

3116 Chadford Place

lot 9 blk 3 BRADFORD PLACE ZONE R-1

L. Satwood 2-15-79

CITY OF LAS VEGAS, NEVADA

LOG NO. & AREA

CONST. VAL. \$

11,825.00

DEPARTMENT OF BUILDING & SAFETY

APPLICATION & BUILDING PERMIT - for:

Dwellings, Duplexes, Residential Const.

ADDRESS OF CONSTRUCTION:

3116 CHADFORD PIKE

OWNER: Robt. H. Grant Co. of Nevada

LOT(s)

9

BLOCK

3

SUBDIVISION

BRADFORD PLACE

ZONE:

R3  
PUD

Existing structure on lot:

Dwelling

Accessory bldgs.

Vacant lot

Other

PROPOSED CONSTRUCTION: Planned Unit Development

USE:

MATERIALS OF CONSTRUCTION:

Wood Frame

Concrete Block

Reinforced Concrete

Steel Frame

SQUARE FEET OF FLOOR AREAS:

1st

2nd

3rd

Other

TOTAL SQ. FT.

850

FIRE ZONE:

1 2(3)

Occupancy Group

A

B

C

D

E

F

G

H

I

J

K

L

M

N

O

P

Q

R

S

T

U

V

W

X

Y

Z

CONST. TYPE:

I

II

III

IV

V

ARCHITECT:

Kaltenbach

ENGINEER:

VEN of Nevada

NO. of UNITS

54

NO. of STORIES

One

Plans Submitted:

Yes

No

Calculations Submitted:

Yes

No

Sewer Fee Req'd:

Yes

No

CONTRACTOR:

Robt. H. Grant of Nevada

STATE LICENSE #

10200

CITY LICENSE #

C11811200969

ADD'L. PERMITS REQ'D:

Air Cond.

Elec.

Plumbing

Signs

Paving

Fence

Public Walks

Curb-gutters

Incinerators

Fire Sprinkling System

CONDITIONS OF THE PERMIT:

1. I agree to call the City Building Department for inspections before concrete is poured, before rough wiring, electrical, plumbing, framing is covered. Also for Air conditioning, sheet-rock and sheathing inspection.
2. I agree that when the job is completed that I will call for final inspection before occupancy.
3. I agree to perform all construction in accordance with City Ordinances and Building Codes.
4. The Contractor's signature below denotes authority from the owner to sign in his behalf and that the owner is aware of all requirements of this application and permit. Separate permits must be taken out for work outlined above this agreement.
5. I have read and understand the contents of this application and permit; I hereby state that the information I have supplied on this application is true and correct.

SIGNED:

Signature of Contractor

BY:

Signature of Agent

Agent of

CLARK COUNTY HEALTH DEPT.

Date

LAS VEGAS FIRE DEPARTMENT

Date

PLANNING DEPT:

Signature

Date:

8-4-71

PUBLIC WORKS DEPT:

Signature

Date:

8-4-71

BUILDING DEPT:

Signature

Date:

8-4-71

#12850

PERMIT NO:

2444

PERMIT FEE

\$50.00

RECEIPT

1000

\$050.00

- 8

CITY OF LAS VEGAS

DEPT. OF BUILDING & SAFETY

MUST BE MACHINE DATED

G. Gatewood 2-15-79

BLR 3 LOT 9

CITY OF LAS VEGAS, NEVADA

DEPARTMENT OF BUILDING & SAFETY - APPLICATION AND PERMIT FOR PLUMBING

ADDRESS OF CONSTRUCTION: Bradford Place  
Pennigood & Wing etc.  
3116 Bradford Place

OWNER'S NAME: Robert H. Grant & Co.

CIRCLE: New Bldg.; Add'n; Remodel; TYPE OF BLDG.: SFD. APT. PUBLIC COMM.

CONTRACTOR'S NAME: Henderson Plumbing & Heating Inc.  
3052 So. Valley View, L.V. 89102

