPECIAL CONDITIONS - ALL WOOD BELOW RFPE (8) FT. SHALL BE TREATED

TYPE OF CONSTRUCTION: <input type="checkbox"/> New Construction - <input type="checkbox"/> Addition / Expansion - <input checked="" type="checkbox"/> Remodel / Renovation / Repair - <input type="checkbox"/> Accessory - <input type="checkbox"/> Other <input type="checkbox"/> Bulkhead - <input type="checkbox"/> Piers/Docks - <input type="checkbox"/> Retaining Wall - <input type="checkbox"/> Beach Access Walkway/Stairs - <input type="checkbox"/> Swimming Pools - <input type="checkbox"/> Workshop - <input type="checkbox"/> Gazebo <input type="checkbox"/> Detached Garage - <input type="checkbox"/> Accessory Storage Building - <input type="checkbox"/> Dune Deck - <input type="checkbox"/> Generator		
OCCUPANCY:	TYPE OF FOUNDATION:	PERMIT TYPE: Residential
HEATED/LIVING AREAS (SqFt): 0.0	HEAT:	RESIDENCE TYPE: Vacation Cottage < 30 days
NON-HEATED AREAS (SqFt): 0	A/C:	BUILDING USE: Single Family
NUMBER OF STORIES:	INTERIOR WALLS:	ZONING DISTRICT: RS1 - Single Family Residential District
BEDROOMS:	EXTERIOR WALLS:	ZONING PERMIT #: ZP21-000034
SEPTIC CAP. # OF PERSONS:	FIREPLACE:	DATE APPROVED: 03/18/2021
BATHS: ½ BATHS:	ROOF:	PERMITTED/CONDITIONAL USE: Single Family Dwelling
GARAGE - DETACHED: ATTACHED:	INSULATION:	CAMA PERMIT #:
STORAGE ENCLOSURE:	ELEVATOR (SqFt):	DATE ISSUED:
POOL: SHED:	DECKS (SqFt):	
FLOOD ZONE: Unshaded X	WINDOWS MAKE:	SEPTIC PERMIT #:
BASE FLOOD ELEVATION: LES 8ft	WINDOWS TYPE:	DATE ISSUED:

TOTAL CONSTRUCTION COST: \$25,000.00	
PERMIT FEES:	Total Cost
Description	250.00
Remodel / Renovation / Repair Fee	TOTAL FEE: 250.00

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 Applicant - Owner/Contractor
 Kevin Clark
 Building/Code/Zoning Official *By MB*


 RICHARD S. NOBLE
 (Please print and sign name)

03/18/2021
 Date Approved
 3-19-2021
 Date Issued



**TOWN OF SOUTHERN SHORES
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**RESIDENTIAL
BUILDING/FLOODPLAIN
DEVELOPMENT PERMIT**

BUILDING PERMIT # DPA21-000059

Parcel: 021925023 Owner: T & B Homes Inc.
PIN: 986707698540 Address: 1706 Virginia Ave., Kill Devil Hills, NC C 27948
Location: 26 PORPOISE RUN Phone #: 252-207-9837
District: RS1 - Single Family Residential District
Subdiv
Lot-Block-Sect: Lot 23R, Block 30, Section 3


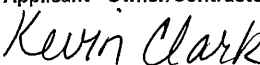
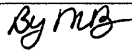
BUSINESS NAME: T & B Homes, Inc. **NC G.C. LICENSED CONTRACTOR:** Licensed General Contractor
CONTRACTOR'S NAME: Ben Nelson **NC G.C. LICENSE NUMBER:** 80069
ADDRESS: 425 Burns Dr **LIMITATION:** Limited
CITY, STATE, ZIP: Kill Devil Hills, NC 27948 **CLASSIFICATION:** Building
OFFICE#: (252) 207-9837 **QUALIFIER:** Terry Gene Robins
CELL#: (252) 207-9837 **LIEN AGENT NAME:** Investors Title Insurance Co
FAX#: **ENTRY#:** 1422844
EMAIL: bnelson304@gmail.com **LIEN AGENT ADDRESS:** 223 S. WEST ST SUITE 900
RALEIGH N.C 27603

DESCRIPTION OF WORK – (Any deviation from the Building Plan or Site Plan requires prior approval): NEW CONSTRUCTION- NEW SINGLE FAMILY 5 BEDROOM HOME WITH 4 FULL & 2 1/2 BATHS WITH POOL
SPECIAL CONDITIONS - ALL WOOD BELOW RFPE (8) FT. SHALL BE TREATED

TYPE OF CONSTRUCTION: <input checked="" type="checkbox"/> New Construction - <input type="checkbox"/> Addition / Expansion - <input type="checkbox"/> Remodel / Renovation / Repair - <input type="checkbox"/> Accessory - <input type="checkbox"/> Other <input type="checkbox"/> Bulkhead - <input type="checkbox"/> Piers/Docks - <input type="checkbox"/> Retaining Wall - <input type="checkbox"/> Beach Access Walkway/Stairs - <input type="checkbox"/> Swimming Pools - <input type="checkbox"/> Workshop - <input type="checkbox"/> Gazebo <input type="checkbox"/> Detached Garage - <input type="checkbox"/> Accessory Storage Building - <input type="checkbox"/> Dune Deck - <input type="checkbox"/> Generator		
OCCUPANCY: 10	TYPE OF FOUNDATION:	PERMIT TYPE: Residential
HEATED/LIVING AREAS (SqFt): 3361.0	HEAT: Heat Pump	RESIDENCE TYPE: Residence
NON-HEATED AREAS (SqFt): 1,093	A/C: Heat Pump	BUILDING USE: Single Family
NUMBER OF STORIES: 2	INTERIOR WALLS: Drywall	ZONING DISTRICT: RS1 - Single Family Residential District
BEDROOMS: 5	EXTERIOR WALLS: Cedar Shakes	ZONING PERMIT #: ZP21-000035
SEPTIC CAP. # OF PERSONS: 10	FIREPLACE:	DATE APPROVED: 03/19/2021
BATHS: 4 1/2 BATHS: 2	ROOF: Asphalt	PERMITTED/CONDITIONAL USE: Single Family Dwelling
GARAGE - DETACHED: ATTACHED: 263	INSULATION: Batt	CAMA PERMIT #:
STORAGE ENCLOSURE:	ELEVATOR (SqFt):	DATE ISSUED:
POOL: 1,080 SHED:	DECKS (SqFt): 114	
FLOOD ZONE: Shaded X	WINDOWS MAKE: Viwinco or Simonton	SEPTIC PERMIT #: 30620
BASE FLOOD ELEVATION: LES 8ft	WINDOWS TYPE: Double Hungs	DATE ISSUED: 03/01/2021

TOTAL CONSTRUCTION COST: \$450,000.00	
PERMIT FEES:	Total Cost
Description	
Heated/Living Area Fee (Single Family)	2,016.60
Non-Heated Areas Fee (Single Family)	327.90
Homeowners Recovery Fund	10.00
	TOTAL FEE: 2,354.50

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 T & B Homes, Inc. - Ben Nelson
Applicant - Owner/Contractor (Please print and sign name)

Building/Code/Zoning Official 

03/19/2021
Date Approved
3-22-2021
Date Issued

TOWN OF SOUTHERN SHORES
PLANNING AND CODE ENFORCEMENT
 5375 N Virginia Dare Trail, Southern Shores, NC 27949
 (252) 261-2394 - Office (252) 255-0876 - Fax
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Trade Contractor Permit

Date March 22, 2021

TP21-000050
Mechanical Trade Permit

Project Address: 10 FIRST AVE
Property Owner: MSMCP OBX LLC

PIN #: 021055000
Mailing Address: 1623 PARKLAND DR
LYNCHBURG, VA 24503

Permit Types:

Plumbing Electrical Mechanical Gas

Contractor:

Company Name: R.A. Hoy Heating & A/C
Phone: (252) 261-2008
N. C. License Number: 13056

Qualifier: Douglas Wakeley
Address: P.O. Box 179
Kitty Hawk, NC 27949

Description of Work: REPLACING 18 SEER MINI SPLIT SYSTEM MITSUBISHI

Project Cost Estimate: \$5,201.00

Permit Amount: 100.00

Payment:

Date Type Reference Receipt Received From Amount

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

JACLYN SLATER 03/22/2021
Signature of Licensee or Duly Authorized Representative Date

Kevin Clark 3-23-2021
Signature of Permit Official Date
BymB

3/23/2021

Permit Detail

**TOWN OF SOUTHERN SHORES
PLANNING AND CODE ENFORCEMENT**
5375 N Virginia Dare Trall, Southern Shores, NC 27949
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Residential Trade Contractor Permit

Date March 23, 2021

**TP21-00051
Electrical Trade Permit**

Project Address: 8 OCEAN BLVD

PIN #: 022819009

**Property Owner: MESHANSKI, JOSEPH A MESHANSKI, DEBRA S Mailing Address: 335 WASHINGTON ST
MOUNT PLEASANT, PA 15666**

Permit Types:

Plumbing Electrical Mechanical Gas

Contractor:

**Company Name: Davco Electric Inc.
Phone: (252) 441-4106
N. C. License Number: U.04354**

**Qualifier: Grant Davenport
Address: 406 W. Lake Drive
Kill Devil Hills, NC 27948**

Description of Work: INSTALL OUTLET IN POOL FENCE AREA AND CONNECT POOL FENCE LIGHTS

Project Cost Estimate: \$500.00

Permit Amount: 100.00

Payment:

