



Town of Kill Devil Hills

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

PAID

MAY - 3 2021

Planning and Inspection Department

TOWN OF
KILL DEVIL HILLS

BJ2021-101

PROJECT NAME: Holloman Renovation
SITE ADDRESS: 120 SPORTSMAN DR E KILL DEVIL HILLS

BUILDING JOINT

ISSUED: 04/27/2021

EXPIRES: 10/24/2021

APPLICANT: HOLLOMAN, KATHRYN
4120 Fort Worth Pl
ALEXANDRIA, VA 22304

OWNER: HOLLOMAN, KATHRYN
4120 Fort Worth Pl
ALEXANDRIA, VA 22304

CONTRACTOR: Albemarle Contractors, Inc.
P.O. Box 146
Kitty Hawk, NC 27949
252-256-1883

GENERAL BUILDING: Albemarle Contractors, Inc.
P.O. Box 146
Kitty Hawk, NC 27949
252-256-1883

License: 53487
Expires:

PARCEL:

PIN: 988517213138

Parcel Number: 001687000

Address: 120 SPORTSMAN DR E KILL DEVIL HILLS

Addition: AVALON BEACH

Zoning:

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

Legal Description:

FEES:	Paid	Due	BUILDING AREA:
Building Permit Fee - Minimum Fee	\$150.00	\$0.00	Open Decks 2 EA
Open Deck Fee	\$300.00	\$0.00	
Totals :	\$450.00	\$0.00	

PROJECT DESCRIPTION: lift existing house install new 8x8 pilings, reset house, new windows, roofing, siding and decks, rebuild front stairs to meet setbacks

BJ2021-101

PROJECT NAME: Holloman Renovation

SITE ADDRESS: 120 SPORTSMAN DR E KILL DEVIL HILLS

BUILDING JOINT

ISSUED: 04/27/2021

EXPIRES: 10/24/2021

DETAILS**Permit**

Name	Value
ZONING DISTRICT	C
FRONT YARD SETBACK	15
REAR YARD SETBACK	20% Depth >30
SIDE YARD SETBACK	6
# PARKING SPACES/BEDROOM	3
CAMA PERMIT	N
CAMA EXEMPTION	N
FLOOD ZONE	X
SUBSTANTIAL IMPROVEMENT	YES
PURPOSE	Residential Repair/Remodel
CONSTRUCTION COST	129405.53
LOT COVERAGE	38.60
SURVEYOR NAME AND NUMBER	Doug Styons L-3227
CULVERT	N
DRIVEWAY INVERT 2	N
OCCUPANCY TYPE	One & Two Family Dwelling

REQUIRED INSPECTIONS

Slab/Foundation/Piling	Final
Framing	Zoning Final
Rough In	

CONDITIONS

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

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

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

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

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

BJ2021-101

PROJECT NAME: Holloman Renovation

SITE ADDRESS: 120 SPORTSMAN DR E KILL DEVIL HILLS

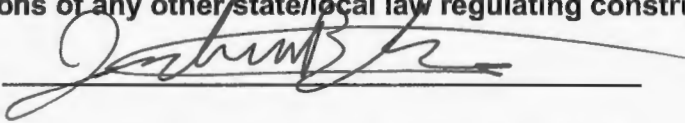
BUILDING JOINT

ISSUED: 04/27/2021

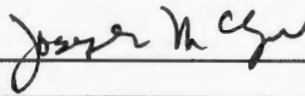
EXPIRES: 10/24/2021

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

Issued By: _____



Contractor or Authorized Agent: _____



Date: _____

5-3-21



Town of Kill Devil Hills

PO BOX 1719
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Phone: 252-449-5318 Fax: 252-441-4102

PAID

MAY 10 2021

Planning and Inspection Department

TOWN OF
KILL DEVIL HILLS

BJ2021-103	BUILDING JOINT
PROJECT NAME: Boyd Shed and Driveway	ISSUED: 05/04/2021
SITE ADDRESS: 1304 Elizabeth St. Kill Devil Hills	EXPIRES: 10/31/2021

APPLICANT: BOYD, TROY
1304 Elizabeth St
Kill Devil Hills, NC 27948

OWNER: BOYD, TROY
1304 Elizabeth St
Kill Devil Hills, NC 27948

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

License: Unlicensed
Expires: 12/31/2021

PARCEL:

PIN: 988312850149

Parcel Number: 027354001

Address: 1304 Elizabeth St. Kill Devil Hills

Addition: KILL DEVIL BEACH EXTENDED

Zoning:
Block: 1 **Lot(s):** 2

Legal Description:

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

PROJECT DESCRIPTION: add 12'x12' shed to rear yard, driveway addition and outdoor shower to rear of house

PAID
5/10/2021
2047

BJ2021-103

PROJECT NAME: Boyd Shed and Driveway
SITE ADDRESS: 1304 Elizabeth St. Kill Devil Hills

BUILDING JOINT

ISSUED: 05/04/2021

EXPIRES: 10/31/2021

DETAILS**Permit**

Name	Value
ZONING DISTRICT	RL
FRONT YARD SETBACK	30
REAR YARD SETBACK	20% Depth >30
SIDE YARD SETBACK	8
HEALTH DEPARTMENT PERMIT #	28068
# PARKING SPACES/BEDROOM	3
CAMA PERMIT	N
CAMA EXEMPTION	N
FLOOD ZONE	X
SUBSTANTIAL IMPROVEMENT	NO
PURPOSE	Residential Accessory
CONSTRUCTION COST	6000.00
LOT COVERAGE	37.00
SURVEYOR NAME AND NUMBER	Jason Mizelle 4917
CULVERT	N
DRIVEWAY INVERT 2	N
OCCUPANCY TYPE	One & Two Family Dwelling

REQUIRED INSPECTIONS

Slab/Foundation/Piling	Final
Framing	Zoning Final

CONDITIONS

- * NOTICE: Call Public Services Department (252) 480-4080 before pouring driveway!
- * This permit becomes null and void if work or construction authorized is not commenced within 6 months or if construction or work is suspended for a period of 12 months at any time after work has started.
- * As-built survey will be required prior to Certificate of Occupancy or Certificate of Compliance.
- * Construction must meet all aspect of Chapter 153 Zoning including lot coverage and setbacks.
- * Per Public Services, keep same elevation as existing driveway.

BJ2021-103

PROJECT NAME: Boyd Shed and Driveway
SITE ADDRESS: 1304 Elizabeth St. Kill Devil Hills

BUILDING JOINT

ISSUED: 05/04/2021

EXPIRES: 10/31/2021

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Issued By: M. Shaw

Contractor or Authorized Agent: Tony Bond Date: 5/10/21



Town of Kill Devil Hills

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MAY 11 2021

Planning and Inspection Department

TOWN OF
KILL DEVIL HILLS

BJ2021-107

PROJECT NAME: CHRISTINA KUHAR
SITE ADDRESS: 403 CHOWAN ST W KILL DEVIL HILLS

BUILDING JOINT

ISSUED: 05/07/2021

EXPIRES: 11/03/2021

APPLICANT: KUHAR, CHRISTINA
403 W Chowan St
Kill Devil Hills, NC 27948
252-207-1414

OWNER: KUHAR, CHRISTINA
403 W Chowan St
Kill Devil Hills, NC 27948
252-207-1414

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

License: Unlicensed
Expires: 12/31/2021

PARCEL:

PIN: 987520925096

Parcel Number: 026666000

Address: 403 CHOWAN ST W KILL DEVIL HILLS

Zoning:

Addition: VIRGINIA DARE SHORES

Block: 57

Lot(s): 19-20

Legal Description:

FEES:	<u>Paid</u>	<u>Due</u>
Building Permit Fee - Minimum Fee	\$150.00	\$0.00
Totals :	\$150.00	\$0.00

PROJECT DESCRIPTION: CONSTRUCT WALLS AND INSTALL PLUMBING FOR OUTDOOR SOAKING TUB



PAID
5/11/21

99

BJ2021-107**PROJECT NAME:** CHRISTINA KUHAR**SITE ADDRESS:** 403 CHOWAN ST W KILL DEVIL HILLS**BUILDING JOINT****ISSUED:** 05/07/2021**EXPIRES:** 11/03/2021**DETAILS****Permit**

Name	Value
ZONING DISTRICT	RL
FRONT YARD SETBACK	15
REAR YARD SETBACK	20% Depth >30
SIDE YARD SETBACK	6
CAMA PERMIT	N
CAMA EXEMPTION	N
FLOOD ZONE	X
SUBSTANTIAL IMPROVEMENT	NO
CONSTRUCTION TYPE	V
CONSTRUCTION COST	2000.00
CULVERT	N
DRIVEWAY INVERT 2	N
OCCUPANCY TYPE	One & Two Family Dwelling

REQUIRED INSPECTIONS

Framing	Final
Rough In	

CONDITIONS

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

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

BJ2021-107

PROJECT NAME: CHRISTINA KUHAR

SITE ADDRESS: 403 CHOWAN ST W KILL DEVIL HILLS

BUILDING JOINT

ISSUED: 05/07/2021

EXPIRES: 11/03/2021

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Issued By: Jordan Blythe

Contractor or Authorized Agent: Christina Kuhar Date: 05 / 07 / 2021



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MAY 11 2021

Planning and Inspection Department

BJ2021-108

PROJECT NAME: Davis Bathroom Remodel
SITE ADDRESS: 1515 VILLAGE LN KILL DEVIL HILLS

BUILDING JOINT

ISSUED: 05/11/2021

EXPIRES: 11/07/2021

APPLICANT: Davis, Wanda
12012 Prince George Drive
Disputanta, VA 23842
804-704-2285

OWNER: Davis, Wanda
12012 Prince George Drive
Disputanta, VA 23842
804-704-2285

CONTRACTOR: Econo Cleaning Service, INC
615 Canal DR
Kill Devil Hills, NC 27948
252-256-3707

UNLICENSED - REMODELING: Econo Cleaning Service, INC
615 Canal DR
Kill Devil Hills, NC 27948
252-256-3707

License: 0
Expires:

PARCEL:

PIN: 988410256086

Parcel Number: 003383000

Address: 1515 VILLAGE LN KILL DEVIL HILLS

Addition: FIRST FLIGHT VILLAGE SEC 1

Zoning:
Block: 0 **Lot(s):** 114

Legal Description:

FEES:	Paid	Due
Building Permit Fee - Minimum Fee	\$150.00	\$0.00
Renovation/ Remodel/Relocate (MIN)	\$100.00	\$0.00
Totals :	\$250.00	\$0.00

PROJECT DESCRIPTION: remodel existing interior bathroom

BJ2021-108**PROJECT NAME:** Davis Bathroom Remodel
SITE ADDRESS: 1515 VILLAGE LN KILL DEVIL HILLS**BUILDING JOINT****ISSUED:** 05/11/2021**EXPIRES:** 11/07/2021**DETAILS****Permit**

Name	Value
ZONING DISTRICT	RL
CAMA PERMIT	N
CAMA EXEMPTION	N
FLOOD ZONE	X
SUBSTANTIAL IMPROVEMENT	NO
PURPOSE	Residential Repair/Remodel
CONSTRUCTION TYPE	V
CONSTRUCTION COST	21489.61
CULVERT	N
DRIVEWAY INVERT 2	N
OCCUPANCY TYPE	One & Two Family Dwelling

REQUIRED INSPECTIONS

Framing	Final
Rough In	Zoning Final
Insulation	

CONDITIONS

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Issued By: _____**Contractor or Authorized Agent:** _____**Date:** 5-11-21



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MAY 12 2021

Planning and Inspection Department

TOWN OF
KILL DEVIL HILLS

BJ2021-115	BUILDING JOINT
PROJECT NAME: Cathie Feild	ISSUED: 05/12/2021
SITE ADDRESS: 1110 CHARLOTTE LN KILL DEVIL HILLS	EXPIRES: 11/08/2021

APPLICANT: GODFREY CONSTRUCTION CO. P.O. Box 694 Kill Devil Hills, NC 27948 252-202-1469	OWNER: Feild, Cathie 2515 Compass Lane Nags Head, NC 27959 919-428-7314
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GENERAL BUILDING - UNLIMITED:	GODFREY CONSTRUCTION CO. P.O. Box 694 Kill Devil Hills, NC 27948 252-202-1469	License: 66982 Expires: 01/05/2022
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PARCEL:

PIN: 988409073330	Parcel Number: 002165065
Address: 1110 CHARLOTTE LN KILL DEVIL HILLS	Zoning:
Addition: WRIGHT'S SHORES SEC 2	Block: 0 Lot(s): 65
Legal Description:	

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

PROJECT DESCRIPTION: Replace rot damaged subfloor, Replace cabinets, flooring and repaint house

PAID
5/12/21
pay per

BJ2021-115

PROJECT NAME: Cathie Feild
SITE ADDRESS: 1110 CHARLOTTE LN KILL DEVIL HILLS

BUILDING JOINT

ISSUED: 05/12/2021

EXPIRES: 11/08/2021

DETAILS**Permit**

Name	Value
ZONING DISTRICT	RL
CAMA PERMIT	N
CAMA EXEMPTION	N
FLOOD ZONE	X
SUBSTANTIAL IMPROVEMENT	NO
PURPOSE	Residential Repair/Remodel
CONSTRUCTION TYPE	V
CONSTRUCTION COST	28750.00
CULVERT	N
DRIVEWAY INVERT 2	N
OCCUPANCY TYPE	One & Two Family Dwelling

REQUIRED INSPECTIONS

Framing	Final
Rough In	Zoning Final
Insulation	

CONDITIONS

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

BJ2021-115

PROJECT NAME: Cathie Feild

SITE ADDRESS: 1110 CHARLOTTE LN KILL DEVIL HILLS

BUILDING JOINT

ISSUED: 05/12/2021

EXPIRES: 11/08/2021

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Issued By: Marty Shaw

Contractor or Authorized Agent:  Date: 05 / 12 / 2021



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MAY 20 2021

Planning and Inspection Department

TOWN OF
KILL DEVIL HILLS

BJ2020-273

PROJECT NAME: Robert Johnson
SITE ADDRESS: 518 BURNS DR KILL DEVIL HILLS

BUILDING JOINT

ISSUED: 05/19/2021

EXPIRES: 11/15/2021

APPLICANT: Creecy, David
226 Rhodoms Dr.
Kill Devil Hills, NC 27948
252-202-9872

OWNER: JOHNSON, ROBERT A
111 EAST BARNES ST.
NAGS HEAD, NC 27959

ELECTRICAL: Creecy, David
226 Rhodoms Dr.
Kill Devil Hills, NC 27948
252-202-9872

License: 6283-L
Expires: 01/31/2022

GENERAL-LIMITED: Creecy, David
226 Rhodoms Dr.
Kill Devil Hills, NC 27948
252-202-9872

License: 55113
Expires: 12/31/2021

PARCEL:

PIN: 988316725793

Parcel Number: 005094000

Address: 518 BURNS DR KILL DEVIL HILLS

Zoning:

Addition:

Block: 0 **Lot(s):** 5

Legal Description:

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

PROJECT DESCRIPTION: Pool and pool deck

BJ2020-273**PROJECT NAME:** Robert Johnson
SITE ADDRESS: 518 BURNS DR KILL DEVIL HILLS**BUILDING JOINT****ISSUED:** 05/19/2021**EXPIRES:** 11/15/2021

DETAILS**Permit**

Name	Value
ZONING DISTRICT	RL
FRONT YARD SETBACK	30
REAR YARD SETBACK	30
SIDE YARD SETBACK	20
HEALTH DEPARTMENT PERMIT #	30275
CAMA PERMIT	N
CAMA EXEMPTION	N
FLOOD ZONE	X
SUBSTANTIAL IMPROVEMENT	NO
PURPOSE	Residential Accessory
CONSTRUCTION COST	75000.00
LOT COVERAGE	28.00
SURVEYOR NAME AND NUMBER	Styons Surveying Services
ENGINEER AND LICENSE NUMBER	Carlos Gomez 14071
CULVERT	N
DRIVEWAY INVERT 2	N
OCCUPANCY TYPE	One & Two Family Dwelling

REQUIRED INSPECTIONS

Pool Bonding	Final
Slab/Foundation/Piling	Zoning Final
Framing	

CONDITIONS

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

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

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

BJ2020-273

PROJECT NAME: Robert Johnson
SITE ADDRESS: 518 BURNS DR KILL DEVIL HILLS

BUILDING JOINT

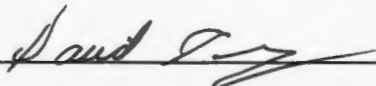
ISSUED: 05/19/2021

EXPIRES: 11/15/2021

- * Per §153.082(B)(1)(c) Mechanical equipment, including HVAC equipment and LP Gas equipment shall not project into a minimum yard setback more than four (4) feet.
- * Construction must meet all aspect of Chapter 153 Zoning including lot coverage and setbacks.
- * Must comply with Wind Borne Debris requirements as defined in NCBC R301.2.1.2 and NCBC 1609.2.
- * Zoning Final Inspection is required.

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Issued By:  _____

Contractor or Authorized Agent:  _____ Date: 5-20-21



Town of Kill Devil Hills

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

PAID

MAY 20 2021

TOWN OF
KILL DEVIL HILLS

Planning and Inspection Department

BJ2021-114

PROJECT NAME: John and Nancy Winstead
SITE ADDRESS: 117 GREENSBORO ST KILL DEVIL HILLS

BUILDING JOINT

ISSUED: 05/12/2021

EXPIRES: 11/08/2021

APPLICANT: OVERTON CORPORATION
PO Box 7804
Kill Devil Hills, NC 27948
252-207-1121

OWNER: John & Nancy Winstead
1165 Valley Rd.
FAIRFIELD, CT 06825
205-913-3825

GENERAL BUILDING - UNLIMITED: OVERTON CORPORATION
1703 Harbour View Drive
PO Box 3989
Kill Devil Hills, NC 27948

License: 54642
Expires: 01/01/2022

PARCEL:

PIN: 988406299916

Parcel Number: 001877000

Address: 117 GREENSBORO ST KILL DEVIL HILLS

Zoning:

Addition: AVALON BEACH ANNEX 1

Block: 0 **Lot(s):** 433

Legal Description:

FEES:	Paid	Due
Building Permit Fee - Minimum Fee	\$150.00	\$0.00
Renovation/ Remodel/Relocate (MIN)	\$100.00	\$0.00
Totals :	\$250.00	\$0.00

PROJECT DESCRIPTION: Renovate existing home - siding, roofing, decking, handrails, kitchen, flooring, bathrooms

BJ2021-114**PROJECT NAME:** John and Nancy Winstead
SITE ADDRESS: 117 GREENSBORO ST KILL DEVIL HILLS**BUILDING JOINT****ISSUED:** 05/12/2021**EXPIRES:** 11/08/2021

DETAILS**Permit**

Name	Value
ZONING DISTRICT	RL
FRONT YARD SETBACK	15
REAR YARD SETBACK	20% Depth >30
SIDE YARD SETBACK	6
CAMA PERMIT	N
CAMA EXEMPTION	N
FLOOD ZONE	X
SUBSTANTIAL IMPROVEMENT	NO
PURPOSE	Residential Repair/Remodel
CONSTRUCTION TYPE	V
CONSTRUCTION COST	115000.00
CULVERT	N
DRIVEWAY INVERT 2	N
OCCUPANCY TYPE	One & Two Family Dwelling

REQUIRED INSPECTIONS

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

CONDITIONS

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

BJ2021-114

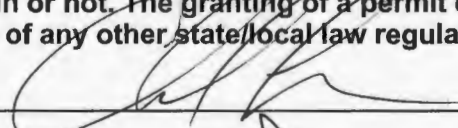
PROJECT NAME: John and Nancy Winstead
SITE ADDRESS: 117 GREENSBORO ST KILL DEVIL HILLS

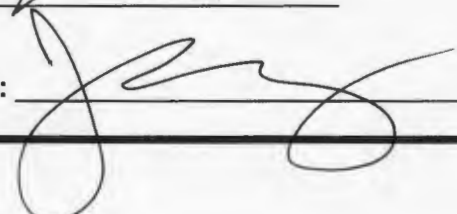
BUILDING JOINT

ISSUED: 05/12/2021

EXPIRES: 11/08/2021

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Issued By:  _____

Contractor or Authorized Agent:  _____ Date: 5/20/21



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PAID

MAY 21 2021

Planning and Inspection Department

TOWN OF
KILL DEVIL HILLS

BJ2021-083

PROJECT NAME: Richard Coder
SITE ADDRESS: 703 MEMORIAL BLVD N KILL DEVIL HILLS

BUILDING JOINT

ISSUED: 03/30/2021

EXPIRES: 09/26/2021

APPLICANT: Four Seasons Pools
One Ocean Blvd.
Kitty Hawk, NC 27949
252-207-5001

OWNER: RICHARD CODER
6528 Windham Ave.
Alexandria, VA 22315

POOL: Four Seasons Pools
One Ocean Blvd.
Kitty Hawk, NC 27949
252-207-5001

License: 0000000
Expires: 06/30/2021

PARCEL:

PIN: 988419722274

Parcel Number: 003734000

Address: 703 MEMORIAL BLVD N KILL DEVIL HILLS

Addition: KITTY HAWK SHORES - REVISED

Zoning:

Block: 21 **Lot(s):** 7

Legal Description:

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

PROJECT DESCRIPTION: Install in ground pool, pool deck and fence

PAID
Vc 5/21/21
check #20891

BJ2021-083**PROJECT NAME:** Richard Coder**SITE ADDRESS:** 703 MEMORIAL BLVD N KILL DEVIL HILLS**BUILDING JOINT****ISSUED:** 03/30/2021**EXPIRES:** 09/26/2021**DETAILS****Permit**

Name	Value
ZONING DISTRICT	RH
FRONT YARD SETBACK	30
REAR YARD SETBACK	20% Depth >30
SIDE YARD SETBACK	8
HEALTH DEPARTMENT PERMIT #	30466
CAMA PERMIT	N
CAMA EXEMPTION	N
FLOOD ZONE	X
SUBSTANTIAL IMPROVEMENT	NO
PURPOSE	Residential Accessory
CONSTRUCTION COST	45000.00
LOT COVERAGE	49.50
SURVEYOR NAME AND NUMBER	Michael Robinson
CULVERT	N
DRIVEWAY INVERT 2	N
OCCUPANCY TYPE	One & Two Family Dwelling

REQUIRED INSPECTIONS

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

CONDITIONS

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

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

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

BJ2021-083

PROJECT NAME: Richard Coder

SITE ADDRESS: 703 MEMORIAL BLVD N KILL DEVIL HILLS

BUILDING JOINT

ISSUED: 03/30/2021

EXPIRES: 09/26/2021

- * Construction must meet all aspect of Chapter 153 Zoning including lot coverage and setbacks.
- * Zoning Final Inspection is required.
- * As-built survey will be required prior to Certificate of Occupancy or Certificate of Compliance.