STATE LICENSE # 11547

CITY 011-0092-07511  
LICENSE #

| UNITS           | DESCRIPTION                                             | FEE   | TOTAL |
|-----------------|---------------------------------------------------------|-------|-------|
| 1               | Bathtub                                                 | 1.00  | 1.00  |
|                 | Shower                                                  | 1.00  |       |
| 11              | Lavatory                                                | 1.00  | 1.00  |
| 1               | Toilet                                                  | 1.00  | 1.00  |
|                 | Urinal                                                  | 1.00  |       |
|                 | Floor Drain                                             | 1.00  |       |
|                 | Floor Sink                                              | 1.00  |       |
|                 | Wash Tray                                               | 1.00  |       |
| 1               | Sink                                                    | 1.00  | 1.00  |
| 1               | Garbage Disposal                                        | 1.00  | 1.00  |
|                 | Garbage Disposal (comm.)                                | 3.00  |       |
| 1               | Clothes Dryer (gas)                                     | 1.00  | 1.00  |
| 1               | Clothes Washer                                          | 1.00  | 1.00  |
|                 | Clothes Washer (comm.)                                  | 5.00  |       |
| 1               | Dishwasher                                              | 1.00  | 1.00  |
|                 | Dishwasher (commercial)                                 | 5.00  |       |
|                 | Dental Unit                                             | 10.00 |       |
|                 | Drinking Fountain                                       | 1.00  |       |
|                 | Any Water using Equipment                               | 1.00  |       |
| 1               | Water Heater (gas) (elect.)                             | 1.00  | 1.00  |
|                 | Sewer System - New, Replacement, or any Drainage System | 4.00  | 4.00  |
|                 | Grease or Sand Trap                                     | 2.00  |       |
|                 | Trailer Trap                                            | 2.00  |       |
|                 | Septic Disposal System                                  | 4.00  |       |
| WATER SOFTENERS |                                                         |       |       |
|                 | Nonpermanent Type                                       | 4.00  |       |
|                 | Permanent Type (connected to Drainage)                  | 5.00  |       |
| SWIMMING POOLS  |                                                         |       |       |
|                 | Private or Wading Pool                                  | 10.00 |       |
|                 | Public or Semi-public                                   | 20.00 |       |

| UNITS                               | DESCRIPTION                               | FEE   | TOTAL |
|-------------------------------------|-------------------------------------------|-------|-------|
| WATER DISTRIBUTION SYSTEM           |                                           |       |       |
|                                     | Single Family Dwelling                    | 4.00  | 4.00  |
|                                     | Multiple Family Dwelling plus each unit   | 4.00  |       |
|                                     |                                           | 2.00  |       |
|                                     | Bldg. Group "A" thru "G" per each floor   | 6.00  |       |
|                                     | Hotel or Motel                            | 4.00  |       |
|                                     | plus each bath                            | 1.50  |       |
|                                     | Trailer Park                              | 20.00 |       |
|                                     | plus each space                           | 1.00  |       |
|                                     | Irrigation                                | 4.00  |       |
| GAS PIPING SYSTEM                   |                                           |       |       |
|                                     | Single Family Dwelling                    | 3.00  | 3.00  |
|                                     | Multiple Family Dwelling plus each unit   | 6.00  |       |
|                                     |                                           | 1.00  |       |
|                                     | Commercial Bldg. per floor plus each unit | 3.00  |       |
|                                     |                                           | 3.00  |       |
|                                     | Gas Appliance (any type)                  | 1.00  |       |
| AUTOMATIC FIRE EXTINGUISHING SYSTEM |                                           |       |       |
|                                     | Underground Piping                        | 10.00 |       |
|                                     | Distribution Piping ea. ft.               | .01   |       |
|                                     | Sprinkler Head each                       | .10   |       |
|                                     | In Range Hood and Vent                    | 5.00  |       |
| DRY STANDPIPE SYSTEM                |                                           |       |       |
|                                     | Piping                                    | 50.00 |       |
|                                     | Each Outlet                               | 1.00  |       |
| WET STANDPIPE SYSTEM                |                                           |       |       |
|                                     | Piping                                    | 5.00  |       |
|                                     | Fire Hose Cabinet                         | 1.00  |       |
|                                     | MINIMUM PERMIT FEE                        | 4.00  |       |
| TOTAL PERMIT FEE \$20.00            |                                           |       |       |

I hereby certify that I have carefully examined and read the above application; that the same is true and correct; and that the work herein described is to be done in accordance with all the provisions of the applicable Ordinances of the City of Las Vegas, Nevada and the State Laws, whether herein specified or not.

Signed John J. Hendon #9  
REGISTERED MASTER PLUMBER, SPEC. CONT'R. OR OWNER Date: 11/3/71  
Building Department M. J. Miller Date: 11/5/71  
#12870 Permit No. 1184 Permit Fee \$ 20.00

RECEIPT  
609 \$020.00 - 7  
CITY OF LAS VEGAS  
DEPT. OF  
BUILDING & SAFETY  
MUST BE MACHINE VALIDATED  
- 5 NOV 71

# CITY OF LAS VEGAS, NEVADA

## DEPARTMENT OF BUILDING & SAFETY - AIR CONDITIONING APPLICATION & PERMIT

ADDRESS OF CONSTRUCTION: 3116 Chadford Place (Lot 9) OWNER'S NAME: Grant Company of Nevada