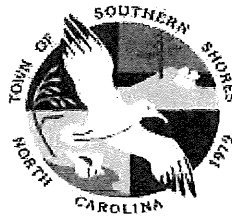
Date Type Reference Receipt Received From Amount

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

Grant Davenport 3-24-2021
Signature of Licensee or Duty Authorized Representative Date

Kevin Clark 3-24-2021
Signature of Permit Official Date
MB

**TOWN OF SOUTHERN SHORES
PLANNING AND CODE ENFORCEMENT**
5375 N Virginia Dare Trail, Southern Shores, NC 27949
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Residential Trade Contractor Permit

Date March 22, 2021

**TP21-000049
Mechanical Trade Permit**

Project Address: 29 FAIRWAY DR

PIN #: 022356007

Property Owner: MCGRAW, MARK X MCGRAW, TAMMY L

Mailing Address: 29 FAIRWAY DR
KITTY HAWK, NC 27949

Permit Types:

Plumbing Electrical Mechanical Gas

Contractor:

Company Name: North Beach Services Heating and Cooling

Qualifier: Jimmy Weaver

Phone: (252) 491-2878

Address: PO Box 181

N. C. License Number: 22053

Kitty Hawk , NC 27949

Description of Work: Replace top level system with Trane 14 Seer, 2 ton heat pump and matching air handler

Project Cost Estimate: \$5,000.00

Permit Amount: 100.00

Payment:

Date Type Reference Receipt Received From Amount

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

Mabby Willes 3/22/21
Signature of Licensee or Duly Authorized Representative Date

Kevin Clark 3-23-2021
Signature of Permit Official Date
By MB



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**RESIDENTIAL
BUILDING/FLOODPLAIN
DEVELOPMENT PERMIT**

BUILDING PERMIT # DPA21-000058

Parcel: 028348000
PIN: 986805181136
Location: 354 SEA OATS TRL
District: RS1 - Single Family Residential District
Subdiv: SO/SH BLK 60
Lot-Block-Sect: LOT: 18 BLK: 60 SEC:

Owner: SMITH, TIMOTHY A SMITH, JENNIFER M
Address: 4150 GARTH RD
CHARLOTTESVILLE, VA 22901
Phone #: 704-709-8061

BUSINESS NAME: Dan Osman
CONTRACTOR'S NAME: Dan Osman
ADDRESS: PO Box 7403
CITY, STATE, ZIP: Kill Devil Hills, NC 27948
OFFICE#: (252) 202-4599
CELL#: (252) 202-4599
FAX#:
EMAIL: osmandanny@gmail.com

NC G.C. LICENSED CONTRACTOR:
NC G.C. LICENSE NUMBER: 76259
LIMITATION:
CLASSIFICATION:
QUALIFIER:
LIEN AGENT NAME: Fidelity National Title Company, LLC
ENTRY#: 1422570
LIEN AGENT ADDRESS: 223 S. WEST ST SUITE 900
RALEIGH N.C 27603

DESCRIPTION OF WORK - (Any deviation from the Building Plan or Site Plan requires prior approval): ADDITION-REMODEL- CONSTRUCT 8 X 16 GOLF CART SHED, MOVE HVAC STANDS 12 FT TO THE SOUTH, CONSTRUCT 170 SQ FT STORAGE SHED UNDER NW FACING DECKS, CONSTRUCT 230 SQ FT FENCE, CONVERT GARAGE INTO HOME OFFICE SPACE, REPLACE WINDOWS & SIDING ON N & NW SIDE OF HOUSE, REPLACE 500 SQ FT DECKING & GUARD RAILS
SPECIAL CONDITIONS - ALL WOOD BELOW RFPE (8) FT. SHALL BE TREATED

TYPE OF CONSTRUCTION: <input type="checkbox"/> New Construction - <input checked="" type="checkbox"/> Addition / Expansion - <input type="checkbox"/> Remodel / Renovation / Repair - <input type="checkbox"/> Accessory - <input type="checkbox"/> Other <input type="checkbox"/> Bulkhead - <input type="checkbox"/> Piers/Docks - <input type="checkbox"/> Retaining Wall - <input type="checkbox"/> Beach Access Walkway/Stairs - <input type="checkbox"/> Swimming Pools - <input type="checkbox"/> Workshop - <input type="checkbox"/> Gazebo <input type="checkbox"/> Detached Garage - <input type="checkbox"/> Accessory Storage Building - <input type="checkbox"/> Dune Deck - <input type="checkbox"/> Generator		
OCCUPANCY:	TYPE OF FOUNDATION: Monolithic slab	PERMIT TYPE: Residential
HEATED/LIVING AREAS (SqFt): 360.0	HEAT:	RESIDENCE TYPE: 2nd Home
NON-HEATED AREAS (SqFt): 658	A/C:	BUILDING USE: Single Family
NUMBER OF STORIES:	INTERIOR WALLS:	ZONING DISTRICT: RS1 - Single Family Residential District
BEDROOMS:	EXTERIOR WALLS:	ZONING PERMIT #: ZP21-000036
SEPTIC CAP. # OF PERSONS:	FIREPLACE:	DATE APPROVED: 03/22/2021
BATHS: 1/2 BATHS:	ROOF: Asphalt	PERMITTED/CONDITIONAL USE: Single Family Dwelling
GARAGE - DETACHED: ATTACHED:	INSULATION:	CAMA PERMIT #:
STORAGE ENCLOSURE: 170	ELEVATOR (SqFt):	DATE ISSUED:
POOL: SHED:	DECKS (SqFt):	
FLOOD ZONE: Unshaded X	WINDOWS MAKE:	SEPTIC PERMIT #:
BASE FLOOD ELEVATION: LES 8ft	WINDOWS TYPE:	DATE ISSUED:

TOTAL CONSTRUCTION COST: \$18,600.00	
PERMIT FEES:	
Description	Total Cost
Heated/Living Area Fee (Single Family)	216.00
Non-Heated Areas Fee (Single Family)	197.40
Homeowners Recovery Fund	10.00
	TOTAL FEE: 423.40

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[Signature]
Applicant - Owner/Contractor

[Signature: Dan Osman]
(Please print and sign name)

03/22/2021

Date Approved

[Signature: Kevin Clark]
Building/Code/Zoning Official *[Signature]*

[Signature]
Date Issued

3/9/2021

Permit Detail



**TOWN OF SOUTHERN SHORES
PLANNING AND CODE ENFORCEMENT**
5375 N Virginia Dare Trail, Southern Shores, NC 27949
(252) 261-2394 Ext 4 - Office (252) 255-0876 - Fax
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**RESIDENTIAL
BUILDING/FLOODPLAIN
DEVELOPMENT PERMIT**

BUILDING PERMIT # DPA21-000048

Parcel:	021791000	Owner:	KEATING, THOMAS L
PIN:	986818416306	Address:	213 SEA OATS TRL SOUTHERN SHORES, NC 27949
Location:	213 SEA OATS	Phone #:	252-455-0245
District:	RS1 - Single Family Residential District		
Subdiv:	SO/SH BEACH BLK 84		
Lot-Block-Sect:	LOT: 20 BLK: 84 SEC:		

BUSINESS NAME:	Caribbean Pool and Spa of the Outer Banks, Inc	NC G.C. LICENSED CONTRACTOR:	
CONTRACTOR'S NAME:	Pete Kelly	NC G.C. LICENSE NUMBER:	73571
ADDRESS:	6024 Currituck Road	LIMITATION:	
CITY, STATE, ZIP:	Kitty Hawk, NC 27949	CLASSIFICATION:	
OFFICE#:	(252) 480-2900	QUALIFIER:	
CELL#:		LIEN AGENT NAME:	
FAX#:		ENTRY#:	
EMAIL:	pete@caribbeanobx.com	LIEN AGENT ADDRESS:	

DESCRIPTION OF WORK – (Any deviation from the Building Plan or Site Plan requires prior approval): ACCESSORY- INSTALL INGROUND POOL - SPECIAL CONDITIONS - ALL WOOD BELOW RFPE () FT. SHALL BE TREATED


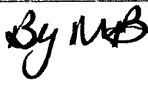
TYPE OF CONSTRUCTION: New Construction - <input type="checkbox"/> Addition / Expansion - <input type="checkbox"/> Remodel / Renovation / Repair - <input type="checkbox"/> Accessory - <input type="checkbox"/> Other		
Bulkhead - <input type="checkbox"/> Piers/Docks - <input type="checkbox"/> Retaining Wall - <input type="checkbox"/> Beach Access Walkway/Stairs - <input type="checkbox"/> Swimming Pools - <input type="checkbox"/> Workshop - <input type="checkbox"/> Gazebo		
Detached Garage - <input type="checkbox"/> Accessory Storage Building - <input type="checkbox"/> Dune Deck - <input type="checkbox"/> Generator		
OCCUPANCY:	TYPE OF FOUNDATION:	PERMIT TYPE: Residential
HEATED/LIVING AREAS (SqFt): 0.0	HEAT:	RESIDENCE TYPE: Residence
NON-HEATED AREAS (SqFt): 0	A/C:	BUILDING USE: Single Family
NUMBER OF STORIES:	INTERIOR WALLS:	ZONING DISTRICT: RS1 - Single Family Residential District
BEDROOMS:	EXTERIOR WALLS:	ZONING PERMIT #: ZP21-000026
SEPTIC CAP. # OF PERSONS:	FIREPLACE:	DATE APPROVED: 03/09/2021
BATHS: 1/2 BATHS:	ROOF:	PERMITTED/CONDITIONAL USE: Single Family Dwelling
GARAGE - DETACHED: ATTACHED:	INSULATION:	CAMA PERMIT #:
STORAGE ENCLOSURE:	ELEVATOR (SqFt):	DATE ISSUED:
POOL: 1,218 SHED:	DECKS (SqFt):	
FLOOD ZONE: Unshaded X	WINDOWS MAKE:	SEPTIC PERMIT #: 30595
BASE FLOOD ELEVATION: LES 8ft	WINDOWS TYPE:	DATE ISSUED: 03/05/2021