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

Issued By: Marty Shaw

Contractor or Authorized Agent: [Signature] Date: 05 / 21 / 2021



Town of Kill Devil Hills

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

Planning and Inspection Department

BJ2021-119	BUILDING JOINT
PROJECT NAME: Remodel House Under Construction Reducing Bedroom Count	ISSUED: 05/26/2021
SITE ADDRESS: 600 AIRSTRIP RD W KILL DEVIL HILLS	EXPIRES: 11/22/2021

APPLICANT: GROUP HOLDINGS LLC 353 SOUNDVIEW DR Kill Devil Hills, NC 27948 252-202-1292	OWNER: GROUP HOLDINGS LLC 353 SOUNDVIEW DR Kill Devil Hills, NC 27948 252-202-1292
--	--

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

GENERAL, UNLIMITED:	COASTAL CONSTRUCTION of NC 7013 Martins Pt. Rd. kitty hawk, nc 27949 480-5556	License: 25529 Expires: 01/01/2022
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PARCEL:

PIN: 988312766208	Parcel Number: 004512000
Address: 600 AIRSTRIP RD W KILL DEVIL HILLS	Zoning:
Addition: KILL DEVIL HILLS REALTY CORP	Block: 40 Lot(s): 4
Legal Description:	

FEES:	Paid	Due
Renovation/ Remodel/Relocate (MIN)	\$100.00	\$0.00
Totals :	\$100.00	\$0.00

PROJECT DESCRIPTION: reduce bedrooms from 7 to 6, reconfigure parking and driveway

PAID
MAY 26 2021

BJ2021-119**PROJECT NAME:** Remodel House Under Construction Reducing
Bedroom Count
SITE ADDRESS: 600 AIRSTRIP RD W KILL DEVIL HILLS**BUILDING JOINT**

ISSUED: 05/26/2021

EXPIRES: 11/22/2021

DETAILS**Permit**

Name	Value
ZONING DISTRICT	RL
FRONT YARD SETBACK	30
REAR YARD SETBACK	30
SIDE YARD SETBACK	10
STREET SIDE SETBACK	15
HEALTH DEPARTMENT PERMIT #	30455
# PARKING SPACES/BEDROOM	6
CAMA PERMIT	N
CAMA EXEMPTION	N
FLOOD ZONE	X
SUBSTANTIAL IMPROVEMENT	NO
PURPOSE	Residential Repair/Remodel
CONSTRUCTION COST	2000.00
LOT COVERAGE	29.72
SURVEYOR NAME AND NUMBER	Fredrick House
CULVERT	N
DRIVEWAY INVERT 2	N
OCCUPANCY TYPE	One & Two Family Dwelling

REQUIRED INSPECTIONSRough In
Final

Zoning Final

CONDITIONS

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

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

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

BJ2021-119

PROJECT NAME: Remodel House Under Construction Reducing
Bedroom Count
SITE ADDRESS: 600 AIRSTRIP RD W KILL DEVIL HILLS

BUILDING JOINT

ISSUED: 05/26/2021

EXPIRES: 11/22/2021

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

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

Issued By: _____

Contractor or Authorized Agent: Matt Tignino

Date: 5/26/21



Town of Kill Devil Hills

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

MAY 28 2021

Planning and Inspection Department

BJ2021-061

PROJECT NAME: Vigil Rear Porch Conversion
SITE ADDRESS: 806 FIRST ST W KILL DEVIL HILLS

BUILDING JOINT

ISSUED: 04/12/2021

EXPIRES: 10/09/2021

APPLICANT: VIGIL, ALEX
806 W First Street
Kill Devil Hills, NC 27948

OWNER: VIGIL, ALEX
806 W First Street
Kill Devil Hills, NC 27948

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

License: Unlicensed
Expires: 12/31/2021

PARCEL:

PIN: 988413135610

Parcel Number: 027546122

Address: 806 FIRST ST W KILL DEVIL HILLS

Zoning:

Addition:

Block: 0 **Lot(s):** 122

Legal Description:

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

PROJECT DESCRIPTION: convert rear porch to living space, add driveway addition

BJ2021-061

PROJECT NAME: Vigil Rear Porch Conversion
SITE ADDRESS: 806 FIRST ST W KILL DEVIL HILLS

BUILDING JOINT

ISSUED: 04/12/2021

EXPIRES: 10/09/2021

- * Development must meet all aspects of Chapter 151 Flood Damage Prevention Ordinance including use and elevation.
- * Construction must meet all aspect of Chapter 153 Zoning including lot coverage and setbacks.

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

Issued By: Marty Shaw

Contractor or Authorized Agent: [Signature] Date: 5/28/21



Town of Kill Devil Hills

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

MAY 11 2021

Planning and Inspection Department

BJ2021-096	BUILDING JOINT
PROJECT NAME: Michael Williams	ISSUED: 05/04/2021
SITE ADDRESS: 802 Sixth Avenue Kill Devil Hills	EXPIRES: 10/31/2021

APPLICANT: Gregory Butcher
119 Lee Crt
Kill Devil Hills, NC 27948
207-8727

OWNER: Williams, Mike
242 Roanoke Dr.
Kill Devil Hills, NC 27948
252-202-2111

GENERAL - LIMITED: Gregory Butcher
119 Lee Crt
Kill Devil Hills, NC 27948
207-8727

License: 47105
Expires:

PARCEL:

PIN: 988311770274

Parcel Number:

004631012

Address: 802 Sixth Avenue Kill Devil Hills

Zoning:

Addition:

Block:

Lot(s):

Legal Description: Lot 2, Block 38, Kill Devil Hills Realty Corp Addition

FEES:	<u>Paid</u>	<u>Due</u>	BUILDING AREA:	
T-Pole	\$50.00	\$0.00	Residential Heated Space	1684 sq. Ft.
Covered Porch Residential	\$168.00	\$0.00	(.75)	
Open Deck Fee	\$150.00	\$0.00	Open Decks	1 EA
Res. Building Permit Fee	\$1,445.40	\$0.00	Covered Porches/Decks	224 SQFT
Totals :	\$1,813.40	\$0.00	Residential Unheated (.40)	456 Sq. Ft
			# of Temporary Poles	1 EA

PROJECT DESCRIPTION: Proposed 4 bedroom single family dwelling

Town of Kill Devil Hills

Water Charges

PAID

Water Tap #: _____

BJ2021-096**PROJECT NAME:** Michael Williams**SITE ADDRESS:** 802 Sixth Avenue Kill Devil Hills**BUILDING JOINT****ISSUED:** 05/04/2021**EXPIRES:** 10/31/2021

DETAILS**Permit**

Name	Value
ZONING DISTRICT	RL
FRONT YARD SETBACK	30
REAR YARD SETBACK	20% Depth >30
SIDE YARD SETBACK	10
HEALTH DEPARTMENT PERMIT #	30695
# PARKING SPACES/BEDROOM	4
CAMA PERMIT	N
CAMA EXEMPTION	N
FLOOD ZONE	X
SUBSTANTIAL IMPROVEMENT	YES
PURPOSE	Residential New
CONSTRUCTION TYPE	V
CONSTRUCTION COST	250000.00
LOT COVERAGE	25.00
LIVING SPACE (SQFT)	1684
COVERED PORCHES/DECKS (SQFT)	224
STORAGE (SQFT)	224
OPEN DECK (SQFT)	64
TOTAL SQUARE FOOTAGE	2428
SURVEYOR NAME AND NUMBER	BILD
ENGINEER AND LICENSE NUMBER	Mike O'Steen 032628
CULVERT	N
DRIVEWAY INVERT 2	N
OCCUPANCY TYPE	One & Two Family Dwelling

BJ2021-096

PROJECT NAME: Michael Williams
SITE ADDRESS: 802 Sixth Avenue Kill Devil Hills

BUILDING JOINT

ISSUED: 05/04/2021

EXPIRES: 10/31/2021

REQUIRED INSPECTIONS

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

Insulation
Final
Zoning Final

CONDITIONS

- * NOTICE: Call Public Services Department (252) 480-4080 before pouring driveway!
- * This permit becomes null and void if work or construction authorized is not commenced within 6 months or if construction or work is suspended for a period of 12 months at any time after work has started.
- * As-built survey will be required prior to Certificate of Occupancy or Certificate of Compliance.
- * The developer shall be responsible for maintaining erosion and sediment control at the disturbed area.
- * Development must meet all aspects of Chapter 151 Flood Damage Prevention Ordinance including use and elevation.
- * Per §153.082(B)(1)(c) Mechanical equipment, including HVAC equipment and LP Gas equipment shall not project into a minimum yard setback more than four (4) feet.
- * Must comply with Wind Borne Debris requirements as defined in NCBC R301.2.1.2 and NCBC 1609.2.
- * Construction must meet all aspect of Chapter 153 Zoning including lot coverage and setbacks.
- * Zoning Final Inspection is required.

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

Issued By: _____

Contractor or Authorized Agent: Luigi Butcher **Date:** _____



Town of Kill Devil Hills

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

PAID

MAY 13 2021

Planning and Inspection Department

BJ2021-106	BUILDING JOINT
PROJECT NAME: SAGA New 3 Bedroom House	ISSUED: 05/12/2021
SITE ADDRESS: 1304 Harpoon Drive Kill Devil Hills	EXPIRES: 05/04/2022

APPLICANT: Water Oak Residential, LLC PO Box 90 Kill Devil Hills, NC 27948 252-441-9003	OWNER: Water Oak Residential, LLC PO Box 90 Kill Devil Hills, NC 27948 252-441-9003
---	---

CONTRACTOR: SAGA CONSTRUCTION INC.
1314 S Croatan Hwy, Suite 301
Kill Devil Hills, NC 27948
252-441-9003

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

PIN: 988413223796	Parcel Number: 004045070
Address: 1304 Harpoon Drive Kill Devil Hills	Zoning:
Addition:	Block:
Legal Description: Lot 70 Water Oak Residential Community	Lot(s):

FEES:	<u>Paid</u>	<u>Due</u>	BUILDING AREA:	
Res. Building Permit Fee	\$1,504.85	\$0.00	Residential Unheated (.40)	479 Sq. Ft
T-Pole	\$50.00	\$0.00	Residential Heated Space (.75)	1751 sq. Ft.
Totals :	\$1,554.85	\$0.00	# of Temporary Poles	1 EA

PROJECT DESCRIPTION: New 3 Bedroom Single Family Dwelling

Town of Kill Devil Hills
Water Charges

PAID

Water Tap #: T245F2

BJ2021-106**PROJECT NAME:** SAGA New 3 Bedroom House
SITE ADDRESS: 1304 Harpoon Drive Kill Devil Hills**BUILDING JOINT****ISSUED:** 05/12/2021**EXPIRES:** 05/04/2022

DETAILS**Permit**

Name	Value
ZONING DISTRICT	RL
FRONT YARD SETBACK	30
REAR YARD SETBACK	20% Depth >30
SIDE YARD SETBACK	10
STREET SIDE SETBACK	15
# PARKING SPACES/BEDROOM	3
CAMA PERMIT	N
CAMA EXEMPTION	N
FLOOD ZONE	X
BASE FLOOD ELEVATION	8
Proposed First Floor Elevation	8.30
SUBSTANTIAL IMPROVEMENT	NO
PURPOSE	Residential New
CONSTRUCTION TYPE	V
CONSTRUCTION COST	280000.00
LOT COVERAGE	37.60
LIVING SPACE (SQFT)	1751
GARAGE (SQFT)	479
TOTAL SQUARE FOOTAGE	2230
SURVEYOR NAME AND NUMBER	Michael Robinson 18994
ENGINEER AND LICENSE NUMBER	Barrett Crook 027540
CULVERT	N
ROLL OUT CAN	1
DRIVEWAY INVERT 2	Y
OCCUPANCY TYPE	One & Two Family Dwelling

BJ2021-106

PROJECT NAME: SAGA New 3 Bedroom House
SITE ADDRESS: 1304 Harpoon Drive Kill Devil Hills

BUILDING JOINT

ISSUED: 05/12/2021

EXPIRES: 05/04/2022

REQUIRED INSPECTIONS

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

CONDITIONS

- * NOTICE: Call Public Services Department (252) 480-4080 before pouring driveway!
- * This permit becomes null and void if work or construction authorized is not commenced within 6 months or if construction or work is suspended for a period of 12 months at any time after work has started.
- * As-built survey will be required prior to Certificate of Occupancy or Certificate of Compliance.
- * The developer shall be responsible for maintaining erosion and sediment control at the disturbed area.
- * A final elevation certificate will be required prior to issuance of a Certificate of Occupancy or a Certificate of Compliance in accordance with 151.41(C).
- * Development must meet all aspects of Chapter 151 Flood Damage Prevention Ordinance including use and elevation.
- * Must comply with Wind Borne Debris requirements as defined in NCBC R301.2.1.2 and NCBC 1609.2.
- * Construction must meet all aspect of Chapter 153 Zoning including lot coverage and setbacks.
- * Zoning Final Inspection is required.
- * Permit includes a pad for a hot tub but DOES NOT include adding a hot tub. A separate permit will be required to add a future hot tub.

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

Issued By: _____

Contractor or Authorized Agent: Braugh Murrek **Date:** 5-13-21



Town of Kill Devil Hills

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

PAID

MAY 14 2021

Planning and Inspection Department

TOWN OF
KILL DEVIL HILLS

BJ2021-090	BUILDING JOINT
PROJECT NAME: T&B Homes New House	ISSUED: 05/14/2021
SITE ADDRESS: 1100 INDIAN DR KILL DEVIL HILLS	EXPIRES: 11/10/2021

APPLICANT: T and B Homes, Inc. 1706 Virginia Ave. Kill Devil Hills, NC 27948 252-207-9837	OWNER: T and B Homes, Inc. 1706 Virginia Ave. Kill Devil Hills, NC 27948 252-207-9837
---	---

CONTRACTOR: T and B Homes, Inc. 1706 Virginia Ave. Kill Devil Hills, NC 27948 252-207-9837	License: 80069 Expires: 12/31/2021
--	---

PARCEL:

PIN: 988409152541	Parcel Number: 002613000
Address: 1100 INDIAN DR KILL DEVIL HILLS	Zoning:
Addition: CROATAN SHORES SUBDIV	Block: 18 Lot(s): 30
Legal Description:	

FEES:	Paid	Due	BUILDING AREA:	
Covered Porch Residential	\$82.50	\$0.00	Covered Porches/Decks	110 SQFT
Res. Building Permit Fee	\$1,825.75	\$0.00	Residential Unheated (.40)	265 Sq. Ft
Land Disturbing	\$100.00	\$0.00	Residential Heated Space ¹³¹ (.75)	2293 sq. Ft.
T-Pole	\$50.00	\$0.00	# of Temporary Poles	1 EA
Totals :	\$2,058.25	\$0.00		

PROJECT DESCRIPTION: New 4 Bedroom single family dwelling

DETAILS
Town of Kill Devil Hills
Water Charges

PAID
Water Tap #: T24120

BJ2021-090**PROJECT NAME:** T&B Homes New House
SITE ADDRESS: 1100 INDIAN DR KILL DEVIL HILLS**BUILDING JOINT****ISSUED:** 05/14/2021**EXPIRES:** 11/10/2021**Permit**

Name	Value
ZONING DISTRICT	RL
FRONT YARD SETBACK	30
REAR YARD SETBACK	20% Depth >30
SIDE YARD SETBACK	8
STREET SIDE SETBACK	15
HEALTH DEPARTMENT PERMIT #	30621
# PARKING SPACES/BEDROOM	4
CAMA PERMIT	N
CAMA EXEMPTION	N
FLOOD ZONE	X
BASE FLOOD ELEVATION	8
Proposed First Floor Elevation	9.90
SUBSTANTIAL IMPROVEMENT	NO
PURPOSE	Residential New
CONSTRUCTION TYPE	V
CONSTRUCTION COST	300000.00
LOT COVERAGE	35.30
LIVING SPACE (SQFT)	2293
COVERED PORCHES/DECKS (SQFT)	110
GARAGE (SQFT)	265
TOTAL SQUARE FOOTAGE	2668
SURVEYOR NAME AND NUMBER	Doug Styons L-3227
ENGINEER AND LICENSE NUMBER	Raymond G Pate 13018
ARCHITECT NAME AND LICENSE NUMBER	Michael Florez 14168
CULVERT	Y
ROLL OUT CAN	1
DRIVEWAY INVERT 2	N
OCCUPANCY TYPE	One & Two Family Dwelling

BJ2021-090

PROJECT NAME: T&B Homes New House
SITE ADDRESS: 1100 INDIAN DR KILL DEVIL HILLS

BUILDING JOINT

ISSUED: 05/14/2021

EXPIRES: 11/10/2021

REQUIRED INSPECTIONS

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

CONDITIONS

- * This permit becomes null and void if work or construction authorized is not commenced within 6 months or if construction or work is suspended for a period of 12 months at any time after work has started.
- * NOTICE: Call Public Services Department (252) 480-4080 before pouring driveway!
- * As-built survey will be required prior to Certificate of Occupancy or Certificate of Compliance.
- * The developer shall be responsible for maintaining erosion and sediment control at the disturbed area.
- * A final elevation certificate will be required prior to issuance of a Certificate of Occupancy or a Certificate of Compliance in accordance with 151.41(C).
- * Development must meet all aspects of Chapter 151 Flood Damage Prevention Ordinance including use and elevation.
- * Per §153.082(B)(1)(c) Mechanical equipment, including HVAC equipment and LP Gas equipment shall not project into a minimum yard setback more than four (4) feet.
- * Must comply with Wind Borne Debris requirements as defined in NCBC R301.2.1.2 and NCBC 1609.2.
- * Construction must meet all aspect of Chapter 153 Zoning including lot coverage and setbacks.
- * Zoning Final Inspection is required.

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

Issued By: _____

Contractor or Authorized Agent: _____

Date: 05/14/2021



Town of Kill Devil Hills

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

MAY 19 2021

Planning and Inspection Department

BJ2021-109

PROJECT NAME: Mindy and Pat O' Reilly
SITE ADDRESS: 701 Cardinal St. UNKNOWN

BUILDING JOINT

ISSUED: 05/17/2021

EXPIRES: 11/13/2021

APPLICANT: Jeffrey H. Haskett Homes, Inc
4711 Lindberg Avenue
kitty hawk, nc 27949
252-267-1777

OWNER: O'Reilly, Pat
706 Cardinal Street
Kill Devil Hills, NC 27948
252-564-2207

BUILDING LIMITED: Jeffrey H. Haskett Homes, Inc
4711 Lindberg Avenue
kitty hawk, nc 27949
252-267-1777

License: 46718
Expires:

PARCEL:

PIN: 988307784279

Parcel Number:

Address: 701 Cardinal St. UNKNOWN

004389002

Zoning:

Addition:

Block:

Lot(s):

Legal Description: Lot 8, Block 19, Kill Devil Hills Realty Corp. Subdivision

FEES:	Paid	Due	BUILDING AREA:	
Covered Porch Residential	\$78.00	\$0.00	Residential Unheated (.40)	207 Sq. Ft
T-Pole	\$50.00	\$0.00	# of Temporary Poles	1 EA
Res. Building Permit Fee	\$1,175.55	\$0.00	Covered Porches/Decks	104 SQFT
Open Deck Fee	\$150.00	\$0.00	Residential Heated Space (.75)	1457 sq. Ft.
Land Disturbing	\$100.00	\$0.00	Open Decks	1 EA
Totals :	\$1,553.55	\$0.00		

PROJECT DESCRIPTION: Proposed 3 bedroom single family dwelling

Town of Kill Devil Hills
Water Charges

PAID

Water Tap #: T24584

BJ2021-109**PROJECT NAME:** Mindy and Pat O' Reilly
SITE ADDRESS: 701 Cardinal St. UNKNOWN**BUILDING JOINT****ISSUED:** 05/17/2021**EXPIRES:** 11/13/2021

DETAILS**Permit**

Name	Value
ZONING DISTRICT	RL
FRONT YARD SETBACK	30
REAR YARD SETBACK	20% Depth >30
SIDE YARD SETBACK	10
HEALTH DEPARTMENT PERMIT #	30791
# PARKING SPACES/BEDROOM	3
CAMA PERMIT	N
CAMA EXEMPTION	N
FLOOD ZONE	X
SUBSTANTIAL IMPROVEMENT	YES
PURPOSE	Residential New
CONSTRUCTION TYPE	V
CONSTRUCTION COST	235000.00
LOT COVERAGE	20.30
LIVING SPACE (SQFT)	1457
COVERED PORCHES/DECKS (SQFT)	104
STORAGE (SQFT)	207
TOTAL SQUARE FOOTAGE	64
SURVEYOR NAME AND NUMBER	M2C Geomatics and Design, PLLC
ENGINEER AND LICENSE NUMBER	Raymond Pate 13018
CULVERT	N
ROLL OUT CAN	1
DRIVEWAY INVERT 2	Y
OCCUPANCY TYPE	One & Two Family Dwelling

BJ2021-109

PROJECT NAME: Mindy and Pat O' Reilly
SITE ADDRESS: 701 Cardinal St. UNKNOWN

BUILDING JOINT

ISSUED: 05/17/2021

EXPIRES: 11/13/2021

REQUIRED INSPECTIONS

In-Slab Plumbing

Insulation

Slab/Foundation/Piling

Final

Framing

Zoning Final

Rough In

CONDITIONS

- * NOTICE: Call Public Services Department (252) 480-4080 before pouring driveway!
- * This permit becomes null and void if work or construction authorized is not commenced within 6 months or if construction or work is suspended for a period of 12 months at any time after work has started.
- * As-built survey will be required prior to Certificate of Occupancy or Certificate of Compliance.
- * The developer shall be responsible for maintaining erosion and sediment control at the disturbed area.
- * Development must meet all aspects of Chapter 151 Flood Damage Prevention Ordinance including use and elevation.
- * Per §153.082(B)(1)(c) Mechanical equipment, including HVAC equipment and LP Gas equipment shall not project into a minimum yard setback more than four (4) feet.
- * Must comply with Wind Borne Debris requirements as defined in NCBC R301.2.1.2 and NCBC 1609.2.
- * Construction must meet all aspect of Chapter 153 Zoning including lot coverage and setbacks.
- * Zoning Final Inspection is required.
- * Must redesign parking to include 3 (10X20) parking spaces. The proposed space under the house is not 10X20. Must submit an updated survey showing 3 conforming parking spaces.