CIRCLE: Addition; Remodel; New Bldg. TYPE OF BLDG.: SFD APT. COMM. PUBLIC

CONTRACTOR'S NAME: Tropic-Aire Conditioning Co. STATE LICENSE 10126 A CITY LICENSE 03382

| UNITS | DESCRIPTION                                                                                                                              | FEE   | TOTAL | UNITS | DESCRIPTION                                                                                                                                                                                                                                           | FEE   | TOTAL |
|-------|------------------------------------------------------------------------------------------------------------------------------------------|-------|-------|-------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------|-------|
|       | Unit heater floor, wall or suspended.                                                                                                    | 4.00  |       |       | EVAPORATIVE COOLERS:                                                                                                                                                                                                                                  |       |       |
|       | FOR EACH FORCED-AIR OR CAVITY-TYPE FURNACE OR BURNER INCLUDING DUCTS AND VENT ATTACHED TO SUCH APPLIANCES:                               |       |       |       | 5 outlets or under                                                                                                                                                                                                                                    | 3.00  |       |
|       | Up to and including 100,000 B.t.u.'s                                                                                                     | 4.00  |       |       | Over 5 and up to and including 10                                                                                                                                                                                                                     | 5.00  |       |
|       | Over 100,000 B.t.u.'s                                                                                                                    | 6.00  |       |       | Each additional outlet over 10                                                                                                                                                                                                                        | .25   |       |
|       | FOR EACH HEATING APPLICATION, REFRIGERATION UNIT, COMFORT COOLING AND HEATING UNIT, ABSORPTION UNIT, COMPRESSOR OR BOILER:               |       |       |       | VENTILATION:                                                                                                                                                                                                                                          |       |       |
|       | Up to and including 3 ton or horsepower, or absorption system up to and including 100,000 B.t.u.'s                                       | 4.00  | 4.00  |       | For each fan connected to a single duct                                                                                                                                                                                                               | 1.00  | 1.00  |
|       | Over 3 ton or 3 horsepower up to and including 10, or absorption system over 100,000 B.t.u.'s up to and including 250,000 B.t.u.'s       | 7.00  |       |       | For each commercial or industrial ventilation system                                                                                                                                                                                                  | 5.00  |       |
|       | Over 10 ton or 10 horsepower up to and including 30, or absorption system over 250,000 B.t.u.'s up to and including 1,000,000 B.t.u.'s   | 12.00 |       |       | For each commercial kitchen hood                                                                                                                                                                                                                      | 5.00  |       |
|       | Over 30 ton or 30 horsepower up to and including 50, or absorption system over 1,000,000 B.t.u.'s up to and including 1,700,000 B.t.u.'s | 20.00 |       |       | MISCELLANEOUS:                                                                                                                                                                                                                                        |       |       |
|       | Over 50 ton or 50 horsepower, or absorption system over 1,700,000 B.t.u.'s                                                               | 30.00 |       |       | For each water cooling tower                                                                                                                                                                                                                          | 8.00  |       |
|       | FOR EACH AIR HANDLING UNIT INCLUDING DUCTS ATTACHED THERETO:                                                                             |       |       |       | Duct work only - each opening                                                                                                                                                                                                                         | .25   | 2.00  |
|       | Up to and including 10,000 CFM                                                                                                           | 2.00  |       |       | For installation or relocation of each commercial or industrial incinerator                                                                                                                                                                           | 15.00 |       |
|       | Over 10,000 CFM                                                                                                                          | 4.00  |       |       | Gas piping related to the air cond. work in single family dwelling only                                                                                                                                                                               | 3.00  |       |
|       |                                                                                                                                          |       |       |       | For each appliance, piece of equipment, any mechanical work or alteration or replacement not included in this schedule, the permit fee shall be computed the same as building permit fees by using the cost of installation for the valuation amount. |       |       |
|       |                                                                                                                                          |       |       |       | FOR THE ISSUANCE OF EACH PERMIT                                                                                                                                                                                                                       | 3.00  |       |
|       |                                                                                                                                          |       |       |       | TOTAL PERMIT FEE \$                                                                                                                                                                                                                                   | 10.00 |       |

I hereby certify that I have carefully examined and read the above application; that the same is true and correct; and that the work herein described is to be done in accordance with all the provisions of the applicable Ordinances of the City of Las Vegas, Nevada and the State Laws, whether herein specified or not.

SIGNED Arthur L. Richardson Date 12-22-71  
Air Conditioning Contractor - Owner

BUILDING DEPARTMENT N. Mills Date 12/27/71

PERMIT NO. 847 PERMIT FEE \$ 10.00

# 12890

RECEIPT

9033 \$010.00 - 4

CITY OF LAS VEGAS  
DEPT. OF  
BUILDING & SAFETY

MUST BE MACHINE VALIDATED

27 DEC 71

L. Waterford 2-15-79

CITY OF LAS VEGAS, NEVADA

DEPARTMENT OF BUILDING & SAFETY - ELECTRICAL APPLICATION & PERMIT

ADDRESS OF CONSTRUCTION: 3116 Chadford Place

OWNER'S NAME: Grant Company

CIRCLE: New Bldg. Add'n; Remodel; TYPE OF BLDG.: SFD. APT. PUBLIC COMM.

CONTRACTOR'S NAME: Cadenbach Electric, Inc.