PERMIT FEES:		TOTAL CONSTRUCTION COST: \$49,969.00	
Description		Total Cost	
Swimming Pools		125.00	
		TOTAL FEE: 125.00	

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 Applicant - Owner/Contractor (Please print and sign name)

03/09/2021
Date Approved


 Building/Code/Zoning Official 

3-24-2021
Date Issued



**TOWN OF SOUTHERN SHORES
PLANNING AND CODE ENFORCEMENT**
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**RESIDENTIAL
BUILDING/FLOODPLAIN
DEVELOPMENT PERMIT**

BUILDING PERMIT # DPA21-000050

Parcel:	021702000	Owner:	LILIEBERG, CARL J III
PIN:	986705281921	Address:	141 S DOGWOOD TRL
Location:	141 S DOGWOOD TRL		SOUTHERN SHORES, NC 27949
District:	R1 - Low Density Residential District	Phone #:	757-615-6356
Subdiv	SO/SH SOUND BLKS 112 122 123		
Lot-Block-Sect:	LOT: 11 BLK: 123 SEC:		

BUSINESS NAME:	R.M. Saunders, General Contractor, Inc.	NC G.C. LICENSED CONTRACTOR:	
CONTRACTOR'S NAME:	Randy M. Saunders	NC G.C. LICENSE NUMBER:	32380
ADDRESS:	P.O. Box 1922	LIMITATION:	Unlimited
CITY, STATE, ZIP:	Kill Devil Hills, NC 27948	CLASSIFICATION:	
OFFICE#:	(252) 441-2544	QUALIFIER:	Randy Saunders
CELL#:		LIEN AGENT NAME:	
FAX#:		ENTRY#:	
EMAIL:	rmsaunders@beachaccess.com	LIEN AGENT ADDRESS:	

DESCRIPTION OF WORK – (Any deviation from the Building Plan or Site Plan requires prior approval): ACCESSORY - INSTALL NEW INGROUND POOL 14 X 32 WITH WOOD FENCE 42 X 33
SPECIAL CONDITIONS - 1. ALL WOOD BELOW RFPE (8) FT. SHALL BE TREATED 2. POOL EQUIPMENT MUST BE AT OR ABOVE 8 FT. MSL

TYPE OF CONSTRUCTION: <input type="checkbox"/> New Construction - <input type="checkbox"/> Addition / Expansion - <input type="checkbox"/> Remodel / Renovation / Repair - <input checked="" type="checkbox"/> Accessory - <input type="checkbox"/> Other <input type="checkbox"/> Bulkhead - <input type="checkbox"/> Piers/Docks - <input type="checkbox"/> Retaining Wall - <input type="checkbox"/> Beach Access Walkway/Stairs - <input checked="" type="checkbox"/> Swimming Pools - <input type="checkbox"/> Workshop - <input type="checkbox"/> Gazebo <input type="checkbox"/> Detached Garage - <input type="checkbox"/> Accessory Storage Building - <input type="checkbox"/> Dune Deck - <input type="checkbox"/> Generator		
OCCUPANCY:	TYPE OF FOUNDATION:	PERMIT TYPE: Residential
HEATED/LIVING AREAS (SqFt): 0.0	HEAT:	RESIDENCE TYPE: Residence
NON-HEATED AREAS (SqFt): 0	A/C:	BUILDING USE: Single Family
NUMBER OF STORIES:	INTERIOR WALLS:	ZONING DISTRICT: R1 - Low Density Residential District
BEDROOMS:	EXTERIOR WALLS:	ZONING PERMIT #: ZP21-000031
SEPTIC CAP. # OF PERSONS:	FIREPLACE:	DATE APPROVED: 03/12/2021
BATHS: ½ BATHS:	ROOF:	PERMITTED/CONDITIONAL USE: Single Family Dwelling
GARAGE - DETACHED: ATTACHED:	INSULATION:	CAMA PERMIT #:
STORAGE ENCLOSURE:	ELEVATOR (SqFt):	DATE ISSUED:
POOL: 79 SHED:	DECKS (SqFt):	
FLOOD ZONE: AE - 4 ft	WINDOWS MAKE:	SEPTIC PERMIT #: 30578
BASE FLOOD ELEVATION: LES 8 ft	WINDOWS TYPE:	DATE ISSUED: 03/01/2021

TOTAL CONSTRUCTION COST: \$68,967.00	
PERMIT FEES:	Total Cost
Description	125.00
Swimming Pools	TOTAL FEE: 125.00

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

Applicant - Owner/Contractor _____ (Please print and sign name)
Kevin Clark Byrnes
 Building/Code/Zoning Official _____

03/12/2021
 Date Approved
3-24-2021
 Date Issued

2/25/2021

Permit Detail



**TOWN OF SOUTHERN SHORES
PLANNING AND CODE ENFORCEMENT**
5375 N Virginia Dare Trail, Southern Shores, NC 27949
(252) 261-2394 Ext 4 - Office (252) 255-0876 - Fax
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**RESIDENTIAL
BUILDING/FLOODPLAIN
DEVELOPMENT PERMIT**

BUILDING PERMIT # DPA21-000035

Parcel: 022487000
PIN: 986715549362
Location: 69 POTESKEET TRL
District: RS1 - Single Family Residential District
Subdiv: CHICHAUK
Lot-Block-Sect: LOT: 401 BLK: SEC:

Owner: EVANS, CASHAR W JR
Address: 69 POTESKEET TRL
KITTY HAWK, NC 27949
Phone #: 252-202-2200

BUSINESS NAME: JES Construction, LLC
CONTRACTOR'S NAME: William Davis
ADDRESS: 1741 Corporate Landing Pkwy Ste 101
CITY, STATE, ZIP: Virginia Beach, VA 23454
OFFICE#: (757) 337-4221
CELL#
FAX#:
EMAIL: jesvbpermitting@jeswork.com

NC G.C. LICENSED CONTRACTOR: Licensed General Contractor
NC G.C. LICENSE NUMBER: 69678
LIMITATION: Limited
CLASSIFICATION: Building
QUALIFIER: William Scott Davis
LIEN AGENT NAME: NGM INSURANCE
ENTRY#: S-886630
LIEN AGENT ADDRESS: 4601 TOUCHTON RD E SUITE 3400
JACKSONVILLE, FL 32246

DESCRIPTION OF WORK – (Any deviation from the Building Plan or Site Plan requires prior approval): Stabilize foundation using intelljacks & push piers
SPECIAL CONDITIONS - ALL WOOD BELOW RFPE (8) FT. SHALL BE TREATED

TYPE OF CONSTRUCTION: New Construction - Addition / Expansion - Remodel / Renovation / Repair - Accessory - Other Bulkhead - Piers/Docks - Retaining Wall - Beach Access Walkway/Stairs - Swimming Pools - Workshop - Gazebo Detached Garage - Accessory Storage Building - Dune Deck - Generator		
OCCUPANCY:	TYPE OF FOUNDATION:	PERMIT TYPE: Residential
HEATED/LIVING AREAS (SqFt): 0.0	HEAT:	RESIDENCE TYPE: Residence
NON-HEATED AREAS (SqFt): 0	A/C:	BUILDING USE: Single Family
NUMBER OF STORIES:	INTERIOR WALLS:	ZONING DISTRICT: RS1 - Single Family Residential District
BEDROOMS:	EXTERIOR WALLS:	ZONING PERMIT #:
SEPTIC CAP. # OF PERSONS:	FIREPLACE:	DATE APPROVED:
BATHS: ½ BATHS:	ROOF:	PERMITTED/CONDITIONAL USE: Single Family Dwelling
GARAGE - DETACHED: ATTACHED:	INSULATION:	CAMA PERMIT #:
STORAGE ENCLOSURE:	ELEVATOR (SqFt):	DATE ISSUED:
POOL: SHED:	DECKS (SqFt):	
FLOOD ZONE: Shaded X	WINDOWS MAKE:	SEPTIC PERMIT #:
BASE FLOOD ELEVATION: LES 8ft	WINDOWS TYPE:	DATE ISSUED:

TOTAL CONSTRUCTION COST: \$70,000.00

PERMIT FEES:		
Description		Total Cost
Remodel / Renovation / Repair Fee		700.00
Homeowners Recovery Fund		10.00
		TOTAL FEE: 710.00

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

Chelsea Willett *Chelsea Wrobel*

Applicant - Owner/Contractor

(Please print and sign name)

02/25/2021

Date Approved

Kevin Clark

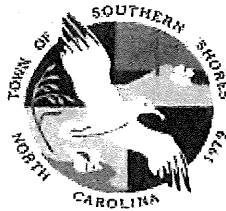
3-26-2021

Building/Code/Zoning Official

By MB

Date Issued

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



Residential Trade Contractor Permit

Date March 26, 2021

**TP21-000053
Mechanical Trade Permit**

Project Address: 24 NINTH AVE

PIN #: 021228000

Property Owner: JENNINGS, WILLIAM H JR

Mailing Address: 1340 PENGUIN CIR
VIRGINIA BEACH, VA 23451

Permit Types:

- Plumbing
 Electrical
 Mechanical
 Gas

Contractor:

Company Name: Delta T Heating & Air Conditioning, Inc

Qualifier: Edwin Miller

Phone: (252) 261-0404

Address: 162 Yaupon Trail

N. C. License Number: 23299

Kitty Hawk, NC 27949

Description of Work: Replace existing system with 2.5 ton 14 SEER indoor and outdoor heat pump system.