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

Issued By: _____

Contractor or Authorized Agent: _____

Date: 5.19.21



Town of Kill Devil Hills

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

MAY 21 2021

Planning and Inspection Department

BJ2021-111	BUILDING JOINT
PROJECT NAME: Robert London	ISSUED: 05/20/2021
SITE ADDRESS: 310 Live Oak Court Kill Devil Hills	EXPIRES: 11/16/2021

APPLICANT: LONDON, ROBERT F JR PO Box 785 Kitty Hawk, NC 27949 252-207-8644	OWNER: LONDON, ROBERT F P O BOX 164 POINT HARBOR, NC 27964 252-491-8330
---	---

GENERAL:	LONDON, ROBERT F. JR. Rt 1 Box 30 Harbinger, NC 27941 252-207-8644	License: 14364 Expires:
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PARCEL:

PIN: 988410355587	Parcel Number: <i>003215000</i>	
Address: 310 Live Oak Court Kill Devil Hills	Zoning:	
Addition:	Block:	Lot(s):
Legal Description: Lot 218, Section 2, First Flight Village		

FEES:	Paid	Due	BUILDING AREA:	
T-Pole	\$50.00	\$0.00	# of Temporary Poles	1 EA
Land Disturbing	\$100.00	\$0.00	Residential Unheated (.40)	354 Sq. Ft
Open Deck Fee	\$150.00	\$0.00	Open Decks	1 EA
Res. Building Permit Fee	\$1,663.35	\$0.00	Residential Heated Space	2029 sq. Ft.
Pool/Hot Tub	\$200.00	\$0.00	(.75)	
Totals :	\$2,163.35	\$0.00		

PROJECT DESCRIPTION: Proposed 4 bedroom single family dwelling

Town of Kill Devil Hills
 Water Charges
PAID
 Water Tap #: *T24585*

BJ2021-111**PROJECT NAME:** Robert London
SITE ADDRESS: 310 Live Oak Court Kill Devil Hills**BUILDING JOINT****ISSUED:** 05/20/2021**EXPIRES:** 11/16/2021

DETAILS**Permit**

Name	Value
ZONING DISTRICT	RL
FRONT YARD SETBACK	30
REAR YARD SETBACK	20% Depth >30
SIDE YARD SETBACK	10
HEALTH DEPARTMENT PERMIT #	30665
# PARKING SPACES/BEDROOM	4
CAMA PERMIT	N
CAMA EXEMPTION	N
FLOOD ZONE	X
SUBSTANTIAL IMPROVEMENT	YES
PURPOSE	Residential New
CONSTRUCTION TYPE	V
CONSTRUCTION COST	220000.00
LOT COVERAGE	21.00
LIVING SPACE (SQFT)	2029
GARAGE (SQFT)	330
STORAGE (SQFT)	24
OPEN DECK (SQFT)	400
TOTAL SQUARE FOOTAGE	2783
SURVEYOR NAME AND NUMBER	WL Norris
ENGINEER AND LICENSE NUMBER	Raymond Pate 13018
ARCHITECT NAME AND LICENSE NUMBER	Michael Florez 14163
CULVERT	N
ROLL OUT CAN	1
DRIVEWAY INVERT 2	Y
OCCUPANCY TYPE	One & Two Family Dwelling

BJ2021-111

PROJECT NAME: Robert London
SITE ADDRESS: 310 Live Oak Court Kill Devil Hills

BUILDING JOINT

ISSUED: 05/20/2021

EXPIRES: 11/16/2021

REQUIRED INSPECTIONS

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

Insulation
Final
Zoning Final

CONDITIONS

- * NOTICE: Call Public Services Department (252) 480-4080 before pouring driveway!
- * This permit becomes null and void if work or construction authorized is not commenced within 6 months or if construction or work is suspended for a period of 12 months at any time after work has started.
- * Proposed elevation certificate required.
- * As-built survey will be required prior to Certificate of Occupancy or Certificate of Compliance.
- * The developer shall be responsible for maintaining erosion and sediment control at the disturbed area.
- * A final elevation certificate will be required prior to issuance of a Certificate of Occupancy or a Certificate of Compliance in accordance with 151.41(C).
- * Development must meet all aspects of Chapter 151 Flood Damage Prevention Ordinance including use and elevation.
- * Per §153.082(B)(1)(c) Mechanical equipment, including HVAC equipment and LP Gas equipment shall not project into a minimum yard setback more than four (4) feet.
- * Must comply with Wind Borne Debris requirements as defined in NCBC R301.2.1.2 and NCBC 1609.2.
- * Construction must meet all aspect of Chapter 153 Zoning including lot coverage and setbacks.
- * Zoning Final Inspection is required.

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

Issued By: _____

Contractor or Authorized Agent: _____

Date: 5/21/21



Town of Kill Devil Hills

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

PAID

MAY 21 2021

Planning and Inspection Department

TOWN OF
KILL DEVIL HILLS

BJ2021-110

PROJECT NAME: Robert London
SITE ADDRESS: 312 LIVE OAK CT KILL DEVIL HILLS

BUILDING JOINT

ISSUED: 05/20/2021

EXPIRES: 11/16/2021

APPLICANT: LONDON, ROBERT F JR
PO Box 785
Kitty Hawk, NC 27949
252-207-8644

OWNER: LONDON, ROBERT F JR
PO Box 785
Kitty Hawk, NC 27949
252-207-8644

GENERAL: LONDON, ROBERT F. JR.
Rt 1 Box 30
Harbinger, NC 27941
252-207-8644

License: 14364
Expires:

PARCEL:

PIN: 988410355656

Parcel Number: 003215000

Address: 312 LIVE OAK CT KILL DEVIL HILLS

Zoning:

Addition: FIRST FLIGHT VILLAGE SEC 2

Block: Lot(s): 219

Legal Description:

FEES:	Paid	Due	BUILDING AREA:	
Pool/Hot Tub	\$200.00	\$0.00	Residential Unheated (.40)	354 Sq. Ft
Land Disturbing	\$100.00	\$0.00	Residential Heated Space (.75)	2029 sq. Ft.
T-Pole	\$50.00	\$0.00	Open Decks	108 1 EA
Res. Building Permit Fee	\$1,663.35	\$0.00	# of Temporary Poles	1 EA
Open Deck Fee	\$150.00	\$0.00		
Totals :	\$2,163.35	\$0.00		

PROJECT DESCRIPTION: Proposed 4 bedroom single family dwelling

Town of Kill Devil Hills
Water Charges

PAID

Water Tap #: T 24586

BJ2021-110**PROJECT NAME:** Robert London**SITE ADDRESS:** 312 LIVE OAK CT KILL DEVIL HILLS**BUILDING JOINT****ISSUED:** 05/20/2021**EXPIRES:** 11/16/2021

DETAILS**Permit**

Name	Value
ZONING DISTRICT	RL
FRONT YARD SETBACK	30
REAR YARD SETBACK	20% Depth >30
SIDE YARD SETBACK	10
HEALTH DEPARTMENT PERMIT #	30596
# PARKING SPACES/BEDROOM	4
CAMA PERMIT	N
CAMA EXEMPTION	N
FLOOD ZONE	X
BASE FLOOD ELEVATION	8
SUBSTANTIAL IMPROVEMENT	YES
PURPOSE	Residential New
CONSTRUCTION TYPE	V
CONSTRUCTION COST	220000.00
LOT COVERAGE	32.00
LIVING SPACE (SQFT)	2029
GARAGE (SQFT)	330
STORAGE (SQFT)	24
OPEN DECK (SQFT)	400
TOTAL SQUARE FOOTAGE	2783
SURVEYOR NAME AND NUMBER	BILD
ENGINEER AND LICENSE NUMBER	Raymond Pate 13018
ARCHITECT NAME AND LICENSE NUMBER	Michael Florez 14163
CULVERT	N
ROLL OUT CAN	1
DRIVEWAY INVERT 2	Y
OCCUPANCY TYPE	One & Two Family Dwelling

BJ2021-110

PROJECT NAME: Robert London
SITE ADDRESS: 312 LIVE OAK CT KILL DEVIL HILLS

BUILDING JOINT

ISSUED: 05/20/2021

EXPIRES: 11/16/2021

REQUIRED INSPECTIONS

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

Insulation
Final
Zoning Final

CONDITIONS

- * This permit becomes null and void if work or construction authorized is not commenced within 6 months or if construction or work is suspended for a period of 12 months at any time after work has started.
- * NOTICE: Call Public Services Department (252) 480-4080 before pouring driveway!
- * As-built survey will be required prior to Certificate of Occupancy or Certificate of Compliance.
- * The developer shall be responsible for maintaining erosion and sediment control at the disturbed area.
- * A final elevation certificate will be required prior to issuance of a Certificate of Occupancy or a Certificate of Compliance in accordance with 151.41(C).
- * Development must meet all aspects of Chapter 151 Flood Damage Prevention Ordinance including use and elevation.
- * Proposed elevation certificate required.
- * Per §153.082(B)(1)(c) Mechanical equipment, including HVAC equipment and LP Gas equipment shall not project into a minimum yard setback more than four (4) feet.
- * Construction must meet all aspect of Chapter 153 Zoning including lot coverage and setbacks.
- * Must comply with Wind Borne Debris requirements as defined in NCBC R301.2.1.2 and NCBC 1609.2.
- * Zoning Final Inspection is required.

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

Issued By: _____

Contractor or Authorized Agent: _____

Date: 5/21/21



Town of Kill Devil Hills

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

MAY 25 2021

Planning and Inspection Department

BJ2021-117

PROJECT NAME: OBX Cottages LLC
SITE ADDRESS: 535 W. Aycock Street Kill Devil Hills

BUILDING JOINT

ISSUED: 05/21/2021

EXPIRES: 11/17/2021

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

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

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

License: 67524
Expires: 01/01/2022

PARCEL:

PIN: 987520904433

Parcel Number:

000725003

Address: 535 W. Aycock Street Kill Devil Hills

Zoning:

Addition:

Block:

Lot(s):

Legal Description: Lots 3 and 4, Block 73, Virginia Dare Shores S/D

FEES:	Paid	Due	BUILDING AREA:	
Open Deck Fee	\$150.00	\$0.00	Residential Unheated (.40)	98 Sq. Ft
Res. Building Permit Fee	\$1,362.20	\$0.00	Covered Porches/Decks	75 SQFT
Land Disturbing	\$100.00	\$0.00	Residential Heated Space	1764 sq. Ft.
T-Pole	\$50.00	\$0.00	(.75)	
Covered Porch Residential	\$56.25	\$0.00	Open Decks	1 EA
			# of Temporary Poles	1 EA
Totals :	\$1,718.45	\$0.00		

PROJECT DESCRIPTION: Proposed 3 bedroom single family dwelling

Town of Kill Devil Hills
Water Charges

PAID

Water Tap #: 724638

BJ2021-117**PROJECT NAME:** OBX Cottages LLC**SITE ADDRESS:** 535 W. Aycock Street Kill Devil Hills**BUILDING JOINT****ISSUED:** 05/21/2021**EXPIRES:** 11/17/2021

DETAILS**Permit**

Name	Value
ZONING DISTRICT	RL
FRONT YARD SETBACK	15
REAR YARD SETBACK	20% Depth >30
SIDE YARD SETBACK	6
HEALTH DEPARTMENT PERMIT #	30805
# PARKING SPACES/BEDROOM	3
CAMA PERMIT	N
CAMA EXEMPTION	N
FLOOD ZONE	X
SUBSTANTIAL IMPROVEMENT	YES
PURPOSE	Residential New
CONSTRUCTION TYPE	V
CONSTRUCTION COST	215000.00
LOT COVERAGE	39.70
LIVING SPACE (SQFT)	1764
COVERED PORCHES/DECKS (SQFT)	75
STORAGE (SQFT)	98
OPEN DECK (SQFT)	116
TOTAL SQUARE FOOTAGE	2053
SURVEYOR NAME AND NUMBER	Seaboard Surveying
ENGINEER AND LICENSE NUMBER	Mike O'Steen 032628
CULVERT	Y
ROLL OUT CAN	1
DRIVEWAY INVERT 2	N
OCCUPANCY TYPE	One & Two Family Dwelling

BJ2021-117

PROJECT NAME: OBX Cottages LLC
SITE ADDRESS: 535 W. Aycock Street Kill Devil Hills

BUILDING JOINT

ISSUED: 05/21/2021

EXPIRES: 11/17/2021

REQUIRED INSPECTIONS

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

Insulation
Final
Zoning Final

CONDITIONS

- * This permit becomes null and void if work or construction authorized is not commenced within 6 months or if construction or work is suspended for a period of 12 months at any time after work has started.
- * **NOTICE:** Call Public Services Department (252) 480-4080 before pouring driveway!
- * As-built survey will be required prior to Certificate of Occupancy or Certificate of Compliance.
- * The developer shall be responsible for maintaining erosion and sediment control at the disturbed area.
- * A final elevation certificate will be required prior to issuance of a Certificate of Occupancy or a Certificate of Compliance in accordance with 151.41(C).
- * Per §153.082(B)(1)(c) Mechanical equipment, including HVAC equipment and LP Gas equipment shall not project into a minimum yard setback more than four (4) feet.
- * Development must meet all aspects of Chapter 151 Flood Damage Prevention Ordinance including use and elevation.
- * Must comply with Wind Borne Debris requirements as defined in NCBC R301.2.1.2 and NCBC 1609.2.
- * Construction must meet all aspect of Chapter 153 Zoning including lot coverage and setbacks.
- * Zoning Final Inspection is required.

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

Issued By: _____

Contractor or Authorized Agent: _____

Date: 5-25-21



Town of Kill Devil Hills

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

PAID

MAY 27 2021

Planning and Inspection Department

TOWN OF
KILL DEVIL HILLS

BJ2021-112

PROJECT NAME: SAGA New 4 Bedroom House
SITE ADDRESS: 706 Harmony Lane Kill Devil Hills

BUILDING JOINT

ISSUED: 05/26/2021

EXPIRES: 11/22/2021

APPLICANT: Water Oak Residential, LLC
PO Box 90
Kill Devil Hills, NC 27948
252-441-9003

OWNER: Water Oak Residential, LLC
PO Box 90
Kill Devil Hills, NC 27948
252-441-9003

CONTRACTOR: SAGA CONSTRUCTION
1314 S Croatan Hwy, Suite 301
PO Box 90
Kill Devil Hills, NC 27948
252-441-9003

GENERAL BUILDING - LIMITED: SAGA CONSTRUCTION
1314 S Croatan Hwy, Suite 301
PO Box 90
Kill Devil Hills, NC 27948
252-441-9003

License: 62306
Expires: 12/31/2021

PARCEL:

PIN: 988413220733

Parcel Number:

004045016

Address: 706 Harmony Lane Kill Devil Hills

Zoning:

Addition:

Block:

Lot(s):

Legal Description: Lot 16, Water Oak Residential Community

FEES:	Paid	Due	BUILDING AREA:	
Res. Building Permit Fee	\$1,811.85	\$0.00	Residential Unheated (.40)	489 Sq. Ft
T-Pole	\$50.00	\$0.00	Residential Heated Space (.75)	2155 sq. Ft.
Totals :	\$1,861.85	\$0.00	# of Temporary Poles	99 1 EA

PROJECT DESCRIPTION: New 4 Bedroom 3 bath single family dwelling

Town of Kill Devil Hills
Water Charges
PAID

Town of Kill Devil Hills

Water Charges

PAID

BJ2021-112**PROJECT NAME:** SAGA New 4 Bedroom House
SITE ADDRESS: 706 Harmony Lane Kill Devil Hills**BUILDING JOINT****ISSUED:** 05/26/2021**EXPIRES:** 11/22/2021

DETAILS**Permit**

Name	Value
ZONING DISTRICT	RL
FRONT YARD SETBACK	30
REAR YARD SETBACK	20% Depth >30
SIDE YARD SETBACK	8
HEALTH DEPARTMENT PERMIT #	KDHWWT
# PARKING SPACES/BEDROOM	4
CAMA PERMIT	N
CAMA EXEMPTION	N
FLOOD ZONE	X
SUBSTANTIAL IMPROVEMENT	YES
PURPOSE	Residential New
CONSTRUCTION TYPE	V
CONSTRUCTION COST	200000.00
LOT COVERAGE	39.69
LIVING SPACE (SQFT)	2155
GARAGE (SQFT)	489
TOTAL SQUARE FOOTAGE	2644
SURVEYOR NAME AND NUMBER	Michael Robinson
ENGINEER AND LICENSE NUMBER	Barrett Crook 027540
CULVERT	Y
ROLL OUT CAN	1
DRIVEWAY INVERT 2	Y
OCCUPANCY TYPE	One & Two Family Dwelling

BJ2021-112

PROJECT NAME: SAGA New 4 Bedroom House
SITE ADDRESS: 706 Harmony Lane Kill Devil Hills

BUILDING JOINT

ISSUED: 05/26/2021

EXPIRES: 11/22/2021

REQUIRED INSPECTIONS

In-Slab Plumbing

Insulation

Slab/Foundation/Piling

Final

Framing

Zoning Final

Rough In

CONDITIONS

- * This permit becomes null and void if work or construction authorized is not commenced within 6 months or if construction or work is suspended for a period of 12 months at any time after work has started.
- * **NOTICE:** Call Public Services Department (252) 480-4080 before pouring driveway!
- * As-built survey will be required prior to Certificate of Occupancy or Certificate of Compliance.
- * The developer shall be responsible for maintaining erosion and sediment control at the disturbed area.
- * A final elevation certificate will be required prior to issuance of a Certificate of Occupancy or a Certificate of Compliance in accordance with 151.41(C).
- * Per §153.082(B)(1)(c) Mechanical equipment, including HVAC equipment and LP Gas equipment shall not project into a minimum yard setback more than four (4) feet.
- * Must comply with Wind Borne Debris requirements as defined in NCBC R301.2.1.2 and NCBC 1609.2.
- * Construction must meet all aspect of Chapter 153 Zoning including lot coverage and setbacks.
- * Zoning Final Inspection is required.

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

Issued By: _____

Contractor or Authorized Agent: Gregg Muck

Date: 5.27.2021



Town of Kill Devil Hills

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

APR 30 2021

Planning and Inspection Department

BJ2021-095	BUILDING JOINT
PROJECT NAME: SAGA New 4 Bedroom House	ISSUED: 04/29/2021
SITE ADDRESS: 1302 HARPOON DR Kill Devil Hills	EXPIRES: 10/26/2021

APPLICANT: Water Oak Residential, LLC PO Box 90 Kill Devil Hills, NC 27948 252-441-9003	OWNER: Water Oak Residential, LLC PO Box 90 Kill Devil Hills, NC 27948 252-441-9003
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CONTRACTOR: SAGA CONSTRUCTION
1314 S Croatan Hwy, Suite 301
PO Box 90
Kill Devil Hills, NC 27948
252-441-9003

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

PIN: 988413224730	Parcel Number: 004045068
Address: 1302 HARPOON DR Kill Devil Hills	
Addition:	Zoning:
	Block:
	Lot(s):
Legal Description: Lot 68 Water Oak Residential Community	

FEES:	Paid	Due	BUILDING AREA:	
Pool/Hot Tub	\$200.00	\$0.00	# of Temporary Poles	1 EA
Res. Building Permit Fee	\$1,894.40	\$0.00	Residential Unheated (.40)	431 Sq. Ft
Covered Porch Residential	\$28.50	\$0.00	Residential Heated Space (.75)	2296 sq. Ft.
T-Pole	\$50.00	\$0.00	Covered Porches/Decks	38 SQFT
Totals :	\$2,172.90	\$0.00		

PROJECT DESCRIPTION: New 4 Bedroom 3 bath single family dwelling

Town of Kill Devil Hills
Water Charges

PAID

Water Tap #: T21578

BJ2021-095**PROJECT NAME:** SAGA New 4 Bedroom House
SITE ADDRESS: 1302 HARPOON DR Kill Devil Hills**BUILDING JOINT****ISSUED:** 04/29/2021**EXPIRES:** 10/26/2021

DETAILS**Permit**

Name	Value
ZONING DISTRICT	RL
FRONT YARD SETBACK	30
REAR YARD SETBACK	20% Depth >30
SIDE YARD SETBACK	10
STREET SIDE SETBACK	15
# PARKING SPACES/BEDROOM	4
CAMA PERMIT	N
CAMA EXEMPTION	N
FLOOD ZONE	X
BASE FLOOD ELEVATION	8
Proposed First Floor Elevation	8.50
SUBSTANTIAL IMPROVEMENT	NO
PURPOSE	Residential New
CONSTRUCTION TYPE	V
CONSTRUCTION COST	400000.00
LOT COVERAGE	37.40
LIVING SPACE (SQFT)	2296
COVERED PORCHES/DECKS (SQFT)	38
GARAGE (SQFT)	431
SURVEYOR NAME AND NUMBER	Mike Robinson 18994
ENGINEER AND LICENSE NUMBER	Barrett Crook 027540
CULVERT	N
ROLL OUT CAN	1
DRIVEWAY INVERT 2	N
OCCUPANCY TYPE	One & Two Family Dwelling

BJ2021-095

PROJECT NAME: SAGA New 4 Bedroom House
SITE ADDRESS: 1302 HARPOON DR Kill Devil Hills

BUILDING JOINT

ISSUED: 04/29/2021

EXPIRES: 10/26/2021

REQUIRED INSPECTIONS

In-Slab Plumbing

Insulation

Slab/Foundation/Piling

Final

Framing

Zoning Final

Rough In

CONDITIONS

- * This permit becomes null and void if work or construction authorized is not commenced within 6 months or if construction or work is suspended for a period of 12 months at any time after work has started.
- * NOTICE: Call Public Services Department (252) 480-4080 before pouring driveway!
- * As-built survey will be required prior to Certificate of Occupancy or Certificate of Compliance.
- * The developer shall be responsible for maintaining erosion and sediment control at the disturbed area.
- * A final elevation certificate will be required prior to issuance of a Certificate of Occupancy or a Certificate of Compliance in accordance with 151.41(C).
- * Per §153.082(B)(1)(c) Mechanical equipment, including HVAC equipment and LP Gas equipment shall not project into a minimum yard setback more than four (4) feet.
- * Must comply with Wind Borne Debris requirements as defined in NCBC R301.2.1.2 and NCBC 1609.2.
- * Construction must meet all aspect of Chapter 153 Zoning including lot coverage and setbacks.
- * Zoning Final Inspection is required.
- * Engineered truss design and layout plans required prior to installation.