STATE LICENSE: 8016A

CITY LICENSE: 9013

| NUMBER | FIXTURE OR INSTALLATION                                 | UNIT PRICE |       |
|--------|---------------------------------------------------------|------------|-------|
| 7      | Fixture or sockets                                      | .15        | 1.05  |
| 38     | Light, receptacle or switch outlet                      | .20        | 7.60  |
|        | Wall or ceiling space heater                            | .35        |       |
|        | Blast coil heater per kilowatt                          | .35        |       |
| 1      | Garbage grinder outlet                                  | .35        | .35   |
| 1      | Dishwasher outlet                                       | .35        | .35   |
|        | Clothes dryer outlet                                    | .35        |       |
|        | Automatic clothes washer                                | .35        |       |
|        | Electric range outlet                                   | .35        |       |
|        | Electric water heater outlet                            | .35        |       |
|        | Mercury arc lamp and equipment                          | .35        |       |
| 1      | Special purpose outlet                                  | .35        | .35   |
|        | X-ray unit and its appurtenances                        | 5.00       |       |
|        | Watts of festoon lighting (Watts) First 3,000 watts     | 4.00       |       |
|        | for each additional thousand watts                      | 1.50       |       |
|        | Horsepower - all motors first horsepower or less        | 1.75       |       |
|        | for each additional horsepower                          | .35        |       |
|        | Temporary power and lights (temporary pole)             | 4.00       |       |
|        | Electric service (including any single meter socket)    | 3.00       |       |
| 1      | for each additional socket                              | .35        | 3.00  |
|        | Air conditioning service amps                           | 1.50       |       |
|        | Each KW (KVA) Generator (Transformer) (Welder) KW (KVA) | 2.00       |       |
|        | First 100 KVA - For each additional KW (KVA)            | .01        |       |
|        | Special inspection per hour                             | 4.00       |       |
|        | Speaker outlets                                         | .15        |       |
|        | Signal or Alarm outlets                                 | .15        |       |
|        | Amplifiers                                              | .50        |       |
|        | Control panels                                          | .25        |       |
|        | T. V. outlets - master system only                      | .15        |       |
|        | Radio outlets                                           | .15        |       |
|        | Main control racks                                      | 1.00       |       |
|        | T. V. and Radio antennas - master system only           | .75        |       |
|        | Minimum fee for any permit                              | 4.00       |       |
|        | Total fee                                               |            | 12.70 |

I hereby certify that I have carefully examined and read the above application; that the same is true and correct; and that the work herein described is to be done in accordance with all the provisions of the applicable Ordinances of the City of Las Vegas, Nevada and State laws whether herein specified or not.

SIGNED [Signature] MASTER ELECTRICIAN (TECHNICIAN) (OWNER)

DATE

BUILDING DEPARTMENT

DATE

#12860

PERMIT NO.