Project Cost Estimate: \$5,800.00

Permit Amount: 100.00

Payment:

Date Type Reference Receipt ReceivedFrom Amount

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

Edwin Miller

Signature of Licensee or Duly Authorized Representative

3/26/21

Date

Kevin Clark

Signature of Permit Official
By MB

3-26-2021

Date

**TOWN OF SOUTHERN SHORES
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Residential Trade Contractor Permit

Date March 29, 2021

**TP21-000056
Electrical Trade Permit**

Project Address: 59 DEER PATH LN
Property Owner: SWICK, DEBORAH SUE SWICK, JOHN JOSEPH JR

PIN #: 029113000
Mailing Address: 59 DEER PATH LANE
SOUTHERN SHORES, NC 27949

Permit Types:

Plumbing Electrical Mechanical Gas

Contractor:

Company Name: Qualifier: SWICK, DEBORAH SUE SWICK, JOHN JOSEPH JR
Phone: 252-715-5945 **Address:** 59 DEER PATH LANE
SOUTHERN SHORES, NC 27949

N. C. License Number:

Description of Work: INSTALLATION OF 2 OUTLETS FOR BOAT LIFT

Project Cost Estimate: \$500.00

Permit Amount: 100.00

Payment:

Date Type Reference Receipt Received From Amount

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

Deborah Swick 3/29/21
Signature of Licensee or Duly Authorized Representative Date

Kevin Clark 3-29-2021
Signature of Permit Official Date

**TOWN OF SOUTHERN SHORES
PLANNING AND CODE ENFORCEMENT**
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www.southernshores-nc.gov



Residential Trade Contractor Permit

Date March 29, 2021

**TP21-000058
Electrical Trade Permit**

Project Address: 244 OCEAN BLVD

PIN #: 021655000

Project Owner: RAWLES, ROBERT B RAWLES, KATHERINE G

Mailing Address: 22 GREENWAY LN
RICHMOND, VA 23226

Permit Types:

Plumbing Electrical Mechanical Gas

Contractor:

Company Name: Above Code Electric

Qualifier: Lionel Richard

Phone: (252) 375-3232

Address: 10 Circle Drive

N. C. License Number: U.31933

Kitty Hawk, NC 27949

Description of Work: REPLACE EXTERIOR 200 AMP SERVICE DISCONNECT

Project Cost Estimate: 1500.00

Permit Amount: 100.00

Payment:

Date Type Reference Receipt Received From Amount

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

Lionel Ruhl

Signature of Licensee or Duly Authorized Representative

3/29/21

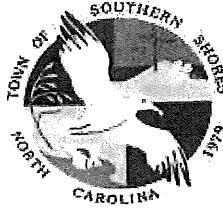
Date

Kevin Clark *3-29-2021*

Signature of Permit Official Date

By MR

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



Residential Trade Contractor Permit

Date March 24, 2021

**TP21-000052
Electrical Trade Permit**

Project Address: 7 THIRTEENTH AVE
Property Owner: BELOTE, H DAVID TTEE BELOTE, PAMELA R TTEE

PIN #: 021295000
Mailing Address: 2248 ROSE HALL DR
VIRGINIA BEACH, VA 23454

Permit Types:

Plumbing Electrical Mechanical Gas

Contractor:

Company Name: BRS Electrical Services Inc.
Phone: (252) 441-5334
N. C. License Number: 23077-U

Qualifier: Bradley Smith
Address: PO Box 2108
Kill Devil Hills, NC 27948

Description of Work: REPLACE 200 AMP METER BASE, STRAP SVC FEEDER & RUN GROUND WIRE FROM PANEL TO OUTSIDE

Project Cost Estimate: \$1,100.00

Permit Amount: 100.00

Payment:

Date Type Reference Receipt Received From Amount

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

3/30/2021
Date

Signature of Licensee or Duly Authorized Representative

3-30-2021
Date

Signature of Permit Official



**TOWN OF SOUTHERN SHORES
PLANNING AND CODE ENFORCEMENT**
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(252) 261-2394 Ext 4 - Office (252) 255-0876 - Fax
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**RESIDENTIAL
BUILDING/FLOODPLAIN
DEVELOPMENT PERMIT**

BUILDING PERMIT # DPA21-000060

Parcel: 022383082
PIN: 986707780271
Location: 139 CLAM SHELL TRL
District: RS1 - Single Family Residential District
Subdiv: CHICAHOUK
Lot-Block-Sect: LOT: 82 BLK: SEC:

Owner: STARKEY, DEBORAH A
Address: 139 CLAMSHELL TRL
KITTY HAWK, NC 27949
Phone #: 252-455-4725

BUSINESS NAME: The Professional Handyman
CONTRACTOR'S NAME: Miguel Morales
ADDRESS: 513 Burns Drive
CITY, STATE, ZIP: Kill Devil Hills, NC 27948
OFFICE#: (252) 573-9372
CELL#: (252) 573-9372
FAX#:
EMAIL: miguelatpeace@aol.com

NC G.C. LICENSED CONTRACTOR:
NC G.C. LICENSE NUMBER:
LIMITATION:
CLASSIFICATION:
QUALIFIER:
LIEN AGENT NAME:
ENTRY#:
LIEN AGENT ADDRESS:

DESCRIPTION OF WORK – (Any deviation from the Building Plan or Site Plan requires prior approval): REPLACE DECK BOARDS, REPLACE HANDRAILS, BUILD EXTERIOR STAIRCASE GOING DOWN IN THE BACK. REBUILD GATE AND PORTION OF FENCE.
SPECIAL CONDITIONS - ALL WOOD BELOW RFPPE (8) FT. SHALL BE TREATED

TYPE OF CONSTRUCTION: <input type="checkbox"/> New Construction - <input type="checkbox"/> Addition / Expansion - <input checked="" type="checkbox"/> Remodel / Renovation / Repair - <input type="checkbox"/> Accessory - <input type="checkbox"/> Other <input type="checkbox"/> Bulkhead - <input type="checkbox"/> Piers/Docks - <input type="checkbox"/> Retaining Wall - <input type="checkbox"/> Beach Access Walkway/Stairs - <input type="checkbox"/> Swimming Pools - <input type="checkbox"/> Workshop - <input type="checkbox"/> Gazebo <input type="checkbox"/> Detached Garage - <input type="checkbox"/> Accessory Storage Building - <input type="checkbox"/> Dune Deck - <input type="checkbox"/> Generator		
OCCUPANCY:	TYPE OF FOUNDATION:	PERMIT TYPE: Residential
HEATED/LIVING AREAS (SqFt): 0.0	HEAT:	RESIDENCE TYPE: Residence
NON-HEATED AREAS (SqFt): 0	A/C:	BUILDING USE: Single Family
NUMBER OF STORIES:	INTERIOR WALLS:	ZONING DISTRICT: RS1 - Single Family Residential District
BEDROOMS:	EXTERIOR WALLS:	ZONING PERMIT #:
SEPTIC CAP. # OF PERSONS:	FIREPLACE:	DATE APPROVED:
BATHS: ½ BATHS:	ROOF:	PERMITTED/CONDITIONAL USE: Single Family Dwelling
GARAGE - DETACHED: ATTACHED:	INSULATION:	CAMA PERMIT #:
STORAGE ENCLOSURE:	ELEVATOR (SqFt):	DATE ISSUED:
POOL: SHED:	DECKS (SqFt):	
FLOOD ZONE: Unshaded X	WINDOWS MAKE:	SEPTIC PERMIT #:
BASE FLOOD ELEVATION: LES 8ft	WINDOWS TYPE:	DATE ISSUED:

TOTAL CONSTRUCTION COST: \$17,000.00

PERMIT FEES:		
Description		Total Cost
Remodel / Renovation / Repair Fee		170.00
		TOTAL FEE: 170.00

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

Applicant - Owner/Contractor _____ (Please print and sign name)

03/29/2021
Date Approved

Building/Code/Zoning Official
Kevin Clark

Date Issued
3-30-2021



**TOWN OF SOUTHERN SHORES
PLANNING AND CODE ENFORCEMENT**
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(252) 261-2394 Ext 4 - Office (252) 255-0876 - Fax
www.southernshores-nc.gov

**RESIDENTIAL
BUILDING/FLOODPLAIN
DEVELOPMENT PERMIT**

BUILDING PERMIT # DPA21-000063

Parcel: 022475383
PIN: 986715645189
Location: 73 GRAVEY POND LN
District: R1 - Low Density Residential District
Subdiv: CHICAHOUK
Lot-Block-Sect: LOT: 383 BLK: SEC:

Owner: ROEDER, HENRY JOHN TTEE
Address: 1814 ST. ROMAN DR
VIENNA, VA 22182
Phone #: 703-547-7753