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

Issued By: _____

Contractor or Authorized Agent: Gracyn Murck

Date: 4.30.21

BP2021-113**PROJECT NAME:** Wasniewski Exterior
SITE ADDRESS: 313 CAMERON ST KILL DEVIL HILLS**BUILDING****ISSUED:** 05/25/2021**EXPIRES:** 11/21/2021**DETAILS****Permit**

Name	Value
CAMA PERMIT	N
CAMA EXEMPTION	N
ZONING DISTRICT	RL
PURPOSE	Residential Repair/Remodel
FLOOD ZONE	X
FINAL ELEVATION CERTIFICATE	N
CONSTRUCTION COST	50000.00
CONSTRUCTION TYPE	V
OCCUPANCY TYPE	One & Two Family Dwelling

REQUIRED INSPECTIONS

Zoning Final

Final

CONDITIONS

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

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

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

Issued By: Charles Thuman

Contractor or Authorized Agent: Patricia L Broom **Date:** 05 / 25 / 2021



Town of Kill Devil Hills

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

PAID

MAY 27 2021

Planning and Inspection Department

TOWN OF

BP2021-116

PROJECT NAME: Santasieri pilings
SITE ADDRESS: 1705 WYANDOTTE ST KILL DEVIL HILLS

BUILDING

ISSUED: 05/26/2021

EXPIRES: 11/22/2021

APPLICANT: Santasieri, Paul
1705 Wyandotte Street
Kill Devil Hills, NC 27948
252-557-5678

OWNER: Santasieri, Paul
1705 Wyandotte Street
Kill Devil Hills, NC 27948
252-557-5678

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

License: 1234567
Expires: 01/31/2022

PARCEL:

PIN: 988409263251

Parcel Number: 002694000

Address: 1705 WYANDOTTE ST KILL DEVIL HILLS

Zoning:

Addition: HIGH VIEW - HEDRICKS ADD

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

Legal Description:

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

PROJECT DESCRIPTION: Replace 18 house pilings with new 8x8 pilings

PAID
*Re 5/26/21
KJ Pa*

BP2021-116**PROJECT NAME:** Santasieri pilings**SITE ADDRESS:** 1705 WYANDOTTE ST KILL DEVIL HILLS**BUILDING****ISSUED:** 05/26/2021**EXPIRES:** 11/22/2021**DETAILS****Permit**

Name	Value
CAMA PERMIT	N
CAMA EXEMPTION	N
ZONING DISTRICT	RL
PURPOSE	Residential Repair/Remodel
FLOOD ZONE	X
FINAL ELEVATION CERTIFICATE	N
CONSTRUCTION COST	18500.00
OCCUPANCY TYPE	One & Two Family Dwelling

REQUIRED INSPECTIONS

Zoning Final

Final

CONDITIONS

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

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

Issued By:

Charles Thuman

Contractor or Authorized Agent:



Date:

05 / 26 / 2021



Town of Kill Devil Hills

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

PAID

MAY 26 2021

Planning and Inspection Department

TOWN OF
KILL DEVIL HILLS

BP2021-115

PROJECT NAME: HUDICK STAIR, DECKING AND RAIL
SITE ADDRESS: 415 Ocean Acres Dr. W. KILL DEVIL HILLS

BUILDING

ISSUED: 05/26/2021

EXPIRES: 11/22/2021

APPLICANT: HUDICK, KYLE
415 W OCEAN ACRES
Kill Devil Hills, NC 27948
715-417-0454

OWNER: HUDICK, KYLE
415 W OCEAN ACRES
Kill Devil Hills, NC 27948
715-417-0454

UNLICENSED - REMODELING: Morales, Miguel
513 Burns Drive
Kill Devil Hills, NC 27948

License: 12345
Expires:

PARCEL:

PIN: 988316836238

Parcel Number: 005045001

Address: 415 Ocean Acres Dr. W. KILL DEVIL HILLS

Addition: Ocean Acres Sec2 Tract 3

Zoning:
Block: J **Lot(s):** 12

Legal Description:

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

PROJECT DESCRIPTION: REPLACE DECKING, REBUILD EAST EXTRIOR STAIR AND RAILING

BP2021-115

PROJECT NAME: HUDICK STAIR, DECKING AND RAIL
SITE ADDRESS: 415 Ocean Acres Dr. W. KILL DEVIL HILLS

BUILDING**ISSUED:** 05/26/2021**EXPIRES:** 11/22/2021**DETAILS****Permit**

Name	Value
CAMA PERMIT	N
CAMA EXEMPTION	N
ZONING DISTRICT	RL
PURPOSE	Residential Repair/Remodel
FRONT YARD SETBACK	30
SIDE YARD SETBACK	8
REAR YARD SETBACK	20% Depth >30
STREET SIDE SETBACK	15
FLOOD ZONE	X
FINAL ELEVATION CERTIFICATE	N
CONSTRUCTION COST	5000.00
CONSTRUCTION TYPE	V
OCCUPANCY TYPE	One & Two Family Dwelling

REQUIRED INSPECTIONS

Zoning Final

Final

CONDITIONS

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

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

BP2021-115

PROJECT NAME: HUDICK STAIR, DECKING AND RAIL
SITE ADDRESS: 415 Ocean Acres Dr. W. KILL DEVIL HILLS

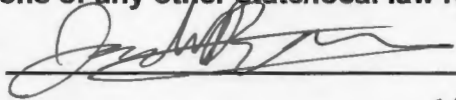
BUILDING

ISSUED: 05/26/2021

EXPIRES: 11/22/2021

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

Issued By: _____



Contractor or Authorized Agent: _____



Date: _____

5/26/21



Town of Kill Devil Hills

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

Planning and Inspection Department

BP2021-111

PROJECT NAME: Lopez Concrete Floor
SITE ADDRESS: 307 SUFFOLK ST KILL DEVIL HILLS

BUILDING JOINT

ISSUED: 05/20/2021

EXPIRES: 11/16/2021

APPLICANT: LOPEZ, GERARDO
1208 Cardinal St
Kill Devil Hills, NC 27948

OWNER: LOPEZ, GERARDO
PO BOX 2851
kitty hawk, nc 27949

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

License: Unlicensed
Expires: 12/31/2021

PARCEL:

PIN: 988405194986

Parcel Number: 001251000

Address: 307 SUFFOLK ST KILL DEVIL HILLS

Addition: AVALON BEACH ANNEX 2 & 3

Zoning:
Block: 0 **Lot(s):** 798

Legal Description:

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

PROJECT DESCRIPTION: replace existing wooden floor with concrete on 1st level

PAID

MAY 20 2021

**TOWN OF
KILL DEVIL HILLS**

BP2021-111

PROJECT NAME: Lopez Concrete Floor
SITE ADDRESS: 307 SUFFOLK ST KILL DEVIL HILLS

BUILDING JOINT

ISSUED: 05/20/2021

EXPIRES: 11/16/2021

DETAILS

Permit

Name	Value
CAMA PERMIT	N
CAMA EXEMPTION	N
ZONING DISTRICT	RL
PURPOSE	Residential Repair/Remodel
FLOOD ZONE	X
FINAL ELEVATION CERTIFICATE	N
CONSTRUCTION COST	2800.00
CONSTRUCTION TYPE	V
OCCUPANCY TYPE	One & Two Family Dwelling

REQUIRED INSPECTIONS

Zoning Final	Slab/Foundation/Piling
Final	In-Slab Plumbing

CONDITIONS

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

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

Issued By: _____

Contractor or Authorized Agent: _____

Date: 5/20/2021



Town of Kill Devil Hills

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

PAID

MAY 18 2021

Planning and Inspection Department

YOU MAY
FILE ONLINE

BP2021-109

PROJECT NAME: Kay Floan
SITE ADDRESS: 800 CLAM SHELL DR KILL DEVIL HILLS

BUILDING

ISSUED: 05/13/2021

EXPIRES: 11/09/2021

APPLICANT: Reese Evans
253 North Spot Road
Powels Point, NC 27966
252-202-7773

OWNER: FLOAN, MARJORIE KAY
P O BOX 1971
KILL DEVIL HILLS, NC 27948

GENERAL BUILDING: Reese Evans
253 North Spot Road
Powels Point, NC 27966
252-202-7773

License: 47321
Expires: 12/31/2021

PARCEL:

PIN: 988409173330

Parcel Number: 002371000

Address: 800 CLAM SHELL DR KILL DEVIL HILLS

Addition: SEA HOLLY RIDGE

Zoning:
Block: A **Lot(s):** 12

Legal Description:

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

PROJECT DESCRIPTION: Replace front steps within existing footprint

PAID
12/5/21
Pay Del

BP2021-109**PROJECT NAME:** Kay Floan**SITE ADDRESS:** 800 CLAM SHELL DR KILL DEVIL HILLS**BUILDING****ISSUED:** 05/13/2021**EXPIRES:** 11/09/2021**DETAILS****Permit**

Name	Value
CAMA PERMIT	N
CAMA EXEMPTION	N
ZONING DISTRICT	RL
PURPOSE	Residential Repair/Remodel
FRONT YARD SETBACK	30
SIDE YARD SETBACK	8
REAR YARD SETBACK	20% Depth >30
FLOOD ZONE	X
FINAL ELEVATION CERTIFICATE	N
CONSTRUCTION COST	1000.00
CONSTRUCTION TYPE	V
OCCUPANCY TYPE	One & Two Family Dwelling

REQUIRED INSPECTIONS

Zoning Final

Final

CONDITIONS

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

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

* Zoning Final Inspection is required.

BP2021-109

PROJECT NAME: Kay Floan

SITE ADDRESS: 800 CLAM SHELL DR KILL DEVIL HILLS

BUILDING

ISSUED: 05/13/2021

EXPIRES: 11/09/2021

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

Issued By: Charles Thuman

Contractor or Authorized Agent: Rock Date: 05 / 13 / 2021



Town of Kill Devil Hills

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

PAID

MAY 18 2021

Planning and Inspection Department

BP2021-105

PROJECT NAME: Paul Santasieri
SITE ADDRESS: 1705 WYANDOTTE ST KILL DEVIL HILLS

BUILDING

ISSUED: 05/17/2021

EXPIRES: 11/13/2021

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

OWNER: Santasieri, Paul
1705 Wyandotte Street
Kill Devil Hills, NC 27948
252-557-5678

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

License: 79801
Expires: 01/01/2022

PARCEL:

PIN: 988409263251

Parcel Number: 002694000

Address: 1705 WYANDOTTE ST KILL DEVIL HILLS

Zoning:

Addition: HIGH VIEW - HEDRICKS ADD

Block: D Lot(s): 11

Legal Description:

FEES:	Paid	Due
Building Permit Fee - Minimum Fee	\$150.00	\$0.00
Open Deck Fee	\$600.00	\$0.00
Totals :	\$750.00	\$0.00

BUILDING AREA:
Open Decks 4 EA

PROJECT DESCRIPTION: Replace 18 pilings, replace deck within existing footprint

PAID
M 5/18/21
By [Signature]

BP2021-105**PROJECT NAME:** Paul Santasieri**SITE ADDRESS:** 1705 WYANDOTTE ST KILL DEVIL HILLS**BUILDING****ISSUED:** 05/17/2021**EXPIRES:** 11/13/2021**DETAILS****Permit**

Name	Value
CAMA PERMIT	N
CAMA EXEMPTION	N
ZONING DISTRICT	RL
PURPOSE	Residential Repair/Remodel
FRONT YARD SETBACK	30
SIDE YARD SETBACK	8
REAR YARD SETBACK	20% Depth >30
FLOOD ZONE	X
FINAL ELEVATION CERTIFICATE	N
CONSTRUCTION COST	33550.00
LOT COVERAGE	31.40
CONSTRUCTION TYPE	V
OCCUPANCY TYPE	One & Two Family Dwelling

REQUIRED INSPECTIONS

Zoning Final

Slab/Foundation/Piling

Final

CONDITIONS

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

BP2021-105

PROJECT NAME: Paul Santasieri

SITE ADDRESS: 1705 WYANDOTTE ST KILL DEVIL HILLS

BUILDING

ISSUED: 05/17/2021

EXPIRES: 11/13/2021

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

Issued By: Marty Shaw

Contractor or Authorized Agent: J. Lewis Date: 05 / 17 / 2021



Town of Kill Devil Hills

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

PAID

MAY 14 2021

Planning and Inspection Department

TOWN OF
KILL DEVIL HILLS

BP2021-108

PROJECT NAME: Katie Johnson
SITE ADDRESS: 1002 BLUE JAY ST KILL DEVIL HILLS

BUILDING

ISSUED: 05/13/2021

EXPIRES: 11/09/2021

APPLICANT: Johnson, Katie
1002 Blue Jay St
Kill Devil Hills, NC 27948

OWNER: Johnson, Katie
1002 Blue Jay St
Kill Devil Hills, NC 27948

CONTRACTOR: NC Shed Depot
1732 Westover Dr.
Sanford, NC 27330
919-776-0206

BUILDING: NC Shed Depot
1732 Westover Dr.
Sanford, NC 27330
919-776-0206

License: 83087
Expires: 05/31/2022

PARCEL:

PIN: 988312874429

Parcel Number: 004374002

Address: 1002 BLUE JAY ST KILL DEVIL HILLS

Zoning:

Addition: KILL DEVIL HILLS REALTY CORP

Block: 16 **Lot(s):** 2

Legal Description:

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

PROJECT DESCRIPTION: Proposed 12 X 24 storage shed

PAID
MAY 15/21
P3 P1

BP2021-108**PROJECT NAME:** Katie Johnson**SITE ADDRESS:** 1002 BLUE JAY ST KILL DEVIL HILLS**BUILDING****ISSUED:** 05/13/2021**EXPIRES:** 11/09/2021**DETAILS****Permit**

Name	Value
CAMA PERMIT	N
CAMA EXEMPTION	N
ZONING DISTRICT	RL
PURPOSE	Residential Accessory
FRONT YARD SETBACK	30
SIDE YARD SETBACK	10
REAR YARD SETBACK	20% Depth >30
HEALTH DEPARTMENT PERMIT #	30796
FLOOD ZONE	AE
BASE FLOOD ELEVATION	9
FINAL ELEVATION CERTIFICATE	N
CONSTRUCTION COST	14620.48
SURVEYOR NAME AND NUMBER	BILD
OCCUPANCY TYPE	One & Two Family Dwelling

REQUIRED INSPECTIONS

Zoning Final

Final

CONDITIONS

- * This permit becomes null and void if work or construction authorized is not commenced within 6 months or if construction or work is suspended for a period of 12 months at any time after work has started.
- * Development must meet all aspects of Chapter 151 Flood Damage Prevention Ordinance including use and elevation.
- * The developer shall be responsible for maintaining erosion and sediment control at the disturbed area.
- * Must comply with Wind Borne Debris requirements as defined in NCBC R301.2.1.2 and NCBC 1609.2.
- * Construction must meet all aspect of Chapter 153 Zoning including lot coverage and setbacks.
- * Zoning Final Inspection is required.

BP2021-108

PROJECT NAME: Katie Johnson

SITE ADDRESS: 1002 BLUE JAY ST KILL DEVIL HILLS

BUILDING

ISSUED: 05/13/2021

EXPIRES: 11/09/2021

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

Issued By: Charles Thuman

Contractor or Authorized Agent: Katie Johnson Date: 05 / 14 / 2021



Town of Kill Devil Hills

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

PAID

MAY 10 2021

Planning and Inspection Department

TOWN OF
KILL DEVIL HILLS

BP2021-106

PROJECT NAME: Skenes Stairs and Side Porch
SITE ADDRESS: 1735 CROATAN HWY S KILL DEVIL HILLS

BUILDING

ISSUED: 05/10/2021

EXPIRES: 11/06/2021

APPLICANT: Willie Skenes
1157 Sunlight Dr.
CHESAPEAKE, VA 23320
757-332-0604

OWNER: Willie Skenes
1157 Sunlight Dr.
CHESAPEAKE, VA 23320
757-332-0604

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

License: Unlicensed
Expires: 12/31/2021

PARCEL:

PIN: 988406378510

Parcel Number: 002947000

Address: 1735 CROATAN HWY S KILL DEVIL HILLS

Zoning:

Addition: LONG LAKE

Block: 0 **Lot(s):** PT 16

Legal Description:

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

PROJECT DESCRIPTION: replace existing side stairs and porch to same footprint



PAID
V2 5/10/21
Check #4245

BP2021-106

PROJECT NAME: Skenes Stairs and Side Porch
SITE ADDRESS: 1735 CROATAN HWY S KILL DEVIL HILLS

BUILDING**ISSUED:** 05/10/2021**EXPIRES:** 11/06/2021**DETAILS****Permit**

Name	Value
CAMA PERMIT	N
CAMA EXEMPTION	N
ZONING DISTRICT	RL
PURPOSE	Residential Repair/Remodel
FRONT YARD SETBACK	30
SIDE YARD SETBACK	8
REAR YARD SETBACK	20% Depth >30
FLOOD ZONE	X
FINAL ELEVATION CERTIFICATE	N
CONSTRUCTION COST	780.00
LOT COVERAGE	35.43
CONSTRUCTION TYPE	V
SURVEYOR NAME AND NUMBER	William S Jones L-2532
OCCUPANCY TYPE	One & Two Family Dwelling

REQUIRED INSPECTIONS

Zoning Final

Final

CONDITIONS

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

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

BP2021-106

PROJECT NAME: Skenes Stairs and Side Porch
SITE ADDRESS: 1735 CROATAN HWY S KILL DEVIL HILLS

BUILDING

ISSUED: 05/10/2021

EXPIRES: 11/06/2021

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

Issued By: _____

Contractor or Authorized Agent: _____

Date: _____



Town of Kill Devil Hills

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

PAID

MAY 11 2021

Planning and Inspection Department

BP2021-107	BUILDING
PROJECT NAME:	ISSUED: 05/11/2021
SITE ADDRESS: 1719 CROATAN HWY N. KILL DEVIL HILLS	EXPIRES: 11/07/2021

APPLICANT: Raper, Linda
2320 Peartree Road
ELIZABETH CITY, NC 27909

OWNER: Raper, Linda
2320 Peartree Road
ELIZABETH CITY, NC 27909

CONTRACTOR: Awesome Remodeling
1809 Va. AVE
Kill Devil Hills, NC 27948
252-305-0636

GENERAL REMODELING-UNLICENSED: Awesome Remodeling
1809 Va. AVE
Kill Devil Hills, NC 27948
252-305-0636

License: 123
Expires:

PARCEL:

PIN: 988410470104

Parcel Number: 002941000

Address: 1719 CROATAN HWY N. KILL DEVIL HILLS

Zoning:

Addition: LONG LAKE

Block: 0 **Lot(s):** 8

Legal Description:

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

PROJECT DESCRIPTION: replace existing rear deck and stairs to same footprint

BP2021-107

PROJECT NAME:

SITE ADDRESS: 1719 CROATAN HWY N. KILL DEVIL HILLS

BUILDING

ISSUED: 05/11/2021

EXPIRES: 11/07/2021

DETAILS

Permit

Name	Value
CAMA PERMIT	N
CAMA EXEMPTION	N
ZONING DISTRICT	RL
PURPOSE	Residential Repair/Remodel
FRONT YARD SETBACK	30
SIDE YARD SETBACK	10
REAR YARD SETBACK	20% Depth >30
HEALTH DEPARTMENT PERMIT #	30788
FLOOD ZONE	X
FINAL ELEVATION CERTIFICATE	N
CONSTRUCTION COST	23410.00
LOT COVERAGE	33.00
CONSTRUCTION TYPE	V
SURVEYOR NAME AND NUMBER	William S Jones L-2532
OCCUPANCY TYPE	One & Two Family Dwelling

REQUIRED INSPECTIONS

Zoning Final

Final

CONDITIONS

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

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

BP2021-107

PROJECT NAME:

SITE ADDRESS: 1719 CROATAN HWY N. KILL DEVIL HILLS

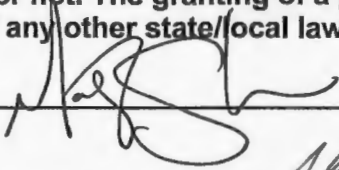
BUILDING

ISSUED: 05/11/2021

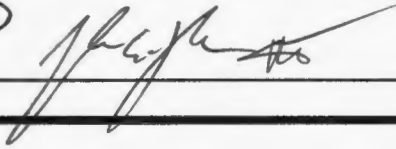
EXPIRES: 11/07/2021

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

Issued By: _____



Contractor or Authorized Agent: _____



Date: _____

5-11-21



Town of Kill Devil Hills

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

PAID

MAY 10 2021

Planning and Inspection Department

TOWN OF
KILL DEVIL HILLS

BP2021-098

PROJECT NAME: BENDER SHED
SITE ADDRESS: 2010 SMITHFIELD ST KILL DEVIL HILLS

BUILDING

ISSUED: 04/30/2021

EXPIRES: 10/27/2021

APPLICANT: BENDER, CHRISTOPHER
2010 SMITHFIELD ST.
KILL DEVIL HILLS, NC 27948

OWNER: BENDER, CHRISTOPHER
2010 SMITHFIELD ST.
KILL DEVIL HILLS, NC 27948

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

License: Unlicensed
Expires: 12/31/2021

PARCEL:

PIN: 988405195055

Parcel Number: 001421000

Address: 2010 SMITHFIELD ST KILL DEVIL HILLS

Addition: AVALON BEACH ANNEX 2 & 3

Zoning:

Block: 0 **Lot(s):** 1283

Legal Description:

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

PROJECT DESCRIPTION: CONSTRUCT 8'X12' SHED IN REAR YARD

PAID
MAY 5/10/21
Dy Pol

BP2021-098**PROJECT NAME:** BENDER SHED**SITE ADDRESS:** 2010 SMITHFIELD ST KILL DEVIL HILLS**BUILDING****ISSUED:** 04/30/2021**EXPIRES:** 10/27/2021

DETAILS**Permit**

Name	Value
CAMA PERMIT	N
CAMA EXEMPTION	N
ZONING DISTRICT	RL
PURPOSE	Residential Repair/Remodel
FRONT YARD SETBACK	15
SIDE YARD SETBACK	8
REAR YARD SETBACK	20% Depth >30
FLOOD ZONE	X
FINAL ELEVATION CERTIFICATE	N
CONSTRUCTION COST	1300.00
CONSTRUCTION TYPE	V
OCCUPANCY TYPE	One & Two Family Dwelling

REQUIRED INSPECTIONS

Zoning Final

Final

CONDITIONS

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

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

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

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

BP2021-098

PROJECT NAME: BENDER SHED

SITE ADDRESS: 2010 SMITHFIELD ST KILL DEVIL HILLS


BUILDING

ISSUED: 04/30/2021

EXPIRES: 10/27/2021

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

Issued By: Jordan Blythe

Contractor or Authorized Agent:  Date: 04 / 30 / 2021



Town of Kill Devil Hills

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

MAY - 6 2021

Planning and Inspection Department

BP2021-101

PROJECT NAME: Dickens Pilings and Fence
SITE ADDRESS: 109 FRESH POND DR E KILL DEVIL HILLS

BUILDING

ISSUED: 05/05/2021

EXPIRES: 11/01/2021

APPLICANT: REGGIE & JOANNE DICKENS
5632 Mallard Grove Rd.
Charlotte, NC 28269

OWNER: REGGIE & JOANNE DICKENS
5632 Mallard Grove Rd.
Charlotte, NC 28269

CONTRACTOR: Harrup Construction
119 John Lloyd Drive
Point Harbor, NC 27964
252-489-0523

UNLICENSED - REMODELING: Harrup Construction
119 John Lloyd Drive
Point Harbor, NC 27964
252-489-0523

License: 12345
Expires: 06/07/2030

PARCEL:

PIN: 989313140090

Parcel Number: 004945000

Address: 109 FRESH POND DR E KILL DEVIL HILLS

Zoning:

Addition: LAKE DRIVE DEVELOPMENT SEC 2

Block: 0 **Lot(s):** 15

Legal Description:

FEES:	Paid	Due
Fence	\$100.00	\$0.00
Building Permit Fee - Minimum Fee	\$150.00	\$0.00
Totals :	\$250.00	\$0.00

PROJECT DESCRIPTION: replace 6 6x6 pilings with 8x8x16 and fence along rear propertya line



PAID

5/6/21 Da
pay pdf

BP2021-101

PROJECT NAME: Dickens Pilings and Fence
SITE ADDRESS: 109 FRESH POND DR E KILL DEVIL HILLS

BUILDING**ISSUED:** 05/05/2021**EXPIRES:** 11/01/2021**DETAILS****Permit**

Name	Value
CAMA PERMIT	N
CAMA EXEMPTION	N
ZONING DISTRICT	C
PURPOSE	Residential Repair/Remodel
FRONT YARD SETBACK	30
SIDE YARD SETBACK	8
REAR YARD SETBACK	20% Depth >30
FLOOD ZONE	X
FINAL ELEVATION CERTIFICATE	N
CONSTRUCTION COST	10000.00
CONSTRUCTION TYPE	V
SURVEYOR NAME AND NUMBER	Carlos F. Gomez L3241
OCCUPANCY TYPE	One & Two Family Dwelling