PERMIT FEE

RECEIPT

2217 \$012.70 - 6

CITY OF LAS VEGAS  
DEPT. OF  
BUILDING & SAFETY

MUST BE MACHINE VALIDATED

30 DEC 71



These Quakes 3-26-81

| DEPT. of BLDG & SAFETY - CITY of LAS VEGAS, NEVADA                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               |                                                 |                                             |          |            |            |                          |                                   |                  |                    |                                           |                             |                          |                                          |                             |                                 |                                            |                                     |               |             |                                             |                      |                             |                |                           |                            |                             |            |                             |      |              |                         |                       |            |                           |             |                         |                               |               |                                |                   |                                  |          |                                |                   |          |                           |               |         |                                 |                    |         |                               |                        |                 |             |                 |                 |                   |                       |               |  |  |                              |  |  |                             |  |  |
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| OWNER <u>R. H. Grant Co</u>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      | ADDRESS <u>3116 Chadford Place</u>              | DATE <u>8-5-71</u>                          |          |            |            |                          |                                   |                  |                    |                                           |                             |                          |                                          |                             |                                 |                                            |                                     |               |             |                                             |                      |                             |                |                           |                            |                             |            |                             |      |              |                         |                       |            |                           |             |                         |                               |               |                                |                   |                                  |          |                                |                   |          |                           |               |         |                                 |                    |         |                               |                        |                 |             |                 |                 |                   |                       |               |  |  |                              |  |  |                             |  |  |
| GEN CONT. <u>Same</u>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            |                                                 |                                             |          |            |            |                          |                                   |                  |                    |                                           |                             |                          |                                          |                             |                                 |                                            |                                     |               |             |                                             |                      |                             |                |                           |                            |                             |            |                             |      |              |                         |                       |            |                           |             |                         |                               |               |                                |                   |                                  |          |                                |                   |          |                           |               |         |                                 |                    |         |                               |                        |                 |             |                 |                 |                   |                       |               |  |  |                              |  |  |                             |  |  |
| PERMIT NO. <u>444</u>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            | LEGAL DESCRIPTION <u>L 9 B 3 Bradford place</u> | TYPE OF STRUCTURE <u>apt bldg</u>           |          |            |            |                          |                                   |                  |                    |                                           |                             |                          |                                          |                             |                                 |                                            |                                     |               |             |                                             |                      |                             |                |                           |                            |                             |            |                             |      |              |                         |                       |            |                           |             |                         |                               |               |                                |                   |                                  |          |                                |                   |          |                           |               |         |                                 |                    |         |                               |                        |                 |             |                 |                 |                   |                       |               |  |  |                              |  |  |                             |  |  |
| <table border="1"><thead><tr><th>BUILDING</th><th>MECHANICAL</th><th>ELECTRICAL</th></tr></thead><tbody><tr><td>LOCATION <u>09-11-71</u></td><td>PLUMBING CONT. <u>Handwritten</u></td><td>TEMP. POLE CONT.</td></tr><tr><td>FIREPLACE <u>0</u></td><td>PERMIT NO. <u>1104</u> DATE <u>4-5-71</u></td><td>PERMIT NO. _____ DATE _____</td></tr><tr><td>FOOTINGS <u>09-12-71</u></td><td>HEAT &amp; VENT. AC CONT. <u>Handwritten</u></td><td>INSPECTION _____ DATE _____</td></tr><tr><td>FOUNDATION WALL <u>09-11-71</u></td><td>PERMIT NO. <u>847</u> DATE <u>12-27-71</u></td><td>ELECTRICAL CONT. <u>Handwritten</u></td></tr><tr><td>FLOOR FRAMING</td><td>SEWER CONT.</td><td>PERMIT NO. <u>1562</u> DATE <u>12-30-71</u></td></tr><tr><td>SLAB <u>09-11-71</u></td><td>PERMIT NO. _____ DATE _____</td><td>FIXTURES CONT.</td></tr><tr><td>CHIMNEY/STEEL (FIREPLACE)</td><td>ROUGH SOIL <u>09-11-71</u></td><td>PERMIT NO. _____ DATE _____</td></tr><tr><td>WALL STEEL</td><td>ROUGH WATER <u>09-11-71</u></td><td>SLAB</td></tr><tr><td>COLUMN STEEL</td><td>TOP-OUT <u>09-11-71</u></td><td>ROUGH <u>09-11-71</u></td></tr><tr><td>BEAM STEEL</td><td>ROUGH GAS <u>09-11-71</u></td><td>FINAL ROUGH</td></tr><tr><td>FRAMING <u>09-11-71</u></td><td>AC ROUGH DUCT <u>09-11-71</u></td><td>FINAL FIXTURE</td></tr><tr><td>ROOF SHEATHING <u>09-11-71</u></td><td>REF. ROUGH PIPING</td><td>FINAL ELECTRICAL <u>09-11-71</u></td></tr><tr><td>INTERIOR</td><td>FINAL PLUMBING <u>09-11-71</u></td><td>TEMPORARY SERVICE</td></tr><tr><td>EXTERIOR</td><td>FINAL GAS <u>09-11-71</u></td><td>MISCELLANEOUS</td></tr><tr><td>DRYWALL</td><td>FINAL AIR COND. <u>09-11-71</u></td><td>GRADING &amp; DRAINAGE</td></tr><tr><td>LATHING</td><td>FINAL REFRIG. <u>09-11-71</u></td><td>ON-SITE PARKING SPACES</td></tr><tr><td>BACKING (SIGNS)</td><td>FINAL SEWER</td><td>END APPROVAL OF</td></tr><tr><td>PLASTER SCRATCH</td><td>FINAL SEPTIC TANK</td><td>OFF-SITE IMPROVEMENTS</td></tr><tr><td>PLASTER BROWN</td><td></td><td></td></tr><tr><td>URBAN REDEVELOPMENT APPROVAL</td><td></td><td></td></tr><tr><td>FINAL BLDG _____ DATE _____</td><td></td><td></td></tr></tbody></table> |                                                 |                                             | BUILDING | MECHANICAL | ELECTRICAL | LOCATION <u>09-11-71</u> | PLUMBING CONT. <u>Handwritten</u> | TEMP. POLE CONT. | FIREPLACE <u>0</u> | PERMIT NO. <u>1104</u> DATE <u>4-5-71</u> | PERMIT NO. _____ DATE _____ | FOOTINGS <u>09-12-71</u> | HEAT & VENT. AC CONT. <u>Handwritten</u> | INSPECTION _____ DATE _____ | FOUNDATION WALL <u>09-11-71</u> | PERMIT NO. <u>847</u> DATE <u>12-27-71</u> | ELECTRICAL CONT. <u>Handwritten</u> | FLOOR FRAMING | SEWER CONT. | PERMIT NO. <u>1562</u> DATE <u>12-30-71</u> | SLAB <u>09-11-71</u> | PERMIT NO. _____ DATE _____ | FIXTURES CONT. | CHIMNEY/STEEL (FIREPLACE) | ROUGH SOIL <u>09-11-71</u> | PERMIT NO. _____ DATE _____ | WALL STEEL | ROUGH WATER <u>09-11-71</u> | SLAB | COLUMN STEEL | TOP-OUT <u>09-11-71</u> | ROUGH <u>09-11-71</u> | BEAM STEEL | ROUGH GAS <u>09-11-71</u> | FINAL ROUGH | FRAMING <u>09-11-71</u> | AC ROUGH DUCT <u>09-11-71</u> | FINAL FIXTURE | ROOF SHEATHING <u>09-11-71</u> | REF. ROUGH PIPING | FINAL ELECTRICAL <u>09-11-71</u> | INTERIOR | FINAL PLUMBING <u>09-11-71</u> | TEMPORARY SERVICE | EXTERIOR | FINAL GAS <u>09-11-71</u> | MISCELLANEOUS | DRYWALL | FINAL AIR COND. <u>09-11-71</u> | GRADING & DRAINAGE | LATHING | FINAL REFRIG. <u>09-11-71</u> | ON-SITE PARKING SPACES | BACKING (SIGNS) | FINAL SEWER | END APPROVAL OF | PLASTER SCRATCH | FINAL SEPTIC TANK | OFF-SITE IMPROVEMENTS | PLASTER BROWN |  |  | URBAN REDEVELOPMENT APPROVAL |  |  | FINAL BLDG _____ DATE _____ |  |  |
| BUILDING                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         | MECHANICAL                                      | ELECTRICAL                                  |          |            |            |                          |                                   |                  |                    |                                           |                             |                          |                                          |                             |                                 |                                            |                                     |               |             |                                             |                      |                             |                |                           |                            |                             |            |                             |      |              |                         |                       |            |                           |             |                         |                               |               |                                |                   |                                  |          |                                |                   |          |                           |               |         |                                 |                    |         |                               |                        |                 |             |                 |                 |                   |                       |               |  |  |                              |  |  |                             |  |  |