BUSINESS NAME:
CONTRACTOR'S NAME: EMAUELSON & DAD
ADDRESS: ELY BARETT
CITY, STATE, ZIP: 6705 S. CROATAN HWY.
OFFICE#
CELL# 252-261-2212
FAX#:
EMAIL: EMANUELSON6705@OUTLOOK.COM

NC G.C. LICENSED CONTRACTOR: Licensed General Contractor
NC G.C. LICENSE NUMBER:
LIMITATION: Limited
CLASSIFICATION: Residential
QUALIFIER: Elizha Barrett
LIEN AGENT NAME:
ENTRY#:
LIEN AGENT ADDRESS:

DESCRIPTION OF WORK – (Any deviation from the Building Plan or Site Plan requires prior approval): REINFORCE APPROXIMATELY 80' OF RETAINING WALL (NOTED ON PLAT)
SPECIAL CONDITIONS - ALL WOOD BELOW RFPE (8) FT. SHALL BE TREATED

TYPE OF CONSTRUCTION: <input type="checkbox"/> New Construction - <input type="checkbox"/> Addition / Expansion - <input type="checkbox"/> Remodel / Renovation / Repair - <input checked="" type="checkbox"/> Accessory - <input type="checkbox"/> Other <input type="checkbox"/> Bulkhead - <input type="checkbox"/> Piers/Docks - <input type="checkbox"/> Retaining Wall - <input type="checkbox"/> Beach Access Walkway/Stairs - <input type="checkbox"/> Swimming Pools - <input type="checkbox"/> Workshop - <input type="checkbox"/> Gazebo <input type="checkbox"/> Detached Garage - <input type="checkbox"/> Accessory Storage Building - <input type="checkbox"/> Dune Deck - <input type="checkbox"/> Generator		
OCCUPANCY:	TYPE OF FOUNDATION:	PERMIT TYPE: Residential
HEATED/LIVING AREAS (SqFt): 0.0	HEAT:	RESIDENCE TYPE: 2nd Home
NON-HEATED AREAS (SqFt): 0	A/C:	BUILDING USE: Single Family
NUMBER OF STORIES:	INTERIOR WALLS:	ZONING DISTRICT: RS-1 - Single-family Residential District
BEDROOMS:	EXTERIOR WALLS:	ZONING PERMIT #:
SEPTIC CAP. # OF PERSONS:	FIREPLACE:	DATE APPROVED:
BATHS: ½ BATHS:	ROOF:	PERMITTED/CONDITIONAL USE:
GARAGE - DETACHED: ATTACHED:	INSULATION:	CAMA PERMIT #:
STORAGE ENCLOSURE:	ELEVATOR (SqFt):	DATE ISSUED:
POOL: SHED:	DECKS (SqFt):	
FLOOD ZONE: Unshaded X	WINDOWS MAKE:	SEPTIC PERMIT #:
BASE FLOOD ELEVATION: LES 8FT	WINDOWS TYPE:	DATE ISSUED:

TOTAL CONSTRUCTION COST: \$5,725.00	
PERMIT FEES:	Total Cost
Description	100.00
Minimum Permit Fee	TOTAL FEE: 100.00

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

Henry John Roeder *Henry John Roeder*
 Applicant - Owner/Contractor (Please print and sign name)

Kevin Clark
 Building/Code/Zoning Official *Ky MB*

03/25/2021
 Date Approved
 Date Issued

TOWN OF SOUTHERN SHORES
PLANNING AND CODE ENFORCEMENT
5375 N Virginia Dare Trail, Southern Shores, NC 27949
(252) 261-2394 - Office (252) 255-0876 - Fax
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Residential Trade Contractor Permit

Date March 29, 2021

TP21-000057
Mechanical Trade Permit

Project Address: 259 WAX MYRTLE TRL
Property Owner: FARWELL, GEORGE E FARWELL, VELMA REBECCA

PIN #: 021464000
Mailing FARWELL, GREGORY SHAUN
Address: PORTSMOUTH, VA 23703

Permit Types:

Plumbing Electrical Mechanical Gas

Contractor:

Company Name: AMERICAN REFRIGERATION
Phone: (252) 715-3335
N. C. License Number: 15578

Qualifier: WILLIAM STOLTZ
Address: PO BOX 835
NAGS HEAD, NC 27959

Description of Work: REPLACE 3.5 TON 14 SEER HEAT PUMP & AIR HANDLER AMERICAN STANDARD

Project Cost Estimate: \$7,000.00

Permit Amount: 100.00

Payment:

Date Type Reference Receipt Received From Amount

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

William Stoltz 3/20/21
Signature of Licensee or Duly Authorized Representative Date

Kevin Clark 3-31-2021
Signature of Permit Official By Date
MB

**TOWN OF SOUTHERN SHORES
PLANNING AND CODE ENFORCEMENT**
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Trade Contractor Permit

Date March 29, 2021

**TP21-000055
Mechanical Trade Permit**

Project Address: 2 FIFTH AVE

PIN #: 021120000

Property Owner: MCMAHON, J KEVIN MCMAHON, KRISTEN R

Mailing Address: PO BOX 57
CURTISVILLE, PA 15032

Permit Types:

Plumbing Electrical Mechanical Gas

Contractor:

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

Qualifier: Douglas Wakeley

Phone: (252) 261-2008

Address: P.O. Box 179

N. C. License Number: 13056

Kitty Hawk, NC 27949

Description of Work: REPLACING 16 SEER 2 TON TRANE SYSTEM WITH AES AIR SCRUBBER

Project Cost Estimate: \$8,882.00

Permit Amount: 100.00

Payment:

Date Type Reference Receipt Received From Amount

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

JACLYN SLATER

03/30/2021

Signature of Licensee or Duly Authorized Representative

Date

Kevia Clark 3-31-2021
Signature of Permit Official Date

By M.B.



BUILDING PERMIT

PERMIT NUMBER: 4987

DATE: 2/11/21

OWNER: Taylor + Jessica Smith
ADDRESS: Gilbert St
CITY: Manteo STATE: NC ZIP: _____

BUILDER: Owner
CONTRACTOR LICENSE #: _____
ADDRESS: 10576 Mackay Rd
CITY: Wilton STATE: NC ZIP: 28574
PHONE: 704-856-8276

LOCATION OF BUILDING SITE: 105 Gilbert
Lot 34 S West 1/2 Lot 35 Highway 12 ZONING DISTRICT: _____
PARCEL NUMBER: 025671000 FLOOD ZONE: _____
ELECTRICAL POWER WORK REQUEST NUMBER OR POWER METER NUMBER (IF APPLICABLE): _____
EFFECT: ERASE ALTER REPAIR

SQUARE FOOTAGE OF HEATED SPACE: 3182 UNHEATED SPACE: 725
NUMBER OF STORIES: 3 ROOMS: 5 BATHS: 4.5 FIREPLACES: 1

EXTERIOR WALLS: 1x6 INTERIOR WALLS: 2x4 ROOF TYPE AND MATERIAL: slated/shingle
HEAT TYPE: Heat Pump INSULATION & R VALUE: R19, R38 FLOORING: wood
FOOTING: _____ FOUNDATION: piers, slab

ADDITIONAL NOTES: _____

EACH APPLICATION MUST BE ACCOMPANIED BY:

- 1- SITE PLAN SHOWING ACTUAL DIMENSIONS OF THE LOT, ALL STRUCTURES, DRIVEWAYS AND PARKING
- 2- TWO SETS OF WORKING DRAWINGS
- ELEVATION OF THE SITE
- RESTAURANTS: HEALTH DEPARTMENT APPROVALS
- CAMA PERMIT IF REQUIRED

*** CALL BUILDING INSPECTOR 24 HOURS IN ADVANCE FOR ALL INSPECTIONS ***

This building is to be erected or altered in accordance with the latest edition of the General Building Laws of North Carolina and all amendments as adopted by the Town of Manteo. This permit is valid for six (6) months. Compliance with Building Regulations is the responsibility of the undersigned applicant. Any change in construction or site plans will be subject to prior notification of the Planning and Zoning Department and the Building Inspector.

Estimated or Contract Cost: 450,000

Review 100.00

Date of Issuance: 2/16/21

Permit Cost: 1772.25

\$ 1872.25

Seals: _____
Applicant: Smith

Inspector: [Signature]

Zoning Official: [Signature]

Conditions of Permit: _____



MECHANICAL PERMIT

PERMIT NUMBER: 4988

DATE: 2/3/2021

OWNER: CVS Pharmacy

CONTRACTOR: Moore's Elec + mech

ADDRESS: 1115 US-64

ADDRESS: P.O. Box 119

CITY: Manteo STATE: NC ZIP: 27954

CITY: Altavista STATE: VA ZIP: 24517

PHONE: 252-473-5054

PHONE: 434-309-2484

LOCATION: 1115 US-64

PARCEL NUMBER: _____

BUILDER: _____

NUMBER OF HEATING UNITS: 4

NUMBER OF AIR HANDLERS: _____

NUMBER OF REGISTERS: _____

TONNAGE: (3) 10 ton + (1) 3 ton

LICENSE NUMBER: 32491

WORK ORDER NUMBER: _____

COST: \$29603

Permit Cost: Renewal \$50 + \$200 = Total \$250

If repairing or altering, please describe work: We will be replacing like for like HVAC roof top units + making all reconnections. Customer is supplying all equipment.
(3) 10 ton units + (1) 3 ton unit.