REQUIRED INSPECTIONS

Slab/Foundation/Piling	Zoning Final
Stringline	Final

CONDITIONS

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

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

BP2021-101

PROJECT NAME: Dickens Pilings and Fence
SITE ADDRESS: 109 FRESH POND DR E KILL DEVIL HILLS

BUILDING

ISSUED: 05/05/2021

EXPIRES: 11/01/2021

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

Issued By: Charles Thuman

Contractor or Authorized Agent: Mark Kump Date: 05 / 05 / 2021



Town of Kill Devil Hills

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

PAID

MAY - 5 2021

TOWN OF
KILL DEVIL HILLS

Planning and Inspection Department

BP2021-095

PROJECT NAME: Chambers Storage Room
SITE ADDRESS: 103 Aviation Ave. E. Kill Devil Hills

BUILDING

ISSUED: 04/27/2021

EXPIRES: 10/24/2021

APPLICANT: Chambers, Scott E.
112 Deer Run Road
TOWNSEND, DE 19734
302-242-8658

OWNER: Chambers, Scott E.
112 Deer Run Road
TOWNSEND, DE 19734
302-242-8658

CONTRACTOR: Gibbs, Clarence
Po Box 2387
Manteo, NC 27954

BUILDING UNLIMITED: Gibbs, Clarence
Po Box 2387
Manteo, NC 27954

License: 76990
Expires: 12/31/2021

PARCEL:

PIN: 988419703837

Parcel Number: 003893001

Address: 103 Aviation Ave. E. Kill Devil Hills

Zoning:

Addition: Klty Hawk Shores Revised

Block: 38 **Lot(s):** 14

Legal Description:

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

PROJECT DESCRIPTION: add 6'x10' storage room under existing rear yard deck

PAID
in 3/5/21
check # 3204

BP2021-095**PROJECT NAME:** Chambers Storage Room
SITE ADDRESS: 103 Aviation Ave. E. Kill Devil Hills**BUILDING****ISSUED:** 04/27/2021**EXPIRES:** 10/24/2021**DETAILS****Permit**

Name	Value
CAMA PERMIT	N
CAMA EXEMPTION	N
ZONING DISTRICT	RL
PURPOSE	Residential Addition
FRONT YARD SETBACK	15
SIDE YARD SETBACK	6
REAR YARD SETBACK	20% Depth >30
FLOOD ZONE	X
BASE FLOOD ELEVATION	8
FINAL ELEVATION CERTIFICATE	N
CONSTRUCTION COST	8938.00
LOT COVERAGE	36.10
SURVEYOR NAME AND NUMBER	Ray Meekins L-2592
OCCUPANCY TYPE	One & Two Family Dwelling

REQUIRED INSPECTIONS

Zoning Final

Final

CONDITIONS

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

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

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

BP2021-095

PROJECT NAME: Chambers Storage Room
SITE ADDRESS: 103 Aviation Ave. E. Kill Devil Hills

BUILDING

ISSUED: 04/27/2021

EXPIRES: 10/24/2021

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

Issued By: Marty Shaw

Contractor or Authorized Agent: Clarence Gibbs Date: 04 / 29 / 2021



Town of Kill Devil Hills

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

MAY - 6 2021

Planning and Inspection Department

BP2021-099

PROJECT NAME: ANDERS STORAGE SHED
SITE ADDRESS: 513 LANDING DR W KILL DEVIL HILLS

BUILDING

ISSUED: 05/04/2021

EXPIRES: 10/31/2021

APPLICANT: John Anders
513 W Landing Dr
Kill Devil Hills, NC 27948

OWNER: John Anders
513 W Landing Dr
Kill Devil Hills, NC 27948

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

License: Unlicensed
Expires: 12/31/2021

PARCEL:

PIN: 988414238382

Parcel Number: 003597000

Address: 513 LANDING DR W KILL DEVIL HILLS

Zoning:

Addition: LANDING SECTION 3, THE

Block: 0 **Lot(s):** 81

Legal Description:

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

PROJECT DESCRIPTION: 12'X12' STORAGE SHED IN REAR YARD

BP2021-099

PROJECT NAME: ANDERS STORAGE SHED
SITE ADDRESS: 513 LANDING DR W KILL DEVIL HILLS

BUILDING

ISSUED: 05/04/2021

EXPIRES: 10/31/2021

DETAILS

Permit

Name	Value
CAMA PERMIT	N
CAMA EXEMPTION	N
ZONING DISTRICT	RL
PURPOSE	Residential Accessory
FRONT YARD SETBACK	30
SIDE YARD SETBACK	10
REAR YARD SETBACK	20% Depth >30
FLOOD ZONE	X
FINAL ELEVATION CERTIFICATE	N
CONSTRUCTION COST	4653.71
CONSTRUCTION TYPE	V
OCCUPANCY TYPE	One & Two Family Dwelling

REQUIRED INSPECTIONS

Zoning Final

Final

CONDITIONS

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

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

Issued By: _____

Contractor or Authorized Agent: _____

Date: 5-6-21

BP2021-099

PROJECT NAME: ANDERS STORAGE SHED

SITE ADDRESS: 513 LANDING DR W KILL DEVIL HILLS

BUILDING

ISSUED: 05/04/2021

EXPIRES: 10/31/2021



Town of Kill Devil Hills

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

Planning and Inspection Department

BP2021-102

PROJECT NAME: Moseley Pergola
SITE ADDRESS: 113 RALEIGH AVE KILL DEVIL HILLS

BUILDING

ISSUED: 05/05/2021

EXPIRES: 11/01/2021

APPLICANT: Annette & rory Moseley
63 Deel St.
LEBANON, VA 24266
276-889-5236

OWNER: Annette & rory Moseley
63 Deel St.
LEBANON, VA 24266
276-889-5236

CONTRACTOR: LONDON, ROBERT F JR
PO Box 785
Kitty Hawk, NC 27949
252-207-8644

GENERAL: LONDON, ROBERT F. JR.
Rt 1 Box 30
Harbinger, NC 27941
252-207-8644

License: 14364
Expires:

PARCEL:

PIN: 988419710962

Parcel Number: 003959000

Address: 113 RALEIGH AVE KILL DEVIL HILLS

Addition: KITTY HAWK SHORES - REVISED

Zoning:
Block: 0 **Lot(s):** 19

Legal Description:

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

PROJECT DESCRIPTION: Pergola on top of existing rear enclosure

PAID
MAY - 6 2021

TOWN OF
KILL DEVIL HILLS

BP2021-102**PROJECT NAME:** Moseley Pergola
SITE ADDRESS: 113 RALEIGH AVE KILL DEVIL HILLS**BUILDING****ISSUED:** 05/05/2021**EXPIRES:** 11/01/2021

DETAILS**Permit**

Name	Value
CAMA PERMIT	N
CAMA EXEMPTION	N
ZONING DISTRICT	RL
PURPOSE	Residential Addition
FRONT YARD SETBACK	15
SIDE YARD SETBACK	6
REAR YARD SETBACK	20% Depth >30
FLOOD ZONE	X
FINAL ELEVATION CERTIFICATE	N
CONSTRUCTION COST	2000.00
LOT COVERAGE	38.00
CONSTRUCTION TYPE	V
SURVEYOR NAME AND NUMBER	Marty Barnette L-3740
OCCUPANCY TYPE	One & Two Family Dwelling

REQUIRED INSPECTIONS

Zoning Final

Final

CONDITIONS

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

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

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

BP2021-102

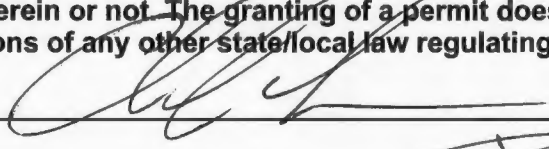
PROJECT NAME: Moseley Pergola
SITE ADDRESS: 113 RALEIGH AVE KILL DEVIL HILLS

BUILDING

ISSUED: 05/05/2021

EXPIRES: 11/01/2021

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

Issued By:  _____

Contractor or Authorized Agent:  _____ Date: 5/06/21



Town of Kill Devil Hills

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

PAID

MAY - 5 2021

Planning and Inspection Department

TOWN OF
KILL DEVIL HILLS

BP2021-103

PROJECT NAME: COPELAND STAIR REBUILD
SITE ADDRESS: 413 Landing Dr. KILL DEVIL HILLS

BUILDING

ISSUED: 05/05/2021

EXPIRES: 11/01/2021

APPLICANT: Copeland, Cameron
413 W Landing Dr.
Kill Devil Hills, NC 27948
252-202-5874

OWNER: Copeland, Cameron
413 W Landing Dr.
Kill Devil Hills, NC 27948
252-202-5874

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

License: Unlicensed
Expires: 12/31/2021

PARCEL:

PIN: 988414333578

Parcel Number: 003578000

Address: 413 Landing Dr. KILL DEVIL HILLS

Zoning:

Addition: LANDING SECTION 2, THE

Block: 0 **Lot(s):** 73

Legal Description:

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

PROJECT DESCRIPTION: REBUILD STAIR AND RAILINGS

BP2021-103

PROJECT NAME: COPELAND STAIR REBUILD
SITE ADDRESS: 413 Landing Dr. KILL DEVIL HILLS

BUILDING

ISSUED: 05/05/2021

EXPIRES: 11/01/2021

DETAILS

Permit

Name	Value
CAMA PERMIT	N
CAMA EXEMPTION	N
ZONING DISTRICT	RL
PURPOSE	Residential Repair/Remodel
FRONT YARD SETBACK	30
SIDE YARD SETBACK	15
REAR YARD SETBACK	20% Depth >30
STREET SIDE SETBACK	15
FLOOD ZONE	X
FINAL ELEVATION CERTIFICATE	N
CONSTRUCTION COST	1000.00
CONSTRUCTION TYPE	V
OCCUPANCY TYPE	One & Two Family Dwelling

REQUIRED INSPECTIONS

Zoning Final

Final

CONDITIONS

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

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

BP2021-103

PROJECT NAME: COPELAND STAIR REBUILD
SITE ADDRESS: 413 Landing Dr. KILL DEVIL HILLS

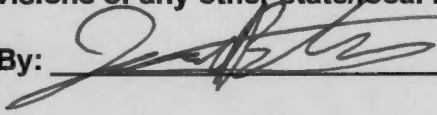
BUILDING

ISSUED: 05/05/2021

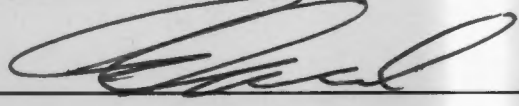
EXPIRES: 11/01/2021

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

Issued By: _____



Contractor or Authorized Agent: _____



Date: _____

5-5-2021



Town of Kill Devil Hills

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

PAID

MAY - 5 2021

Planning and Inspection Department

BP2021-100

PROJECT NAME: VANN PATIO AND SHED
SITE ADDRESS: 607 W Landing Dr Kill Devil Hills

BUILDING

ISSUED: 05/05/2021

EXPIRES: 11/01/2021

APPLICANT: Vann, Elaine
5535 Railroad Bed Road
Pantego, NC 27860
252-217-6123

OWNER: Vann, Elaine
5535 Railroad Bed Road
Pantego, NC 27860
252-217-6123

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

License: Unlicensed
Expires: 12/31/2021

PARCEL:

PIN: 988413230087

Parcel Number: 003611000

Address: 607 W Landing Dr Kill Devil Hills

Addition: LANDING SECTION 3, THE

Zoning:
Block: 0 **Lot(s):** 95

Legal Description:

FEES:	Paid	Due
Accessory Residential (MIN)	\$100.00	\$0.00
Accessory Residential (MIN)	\$100.00	\$0.00
Totals :	\$200.00	\$0.00

PROJECT DESCRIPTION: CONSTRUCT 12'X14' GRADE LEVEL WOODEN PATIO AND 8'X12' STORAGE SHED IN REAR YARD

BP2021-100PROJECT NAME: VANN PATIO AND SHED
SITE ADDRESS: 607 W Landing Dr Kill Devil Hills**BUILDING**

ISSUED: 05/05/2021

EXPIRES: 11/01/2021

DETAILS**Permit**

Name	Value
CAMA PERMIT	N
CAMA EXEMPTION	N
ZONING DISTRICT	RL
PURPOSE	Residential Accessory
FRONT YARD SETBACK	30
SIDE YARD SETBACK	10
REAR YARD SETBACK	20% Depth >30
STREET SIDE SETBACK	15
FLOOD ZONE	X
FINAL ELEVATION CERTIFICATE	N
CONSTRUCTION COST	2200.00
CONSTRUCTION TYPE	V
OCCUPANCY TYPE	One & Two Family Dwelling

REQUIRED INSPECTIONS

Zoning Final

Final

CONDITIONS

- * This permit becomes null and void if work or construction authorized is not commenced within 6 months or if construction or work is suspended for a period of 12 months at any time after work has started.
- * Construction must meet all aspect of Chapter 153 Zoning including lot coverage and setbacks.
- * Zoning Final Inspection is required.
- * Must comply with Wind Borne Debris requirements as defined in NCBC R301.2.1.2 and NCBC 1609.2.
- * Development must meet all aspects of Chapter 151 Flood Damage Prevention Ordinance including use and elevation.

BP2021-100

PROJECT NAME: VANN PATIO AND SHED
SITE ADDRESS: 607 W Landing Dr Kill Devil Hills

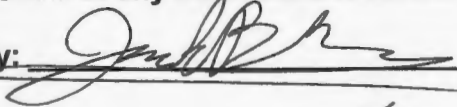
BUILDING

ISSUED: 05/05/2021

EXPIRES: 11/01/2021

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

Issued By: _____



Contractor or Authorized Agent: _____

Elaine M. Vann

Date: _____

5/5/21



Town of Kill Devil Hills

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

PAID

MAY - 4 2021

Planning and Inspection Department

BP2020-267

PROJECT NAME: SCOTT STAIR REBUILD
SITE ADDRESS: 105 CHARLOTTE ST KILL DEVIL HILLS

BUILDING

ISSUED: 11/12/2020

EXPIRES: 05/11/2021

APPLICANT: BETTY SCOTT
250 FOREST VIEW DRIVE
BASSETT, VA 24055-9164

OWNER: BETTY SCOTT
250 FOREST VIEW DRIVE
BASSETT, VA 24055-9164

UNLICENSED - REMODELING: DONALD FANTONE
1327 W KITTY HAWK RD
kitty hawk, nc 27949
252-455-1297

License: XXXXX
Expires:

PARCEL:

PIN: 988406297680

Parcel Number: 001902000

Address: 105 CHARLOTTE ST KILL DEVIL HILLS

Addition: AVALON BEACH ANNEX 1

Zoning:
Block: 0 **Lot(s):** 459

Legal Description:

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

PROJECT DESCRIPTION: REBUILD STAIR AND RAILINGS, SAME FOOTPRINT, AS-IS, WHERE IS

BP2020-267**PROJECT NAME:** SCOTT STAIR REBUILD
SITE ADDRESS: 105 CHARLOTTE ST KILL DEVIL HILLS**BUILDING****ISSUED:** 11/12/2020**EXPIRES:** 05/11/2021

DETAILS**Permit**

Name	Value
CAMA PERMIT	N
CAMA EXEMPTION	N
ZONING DISTRICT	C
PURPOSE	Residential Repair/Remodel
FRONT YARD SETBACK	15
SIDE YARD SETBACK	6
REAR YARD SETBACK	20% Depth >30
FLOOD ZONE	X
FINAL ELEVATION CERTIFICATE	N
CONSTRUCTION COST	2500.00
CONSTRUCTION TYPE	V
OCCUPANCY TYPE	One & Two Family Dwelling

REQUIRED INSPECTIONS

Zoning Final

Final

CONDITIONS

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

BP2020-267

PROJECT NAME: SCOTT STAIR REBUILD

SITE ADDRESS: 105 CHARLOTTE ST KILL DEVIL HILLS

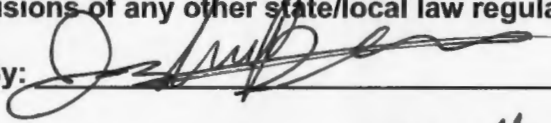
BUILDING

ISSUED: 11/12/2020

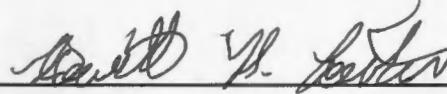
EXPIRES: 05/11/2021

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

Issued By: _____



Contractor or Authorized Agent: _____



Date: _____

5/18/21



Town of Kill Devil Hills

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

PAID
APR 30 2021

Planning and Inspection Department

BP2021-096

PROJECT NAME: PARKER STAIR AND RAILING
SITE ADDRESS: 526 LANDING DR W KILL DEVIL HILLS

BUILDING

ISSUED: 04/27/2021

EXPIRES: 10/24/2021

APPLICANT: R E JR PARKER
903 Indian Drive
KILL DEVIL HILLS, NC 27948

OWNER: R E JR PARKER
903 Indian Drive
KILL DEVIL HILLS, NC 27948

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

License: Unlicensed
Expires: 12/31/2021

PARCEL:

PIN: 988413234277

Parcel Number: 003633000

Address: 526 LANDING DR W KILL DEVIL HILLS

Zoning:

Addition: LANDING SECTION 3, THE

Block: 0 **Lot(s):** 117

Legal Description:

FEES:	<u>Paid</u>	<u>Due</u>
Building Permit Fee - Minimum Fee	\$150.00	\$0.00
Totals :	\$150.00	\$0.00

PROJECT DESCRIPTION: REBUILD STAIR AND RAILINGS ON REAR DECK

BP2021-096

PROJECT NAME: PARKER STAIR AND RAILING
SITE ADDRESS: 526 LANDING DR W KILL DEVIL HILLS

BUILDING**ISSUED:** 04/27/2021**EXPIRES:** 10/24/2021

DETAILS

Permit

Name	Value
CAMA PERMIT	N
CAMA EXEMPTION	N
ZONING DISTRICT	RL
PURPOSE	Residential Repair/Remodel
FRONT YARD SETBACK	30
SIDE YARD SETBACK	10
REAR YARD SETBACK	20% Depth >30
STREET SIDE SETBACK	15
FLOOD ZONE	X
FINAL ELEVATION CERTIFICATE	N
CONSTRUCTION COST	2000.00
CONSTRUCTION TYPE	V
OCCUPANCY TYPE	One & Two Family Dwelling

REQUIRED INSPECTIONS

Zoning Final

Final

CONDITIONS

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

* Zoning Final Inspection is required.

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

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

BP2021-096

PROJECT NAME: PARKER STAIR AND RAILING
SITE ADDRESS: 526 LANDING DR W KILL DEVIL HILLS

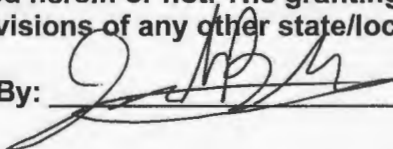
BUILDING

ISSUED: 04/27/2021

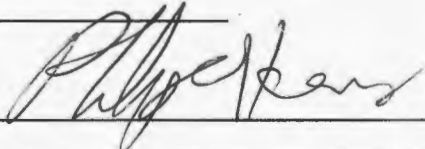
EXPIRES: 10/24/2021

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

Issued By: _____



Contractor or Authorized Agent: _____



Date: _____

4.30.21



Town of Kill Devil Hills

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

APR 30 2021

Planning and Inspection Department

MC2021-109	MECHANICAL
PROJECT NAME:	ISSUED: 04/30/2021
SITE ADDRESS: 115 TANYA DR KILL DEVIL HILLS	EXPIRES: 10/27/2021

APPLICANT: WENDELL BRATBURD
6518 Fordice Dr.
MOUNT AIRY, MD 21771

OWNER: WENDELL BRATBURD
6518 Fordice Dr.
MOUNT AIRY, MD21771

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

License: 12643
Expires: 12/31/2021

PARCEL:

PIN: 988415640102

Parcel Number: 003478000

Address: 115 TANYA DR KILL DEVIL HILLS

Addition: MEMORIAL OVERLOOK

Zoning:
Block: 0 **Lot(s):** 18

Legal Description:

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

PROJECT DESCRIPTION: HVAC replacement

PAID
Pr 4/30/21
Check #2135

MC2021-109

PROJECT NAME:

SITE ADDRESS: 115 TANYA DR KILL DEVIL HILLS

MECHANICAL

ISSUED: 04/30/2021

EXPIRES: 10/27/2021

DETAILS

Permit

Name	Value
PURPOSE	Residential Repair/Remodel
CONSTRUCTION COST	3768.00
CONSTRUCTION TYPE	V
FLOOD ZONE	X
NATURAL GAS SIGNOFF	N
OCCUPANCY TYPE	One & Two Family Dwelling

REQUIRED INSPECTIONS

Final

CONDITIONS

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

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

Issued By: Marty Shaw

Contractor or Authorized Agent: Tom McDonald Date: 04 / 30 / 2021



Town of Kill Devil Hills

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

PAID

MAY - 3 2021

Planning and Inspection Department

TOWN OF
KILL DEVIL HILLS

MC2021-108

PROJECT NAME: Adams

SITE ADDRESS: 233 ARCHDALE ST W KILL DEVIL HILLS

MECHANICAL

ISSUED: 04/29/2021

EXPIRES: 10/26/2021

APPLICANT: ADAMS, JOHN E III &
117 SEDGEFIELD ROAD
MOYOCK, NC 27958

OWNER: ADAMS, JOHN E III &
117 SEDGEFIELD ROAD
MOYOCK, NC 27958

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

License: 13056
Expires: 12/31/2021

PARCEL:

PIN: 988517016763

Parcel Number: 000487000

Address: 233 ARCHDALE ST W KILL DEVIL HILLS

Zoning:

Addition: VIRGINIA DARE SHORES

Block: 29 **Lot(s):** 4-6

Legal Description:

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

PROJECT DESCRIPTION: C/O 2 ton heat pump

PAID
4/30/21
Rog Pol

MC2021-108

PROJECT NAME: Adams

SITE ADDRESS: 233 ARCHDALE ST W KILL DEVIL HILLS

MECHANICAL

ISSUED: 04/29/2021

EXPIRES: 10/26/2021

DETAILS

Permit

Name	Value
PURPOSE	Residential Repair/Remodel
CONSTRUCTION COST	3899.00
CONSTRUCTION TYPE	V
FLOOD ZONE	X
NATURAL GAS SIGNOFF	N
OCCUPANCY TYPE	One & Two Family Dwelling

REQUIRED INSPECTIONS

Final

CONDITIONS

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

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

Issued By: Charles Thuman

Contractor or Authorized Agent: Jaclyn Slater **Date:** 04 / 30 / 2021



Town of Kill Devil Hills

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

PAID

MAY - 3 2021

Planning and Inspection Department

TOWN OF
KILL DEVIL HILLS

MC2021-107

PROJECT NAME:

SITE ADDRESS: 307 ST LOUIS ST KILL DEVIL HILLS

MECHANICAL

ISSUED: 04/28/2021

EXPIRES: 10/25/2021

APPLICANT: ANDREW KIDWELL III
2504 Hanover Ave.
Richmond, VA 00000

OWNER: ANDREW KIDWELL III
2504 Hanover Ave.
Richmond, VA 00000

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

License: 13056
Expires: 12/31/2021

PARCEL:

PIN: 987516940382

Parcel Number: 000187082

Address: 307 ST LOUIS ST KILL DEVIL HILLS

Addition: ORVILLE BEACH WEST

Zoning:
Block: 0 **Lot(s):** 82

Legal Description:

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

PROJECT DESCRIPTION: HVAC replacement

PAID
MAY 29/21
P.S. Pal

MC2021-107

PROJECT NAME:

SITE ADDRESS: 307 ST LOUIS ST KILL DEVIL HILLS

MECHANICAL

ISSUED: 04/28/2021

EXPIRES: 10/25/2021

DETAILS

Permit

Name	Value
PURPOSE	Residential Repair/Remodel
CONSTRUCTION COST	6769.00
CONSTRUCTION TYPE	V
FLOOD ZONE	X
NATURAL GAS SIGNOFF	N
OCCUPANCY TYPE	One & Two Family Dwelling

REQUIRED INSPECTIONS

Final

CONDITIONS

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Issued By: Marty Shaw

Contractor or Authorized Agent: Jaclyn Slater Date: 04 / 29 / 2021



Town of Kill Devil Hills

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

PAID

MAY - 3 2021

Planning and Inspection Department

TOWN OF
KILL DEVIL HILLS

MC2021-106

PROJECT NAME:

SITE ADDRESS: 1301 VA DARE TRL S KILL DEVIL HILLS

MECHANICAL

ISSUED: 04/28/2021

EXPIRES: 10/25/2021

APPLICANT: Hauser, Emil
2535 Ogden Street
FALLS CHURCH, VA22043

OWNER: Hauser, Emil
2535 Ogden Street
FALLS CHURCH, VA22043

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

License: 13056
Expires: 12/31/2021

PARCEL:

PIN: 989309067738

Parcel Number: 004662000

Address: 1301 VA DARE TRL S KILL DEVIL HILLS

Addition: KILL DEVIL BEACH SEC 1 REVISED

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

Legal Description:

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

PROJECT DESCRIPTION: HVAC replacement

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R 4/29/21
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MC2021-106

PROJECT NAME:

SITE ADDRESS: 1301 VA DARE TRL S KILL DEVIL HILLS

MECHANICAL

ISSUED: 04/28/2021

EXPIRES: 10/25/2021

DETAILS

Permit

Name	Value
PURPOSE	Residential Repair/Remodel
CONSTRUCTION COST	13328.00
CONSTRUCTION TYPE	V
FLOOD ZONE	VE
BASE FLOOD ELEVATION	10
NATURAL GAS SIGNOFF	N
OCCUPANCY TYPE	One & Two Family Dwelling

REQUIRED INSPECTIONS

Final

CONDITIONS

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Issued By: Marty Shaw

Contractor or Authorized Agent: Jaclyn Slater Date: 04 / 29 / 2021



Town of Kill Devil Hills

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

MAY - 4 2021

Planning and Inspection Department

PAID
MAY 4 2021

MC2021-111

PROJECT NAME: Cornwell HVAC
SITE ADDRESS: 1611 CROATAN HWY N KILL DEVIL HILLS

MECHANICAL

ISSUED: 05/03/2021

EXPIRES: 10/30/2021

APPLICANT: Chris Cornwell
30499 Berlin Dory Rd
sedley, va 23878
757-651-8851

OWNER: Chris Cornwell
30499 Berlin Dory Rd
sedley, va 23878
757-651-8851

MECHANICAL: ALL SEASONS HEATING & COOLING
P.O. Box 244
Point Harbor, NC 27964
491-9232

License: 19091
Expires: 12/31/2021

PARCEL:

PIN: 988410464166

Parcel Number: 003136022

Address: 1611 CROATAN HWY N KILL DEVIL HILLS

Addition: DELRAY BEACH RESUBDIV

Zoning:
Block: 3 **Lot(s):** 22

Legal Description:

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

PROJECT DESCRIPTION: C/O 2.5 Ton HVAC system

PAID
MAY 5/3/21
By Paul

MC2021-111

PROJECT NAME: Cornwell HVAC

SITE ADDRESS: 1611 CROATAN HWY N KILL DEVIL HILLS

MECHANICAL

ISSUED: 05/03/2021

EXPIRES: 10/30/2021

DETAILS

Permit

Name	Value
PURPOSE	Residential Repair/Remodel
CONSTRUCTION COST	7850.00
CONSTRUCTION TYPE	V
FLOOD ZONE	X
NATURAL GAS SIGNOFF	N
OCCUPANCY TYPE	One & Two Family Dwelling

REQUIRED INSPECTIONS


Final

CONDITIONS

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Issued By: Charles Thuman

Contractor or Authorized Agent:  Date: 05 / 03 / 2021



Town of Kill Devil Hills

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

PAID
MAY - 4 2021

Planning and Inspection Department

PAID

MC2021-110	MECHANICAL
PROJECT NAME: Curtis HVAC	ISSUED: 05/03/2021
SITE ADDRESS: 1817 BAY DR KILL DEVIL HILLS	EXPIRES: 10/30/2021

APPLICANT: RONNIE & TINEY CURTIS 1817 Bay Dr. KILL DEVIL HILLS, NC 27948	OWNER: RONNIE & TINEY CURTIS 1817 Bay Dr. KILL DEVIL HILLS, NC 27948
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MECHANICAL:	ALL SEASONS HEATING & COOLING P.O. Box 244 Point Harbor, NC 27964 491-9232	License: 19091 Expires: 12/31/2021
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PARCEL:

PIN: 988409062567	Parcel Number: 002528000
Address: 1817 BAY DR KILL DEVIL HILLS	Zoning:
Addition: CROATAN SHORES INC SEC 1	Block: 19 Lot(s): 17A
Legal Description:	

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

PROJECT DESCRIPTION: C/O 2.5 Ton HVAC system

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MC2021-110

PROJECT NAME: Curtis HVAC

SITE ADDRESS: 1817 BAY DR KILL DEVIL HILLS

MECHANICAL

ISSUED: 05/03/2021

EXPIRES: 10/30/2021

DETAILS

Permit

Name	Value
PURPOSE	Residential Repair/Remodel
CONSTRUCTION COST	6200.00
CONSTRUCTION TYPE	V
FLOOD ZONE	X
NATURAL GAS SIGNOFF	N
OCCUPANCY TYPE	One & Two Family Dwelling

REQUIRED INSPECTIONS


Final

CONDITIONS

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Issued By: Charles Thuman

Contractor or Authorized Agent:  Date: 05 / 03 / 2021



Town of Kill Devil Hills

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

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MAY - 4 2021
TOWN OF
KILL DEVIL HILLS

Planning and Inspection Department

MC2021-114	MECHANICAL
PROJECT NAME: Bill-Mar HVAC	ISSUED: 05/03/2021
SITE ADDRESS: 1517 NORTH VIRGINIA DARE TRAIL KILL DEVIL HILLS	EXPIRES: 10/30/2021

APPLICANT: BILL-MAR PROPERTIES, LLC 1824 RIVERSHORE RD ELIZABETH CITY, NC 27909 252-333-5666	OWNER: BILL-MAR PROPERTIES, LLC 1824 RIVERSHORE RD ELIZABETH CITY, NC 27909 252-333-5666
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MECHANICAL, H-2, H-3:	ATLANTIC HEATING AND COOLING P.O. Box 132 Kill Devil Hills, NC 27948 441-7642	License: 34340 Expires: 12/31/2021
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PARCEL:

PIN: 002768000	Parcel Number:
Address: 1517 NORTH VIRGINIA DARE TRAIL KILL DEVIL HILLS	Zoning:
Addition:	Block: Lot(s):
Legal Description: CROATAN SHORES, LOT: 12-13 BLK: A SEC 1	

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

PROJECT DESCRIPTION: C/O 2.5 Ton HVAC system

PAID
5/3/21
Pg 1 of 2

MC2021-114**PROJECT NAME:** Bill-Mar HVAC**SITE ADDRESS:** 1517 NORTH VIRGINIA DARE TRAIL KILL DEVIL HILLS**MECHANICAL****ISSUED:** 05/03/2021**EXPIRES:** 10/30/2021**DETAILS****Permit**

Name	Value
PURPOSE	Residential Repair/Remodel
CONSTRUCTION COST	5775.00
CONSTRUCTION TYPE	V
FLOOD ZONE	VE
BASE FLOOD ELEVATION	12
NATURAL GAS SIGNOFF	N
OCCUPANCY TYPE	One & Two Family Dwelling

REQUIRED INSPECTIONS

Final

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Issued By: Charles ThumanContractor or Authorized Agent: Andrew L Buchanan Date: 05 / 03 / 2021



Town of Kill Devil Hills

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

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MAY - 4 2021

Planning and Inspection Department

TOWN OF
KILL DEVIL HILLS

MC2021-115

PROJECT NAME: Velazquez HVAC
SITE ADDRESS: 219 SOTHEL ST W KILL DEVIL HILLS

MECHANICAL

ISSUED: 05/03/2021

EXPIRES: 10/30/2021

APPLICANT: Velazquez, Ryan
219 Sothel St
Kill Devil Hills, NC 27948

OWNER: Velazquez, Ryan
219 Sothel St
Kill Devil Hills, NC 27948

MECHANICAL, H-2, H-3:

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

License: 34340
Expires: 12/31/2021

PARCEL:

PIN: 988517025218

Parcel Number: 000510000

Address: 219 SOTHEL ST W KILL DEVIL HILLS

Zoning:

Addition: VIRGINIA DARE SHORES

Block: 31 Lot(s): 13-15

Legal Description:

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

PROJECT DESCRIPTION: C/O 3 Ton HVAC system

11' X 9' Flood Zone

PAID
PE 3/4/21
Pg 1 P-1

MC2021-115

PROJECT NAME: Velazquez HVAC
SITE ADDRESS: 219 SOTHEL ST W KILL DEVIL HILLS

MECHANICAL

ISSUED: 05/03/2021

EXPIRES: 10/30/2021

DETAILS

Permit

Name	Value
PURPOSE	Residential Repair/Remodel
CONSTRUCTION COST	6050.00
CONSTRUCTION TYPE	V
NATURAL GAS SIGNOFF	N
OCCUPANCY TYPE	One & Two Family Dwelling

REQUIRED INSPECTIONS

Final

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Issued By: Charles Thuman

Contractor or Authorized Agent: Andrew L Buchanan Date: 05 / 03 / 2021



Town of Kill Devil Hills

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

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MAY - 4 2021

Planning and Inspection Department

MC2021-113	MECHANICAL
PROJECT NAME: Zaepfel HVAC	ISSUED: 05/03/2021
SITE ADDRESS: 606 FIFTH ST W KILL DEVIL HILLS	EXPIRES: 10/30/2021

APPLICANT: ZAEPFEL, HELENE D
1521 SLEEPY LAKE PARKWAY
SUFFOLK, VA 23433

OWNER: ZAEPFEL, HELENE D
1521 SLEEPY LAKE PARKWAY
SUFFOLK, VA 23433

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

License: 12643
Expires: 12/31/2021

PARCEL:

PIN: 988405183450

Parcel Number: 002077000

Address: 606 FIFTH ST W KILL DEVIL HILLS

Addition: WRIGHT'S SHORES

Zoning:

Block: 0 **Lot(s):** 24

Legal Description:

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

PROJECT DESCRIPTION: C/O 1.5Ton HVAC system



PAID
5/4/21
CK # 2143

MC2021-113

PROJECT NAME: Zaepfel HVAC

SITE ADDRESS: 606 FIFTH ST W KILL DEVIL HILLS

MECHANICAL

ISSUED: 05/03/2021

EXPIRES: 10/30/2021

DETAILS

Permit

Name	Value
PURPOSE	Residential Repair/Remodel
CONSTRUCTION COST	5302.00
CONSTRUCTION TYPE	V
FLOOD ZONE	X
NATURAL GAS SIGNOFF	N
OCCUPANCY TYPE	One & Two Family Dwelling

REQUIRED INSPECTIONS

Final

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Issued By: Charles Thuman

Contractor or Authorized Agent: Tom McDonald Date: 05 / 03 / 2021



Town of Kill Devil Hills

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

PAID

MAY - 6 2021

Planning and Inspection Department

MC2021-117

PROJECT NAME: Powers HVAC
SITE ADDRESS: 1303 Theodore St. Kill Devil Hills

MECHANICAL

ISSUED: 05/05/2021

EXPIRES: 11/01/2021

APPLICANT: Powers, Julie
1303 Theodore St
Kill Devil Hills, NC 27948

OWNER: Powers, Julie
1303 Theodore St
Kill Devil Hills, NC 27948

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

License: 23299
Expires: 12/31/2021

PARCEL:

PIN: 988312853583

Parcel Number: 008222001

Address: 1303 Theodore St. Kill Devil Hills

Addition: KILL DEVIL BEACH EXTENDED

Zoning:
Block: Y **Lot(s):** 15

Legal Description:

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

PROJECT DESCRIPTION: C/O 2.5Ton HVAC system

PAID
MC 5/6/21
check # 9731

MC2021-117

PROJECT NAME: Powers HVAC

SITE ADDRESS: 1303 Theodore St. Kill Devil Hills

MECHANICAL

ISSUED: 05/05/2021

EXPIRES: 11/01/2021

DETAILS

Permit

Name	Value
PURPOSE	Residential Repair/Remodel
CONSTRUCTION COST	5800.00
CONSTRUCTION TYPE	V
FLOOD ZONE	X
NATURAL GAS SIGNOFF	N
OCCUPANCY TYPE	One & Two Family Dwelling

REQUIRED INSPECTIONS

Final

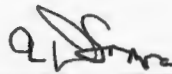
CONDITIONS

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Issued By: Charles Thuman

Contractor or Authorized Agent: _____



Date: 05 / 05 / 2021



Town of Kill Devil Hills

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

PAID

MAY - 6 2021

Planning and Inspection Department

MC2021-116

PROJECT NAME: Liverman HVAC
SITE ADDRESS: 218 GUNAS DR KILL DEVIL HILLS

MECHANICAL

ISSUED: 05/05/2021

EXPIRES: 11/01/2021

APPLICANT: FRED L LIVERMAN
415 Curtis Street North
AHOSKIE, NC 27910
252-332-7999

OWNER: FRED L LIVERMAN
415 Curtis Street North
AHOSKIE, NC 27910
252-332-7999

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

License: 23299
Expires: 12/31/2021

PARCEL:

PIN: 988316947000

Parcel Number: 008426000

Address: 218 GUNAS DR KILL DEVIL HILLS

Addition: OCEAN ACRES TRACT 3 SEC 1

Zoning:
Block: C **Lot(s):** 20

Legal Description:

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

PROJECT DESCRIPTION: C/O 2.5Ton HVAC system

PAID
M 5/6/21
Check # 9731

MC2021-116

PROJECT NAME: Liverman HVAC

SITE ADDRESS: 218 GUNAS DR KILL DEVIL HILLS

MECHANICAL

ISSUED: 05/05/2021

EXPIRES: 11/01/2021

DETAILS

Permit

Name	Value
PURPOSE	Residential Repair/Remodel
CONSTRUCTION COST	5800.00
CONSTRUCTION TYPE	V
FLOOD ZONE	X
NATURAL GAS SIGNOFF	N
OCCUPANCY TYPE	One & Two Family Dwelling

REQUIRED INSPECTIONS

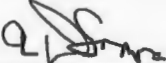
Final

CONDITIONS

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Issued By: Charles Thuman

Contractor or Authorized Agent:  Date: 05/05/2021



Town of Kill Devil Hills

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

MAY - 6 2021

Planning and Inspection Department

MC2021-119	MECHANICAL
PROJECT NAME: Talbott HVAC	ISSUED: 05/06/2021
SITE ADDRESS: 1729 SOBLE DR KILL DEVIL HILLS	EXPIRES: 11/02/2021

APPLICANT: TALBOTT, ROSE K
PO Box 7127
Kill Devil Hills, NC 27948

OWNER: TALBOTT, ROSE K
PO Box 7127
Kill Devil Hills, NC 27948

MECHANICAL H-3 CLASS 1: NORTH BEACH SERVICES
P.O. Box 181
Kitty Hawk, NC 27949
252-491-2878

License: 22053
Expires: 12/31/2021

PARCEL:

PIN: 988406471561

Parcel Number: 002920000

Address: 1729 SOBLE DR KILL DEVIL HILLS

Addition: HEDRICKS ADD-PAR B CROATAN SH

Zoning:
Block: 0 **Lot(s):** 3

Legal Description:

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

PROJECT DESCRIPTION: C/O 2 Ton HVAC system



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MC2021-119

PROJECT NAME: Talbott HVAC

SITE ADDRESS: 1729 SOBLE DR KILL DEVIL HILLS

MECHANICAL

ISSUED: 05/06/2021

EXPIRES: 11/02/2021

DETAILS

Permit

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

REQUIRED INSPECTIONS

Final

CONDITIONS

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Issued By: Charles Thuman

Contractor or Authorized Agent: Gabby Willis **Date:** 05 / 06 / 2021



Town of Kill Devil Hills

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

PAID
MAY - 7 2021

Planning and Inspection Department

MC2021-120

PROJECT NAME: Knieper HVAC
SITE ADDRESS: 1116 FOURTH ST W KILL DEVIL HILLS

MECHANICAL
ISSUED: 05/06/2021
EXPIRES: 11/02/2021

APPLICANT: Knieper, Erin
1116 Fourth St
Kill Devil Hills, NC 27948

OWNER: Knieper, Erin
1116 Fourth St
Kill Devil Hills, NC 27948

PARCEL:

PIN: 988409074122

Parcel Number: 002286000

Address: 1116 FOURTH ST W KILL DEVIL HILLS

Addition: WRIGHT'S SHORES SEC 2

Zoning:
Block: 0 **Lot(s):** 62

Legal Description:

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

PROJECT DESCRIPTION: C/O 2 Ton HVAC system

DETAILS

Permit

Name	Value
PURPOSE	Residential Repair/Remodel
CONSTRUCTION COST	6590.00
FLOOD ZONE	X
NATURAL GAS SIGNOFF	N
OCCUPANCY TYPE	One & Two Family Dwelling

PAID
rc 5/7/21
check # 2152

MC2021-120

PROJECT NAME: Knieper HVAC

SITE ADDRESS: 1116 FOURTH ST W KILL DEVIL HILLS

MECHANICAL

ISSUED: 05/06/2021

EXPIRES: 11/02/2021

REQUIRED INSPECTIONS

Final

CONDITIONS

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Issued By: Charles Thuman

Contractor or Authorized Agent: Tom McDonald Date: 05 / 06 / 2021



Town of Kill Devil Hills

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

PAID

MAY 10 2021

Planning and Inspection Department

TOWN OF
KILL DEVIL HILLS

MC2021-124

PROJECT NAME:

SITE ADDRESS: 310 GUNAS DR KILL DEVIL HILLS

MECHANICAL

ISSUED: 05/07/2021

EXPIRES: 11/03/2021

APPLICANT: Blanchard, Michael & Katherine
310 Gunas DR
Kill Devil Hills, NC 27948
252-599-1160

OWNER: Blanchard, Michael & Katherine
310 Gunas DR
Kill Devil Hills, NC 27948
252-599-1160

MECHANICAL H-3 CLASS 1: NORTH BEACH SERVICES
P.O. Box 181
Kitty Hawk, NC 27949
252-491-2878

License: 22053
Expires: 12/31/2021

PARCEL:

PIN: 988316932696

Parcel Number: 008490000

Address: 310 GUNAS DR KILL DEVIL HILLS

Addition: OCEAN ACRES TRACT 3 SEC 1

Zoning:

Block: G **Lot(s):** 12

Legal Description:

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

PROJECT DESCRIPTION: HVAC replacement

PAID
R 5/10/21
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MC2021-124

PROJECT NAME:

SITE ADDRESS: 310 GUNAS DR KILL DEVIL HILLS

MECHANICAL

ISSUED: 05/07/2021

EXPIRES: 11/03/2021

DETAILS

Permit

Name	Value
PURPOSE	Residential Repair/Remodel
CONSTRUCTION COST	9500.00
CONSTRUCTION TYPE	V
FLOOD ZONE	X
NATURAL GAS SIGNOFF	N
OCCUPANCY TYPE	One & Two Family Dwelling

REQUIRED INSPECTIONS

Final

CONDITIONS

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

Issued By: Marty Shaw

Contractor or Authorized Agent: Gabby Willis Date: 05 / 07 / 2021



Town of Kill Devil Hills

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

PAID
MAY 10 2021

Planning and Inspection Department

MC2021-121	MECHANICAL
PROJECT NAME: Bunch HVAC	ISSUED: 05/06/2021
SITE ADDRESS: 1207 MEMORIAL BLVD S KILL DEVIL HILLS	EXPIRES: 11/02/2021

APPLICANT: RODNEY BUNCH
700 E Main St Apt 202
ELIZABETH CITY, NC 27909

OWNER: RODNEY BUNCH
700 E Main St Apt 202
ELIZABETH CITY, NC 27909

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

License: 13056
Expires: 12/31/2021

PARCEL:

PIN: 988312978403

Parcel Number: 004282022

Address: 1207 MEMORIAL BLVD S KILL DEVIL HILLS

Addition: KILL DEVIL HILLS SEC 1

Zoning:
Block: 6 **Lot(s):** 22

Legal Description:

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

PROJECT DESCRIPTION: C/O 2 Ton HVAC system

PAID
5/10/21
pay pal

MC2021-121**PROJECT NAME:** Bunch HVAC
SITE ADDRESS: 1207 MEMORIAL BLVD S KILL DEVIL HILLS**MECHANICAL****ISSUED:** 05/06/2021**EXPIRES:** 11/02/2021**DETAILS****Permit**

Name	Value
PURPOSE	Residential Repair/Remodel
CONSTRUCTION COST	7910.00
CONSTRUCTION TYPE	V
FLOOD ZONE	X
NATURAL GAS SIGNOFF	N
OCCUPANCY TYPE	One & Two Family Dwelling

REQUIRED INSPECTIONS

Final

CONDITIONS

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

Issued By: Charles Thuman**Contractor or Authorized Agent:** Jaclyn Slater **Date:** 05 / 10 / 2021



Town of Kill Devil Hills

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

PAID

MAY 12 2021

Planning and Inspection Department

TOWN OF
KILL DEVIL HILLS

MC2021-125

PROJECT NAME:

SITE ADDRESS: 400 BURNS DR KILL DEVIL HILLS

MECHANICAL

ISSUED: 05/07/2021

EXPIRES: 11/03/2021

APPLICANT: JOSEPH & WENDY MERTZ
400 Burns Dr.
KILL DEVIL HILLS, NC 27948

OWNER: JOSEPH & WENDY MERTZ
400 Burns Dr.
KILL DEVIL HILLS, NC 27948

MECHANICAL: ALL SEASONS HEATING & COOLING
P.O. Box 244
Point Harbor, NC 27964
491-9232

License: 19091
Expires: 12/31/2021

PARCEL:

PIN: 988316836859

Parcel Number: 008457012

Address: 400 BURNS DR KILL DEVIL HILLS

Addition: OCEAN ACRES TRACT 3 SEC 1

Zoning:
Block: E **Lot(s):** 12

Legal Description:

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

PROJECT DESCRIPTION: HVAC replacement

PAID
5/11/21
Peg Per

MC2021-125

PROJECT NAME:

SITE ADDRESS: 400 BURNS DR KILL DEVIL HILLS

MECHANICAL

ISSUED: 05/07/2021

EXPIRES: 11/03/2021

DETAILS

Permit

Name	Value
PURPOSE	Residential Repair/Remodel
CONSTRUCTION COST	5430.00
CONSTRUCTION TYPE	V
FLOOD ZONE	X
NATURAL GAS SIGNOFF	N
OCCUPANCY TYPE	One & Two Family Dwelling

REQUIRED INSPECTIONS

Final

CONDITIONS

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

Issued By: Marty Shaw

Contractor or Authorized Agent: [Signature] **Date:** 05 / 07 / 2021



Town of Kill Devil Hills

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

PAID

MAY 12 2021

TOWN OF
KILL DEVIL HILLS

Planning and Inspection Department

MC2021-123

PROJECT NAME:

SITE ADDRESS: 3124 SEA WING CT KILL DEVIL HILLS

MECHANICAL

ISSUED: 05/07/2021

EXPIRES: 11/03/2021

APPLICANT: HANCHETTE, CASEY
3124 Sea Wing Ct
Kill Devil Hills, NC 27948

OWNER: HANCHETTE, CASEY
3124 Sea Wing Ct
Kill Devil Hills, NC 27948

MECHANICAL H-3 CLASS 1: HARCO AIR
PO BOX 3156
KITTY HAWK, NC 27949
207-1371

License: 30194
Expires: 12/31/2021

PARCEL:

PIN: 988513036884

Parcel Number: 000971000

Address: 3124 SEA WING CT KILL DEVIL HILLS

Addition:

Zoning:

Block: 0

Lot(s): 20

Legal Description:

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

PROJECT DESCRIPTION: HVAC replacement

PAID
5/11/21
By [Signature]

MC2021-123
PROJECT NAME:
SITE ADDRESS: 3124 SEA WING CT KILL DEVIL HILLS

MECHANICAL
ISSUED: 05/07/2021
EXPIRES: 11/03/2021

DETAILS

Permit

Name	Value
PURPOSE	Residential Repair/Remodel
CONSTRUCTION COST	12730.00
CONSTRUCTION TYPE	V
FLOOD ZONE	X
NATURAL GAS SIGNOFF	N
OCCUPANCY TYPE	One & Two Family Dwelling

REQUIRED INSPECTIONS

Final

CONDITIONS

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

Issued By: Marty Shaw

Contractor or Authorized Agent: Robert Date: 05 / 10 / 2021



Town of Kill Devil Hills

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

PAID

MAY 13 2021

Planning and Inspection Department

TOWN OF
KILL DEVIL HILLS

MC2021-128	MECHANICAL
PROJECT NAME: Lisa Sheppard	ISSUED: 05/12/2021
SITE ADDRESS: 105 WILSON ST KILL DEVIL HILLS	EXPIRES: 11/08/2021

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

OWNER: Sheppard, Lisa
105 Wilson Street
Kill Devil Hills, NC 27948

MECHANICAL, H-3, I:

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

License: 18066
Expires: 12/31/2021

PARCEL:

PIN: 988517202493

Parcel Number: 001827000

Address: 105 WILSON ST KILL DEVIL HILLS

Addition: AVALON BEACH ANNEX 1

Zoning:
Block: 0 **Lot(s):** 379

Legal Description:

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

PROJECT DESCRIPTION: HVAC

PAID
RL 5/13/21
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MC2021-128

PROJECT NAME: Lisa Sheppard
SITE ADDRESS: 105 WILSON ST KILL DEVIL HILLS

MECHANICAL

ISSUED: 05/12/2021

EXPIRES: 11/08/2021

DETAILS

Permit

Name	Value
PURPOSE	Residential Repair/Remodel
CONSTRUCTION COST	6750.00
FLOOD ZONE	X
NATURAL GAS SIGNOFF	N
OCCUPANCY TYPE	One & Two Family Dwelling

REQUIRED INSPECTIONS

Final

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Issued By: Marty Shaw

Contractor or Authorized Agent: H. W. Francis **Date:** 05 / 12 / 2021



Town of Kill Devil Hills

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

PAID
MAY 14 2021

Planning and Inspection Department

MC2021-122	MECHANICAL
PROJECT NAME:	ISSUED: 05/07/2021
SITE ADDRESS: 807 FOURTH ST W KILL DEVIL HILLS	EXPIRES: 11/03/2021

APPLICANT: Simpkins, Barbara 1955 Elliot Farm RD FAYETTEVILLE, NC 28311	OWNER: Simpkins, Barbara 1955 Elliot Farm RD FAYETTEVILLE, NC 28311
--	--

MECHANICAL, H-3, I:	AIR HANDLERS OBX 8788 Caratoke Hwy Harbinger, NC 27941 252-216-8945	License: 23577 Expires: 12/31/2021
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PARCEL:

PIN: 988409172328	Parcel Number: 002256000
Address: 807 FOURTH ST W KILL DEVIL HILLS	Zoning:
Addition: WRIGHT'S SHORES SEC 2	Block: 0 Lot(s): 28
Legal Description:	

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

PROJECT DESCRIPTION: HVAC replacement

PAID
on 5/15/21
Arch # 1109

MC2021-122

PROJECT NAME:

SITE ADDRESS: 807 FOURTH ST W KILL DEVIL HILLS

MECHANICAL

ISSUED: 05/07/2021

EXPIRES: 11/03/2021

DETAILS

Permit

Name	Value
PURPOSE	Residential Repair/Remodel
CONSTRUCTION COST	6142.00
CONSTRUCTION TYPE	V
FLOOD ZONE	X
NATURAL GAS SIGNOFF	N
OCCUPANCY TYPE	One & Two Family Dwelling

REQUIRED INSPECTIONS

Final

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Issued By: Marty Shaw

Contractor or Authorized Agent: Linda Burgess Date: 05 / 12 / 2021



Town of Kill Devil Hills

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

PAID

MAY 14 2021

Planning and Inspection Department

TOWN OF
 KILL DEVIL HILLS

MC2021-134

PROJECT NAME: Owen HVAC
SITE ADDRESS: 103 LANDING DR W KILL DEVIL HILLS

MECHANICAL

ISSUED: 05/14/2021

EXPIRES: 11/10/2021

APPLICANT: OWEN, WILLIAM L JR
 2139 Spindle Top Tr
 Frisco, TX 75033

OWNER: OWEN, WILLIAM L JR
 2139 Spindle Top Tr
 Frisco, TX 75033

MECHANICAL H-3 CLASS 1: NORTH BEACH SERVICES
 P.O. Box 181
 Kitty Hawk, NC 27949
 252-491-2878

License: 22053
Expires: 12/31/2021

PARCEL:

PIN: 988414449609

Parcel Number: 009155000

Address: 103 LANDING DR W KILL DEVIL HILLS

Zoning:

Addition: LANDING SECTION 1, THE

Block: 0 **Lot(s):** 43

Legal Description:

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

PROJECT DESCRIPTION: C/O 2 Ton HVAC system



PAID
 5/15/21
 [Signature]

MC2021-134

PROJECT NAME: Owen HVAC

SITE ADDRESS: 103 LANDING DR W KILL DEVIL HILLS

MECHANICAL

ISSUED: 05/14/2021

EXPIRES: 11/10/2021

DETAILS

Permit

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

REQUIRED INSPECTIONS

Final

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Issued By: Charles Thuman

Contractor or Authorized Agent: Gabby Willis **Date:** 05 / 14 / 2021



Town of Kill Devil Hills

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

MAY 14 2021

Planning and Inspection Department

MC2021-131	MECHANICAL
PROJECT NAME: Lycett HAVC	ISSUED: 05/13/2021
SITE ADDRESS: 910 CONSOLE LN KILL DEVIL HILLS	EXPIRES: 11/09/2021

APPLICANT: Lycett, Charles 910 Console Ct Kill Devil Hills, NC 27948	OWNER: Lycett, Charles 910 Console Ct Kill Devil Hills, NC 27948
---	---

H3, CLASS 1:	One Hour Heating and Air Conditioning 701 Fresh Pond West Kill Devil Hills, NC 27948 441-1740	License: 12643 Expires: 12/31/2021
---------------------	--	---

PARCEL:

PIN: 988405078526	Parcel Number: 027148000
Address: 910 CONSOLE LN KILL DEVIL HILLS	
Addition: WRIGHT'S SHORES SEC 2	Zoning:
Legal Description:	Block: 0 Lot(s): 83

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

PROJECT DESCRIPTION: C/O 3 Ton HVAC system

PAID
Pa ab 5/15/21
chl # 2175

MC2021-131

PROJECT NAME: Lycett HAVC

SITE ADDRESS: 910 CONSOLE LN KILL DEVIL HILLS

MECHANICAL

ISSUED: 05/13/2021

EXPIRES: 11/09/2021

DETAILS

Permit

Name	Value
PURPOSE	Residential Repair/Remodel
CONSTRUCTION COST	7229.00
CONSTRUCTION TYPE	V
FLOOD ZONE	X
NATURAL GAS SIGNOFF	N
OCCUPANCY TYPE	One & Two Family Dwelling

REQUIRED INSPECTIONS

Final

CONDITIONS

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Issued By: Charles Thuman

Contractor or Authorized Agent: Tom McDonald Date: 05 / 13 / 2021



Town of Kill Devil Hills

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

MAY 14 2021

Planning and Inspection Department

MC2021-130

PROJECT NAME: Burkley HVAC
SITE ADDRESS: 815 KITTY CT KILL DEVIL HILLS

MECHANICAL

ISSUED: 05/13/2021

EXPIRES: 11/09/2021

APPLICANT: BRUCE BURKLEY
815 Kitty Ct
Kill Devil Hills, NC 27948

OWNER: BRUCE BURKLEY
815 Kitty Ct
Kill Devil Hills, NC 27948

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

License: 12643
Expires: 12/31/2021

PARCEL:

PIN: 988405079838

Parcel Number: 002197000

Address: 815 KITTY CT KILL DEVIL HILLS

Zoning:

Addition: WRIGHT'S SHORES

Block: 0 **Lot(s):** 103

Legal Description:

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

PROJECT DESCRIPTION: C/O 2 Ton Heat pump



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R 5/13/21
Chk # 2175

MC2021-130

PROJECT NAME: Burkley HVAC

SITE ADDRESS: 815 KITTY CT KILL DEVIL HILLS

MECHANICAL

ISSUED: 05/13/2021

EXPIRES: 11/09/2021

DETAILS

Permit

Name	Value
PURPOSE	Residential Repair/Remodel
CONSTRUCTION COST	3378.00
CONSTRUCTION TYPE	V
FLOOD ZONE	X
NATURAL GAS SIGNOFF	N
OCCUPANCY TYPE	One & Two Family Dwelling

REQUIRED INSPECTIONS

Final

CONDITIONS

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Issued By: Charles Thuman

Contractor or Authorized Agent: Tom McDonald Date: 05 / 13 / 2021



Town of Kill Devil Hills

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

PAID

MAY 13 2021

Planning and Inspection Department

TOWN OF
KILL DEVIL HILLS

MC2021-129

PROJECT NAME: White Hvac
SITE ADDRESS: 1511 SIR WALTER RD KILL DEVIL HILLS

MECHANICAL

ISSUED: 05/13/2021

EXPIRES: 11/09/2021

APPLICANT: WHITE, JOSEPH R
CHRISTINA L WHITE
1511 Sir Walter Rd
Kill Devil Hills, NC 27948

OWNER: WHITE, JOSEPH R
CHRISTINA L WHITE
1511 Sir Walter Rd
Kill Devil Hills, NC 27948

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

License: 13056
Expires: 12/31/2021

PARCEL:

PIN: 988411555466

Parcel Number: 003190000

Address: 1511 SIR WALTER RD KILL DEVIL HILLS

Addition: W R DEATON - DELRAY BEACH

Zoning:

Block: D **Lot(s):** 35

Legal Description:

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

PROJECT DESCRIPTION: C/O 2.5 Ton HVAC system W/ duct mods



PAID

5/13/21
pay pay

MC2021-129

PROJECT NAME: White Hvac

SITE ADDRESS: 1511 SIR WALTER RD KILL DEVIL HILLS

MECHANICAL

ISSUED: 05/13/2021

EXPIRES: 11/09/2021

DETAILS

Permit

Name	Value
PURPOSE	Residential Repair/Remodel
CONSTRUCTION COST	7739.00
CONSTRUCTION TYPE	V
FLOOD ZONE	X
NATURAL GAS SIGNOFF	N
OCCUPANCY TYPE	One & Two Family Dwelling

REQUIRED INSPECTIONS

Final

CONDITIONS

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Issued By: Charles Thuman

Contractor or Authorized Agent: Jaclyn Slater Date: 05 / 13 / 2021



Town of Kill Devil Hills

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

MAY 14 2021

Planning and Inspection Department

MC2021-132

PROJECT NAME: Pettit HVAC
SITE ADDRESS: 115 OREGON AVE E KILL DEVIL HILLS

MECHANICAL

ISSUED: 05/13/2021

EXPIRES: 11/09/2021

APPLICANT: PETTIT, BILLY LEE
REVOCABLE LIVING TRUST
241 FAULK ROAD
NORFOLK, VA 23502

OWNER: PETTIT, BILLY LEE
REVOCABLE LIVING TRUST
241 FAULK ROAD
NORFOLK, VA 23502

H3, CLASS 1:

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

License: 12643
Expires: 12/31/2021

PARCEL:

PIN: 988420800096

Parcel Number: 003829000

Address: 115 OREGON AVE E KILL DEVIL HILLS

Zoning:

Addition: KITTY HAWK SHORES - REVISED

Block: 34 **Lot(s):** 20

Legal Description:

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

PROJECT DESCRIPTION: C/O 2.5 Ton HVAC system

DETAILS

Permit

Name	Value
NATURAL GAS SIGNOFF	N

PAID
12/5/21
check # 2175

REQUIRED INSPECTIONS

Final

5999.
400.
6,399.00

MC2021-132

PROJECT NAME: Pettit HVAC

SITE ADDRESS: 115 OREGON AVE E KILL DEVIL HILLS

MECHANICAL

ISSUED: 05/13/2021

EXPIRES: 11/09/2021

CONDITIONS

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

Issued By: Charles Thuman

Contractor or Authorized Agent: Tom McDonald Date: 05 / 13 / 2021

PAID



Town of Kill Devil Hills

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

MAY 18 2021

TOWN OF
KILL DEVIL HILLS

Planning and Inspection Department

MC2021-133	MECHANICAL
PROJECT NAME: Clark HVAC	ISSUED: 05/13/2021
SITE ADDRESS: 502 TRUXTON ST KILL DEVIL HILLS	EXPIRES: 11/09/2021

APPLICANT: Gordon Clark
1243 Parkview Blvd.
Pittsburg, PA 15217

OWNER: Gordon Clark
1243 Parkview Blvd.
Pittsburg, PA 15217

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

License: 13056
Expires: 12/31/2021

PARCEL:

PIN: 987516835002

Parcel Number: 001061000

Address: 502 TRUXTON ST KILL DEVIL HILLS

Addition: MOOR SHORES

Zoning:
Block: 0 **Lot(s):** 123

Legal Description:

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

PROJECT DESCRIPTION: HVAC C/O

PAID
Mc 5/13/21
Rg Pal

MC2021-133

PROJECT NAME: Clark HVAC

SITE ADDRESS: 502 TRUXTON ST KILL DEVIL HILLS

MECHANICAL

ISSUED: 05/13/2021

EXPIRES: 11/09/2021

DETAILS

Permit

Name	Value
PURPOSE	Residential Repair/Remodel
CONSTRUCTION COST	10871.00
CONSTRUCTION TYPE	V
FLOOD ZONE	X
NATURAL GAS SIGNOFF	N
OCCUPANCY TYPE	One & Two Family Dwelling

REQUIRED INSPECTIONS

Final

CONDITIONS

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

Issued By: Charles Thuman

Contractor or Authorized Agent: Jaclyn Slater **Date:** 05 / 13 / 2021



Town of Kill Devil Hills

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

Planning and Inspection Department

MC2021-135	MECHANICAL
PROJECT NAME:	ISSUED: 05/17/2021
SITE ADDRESS: 1211 VA DARE TRL S KILL DEVIL HILLS	EXPIRES: 11/13/2021

APPLICANT: VINSON INVESTMENTS LP
4100 HENRY GRACE FRWY
WICHITA FALLS, TX 76302-2218

OWNER: VINSON INVESTMENTS LP
4100 HENRY GRACE FRWY
WICHITA FALLS, TX 76302-2218

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

License: 12643
Expires: 12/31/2021

PARCEL:

PIN: 989305072502

Parcel Number: 004304001

Address: 1211 VA DARE TRL S KILL DEVIL HILLS

Addition: KILL DEVIL HILLS SEC 1

Zoning:
Block: 5 **Lot(s):** PT OF 6 & 7

Legal Description:

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

PROJECT DESCRIPTION: HVAC replacement

PAID
1/2 3/19/21
Chk # 2184

MC2021-135

PROJECT NAME:

SITE ADDRESS: 1211 VA DARE TRL S KILL DEVIL HILLS

MECHANICAL

ISSUED: 05/17/2021

EXPIRES: 11/13/2021

DETAILS

Permit

Name	Value
PURPOSE	Residential Repair/Remodel
CONSTRUCTION COST	3496.00
CONSTRUCTION TYPE	V
FLOOD ZONE	X
NATURAL GAS SIGNOFF	N
OCCUPANCY TYPE	One & Two Family Dwelling

REQUIRED INSPECTIONS

Final

CONDITIONS

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Issued By: Marty Shaw

Contractor or Authorized Agent: Tom McDonald **Date:** 05 / 18 / 2021



Town of Kill Devil Hills

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

PAID

MAY 21 2021

Planning and Inspection Department

TOWN OF
KILL DEVIL HILLS

MC2021-138

PROJECT NAME:

SITE ADDRESS: 3312 VA DARE TRL N KILL DEVIL HILLS

MECHANICAL

ISSUED: 05/19/2021

EXPIRES: 11/15/2021

APPLICANT: MARKS, KIMBERLY
26190 WILLIS CIR
COURTLAND, VA 23837
757-328-8235

OWNER: MARKS, KIMBERLY
26190 WILLIS CIR
COURTLAND, VA 23837
757-328-8235

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

License: 12643
Expires: 12/31/2021

PARCEL:

PIN: 988509054134

Parcel Number: 000062000

Address: 3312 VA DARE TRL N KILL DEVIL HILLS

Addition: ORVILLE BEACH BLK 2

Zoning:

Block: 2 **Lot(s):** 5

Legal Description:

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

PROJECT DESCRIPTION: HVAC replacement



PAID

M 5/21/21

Check # 21489

MC2021-138

PROJECT NAME:

SITE ADDRESS: 3312 VA DARE TRL N KILL DEVIL HILLS

MECHANICAL

ISSUED: 05/19/2021

EXPIRES: 11/15/2021

DETAILS

Permit

Name	Value
PURPOSE	Residential Repair/Remodel
CONSTRUCTION COST	3756.00
CONSTRUCTION TYPE	V
FLOOD ZONE	X
NATURAL GAS SIGNOFF	N
OCCUPANCY TYPE	One & Two Family Dwelling

REQUIRED INSPECTIONS

Final

CONDITIONS

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

Issued By: Marty Shaw

Contractor or Authorized Agent: Tom McDonald **Date:** 05 / 21 / 2021



Town of Kill Devil Hills

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

MAY 21 2021

Planning and Inspection Department

MC2021-136

PROJECT NAME: Tompkins HVAC
SITE ADDRESS: 1502 VA DARE TRL N KILL DEVIL HILLS

MECHANICAL

ISSUED: 05/18/2021

EXPIRES: 11/14/2021

APPLICANT: TOMPKINS, CHRISTOPHER W
4123 COLUMBUS AVENUE
NORFOLK, VA 23504

OWNER: TOMPKINS, CHRISTOPHER W
4123 COLUMBUS AVENUE
NORFOLK, VA 23504

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

License: 13056
Expires: 12/31/2021

PARCEL:

PIN: 988411557386

Parcel Number: 002837000

Address: 1502 VA DARE TRL N KILL DEVIL HILLS

Addition: CROATAN SHORES

Zoning:

Block: D **Lot(s):** 19 & PT 18

Legal Description:

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

PROJECT DESCRIPTION: Replace mini split system

PAID
CIC-5/21/21
Paypal

MC2021-136

PROJECT NAME: Tompkins HVAC

SITE ADDRESS: 1502 VA DARE TRL N KILL DEVIL HILLS

MECHANICAL

ISSUED: 05/18/2021

EXPIRES: 11/14/2021

DETAILS

Permit

Name	Value
PURPOSE	Residential Repair/Remodel
CONSTRUCTION COST	5213.00
CONSTRUCTION TYPE	V
FLOOD ZONE	X
NATURAL GAS SIGNOFF	N
OCCUPANCY TYPE	One & Two Family Dwelling

REQUIRED INSPECTIONS

Final

CONDITIONS

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Issued By: Charles Thuman

Contractor or Authorized Agent: Jessica Bennett **Date:** 05 / 18 / 2021



Town of Kill Devil Hills

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

Planning and Inspection Department

MAY 21 2021

MC2021-146

PROJECT NAME: Kelly HVAC
SITE ADDRESS: 602 SPORTSMAN DR W KILL DEVIL HILLS

MECHANICAL

ISSUED: 05/21/2021

EXPIRES: 11/17/2021

APPLICANT: KELLY, MICHAEL W
P O BOX 1089
NAGS HEAD, NC 27959

OWNER: KELLY, MICHAEL W
P O BOX 1089
NAGS HEAD, NC 27959

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

License: 13056
Expires: 12/31/2021

PARCEL:

PIN: 988517005199

Parcel Number: 001552000

Address: 602 SPORTSMAN DR W KILL DEVIL HILLS

Addition: AVALON BEACH

Zoning:

Block: 0 **Lot(s):** 191

Legal Description:

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

PROJECT DESCRIPTION: C/O 2.5 ton heat pump

PAID
PC 5/21/21
By [Signature]

MC2021-146

PROJECT NAME: Kelly HVAC

SITE ADDRESS: 602 SPORTSMAN DR W KILL DEVIL HILLS

MECHANICAL

ISSUED: 05/21/2021

EXPIRES: 11/17/2021

DETAILS

Permit

Name	Value
PURPOSE	Residential Repair/Remodel
CONSTRUCTION COST	3958.00
CONSTRUCTION TYPE	V
FLOOD ZONE	X
NATURAL GAS SIGNOFF	N
OCCUPANCY TYPE	One & Two Family Dwelling

REQUIRED INSPECTIONS

Final

CONDITIONS

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

Issued By: Marty Shaw

Contractor or Authorized Agent: JESSICA NEWOTT **Date:** 05/21/2021



Town of Kill Devil Hills

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

MAY 21 2021

Planning and Inspection Department

MC2021-145	MECHANICAL
PROJECT NAME:	ISSUED: 05/21/2021
SITE ADDRESS: 2603 VA DARE TRL N KILL DEVIL HILLS	EXPIRES: 11/17/2021