| LOCATION <u>09-11-71</u>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         | PLUMBING CONT. <u>Handwritten</u>               | TEMP. POLE CONT.                            |          |            |            |                          |                                   |                  |                    |                                           |                             |                          |                                          |                             |                                 |                                            |                                     |               |             |                                             |                      |                             |                |                           |                            |                             |            |                             |      |              |                         |                       |            |                           |             |                         |                               |               |                                |                   |                                  |          |                                |                   |          |                           |               |         |                                 |                    |         |                               |                        |                 |             |                 |                 |                   |                       |               |  |  |                              |  |  |                             |  |  |
| FIREPLACE <u>0</u>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               | PERMIT NO. <u>1104</u> DATE <u>4-5-71</u>       | PERMIT NO. _____ DATE _____                 |          |            |            |                          |                                   |                  |                    |                                           |                             |                          |                                          |                             |                                 |                                            |                                     |               |             |                                             |                      |                             |                |                           |                            |                             |            |                             |      |              |                         |                       |            |                           |             |                         |                               |               |                                |                   |                                  |          |                                |                   |          |                           |               |         |                                 |                    |         |                               |                        |                 |             |                 |                 |                   |                       |               |  |  |                              |  |  |                             |  |  |
| FOOTINGS <u>09-12-71</u>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         | HEAT & VENT. AC CONT. <u>Handwritten</u>        | INSPECTION _____ DATE _____                 |          |            |            |                          |                                   |                  |                    |                                           |                             |                          |                                          |                             |                                 |                                            |                                     |               |             |                                             |                      |                             |                |                           |                            |                             |            |                             |      |              |                         |                       |            |                           |             |                         |                               |               |                                |                   |                                  |          |                                |                   |          |                           |               |         |                                 |                    |         |                               |                        |                 |             |                 |                 |                   |                       |               |  |  |                              |  |  |                             |  |  |
| FOUNDATION WALL <u>09-11-71</u>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  | PERMIT NO. <u>847</u> DATE <u>12-27-71</u>      | ELECTRICAL CONT. <u>Handwritten</u>         |          |            |            |                          |                                   |                  |                    |                                           |                             |                          |                                          |                             |                                 |                                            |                                     |               |             |                                             |                      |                             |                |                           |                            |                             |            |                             |      |              |                         |                       |            |                           |             |                         |                               |               |                                |                   |                                  |          |                                |                   |          |                           |               |         |                                 |                    |         |                               |                        |                 |             |                 |                 |                   |                       |               |  |  |                              |  |  |                             |  |  |
| FLOOR FRAMING                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    | SEWER CONT.                                     | PERMIT NO. <u>1562</u> DATE <u>12-30-71</u> |          |            |            |                          |                                   |                  |                    |                                           |                             |                          |                                          |                             |                                 |                                            |                                     |               |             |                                             |                      |                             |                |                           |                            |                             |            |                             |      |              |                         |                       |            |                           |             |                         |                               |               |                                |                   |                                  |          |                                |                   |          |                           |               |         |                                 |                    |         |                               |                        |                 |             |                 |                 |                   |                       |               |  |  |                              |  |  |                             |  |  |
| SLAB <u>09-11-71</u>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             | PERMIT NO. _____ DATE _____                     | FIXTURES CONT.                              |          |            |            |                          |                                   |                  |                    |                                           |                             |                          |                                          |                             |                                 |                                            |                                     |               |             |                                             |                      |                             |                |                           |                            |                             |            |                             |      |              |                         |                       |            |                           |             |                         |                               |               |                                |                   |                                  |          |                                |                   |          |                           |               |         |                                 |                    |         |                               |                        |                 |             |                 |                 |                   |                       |               |  |  |                              |  |  |                             |  |  |
| CHIMNEY/STEEL (FIREPLACE)                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        | ROUGH SOIL <u>09-11-71</u>                      | PERMIT NO. _____ DATE _____                 |          |            |            |                          |                                   |                  |                    |                                           |                             |                          |                                          |                             |                                 |                                            |                                     |               |             |                                             |                      |                             |                |                           |                            |                             |            |                             |      |              |                         |                       |            |                           |             |                         |                               |               |                                |                   |                                  |          |                                |                   |          |                           |               |         |                                 |                    |         |                               |                        |                 |             |                 |                 |                   |                       |               |  |  |                              |  |  |                             |  |  |