CALL BUILDING INSPECTOR 24 HOURS IN ADVANCE FOR ALL INSPECTIONS

DATE OF ISSUANCE: 2/17/21

SEALS: Danya Mund
(Applicant)

lllllll D. Fred
(Inspector)
lnterstone

(UPDATED 7/2017)

025816001
Manteo Partners



ELECTRICAL PERMIT

PERMIT NUMBER: 4989

DATE: 3-31-2021

OWNER: Hugh Parnell
ADDRESS: 1100 Running Cedar Way
CITY: Lynchburg STATE: VA ZIP: 24503
PHONE: _____

CONTRACTOR: DAVCO Electric
ADDRESS: 406 W Lake Dr
CITY: KOH STATE: NC ZIP: 27848
PHONE: 441-4106

LOCATION: 72 Ballast Pt PARCEL NUMBER: _____
BUILDER: _____

RESIDENTIAL: NEW ALTERATION
COMMERCIAL: NEW ALTERATION

NC POWER WORK REQUEST NUMBER OR POWER METER NUMBER (IF APPLICABLE) _____

SERVICE AMPS: 200
LICENSE NUMBER: 4354U

INCREASED TO: _____
WORK ORDER NUMBER: _____
Permit Cost: _____

COST: 2,000

If repairing or altering, please describe work: addition General wiring in storage room

CALL BUILDING INSPECTOR 24 HOURS IN ADVANCE FOR ALL INSPECTIONS

DATE OF ISSUANCE: 3-31-21 SEALS: [Signature]
(Applicant)

(Inspector)

025694451



BUILDING PERMIT

PERMIT NUMBER: 4990

DATE: 3-2-21

OWNER: Steve King

BUILDER: Soundside Construction Corp

ADDRESS: 141 - Orion Lane

CONTRACTOR LICENSE #: 21579

CITY: Manteo STATE: NC ZIP: 27954

ADDRESS: PO Box 956

CITY: Manteo STATE: NC ZIP: 27954

PHONE: 252 305 2526

207 Queen Elizabeth Ave #2

LOCATION OF BUILDING SITE: Cards Waterfront Shops ZONING DISTRICT: _____

PARCEL NUMBER: 0024780036 FLOOD ZONE: _____ BFE: _____ FFE: _____

NC POWER WORK REQUEST NUMBER OR POWER METER NUMBER (IF APPLICABLE) _____

ERECT: _____ ALTER: REPAIR: _____

SQUARE FOOTAGE OF HEATED SPACE: 9805 sq ft UNHEATED SPACE: _____

NUMBER OF STORIES: _____ ROOMS: _____ BATHS: _____ FIREPLACES: _____

FINISHES:

EXTERIOR WALLS: _____ INTERIOR WALLS: _____ ROOF TYPE AND MATERIAL: _____

HEAT TYPE: _____ INSULATION & R VALUE: _____ FLOORING: _____

FOOTING: _____ FOUNDATION: _____

ADDITIONAL NOTES: Changing some HVAC Registers
Moving and changing lights Interior trim & Paint

EACH APPLICATION MUST BE ACCOMPANIED BY:

- SITE PLAN SHOWING ACTUAL DIMENSIONS OF THE LOT, ALL STRUCTURES, DRIVEWAYS AND PARKING
- TWO SETS OF WORKING DRAWINGS
- ELEVATION OF THE SITE
- RESTAURANTS: HEALTH DEPARTMENT APPROVALS
- CAMA PERMIT IF REQUIRED

024780036

*** CALL BUILDING INSPECTOR 24 HOURS IN ADVANCE FOR ALL INSPECTIONS***

This building is to be erected or altered in accordance with the latest edition of the General Building Laws of North Carolina and all amendments as adopted by the Town of Manteo. This permit is valid for six (6) months. Compliance with Building Regulations is the responsibility of the undersigned applicant. Any change in construction or site plans will be subject to prior notification of the Planning and Zoning Department and the Building Inspector.

Estimated or Contract Cost: \$20,000

Permit Cost: \$200.00

Date of Issuance: 3/3/21

Review 50.00
\$250.00

Seals: SLC
Applicant

Joe St
Inspector

MO St
Zoning Official

Conditions of Permit: _____



SIGN PERMIT

PERMIT NUMBER: 4991

DATE: 01/13/2021

APPLICANT: KEN PADGETT
ADDRESS: 6 BAFFIN BAY CT
ROCKVILLE, MD 20853
PHONE: 301-370-2126

THIS PERMIT IS TO: ERECT ALTER: REPAIR: A SIGN. (PLEASE CHECK ONE.)

TYPE OF SIGN: REPLACE (2) EXISTING "M" LOGO BUILDING MOUNTED SIGNS WITH HALO ILLUMINATED SIGNS 3.5' x 4.0' = 14 SF EACH
ADD (1) WINDOW VINYL "M" LOGO 3.5' x 4.0' = 14 SF TO WINDOW ON FRONT ELEVATION

LOCATION OF SIGN: "M" LOGO SIGNS - 1 SIGN ON THE DRIVE-THRU SIDE ELEVATION AND 1 SIGN ON THE NON-DRIVE THRU SIDE ELEVATION.
"M" LOGO WINDOW VINYL ON FRONT ELEVATION WINDOW.

PARCEL NUMBER: 028799000

ZONING DISTRICT: B-2 SQUARE FOOTAGE OF SIGN: _____

028799000
515 S HWY

THIS PERMIT MUST BE ACCOMPANIED BY:

- DRAWING OF SIGN TO SCALE
- LOCATION OF PROPOSED SIGN AND ANY OTHER SIGNS ON THE SAME LOT
- DRAWING TO SCALE OF FACE OF BUILDING IF THE SIGN IS TO BE MOUNTED ON THE FACE OF A BUILDING

Ken Padgett
CONTRACTOR/OWNER SIGNATURE

01/13/2021
DATE

[Signature]
BUILDING INSPECTOR

3/2/21
DATE

COMMENTS:

COST OF PERMIT: \$150.00



BUILDING PERMIT

PERMIT NUMBER: 4992

DATE: 2-18-21

OWNER: 119 Gilbert Street Investment, LLC BUILDER: J.D. Johnson Realty + Const., LLC

ADDRESS: 119 Gilbert Street CONTRACTOR LICENSE #: 73168

CITY: Manteo STATE: NC ZIP: 27954 ADDRESS: P.O. Box 340

CITY: Manteo STATE: NC ZIP: 27954

PHONE: 252-305-9982 Jonathan9982@gmail.com

LOCATION OF BUILDING SITE: 119 Gilbert Street ZONING DISTRICT: 10

PARCEL NUMBER: 025688000 FLOOD ZONE: AE BFE: 4.0 FFE: 14

NC POWER WORK REQUEST NUMBER OR POWER METER NUMBER (IF APPLICABLE) _____

ERECT: ALTER: _____ REPAIR: _____

SQUARE FOOTAGE OF HEATED SPACE: 1495 UNHEATED SPACE: 631

NUMBER OF STORIES: 2 ROOMS: 3 BATHS: 2.5 FIREPLACES: 0

FINISHES:

EXTERIOR WALLS: LP Wood INTERIOR WALLS: Sheetrock ROOF TYPE AND MATERIAL: Combination/Asphalt

HEAT TYPE: Elect. INSULATION & R VALUE: 38 FLOORING: LVT

FOOTING: Conc/pilings FOUNDATION: Pilings

ADDITIONAL NOTES: _____

EACH APPLICATION MUST BE ACCOMPANIED BY:

- SITE PLAN SHOWING ACTUAL DIMENSIONS OF THE LOT, ALL STRUCTURES, DRIVEWAYS AND PARKING
- TWO SETS OF WORKING DRAWINGS
- ELEVATION OF THE SITE
- RESTAURANTS: HEALTH DEPARTMENT APPROVALS
- CAMA PERMIT IF REQUIRED

*** CALL BUILDING INSPECTOR 24 HOURS IN ADVANCE FOR ALL INSPECTIONS***

This building is to be erected or altered in accordance with the latest edition of the General Building Laws of North Carolina and all amendments as adopted by the Town of Manteo. This permit is valid for six (6) months. Compliance with Building Regulations is the responsibility of the undersigned applicant. Any change in construction or site plans will be subject to prior notification of the Planning and Zoning Department and the Building Inspector.