APPLICANT: Tom Hoffer
P.O. Box 1603
Suffolk, VA 23439

OWNER: Tom Hoffer
P.O. Box 1603
Suffolk, VA 23439

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

License: 13056
Expires: 12/31/2021

PARCEL:

PIN: 988513222543

Parcel Number: 000837000

Address: 2603 VA DARE TRL N KILL DEVIL HILLS

Addition: VIRGINIA DARE SHORES PLAT B

Zoning:
Block: 0 **Lot(s):** 32

Legal Description:

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

PROJECT DESCRIPTION: HVAC replacement

PAID
5/21/21
Peg Pet

MC2021-145

PROJECT NAME:

SITE ADDRESS: 2603 VA DARE TRL N KILL DEVIL HILLS

MECHANICAL

ISSUED: 05/21/2021

EXPIRES: 11/17/2021

DETAILS

Permit

Name	Value
PURPOSE	Residential Repair/Remodel
CONSTRUCTION COST	2997.00
CONSTRUCTION TYPE	V
FLOOD ZONE	VE
BASE FLOOD ELEVATION	11
NATURAL GAS SIGNOFF	N
OCCUPANCY TYPE	One & Two Family Dwelling

REQUIRED INSPECTIONS

Final

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Issued By: _____

Marty Shaw

Contractor or Authorized Agent: _____

JESSICA NEWITT

Date: 05 / 21 / 2021



Town of Kill Devil Hills

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

MAY 25 2021

Planning and Inspection Department

MC2021-139	MECHANICAL
PROJECT NAME:	ISSUED: 05/20/2021
SITE ADDRESS: 409 ARCH ST W KILL DEVIL HILLS	EXPIRES: 11/16/2021

APPLICANT: FOX, SHELLEY B
329 WINSTON SALEM AVE
VIRGINIA BEACH, VA 23451
757-575-9549

OWNER: FOX, SHELLEY B
329 WINSTON SALEM AVE
VIRGINIA BEACH, VA 23451
757-575-9549

MECHANICAL, H-3, I:

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

License: 18066
Expires: 12/31/2021

PARCEL:

PIN: 987516834778

Parcel Number: 002961000

Address: 409 ARCH ST W KILL DEVIL HILLS

Zoning:

Addition: ORVILLE BEACH WEST

Block: 0 **Lot(s):** 136

Legal Description:

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

PROJECT DESCRIPTION: HVAC replacement

*PAID
R S/21/21
Ry Pa*

MC2021-139

PROJECT NAME:

SITE ADDRESS: 409 ARCH ST W KILL DEVIL HILLS

MECHANICAL

ISSUED: 05/20/2021

EXPIRES: 11/16/2021

DETAILS

Permit

Name	Value
PURPOSE	Residential Repair/Remodel
CONSTRUCTION COST	5850.00
CONSTRUCTION TYPE	V
FLOOD ZONE	X
NATURAL GAS SIGNOFF	N
OCCUPANCY TYPE	One & Two Family Dwelling

REQUIRED INSPECTIONS

Final

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Issued By: Charles Thuman

Contractor or Authorized Agent: H. W. Francis Date: 05 / 21 / 2021



Town of Kill Devil Hills

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

MAY 25 2021

Planning and Inspection Department

MC2021-141	MECHANICAL
PROJECT NAME:	ISSUED: 05/20/2021
SITE ADDRESS: 2037 VA DARE TRL N KILL DEVIL HILLS	EXPIRES: 11/16/2021

APPLICANT: Savannah Land Company, LLC
6912 Golden Rain Ct
Charlotte, NC 28277

OWNER: Savannah Land Company, LLC
6912 Golden Rain Ct
Charlotte, NC 28277

MECHANICAL, H-3, I:

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

License: 18066
Expires: 12/31/2021

PARCEL:

PIN: 988518303669

Parcel Number: 002326000

Address: 2037 VA DARE TRL N KILL DEVIL HILLS

Addition: MILES CLARK

Zoning:
Block: 0 **Lot(s):** 19 & PT 21

Legal Description:

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

PROJECT DESCRIPTION: C/O 3 Ton heat pump only

PAID
05/21/21
P. J. Baker

MC2021-141

PROJECT NAME:

SITE ADDRESS: 2037 VA DARE TRL N KILL DEVIL HILLS

MECHANICAL

ISSUED: 05/20/2021

EXPIRES: 11/16/2021

DETAILS

Permit

Name	Value
PURPOSE	Residential Repair/Remodel
CONSTRUCTION COST	4500.00
CONSTRUCTION TYPE	V
FLOOD ZONE	VE
BASE FLOOD ELEVATION	12
NATURAL GAS SIGNOFF	N
OCCUPANCY TYPE	One & Two Family Dwelling

REQUIRED INSPECTIONS

Final

CONDITIONS

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Issued By: Charles Thuman

Contractor or Authorized Agent: H. W. Francis **Date:** 05 / 21 / 2021



Town of Kill Devil Hills

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

PAID

MAY 25 2021

Planning and Inspection Department

MC2021-144

PROJECT NAME: Framer HVAC
SITE ADDRESS: 421 BURNS DR KILL DEVIL HILLS

MECHANICAL

ISSUED: 05/20/2021

EXPIRES: 11/16/2021

APPLICANT: MR. CHARLES A FARMER
421 Burns Drive
Kill Devil Hills, NC 27948

OWNER: MR. CHARLES A FARMER
421 Burns Drive
Kill Devil Hills, NC 27948

MECHANICAL, H-3, I:

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

License: 18066
Expires: 12/31/2021

PARCEL:

PIN: 988316832362

Parcel Number: 005005000

Address: 421 BURNS DR KILL DEVIL HILLS

Addition: OCEAN ACRES TRACT 3 SEC 2

Zoning:
Block: H **Lot(s):** 21 & PT 19

Legal Description:

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

PROJECT DESCRIPTION: C/O 2.5 Ton HVAC system

PAID
M 5/21/21
P.S. P.1

MC2021-144

PROJECT NAME: Framer HVAC

SITE ADDRESS: 421 BURNS DR KILL DEVIL HILLS

MECHANICAL

ISSUED: 05/20/2021

EXPIRES: 11/16/2021

DETAILS

Permit

Name	Value
PURPOSE	Residential Repair/Remodel
CONSTRUCTION COST	6250.00
CONSTRUCTION TYPE	V
FLOOD ZONE	X
NATURAL GAS SIGNOFF	N
OCCUPANCY TYPE	One & Two Family Dwelling

REQUIRED INSPECTIONS

Final

CONDITIONS

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Issued By: Charles Thuman

Contractor or Authorized Agent: H. W. Francis **Date:** 05 / 21 / 2021



Town of Kill Devil Hills

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

PAID

MAY 25 2021

Planning and Inspection Department

MC2021-143	MECHANICAL
PROJECT NAME: Miller HVAC	ISSUED: 05/20/2021
SITE ADDRESS: 706 TEAKWOOD LN KILL DEVIL HILLS	EXPIRES: 11/16/2021

APPLICANT: Miller, Graciela
706 TEAKWOOD LN
KILL DEVIL HILLS, NC 27948

OWNER: Miller, Graciela
706 TEAKWOOD LN
KILL DEVIL HILLS, NC 27948

MECHANICAL, H-3, I:

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

License: 18066
Expires: 12/31/2021

PARCEL:

PIN: 988413125715

Parcel Number: 003651000

Address: 706 TEAKWOOD LN KILL DEVIL HILLS

Addition: LANDING SECTION 3, THE

Zoning:
Block: 0 **Lot(s):** 146

Legal Description:

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

PROJECT DESCRIPTION: C/O 2.5 Ton HVAC system

PAID
By S/21/21
By PC

MC2021-143

PROJECT NAME: Miller HVAC

SITE ADDRESS: 706 TEAKWOOD LN KILL DEVIL HILLS

MECHANICAL

ISSUED: 05/20/2021

EXPIRES: 11/16/2021

DETAILS

Permit

Name	Value
PURPOSE	Residential Repair/Remodel
CONSTRUCTION COST	6250.00
CONSTRUCTION TYPE	V
FLOOD ZONE	X
NATURAL GAS SIGNOFF	N
OCCUPANCY TYPE	One & Two Family Dwelling

REQUIRED INSPECTIONS

Final

CONDITIONS

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Issued By: Charles Thuman

Contractor or Authorized Agent: H. W. Francis **Date:** 05 / 21 / 2021



Town of Kill Devil Hills

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

PAID

MAY 25 2021

Planning and Inspection Department

TOWN OF
KILL DEVIL HILLS

MC2021-149	MECHANICAL
PROJECT NAME: Peck HVAC	ISSUED: 05/25/2021
SITE ADDRESS: 1811 UPPER DUNE RD KILL DEVIL HILLS	EXPIRES: 11/21/2021

APPLICANT: Peck, Travis
1811 Upper Dune
Kill Devil Hills, NC 27948

OWNER: Peck, Travis
1811 Upper Dune
Kill Devil Hills, NC 27948

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

License: 12643
Expires: 12/31/2021

PARCEL:

PIN: 988409163902

Parcel Number: 002384000

Address: 1811 UPPER DUNE RD KILL DEVIL HILLS

Addition: SEA HOLLY RIDGE

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

Legal Description:

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

PROJECT DESCRIPTION: C/O 2 ton heat pump



PAID

5/25/21 DG

CK # 2214

MC2021-149

PROJECT NAME: Peck HVAC

SITE ADDRESS: 1811 UPPER DUNE RD KILL DEVIL HILLS

MECHANICAL

ISSUED: 05/25/2021

EXPIRES: 11/21/2021

DETAILS

Permit

Name	Value
PURPOSE	Residential Repair/Remodel
CONSTRUCTION COST	3427.00
CONSTRUCTION TYPE	V
FLOOD ZONE	X
NATURAL GAS SIGNOFF	N
OCCUPANCY TYPE	One & Two Family Dwelling

REQUIRED INSPECTIONS

Final

CONDITIONS

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Issued By: Charles Thuman

Contractor or Authorized Agent: Tom McDonald Date: 05 / 25 / 2021



Town of Kill Devil Hills

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

Planning and Inspection Department

MC2021-154	MECHANICAL
PROJECT NAME: Joyner HVAC	ISSUED: 05/28/2021
SITE ADDRESS: 1016 ALEXANDER LN KILL DEVIL HILLS	EXPIRES: 11/24/2021

APPLICANT: Joyner, William 1016 Alexander Ln Kill Devil Hills, NC 27948 252-423-0196	OWNER: Joyner, William 1016 Alexander Ln Kill Devil Hills, NC 27948 252-423-0196
--	--

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

H3, CLASS 1:	One Hour Heating and Air Conditioning 701 Fresh Pond West Kill Devil Hills, NC 27948 441-1740	License: 12643 Expires: 12/31/2021
---------------------	--	---

PARCEL:

PIN: 988409076274	Parcel Number: 002289000
Address: 1016 ALEXANDER LN KILL DEVIL HILLS	Zoning:
Addition: WRIGHT'S SHORES SEC 2	Block: 0 Lot(s): 71
Legal Description:	

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

PROJECT DESCRIPTION: hvac changeout

Handwritten: FVID
R 5/28/21
Chad # 2232

MC2021-154

PROJECT NAME: Joyner HVAC

SITE ADDRESS: 1016 ALEXANDER LN KILL DEVIL HILLS

MECHANICAL

ISSUED: 05/28/2021

EXPIRES: 11/24/2021

DETAILS

Permit

Name	Value
CONSTRUCTION COST	7660.00
FLOOD ZONE	X
NATURAL GAS SIGNOFF	N
OCCUPANCY TYPE	One & Two Family Dwelling

REQUIRED INSPECTIONS

Final

CONDITIONS

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Issued By: Charles Thuman

Contractor or Authorized Agent: Tom McDonald Date: 05/28/2021



Town of Kill Devil Hills

Comer

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

Planning and Inspection Department

MC2021-127	MECHANICAL
PROJECT NAME: White Lion HVAC	ISSUED: 05/10/2021
SITE ADDRESS: 115 OREGON AVE W KILL DEVIL HILLS	EXPIRES: 11/06/2021

APPLICANT: White Lion Enterprises, LLC PO Box 2920 Kill Devil Hills, NC 27948	OWNER: White Lion Enterprises, LLC PO Box 2920 Kill Devil Hills, NC 27948
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H3, CLASS 1:	One Hour Heating and Air Conditioning 701 Fresh Pond West Kill Devil Hills, NC 27948 441-1740	License: 12643 Expires: 12/31/2021
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PARCEL:

PIN: 988307793614	Parcel Number: 004026009
Address: 115 OREGON AVE W KILL DEVIL HILLS	Zoning:
Addition: KITTY HAWK SHORES - REVISED	Block: 65 Lot(s): 9-10
Legal Description:	


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

PROJECT DESCRIPTION: C/O 2 Ton HVAC system

DETAILS

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

\$6,411.00



PAID
5/16/21 DC
CR# 2161

MC2021-127

PROJECT NAME: White Lion HVAC

SITE ADDRESS: 115 OREGON AVE W KILL DEVIL HILLS

MECHANICAL

ISSUED: 05/10/2021

EXPIRES: 11/06/2021

REQUIRED INSPECTIONS

Final

CONDITIONS

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

Issued By: Charles Thuman

Contractor or Authorized Agent: Tom McDonald Date: 05 / 10 / 2021



Town of Kill Devil Hills

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

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PAID

MAY 11 2021

Planning and Inspection Department

TOWN OF
KILL DEVIL HILLS

MC2021-126

PROJECT NAME: Wind and Sea HVAC
SITE ADDRESS: 1633 VA DARE TRL N KILL DEVIL HILLS

MECHANICAL

ISSUED: 05/10/2021

EXPIRES: 11/06/2021

APPLICANT: Wind and Sea LLC
7402 Longmeadow Road
Madison, NC 53717

OWNER: Wind and Sea LLC
7402 Longmeadow Road
Madison, NC 53717

MECHANICAL, H-2, H-3:

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

License: 34340
Expires: 12/31/2021

PARCEL:

PIN: 98841157320018

Parcel Number: 027605000

Address: 1633 VA DARE TRL N KILL DEVIL HILLS

Addition:

Zoning:

Block: B

Lot(s): UNIT F-3 LT
1,2,PT3

Legal Description:

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

PROJECT DESCRIPTION: C/O 2 Ton HVAC system

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5/10/21 Da
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MC2021-126

PROJECT NAME: Wind and Sea HVAC
SITE ADDRESS: 1633 VA DARE TRL N KILL DEVIL HILLS

MECHANICAL

ISSUED: 05/10/2021

EXPIRES: 11/06/2021

DETAILS

Permit

Name	Value
PURPOSE	Residential Repair/Remodel
CONSTRUCTION COST	5950.00
CONSTRUCTION TYPE	V
FLOOD ZONE	VE
BASE FLOOD ELEVATION	12
NATURAL GAS SIGNOFF	N
OCCUPANCY TYPE	Residential

REQUIRED INSPECTIONS

Final

CONDITIONS

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Issued By: Charles Thuman

Contractor or Authorized Agent: Andrew L Buchanan Date: 05 / 10 / 2021



Town of Kill Devil Hills

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

PAID

MAY 12 2021

Planning and Inspection Department

MC2021-118

PROJECT NAME: Inabinet HVAC
SITE ADDRESS: 2009 WRIGHTSVILLE BLVD KILL DEVIL HILLS

MECHANICAL

ISSUED: 05/05/2021

EXPIRES: 11/01/2021

APPLICANT: INABINET DAVID & LISA
3208 Eagles Watch
Williamsburg, VA 23188

OWNER: INABINET DAVID & LISA
3208 Eagles Watch
Williamsburg, VA 23188

MECHANICAL, H-3, I:

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

License: 18066
Expires: 12/31/2021

PARCEL:

PIN: 98931313596813

Parcel Number: 029023000

Address: 2009 WRIGHTSVILLE BLVD KILL DEVIL HILLS

Zoning:

Addition:

Block: 0 **Lot(s):** UNIT 3-G

Legal Description:

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

PROJECT DESCRIPTION: C/O 2.5Ton HVAC system



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MC2021-118

PROJECT NAME: Inabinet HVAC

SITE ADDRESS: 2009 WRIGHTSVILLE BLVD KILL DEVIL HILLS

MECHANICAL

ISSUED: 05/05/2021

EXPIRES: 11/01/2021

DETAILS

Permit

Name	Value
PURPOSE	Residential Repair/Remodel
CONSTRUCTION COST	6350.00
CONSTRUCTION TYPE	V
FLOOD ZONE	X
NATURAL GAS SIGNOFF	N
OCCUPANCY TYPE	Residential

REQUIRED INSPECTIONS

Final

CONDITIONS

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Issued By: Charles Thuman

Contractor or Authorized Agent: H. W. Francis Date: 05 / 06 / 2021



Town of Kill Devil Hills

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

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MAY 19 2021

Planning and Inspection Department

TOWN OF
KILL DEVIL HILLS

MC2021-137

PROJECT NAME: Spitzgo HVAC
SITE ADDRESS: 1625 VA DARE TRL N KILL DEVIL HILLS

MECHANICAL

ISSUED: 05/18/2021

EXPIRES: 11/14/2021

APPLICANT: SPITZGO, WILLIAM A
4377 Strawflower St
Fairfax, VA 22030

OWNER: SPITZGO, WILLIAM A
4377 Strawflower St
Fairfax, VA 22030

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

License: 13056
Expires: 12/31/2021

PARCEL:

PIN: 98841156490203

Parcel Number: 002775003

Address: 1625 VA DARE TRL N KILL DEVIL HILLS

Addition:

Zoning:

Block: B

Lot(s): UNIT 3
PHASE 1 LT7

Legal Description:

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

PROJECT DESCRIPTION: C/O 3 ton heat pump only

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MC2021-137

PROJECT NAME: Spitzgo HVAC

SITE ADDRESS: 1625 VA DARE TRL N KILL DEVIL HILLS

MECHANICAL

ISSUED: 05/18/2021

EXPIRES: 11/14/2021

DETAILS

Permit

Name	Value
PURPOSE	Residential Repair/Remodel
CONSTRUCTION COST	4353.00
CONSTRUCTION TYPE	V
FLOOD ZONE	VE
BASE FLOOD ELEVATION	12
NATURAL GAS SIGNOFF	N
OCCUPANCY TYPE	Residential

REQUIRED INSPECTIONS

Final

CONDITIONS

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Issued By: Charles Thuman

Contractor or Authorized Agent: Jessica Bennett Date: 05 / 18 / 2021



Town of Kill Devil Hills

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

PAID

MAY 24 2021

Planning and Inspection Department

TOWN OF
KILL DEVIL HILLS

MC2021-147

PROJECT NAME:

SITE ADDRESS: 700 F1 FIRST ST W KILL DEVIL HILLS

MECHANICAL

ISSUED: 05/21/2021

EXPIRES: 11/17/2021

APPLICANT: Zarchy, Alan
276 Gilmore St
MINEOLA, NY 11501

OWNER: Zarchy, Alan
276 Gilmore St
MINEOLA, NY 11501

MECHANICAL, H-2, H-3:

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

License: 34340
Expires: 12/31/2021

PARCEL:

PIN: 98841314042671

Parcel Number: 008075601

Address: 700 F1 FIRST ST W KILL DEVIL HILLS

Addition:

Zoning:

Block: 0

Lot(s): UT 1 BLDG
F

Legal Description:

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

PROJECT DESCRIPTION: HVAC replacement



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MC2021-147

PROJECT NAME:

SITE ADDRESS: 700 F1 FIRST ST W KILL DEVIL HILLS

MECHANICAL

ISSUED: 05/21/2021

EXPIRES: 11/17/2021

DETAILS

Permit

Name	Value
PURPOSE	Residential Repair/Remodel
CONSTRUCTION COST	5500.00
CONSTRUCTION TYPE	V
FLOOD ZONE	AE
BASE FLOOD ELEVATION	4
NATURAL GAS SIGNOFF	N
OCCUPANCY TYPE	Residential

REQUIRED INSPECTIONS

Final

CONDITIONS

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Issued By: Marty Shaw

Contractor or Authorized Agent: Andrew L Buchanan Date: 05 / 21 / 2021



Town of Kill Devil Hills

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

PAID

MAY 21 2021

Planning and Inspection Department

MC2021-140

PROJECT NAME: Bragg HVAC
SITE ADDRESS: 804 MEMORIAL BLVD S KILL DEVIL HILLS

MECHANICAL

ISSUED: 05/20/2021

EXPIRES: 11/16/2021

APPLICANT: BRAGG, DAVID
5205 S Links Dr #16
nags head, nc 27959

OWNER: BRAGG, DAVID
5205 S Links Dr #16
nags head, nc 27959

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

License: 23299
Expires: 12/31/2021

PARCEL:

PIN: 98830899011017

Parcel Number: 008147301

Address: 804 MEMORIAL BLVD S KILL DEVIL HILLS

Addition:

Zoning:

Block: 0

Lot(s): UNIT 3-A

Legal Description:

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

PROJECT DESCRIPTION: C/O 1.5 Ton HVAC system



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CK # 9743

MC2021-140

PROJECT NAME: Bragg HVAC
SITE ADDRESS: 804 MEMORIAL BLVD S KILL DEVIL HILLS

MECHANICAL

ISSUED: 05/20/2021

EXPIRES: 11/16/2021

DETAILS

Permit

Name	Value
PURPOSE	Residential Repair/Remodel
CONSTRUCTION COST	5500.00
CONSTRUCTION TYPE	V
FLOOD ZONE	X
NATURAL GAS SIGNOFF	N
OCCUPANCY TYPE	Residential

REQUIRED INSPECTIONS

Final

CONDITIONS

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Issued By: Charles Thuman

Contractor or Authorized Agent:  **Date:** 05 / 20 / 2021



Town of Kill Devil Hills

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

MAY 25 2021

Planning and Inspection Department

MC2021-142	MECHANICAL
PROJECT NAME: Swain HVAC	ISSUED: 05/20/2021
SITE ADDRESS: 804 MEMORIAL BLVD S KILL DEVIL HILLS	EXPIRES: 11/16/2021

APPLICANT: David Swain
509 Windy Peak Loop
CARY, NC 27519

OWNER: David Swain
509 Windy Peak Loop
CARY, NC 27519

MECHANICAL, H-3, I:

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

License: 18066
Expires: 12/31/2021

PARCEL:

PIN: 98830899011010

Parcel Number: 008147202

Address: 804 MEMORIAL BLVD S KILL DEVIL HILLS

Addition:

Zoning:

Block: 0

Lot(s): UNIT 2-B

Legal Description:

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

PROJECT DESCRIPTION: C/O 1.5 Ton HVAC system

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12/5/21/21
P3 P01

MC2021-142

PROJECT NAME: Swain HVAC

SITE ADDRESS: 804 MEMORIAL BLVD S KILL DEVIL HILLS

MECHANICAL

ISSUED: 05/20/2021

EXPIRES: 11/16/2021

DETAILS

Permit

Name	Value
PURPOSE	Residential Repair/Remodel
CONSTRUCTION COST	5650.00
CONSTRUCTION TYPE	V
FLOOD ZONE	X
NATURAL GAS SIGNOFF	N
OCCUPANCY TYPE	Residential

REQUIRED INSPECTIONS

Final

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Issued By: Charles Thuman

Contractor or Authorized Agent: H. W. Francis **Date:** 05 / 21 / 2021