| WALL STEEL                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       | ROUGH WATER <u>09-11-71</u>                     | SLAB                                        |          |            |            |                          |                                   |                  |                    |                                           |                             |                          |                                          |                             |                                 |                                            |                                     |               |             |                                             |                      |                             |                |                           |                            |                             |            |                             |      |              |                         |                       |            |                           |             |                         |                               |               |                                |                   |                                  |          |                                |                   |          |                           |               |         |                                 |                    |         |                               |                        |                 |             |                 |                 |                   |                       |               |  |  |                              |  |  |                             |  |  |
| COLUMN STEEL                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     | TOP-OUT <u>09-11-71</u>                         | ROUGH <u>09-11-71</u>                       |          |            |            |                          |                                   |                  |                    |                                           |                             |                          |                                          |                             |                                 |                                            |                                     |               |             |                                             |                      |                             |                |                           |                            |                             |            |                             |      |              |                         |                       |            |                           |             |                         |                               |               |                                |                   |                                  |          |                                |                   |          |                           |               |         |                                 |                    |         |                               |                        |                 |             |                 |                 |                   |                       |               |  |  |                              |  |  |                             |  |  |
| BEAM STEEL                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       | ROUGH GAS <u>09-11-71</u>                       | FINAL ROUGH                                 |          |            |            |                          |                                   |                  |                    |                                           |                             |                          |                                          |                             |                                 |                                            |                                     |               |             |                                             |                      |                             |                |                           |                            |                             |            |                             |      |              |                         |                       |            |                           |             |                         |                               |               |                                |                   |                                  |          |                                |                   |          |                           |               |         |                                 |                    |         |                               |                        |                 |             |                 |                 |                   |                       |               |  |  |                              |  |  |                             |  |  |
| FRAMING <u>09-11-71</u>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          | AC ROUGH DUCT <u>09-11-71</u>                   | FINAL FIXTURE                               |          |            |            |                          |                                   |                  |                    |                                           |                             |                          |                                          |                             |                                 |                                            |                                     |               |             |                                             |                      |                             |                |                           |                            |                             |            |                             |      |              |                         |                       |            |                           |             |                         |                               |               |                                |                   |                                  |          |                                |                   |          |                           |               |         |                                 |                    |         |                               |                        |                 |             |                 |                 |                   |                       |               |  |  |                              |  |  |                             |  |  |
| ROOF SHEATHING <u>09-11-71</u>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   | REF. ROUGH PIPING                               | FINAL ELECTRICAL <u>09-11-71</u>            |          |            |            |                          |                                   |                  |                    |                                           |                             |                          |                                          |                             |                                 |                                            |                                     |               |             |                                             |                      |                             |                |                           |                            |                             |            |                             |      |              |                         |                       |            |                           |             |                         |                               |               |                                |                   |                                  |          |                                |                   |          |                           |               |         |                                 |                    |         |                               |                        |                 |             |                 |                 |                   |                       |               |  |  |                              |  |  |                             |  |  |
| INTERIOR                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         | FINAL PLUMBING <u>09-11-71</u>                  | TEMPORARY SERVICE                           |          |            |            |                          |                                   |                  |                    |                                           |                             |                          |                                          |                             |                                 |                                            |                                     |               |             |                                             |                      |                             |                |                           |                            |                             |            |                             |      |              |                         |                       |            |                           |             |                         |                               |               |                                |                   |                                  |          |                                |                   |          |                           |               |         |                                 |                    |         |                               |                        |                 |             |                 |                 |                   |                       |               |  |  |                              |  |  |                             |  |  |
| EXTERIOR                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         | FINAL GAS <u>09-11-71</u>                       | MISCELLANEOUS                               |          |            |            |                          |                                   |                  |                    |                                           |                             |                          |                                          |                             |                                 |                                            |                                     |               |             |                                             |                      |                             |                |                           |                            |                             |            |                             |      |              |                         |                       |            |                           |             |                         |                               |               |                                |                   |                                  |          |                                |                   |          |                           |               |         |                                 |                    |         |                               |                        |                 |             |                 |                 |                   |                       |               |  |  |                              |  |  |                             |  |  |