Estimated or Contract Cost: 380,000

Date of Issuance: 3/3/21

Permit Cost: 905.25

Review 100.00

\$ 1005.25

Seals: [Signature]
Applicant

[Signature]
Inspector

Zoning Official

Conditions of Permit: _____



PERMIT NUMBER: 4998

BUILDING PERMIT

DATE: 2/16/21

OWNER: Michael MARCINCYK
ADDRESS: 18 Ballast Point Dr
CITY: MANTEO STATE: NC ZIP: 27954

BUILDER: _____
CONTRACTOR LICENSE #: Self
ADDRESS: _____
CITY: _____ STATE: _____ ZIP: _____
PHONE: _____

LOCATION OF BUILDING SITE: Above address ZONING DISTRICT: R5
PARCEL NUMBER: 025694375 FLOOD ZONE: _____ BFE: _____ FFE: _____ (X ZONE)
NC POWER WORK REQUEST NUMBER OR POWER METER NUMBER (IF APPLICABLE) _____
ERECT: _____ ALTER: _____ REPAIR: _____

SQUARE FOOTAGE OF HEATED SPACE: 4134 UNHEATED SPACE: _____
NUMBER OF STORIES: 3 ROOMS: 15 BATHS: 6 FIREPLACES: 2

FINISHES: _____
EXTERIOR WALLS: _____ INTERIOR WALLS: _____ ROOF TYPE AND MATERIAL: _____
HEAT TYPE: _____ INSULATION & R VALUE: _____ FLOORING: _____
FOOTING: _____ FOUNDATION: _____

ADDITIONAL NOTES: Remodel kitchen/baths; Replace flooring; Replace landing doors
and windows; replace broken HVAC; Replace landing roof and gutters;
change exterior lighting (high pressure); new soffits, corner lights
small (replaces) 11-11-21

EACH APPLICATION MUST BE ACCOMPANIED BY:

- SITE PLAN SHOWING ACTUAL DIMENSIONS OF THE LOT, ALL STRUCTURES, DRIVEWAYS AND PARKING
- TWO SETS OF WORKING DRAWINGS
- ELEVATION OF THE SITE
- RESTAURANTS: HEALTH DEPARTMENT APPROVALS
- CAMA PERMIT IF REQUIRED
- NC LIEN AGENT FORM

*** CALL BUILDING INSPECTOR 24 HOURS IN ADVANCE FOR ALL INSPECTIONS***

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Review 50.00

Estimated or Contract Cost: \$150,000

Date of Issuance: 3/10/21 Permit Cost: 1500.00

Seals: [Signature]
Applicant

[Signature]
Inspector

\$1,550.00
[Signature]
Zoning Official

Conditions of Permit: _____



MECHANICAL PERMIT

PERMIT NUMBER: 4994

DATE: 3-10-21

OWNER: CHARLES MCKENNEY
ADDRESS: 305 DOWN ST
CITY: MANTEO STATE: NC ZIP: 27954
PHONE: _____

CONTRACTOR: T SLAWN HVAC
ADDRESS: PO BOX 2252
CITY: KH STATE: NC ZIP: 27948
PHONE: _____

LOCATION: _____ PARCEL NUMBER: _____
BUILDER: _____

NUMBER OF HEATING UNITS: 2
NUMBER OF B.T.U.'s: 60,000 + 18,000
LICENSE NUMBER: 22354
COST: 5000.00

NUMBER OF REGISTERS: 20
TONNAGE: 5 + 1.5
WORK ORDER NUMBER: _____
Permit Cost: 150.00

If repairing or altering, please describe work: DOWN CHANGE OUT SYSTEMS WITH RING 14 SEER HEAT PUMP SYSTEMS

POPS REPAIRS DOWN ELECTRICAL

CALL BUILDING INSPECTOR 24 HOURS IN ADVANCE FOR ALL INSPECTIONS

DATE OF ISSUANCE: 3/10/21 SEALS: POPS REPAIRS
(Applicant)

[Signature]
(Inspector)

024693000

4995



ZONING PERMIT

This zoning permit is for the restriping and repaving of the parking lot and drivethru. Signage to be submitted separately by sign contractor.

DATE: 12/16/2020

APPLICANT

NAME: Thomas Hughes
ADDRESS: 6903 Rockledge Drive 1100 Bethesda, MD 20817
TELEPHONE: 4109771214

PROPERTY OWNER

NAME: McDonald Corp 032-0223
ADDRESS: #6374, po box 709
Elizabeth city, NC 27907
410-977-1214

LEGAL RELATIONSHIP OF APPLICANT TO PROPERTY OWNER: Owner Rep

- 1. BUSINESS NAME: McDonald's
- 2. ADDRESS OF PROPERTY: 515 S. Virginia Dare RD
- 3. PROPOSED USE: Restaurant (A-2 Assembly)
- 4. ZONING DISTRICT: FLOOD ZONE:
- 5. LOT SIZE: SQUARE FOOTAGE:
- 6. IF EXISTING, PROPOSED CHANGE OF USE: N/A

- 7. GROSS FLOOR AREA: 5,255 s.f. PROPOSED ADDITIONAL FLOOR AREA: 0 s.f.
- 8. BUFFER (NUMBER OF TREES REQUIRED & TYPE): N/A

SCREEN (LOCATION AND TYPE): N/A

- 9. SIGNAGE: SQUARE FOOTAGE FREE STANDING SIGN: 37.7 s.f. TOTAL AREA (SIGNAGE UNDER SEPERATE SUBMITTAL)
SQUARE FOOTAGE WALL MOUNTED SIGN: 94 s.f. TOTAL AREA (SIGNAGE UNDER SEPERATE SUBMITTAL)

- 10. PARKING: REQUIRED SPACES: 81
EXISTING SPACES: 61
PROPOSED SPACES: 0

- 11. ATTACH SITE PLAN OR SURVEY SHOWING EXISTING AND PROPOSED CONDITIONS

APPLICANT'S SIGNATURE: Thomas Hughes
DocuSigned by: Thomas Hughes
0C00E895F6844C0

McDonalds Corp

STAFF USE ONLY

IS PROPOSED USE IN COMPLIANCE WITH THE ZONING DISTRICT IN WHICH IT IS LOCATED? Yes No

ZONING ADMINISTRATOR'S SIGNATURE: William Dickerson

COMMENTS: Planning & Zoning Board approval on March 9, 2021.



252-473-2135

ELECTRICAL PERMIT

PERMIT NUMBER: 4996

DATE: 3/10/2021

OWNER: AVENUE WATERFRONT GRILLE
 ADDRESS: 207 QUEEN ELIZABETH AVE
 CITY: MANTEO STATE: NC ZIP: 27948
 PHONE: 252-473-4800 OFFICE
THOMAS 252-207-1199 CELL

CONTRACTOR: BRS ELECTRICAL SERVICES INC
 ADDRESS: PO BOX 2108
 CITY: KDH STATE: NC ZIP: 27948
 PHONE: 252-441-5334 OFFICE
BRAH 252-207-5334 CELL

LOCATION: 207 QUEEN ELIZABETH AVE PARCEL NUMBER: _____

BUILDER: _____

RESIDENTIAL: NEW ALTERATION
 COMMERCIAL: NEW ALTERATION

NC POWER WORK REQUEST NUMBER OR POWER METER NUMBER (IF APPLICABLE) _____

SERVICE AMPS: 600 INCREASED TO: _____

LICENSE NUMBER: 23077-U WORK ORDER NUMBER: _____

COST: \$4,200 Permit Cost: 75.00

If repairing or altering, please describe work: UPDATING WIRING OF EXHAUST HOOD WIRING OF FAN/SUL SYSTEM

CALL BUILDING INSPECTOR 24 HOURS IN ADVANCE FOR ALL INSPECTIONS

DATE OF ISSUANCE: 3/11/21

SEALS: [Signature]
(Applicant)

[Signature]
(Inspector)

024780039



MECHANICAL PERMIT

PERMIT NUMBER: 4997

DATE: 3-17-21

OWNER: Richard L Howell II
ADDRESS: P.O. Box 797
CITY: Mt Jackson STATE: V.A ZIP: 22842
PHONE: 540-856-8449

CONTRACTOR: OBHC Inc Dba One Hour Htg & A/C
ADDRESS: 701 W. Fresh Pond Dr
CITY: KDVA STATE: NC ZIP: 27948
PHONE: 441-1740

LOCATION: 1110 South Bay Club Dr #1110
BUILDER: _____

NUMBER OF HEATING UNITS: 1
NUMBER OF B.T.U.'S: 18,000
LICENSE NUMBER: 12643 H2-3 Class 1
COST: 6101.00

NUMBER OF REGISTERS: —
TONNAGE: 1 1/2
WORK ORDER NUMBER: _____
Permit Cost: 150.00

If repairing or altering, please describe work: Replace HVAC with 14 seer
1/2 ton Carrier air handler & heat pump.

CALL BUILDING INSPECTOR 24 HOURS IN ADVANCE FOR ALL INSPECTIONS

DATE OF ISSUANCE: 3/17/21

SEALS: [Signature]
(Applicant)

[Signature]
(Inspector)

030835075



025694278

MECHANICAL PERMIT

PERMIT NUMBER: 4998

DATE: 03/15/2021

OWNER: TONY & JULIA WIENERS

CONTRACTOR: R A HOY HEATING & A/C, INC

ADDRESS: 222 PIRATES WAY

ADDRESS: P O BOX #179

CITY: MANTEO STATE: NC ZIP: 27954

CITY: KITTY HAWK STATE: NC ZIP: 27949

PHONE: 330-554-7163

PHONE: (252) 261-2008

LOCATION: _____

BUILDER: _____

NUMBER OF HEATING UNITS: _____

NUMBER OF REGISTERS: _____

NUMBER OF B.T.U.'S: _____

TONNAGE: _____

LICENSE NUMBER: 13056

WORK ORDER NUMBER: _____

COST: \$1733

Permit Cost \$50.00

If repairing or altering, please describe work:
REPLACING 4 LINES IN THE ATTIC

DUCT CLEAN ON THE FIRST FLOOR

CALL BUILDING INSPECTOR 24 HOURS IN ADVANCE FOR ALL INSPECTIONS

DATE OF ISSUANCE: 3/17/21

SEALS:

[Signature]
(Applicant)

[Signature]
(Inspector)



025818025

4999

MECHANICAL PERMIT

PERMIT NUMBER: ~~8006~~

DATE: 3-23-21

OWNER: COLIN CUSHNIE
ADDRESS: 123 PENISULA DR
CITY: MANTO STATE: NC ZIP: 27954
PHONE:

CONTRACTOR: ISLAND HVAC
ADDRESS: PO BOX 2254
CITY: FH STATE: NC ZIP: 27954
PHONE:

LOCATION: SCMP
BUILDER:

PARCEL NUMBER:

NUMBER OF HEATING UNITS: 2
NUMBER OF REGISTERS: 20
LICENSE NUMBER: 22354
COST: 6100.00

NUMBER OF AIR HANDLERS: 2
TONNAGE: 3 TON
WORK ORDER NUMBER:
Permit Cost: 1150.00

If repairing or altering, please describe work:
REPAIR LOWER HEAT PUMP SYSTEM AND INSTALL NEW RUD 3 TON 14 SEER SYSTEM

CALL BUILDING INSPECTOR 24 HOURS IN ADVANCE FOR ALL INSPECTIONS

DATE OF ISSUANCE: 3/23/21 SEALS: [Signature] (Applicant)

[Signature] (Inspector)

(UPDATED 7/2017)

colin Cushnie



PERMIT NUMBER: 5000

BUILDING PERMIT

DATE: March 20, 2021

OWNER: Mt. Olivet UMC
ADDRESS: 300 Ananias Dare St.
CITY: Manteo STATE: NC ZIP: _____

BUILDER: Paul A. Creef Custom Homes
CONTRACTOR LICENSE #: 28283
ADDRESS: 1318 US Hwy 64
CITY: Manteo STATE: NC ZIP: 27954
PHONE: 252 480-8053

LOCATION OF BUILDING SITE: 300 Ananias Dare St. ZONING DISTRICT: _____
PARCEL NUMBER: 024559000 FLOOD ZONE: x BFE: _____ FFE: _____
NC POWER WORK REQUEST NUMBER OR POWER METER NUMBER (IF APPLICABLE) _____
ERECT: _____ ALTER: x REPAIR: _____

SQUARE FOOTAGE OF HEATED SPACE: 22399 UNHEATED SPACE: _____
NUMBER OF STORIES: 2 ROOMS: _____ BATHS: _____ FIREPLACES: _____
FINISHES: _____
EXTERIOR WALLS: mix INTERIOR WALLS: mix ROOF TYPE AND MATERIAL: asphalt
HEAT TYPE: heat pump INSULATION & R VALUE: _____ FLOORING: _____
FOOTING: _____ FOUNDATION: _____

ADDITIONAL NOTES: Propose to open two first floor nursery rooms up with header to create appx. 14' cased opening. Open two second floor classrooms to create one large room. Alterations are in the old part of the educational building (1940's-1950's). Work as specified in engineers report from Kitty Hawk Engineering, Barrett Crook

EACH APPLICATION MUST BE ACCOMPANIED BY:

- SITE PLAN SHOWING ACTUAL DIMENSIONS OF THE LOT, ALL STRUCTURES, DRIVEWAYS AND PARKING
- TWO SETS OF WORKING DRAWINGS
- ELEVATION OF THE SITE
- RESTAURANTS: HEALTH DEPARTMENT APPROVALS
- CAMA PERMIT IF REQUIRED

*** CALL BUILDING INSPECTOR 24 HOURS IN ADVANCE FOR ALL INSPECTIONS***

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Estimated or Contract Cost: \$7500.00 Permit Cost: Review 50.00

Date of Issuance: 3/22/21 125.00

Seals: Paul A. Creef
Applicant

[Signature]
Inspector

[Signature]
Zoning Official

Conditions of Permit: _____



025536022

BUILDING PERMIT

PERMIT NUMBER: 5001

DATE: 3.2.21

OWNER: Lisa McGaha
ADDRESS: 800 Lindsey Lane
CITY: Manteo STATE: NC ZIP: 27954
PHONE: 704-756-6264

BUILDER: Emanuelson's Dad Inc
ADDRESS: P.O. Box 448
CITY: Nags Head STATE: NC ZIP: 27959
PHONE: 252-261-2212

LOCATION OF BUILDING SITE: 800 Lindsey Lane

ZONING DISTRICT: _____

FLOOD ZONE: X BASE FLOOD ELEVATION: _____ FINISHED FLOOR ELEVATION: _____

ERECT: ALTER: REPAIR:

SQUARE FOOTAGE OF HEATED SPACE: _____ UNHEATED SPACE: _____

NUMBER OF STORIES: _____ ROOMS: _____ BATHS: _____ FIREPLACES: _____

EXTERIOR WALLS: _____ FINISH: _____ INTERIOR WALLS: _____ ROOF TYPE AND MATERIAL: _____
HEAT TYPE: _____ INSULATION & R VALUE: _____ FLOORING: _____
FOOTING: _____ FOUNDATION: _____

ADDITIONAL NOTES:
2' high x 74' Wood Retaining Wall

EACH APPLICATION MUST BE ACCOMPANIED BY

- Site Plan showing actual dimensions of the lot, all structures driveways and parking
- A set of working drawings
- Elevation of site
- Approximate setbacks of all buildings on adjoining lots
- Restaurants, Health Department Approvals
- CAMA permit if required

CALL BUILDING INSPECTOR 24 HOURS IN ADVANCE FOR ALL INSPECTIONS

This building is to be erected or altered in accordance with the latest edition of the General Building Laws of the State of North Carolina and all amendments as adopted by the Town of Manteo. This permit is valid for six (6) months. Compliance with Building Regulations is the responsibility of the undersigned applicant. Any change in construction or site plans will be subject to prior notification and approval of the Planning Department and the Building Inspector.

ESTIMATED OR CONTRACT COST: 8062.00

REVIEW 50.00
Permit Cost: 74.00
124.00

DATE OF ISSUANCE: 3/30/21

SEAL: L. Howard Emanuelson
(Applicant)

[Signature]
(Inspector)

[Signature]
(Zoning Official)

CONDITIONS OF PERMIT



BUILDING PERMIT

PERMIT NUMBER: 5002

DATE: 3/25/2021

OWNER: Thomas Rose
ADDRESS: 110 Wampum Dr.
CITY: Duck STATE: NC ZIP: 27949

BUILDER: Godfrey Construction, LLC
CONTRACTOR LICENSE #: 66982
ADDRESS: 114 W. Meadowlark St.
CITY: Kill Devil Hills STATE: NC ZIP: 27948
PHONE: 252-261-8600

LOCATION OF BUILDING SITE: 806 Lindsey Ln. ZONING DISTRICT: 10- Manteo In
PARCEL NUMBER: 025536025 FLOOD ZONE: _____ BFE: _____ FFE: _____
NC POWER WORK REQUEST NUMBER OR POWER METER NUMBER (IF APPLICABLE) _____
ERECT: _____ ALTER: X REPAIR: _____

SQUARE FOOTAGE OF HEATED SPACE: 1321 UNHEATED SPACE: 264
NUMBER OF STORIES: 1 ROOMS: 2 BATHS: 3 FIREPLACES: _____
FINISHES: _____
EXTERIOR WALLS: Wood INTERIOR WALLS: Wood ROOF TYPE AND MATERIAL: Asphalt
HEAT TYPE: Forced Air INSULATION & R VALUE: _____ FLOORING: _____
FOOTING: Pilings FOUNDATION: _____

ADDITIONAL NOTES: We will cut out a 54" X 72" section of the wood grade level deck and replace with a 3" slab of concrete for a wheel chair lift to be installed by others. We will provide power to the lift by running a Circuit from the disconnect to lift location. A section of handrail will be removed for access.

EACH APPLICATION MUST BE ACCOMPANIED BY:

- SITE PLAN SHOWING ACTUAL DIMENSIONS OF THE LOT, ALL STRUCTURES, DRIVEWAYS AND PARKING
- TWO SETS OF WORKING DRAWINGS
- ELEVATION OF THE SITE
- RESTAURANTS: HEALTH DEPARTMENT APPROVALS
- CAMA PERMIT IF REQUIRED

*** CALL BUILDING INSPECTOR 24 HOURS IN ADVANCE FOR ALL INSPECTIONS***

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Estimated or Contract Cost: \$7,500.00

Permit Cost: 75.00

Date of Issuance: 3/30/21

Review 50.00

\$125.00

Seals: *Paul Rose*
Applicant

[Signature]
Inspector

[Signature]
Zoning Official

Conditions of Permit: _____



Shaneoneil1028@yahoo.com

ELECTRICAL PERMIT

PERMIT NUMBER: 5003

DATE: 03/29/2021

OWNER: Rebecca Pope
ADDRESS: 31 Hammock Drive
CITY: Manteo STATE: NC ZIP: _____
PHONE: _____

CONTRACTOR: Shane O'Neill
ADDRESS: 432 Kitty Hawk Bay Drive
CITY: KDH STATE: NC ZIP: 27948
PHONE: (252) 202-8744

LOCATION: Pirates Cove PARCEL NUMBER: 025694231
BUILDER: Shane O'Neill

RESIDENTIAL: NEW ALTERATION
COMMERCIAL: NEW ALTERATION

NC POWER WORK REQUEST NUMBER OR POWER METER NUMBER (IF APPLICABLE) _____

SERVICE AMPS: _____ INCREASED TO: _____

LICENSE NUMBER: 89874 WORK ORDER NUMBER: _____

COST: 11,000.00 Permit Cost: 150.00

If repairing or altering, please describe work: adding Generac Generator / 200 amps with stand Above base flood.

CALL BUILDING INSPECTOR 24 HOURS IN ADVANCE FOR ALL INSPECTIONS

DATE OF ISSUANCE: 3/31/21 SEALS: Shane O'Neill
(Applicant)

[Signature]
(Inspector)