| DRYWALL                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          | FINAL AIR COND. <u>09-11-71</u>                 | GRADING & DRAINAGE                          |          |            |            |                          |                                   |                  |                    |                                           |                             |                          |                                          |                             |                                 |                                            |                                     |               |             |                                             |                      |                             |                |                           |                            |                             |            |                             |      |              |                         |                       |            |                           |             |                         |                               |               |                                |                   |                                  |          |                                |                   |          |                           |               |         |                                 |                    |         |                               |                        |                 |             |                 |                 |                   |                       |               |  |  |                              |  |  |                             |  |  |
| LATHING                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          | FINAL REFRIG. <u>09-11-71</u>                   | ON-SITE PARKING SPACES                      |          |            |            |                          |                                   |                  |                    |                                           |                             |                          |                                          |                             |                                 |                                            |                                     |               |             |                                             |                      |                             |                |                           |                            |                             |            |                             |      |              |                         |                       |            |                           |             |                         |                               |               |                                |                   |                                  |          |                                |                   |          |                           |               |         |                                 |                    |         |                               |                        |                 |             |                 |                 |                   |                       |               |  |  |                              |  |  |                             |  |  |
| BACKING (SIGNS)                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  | FINAL SEWER                                     | END APPROVAL OF                             |          |            |            |                          |                                   |                  |                    |                                           |                             |                          |                                          |                             |                                 |                                            |                                     |               |             |                                             |                      |                             |                |                           |                            |                             |            |                             |      |              |                         |                       |            |                           |             |                         |                               |               |                                |                   |                                  |          |                                |                   |          |                           |               |         |                                 |                    |         |                               |                        |                 |             |                 |                 |                   |                       |               |  |  |                              |  |  |                             |  |  |
| PLASTER SCRATCH                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  | FINAL SEPTIC TANK                               | OFF-SITE IMPROVEMENTS                       |          |            |            |                          |                                   |                  |                    |                                           |                             |                          |                                          |                             |                                 |                                            |                                     |               |             |                                             |                      |                             |                |                           |                            |                             |            |                             |      |              |                         |                       |            |                           |             |                         |                               |               |                                |                   |                                  |          |                                |                   |          |                           |               |         |                                 |                    |         |                               |                        |                 |             |                 |                 |                   |                       |               |  |  |                              |  |  |                             |  |  |
| PLASTER BROWN                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    |                                                 |                                             |          |            |            |                          |                                   |                  |                    |                                           |                             |                          |                                          |                             |                                 |                                            |                                     |               |             |                                             |                      |                             |                |                           |                            |                             |            |                             |      |              |                         |                       |            |                           |             |                         |                               |               |                                |                   |                                  |          |                                |                   |          |                           |               |         |                                 |                    |         |                               |                        |                 |             |                 |                 |                   |                       |               |  |  |                              |  |  |                             |  |  |
| URBAN REDEVELOPMENT APPROVAL                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |                                                 |                                             |          |            |            |                          |                                   |                  |                    |                                           |                             |                          |                                          |                             |                                 |                                            |                                     |               |             |                                             |                      |                             |                |                           |                            |                             |            |                             |      |              |                         |                       |            |                           |             |                         |                               |               |                                |                   |                                  |          |                                |                   |          |                           |               |         |                                 |                    |         |                               |                        |                 |             |                 |                 |                   |                       |               |  |  |                              |  |  |                             |  |  |
| FINAL BLDG _____ DATE _____                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |                                                 |                                             |          |            |            |                          |                                   |                  |                    |                                           |                             |                          |                                          |                             |                                 |                                            |                                     |               |             |                                             |                      |                             |                |                           |                            |                             |            |                             |      |              |                         |                       |            |                           |             |                         |                               |               |                                |                   |                                  |          |                                |                   |          |                           |               |         |                                 |                    |         |                               |                        |                 |             |                 |                 |                   |                       |               |  |  |                              |  |  |                             |  |  |

APPROVED FOR OCCUPANCY & METER 7-13-71 INSPECTOR

DATE

PLEASE NOTE REMARKS ON REVERSE SIDE

3116 Chadford Place LOG #

AREA # 20-4

23 04