

This home has been professionally insulated with

# Owens-Corning Fiberglas Insulation



Seg 107

Job 6026

9425 Eagle Valley Dr.  
# 90-091485

To meet the stated thermal resistances (R-Values), the manufacturer provides the following specifications:

## Blanket Insulation

Blanket and batt insulation when installed according to the manufacturer's recommendations will provide the stated R-Value.

| R-Value                                  | Minimum Thickness                             |
|------------------------------------------|-----------------------------------------------|
| To Obtain an insulation resistance R of: | Installed insulation should not be less than: |
| R-38                                     | 12" Thick                                     |
| R-30                                     | 9½" Thick                                     |
| R-22                                     | 6¾" Thick                                     |
| R-19                                     | 6¼" Thick†                                    |
| R-13                                     | 3¾" Thick††                                   |
| R-11                                     | 3½" Thick                                     |

†R-18 in a 5½" cavity

††R-12.7 in a 3½" cavity

## ThermaGlas™

### Loose Fill Insulation 03M04250

Stated R-Value is provided by installing the required number of bags per 1,000 sq. ft. at a thickness not less than the label minimum thickness. Installation of the required number of bags may yield more than the specified minimum thickness and minimum sq. ft. weight. Failure by the installer to provide both the required bags and at least the minimum thickness will result in lower insulation R-Value.

Specification For Open Blow Attics

Nominal net weight of insulation per bag is 35 lbs.

| R-VALUE                                  | BAGS PER 1000 SQ. FT.                                            | MAXIMUM NET COVERAGE                             | MINIMUM WEIGHT SQ. FT.                                              | MINIMUM THICKNESS                             |
|------------------------------------------|------------------------------------------------------------------|--------------------------------------------------|---------------------------------------------------------------------|-----------------------------------------------|
| To obtain an insulation resistance R of: | No. of bags per 1000 sq. ft. of net area shall not be less than: | Contents of this bag should not cover more than: | Weight per sq. ft. of installed insulation should not be less than: | Installed insulation should not be less than: |
| R-49                                     | 33.3                                                             | 30 Sq. Ft.                                       | 1.173                                                               | 19½ In.                                       |
| R-44                                     | 30.3                                                             | 33 Sq. Ft.                                       | 1.053                                                               | 17½ In.                                       |
| R-38                                     | 26.3                                                             | 38 Sq. Ft.                                       | 0.910                                                               | 15¼ In.                                       |
| R-30                                     | 20.4                                                             | 49 Sq. Ft.                                       | 0.718                                                               | 12 In.                                        |
| R-26                                     | 17.9                                                             | 56 Sq. Ft.                                       | 0.622                                                               | 10¼ In.                                       |
| R-22                                     | 15.2                                                             | 66 Sq. Ft.                                       | 0.527                                                               | 8¾ In.                                        |
| R-19                                     | 13.0                                                             | 77 Sq. Ft.                                       | 0.455                                                               | 7½ In.                                        |
| R-11                                     | 7.5                                                              | 133 Sq. Ft.                                      | 0.263                                                               | 4½ In.                                        |

R means resistance to heat flow. The higher the R-value, the greater the insulating power.

The following products have been installed as specified above:

| Type (check appropriate box) | kraft                    | unfaced                  | foil                     | FS-25                    | loose fill                          | R-value | thickness | no pkgs. | coverage area |
|------------------------------|--------------------------|--------------------------|--------------------------|--------------------------|-------------------------------------|---------|-----------|----------|---------------|
| Ceilings                     | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> | 30      | 12        | 58       | 2850          |
| Floors                       | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>            |         |           |          |               |
| Walls                        | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>            |         |           |          |               |

Installed by: Commercial

Builder:

signature: mendoza date: 3-7-91

signature: \_\_\_\_\_ date: \_\_\_\_\_

**HIGHLAND****PRODUCTS  
INC.**3650 North 40th Avenue  
Phoenix, Arizona 85019  
(602) 272-1575 • (602) 269-2561

# 90-091485

THE INFORMATION BELOW TO BE SUPPLIED BY APPLICATOR  
LOCATION 9425 Eagle Valley DATE 3-8-91  
APPLICATOR Nevada State Plastering INSPECTED \_\_\_\_\_  
NAME Del Webb PHONE # 649-8522  
BUILDER \_\_\_\_\_  
APPLICATOR'S # 196 LOT # 107

I hereby state that the stucco installation on this project is per manufacturer's specification and conforms to the local building requirements.

CONTRACTOR John Sabri

One copy to builder and one copy to building department in authority.  
Any misuse of this card shall invalidate any warranty, implied or otherwise. Verification of this card must be obtained by calling Highland Products, Inc., 269-2561.

The following is a COPY ONLY, not to be misconstrued as an actual warranty by Highland Products, Inc.

Highland Products, Inc. warrants the Wire-Tex Stucco System for twenty (20) years from the date of the initial application to be free from any defects which seriously affect the weather resistance of the system. Should any defects occur, Highland Products, Inc. shall make a pro-rate allowance for replacement, or pay the owner the amount of the allowance. Highland Products, Inc. shall not be liable for damages or defects resulting from misuse, natural catastrophies, casualty or other cause beyond the control of Highland Products, Inc.

This warranty does not relieve the builder of his responsibilities under the Builder's Warranty required by the National Housing Act or under any provisions applicable to special housing programs such as Low Rent Public Housing.

The above warranty applies to HUB bulleting #1074.

# DEPARTMENT OF BUILDING & SAFETY CITY OF LAS VEGAS

|                                                     |                      |                                                       |                     |
|-----------------------------------------------------|----------------------|-------------------------------------------------------|---------------------|
| <input type="checkbox"/> <b>PERMIT NUMBER</b> 91485 |                      | <b>INSPECTION NUMBER</b> 423 6026<br><del>91485</del> |                     |
| <b>JOB ADDRESS</b> 9425 Eagle Valley                |                      |                                                       |                     |
| <b>LOT NO.</b> 158                                  | <b>BLOCK NO.</b> 107 | <b>SUBDIVISION NAME</b> Sun City 4107                 |                     |
| <b>FIRE DEPT. MAP NO.</b>                           | <b>JOB PHONE</b>     | <b>CALL-IN DATE</b>                                   | <b>CALL-IN TIME</b> |
| <b>INSPECTOR NO</b> 23                              |                      | <b>INSPECTOR NAME</b> E h                             |                     |
| <b>INSPECTION REQUESTED</b> Final Gas               |                      |                                                       |                     |

|                                                                                                                             |                                                                                                                                    |                                              |                                                                |
|-----------------------------------------------------------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------|----------------------------------------------------------------|
| <input type="checkbox"/> <b>PARTIAL INSPECTION</b>                                                                          | <input type="checkbox"/> <b>PARTIAL APPROVAL (P)</b>                                                                               | <b>PARTIAL DESCRIPTION</b>                   |                                                                |
| <input checked="" type="checkbox"/> <b>APPROVED (A)</b>                                                                     | <input type="checkbox"/> <b>STOP WORK (S)</b>                                                                                      | <input type="checkbox"/> <b>COMMENTS (C)</b> | <input type="checkbox"/> <b>TEMPORARY APPROVAL (T) - UNTIL</b> |
|                                                                                                                             |                                                                                                                                    | <input type="checkbox"/> <b>HOLD (H)</b>     |                                                                |
| <input type="checkbox"/> <b>REJECTED (R)</b>                                                                                | <b>REINSPECTION REQUIRED - CALL 799-2071</b>                                                                                       |                                              | <input type="checkbox"/> <b>PERMIT REQUIRED</b>                |
| <input type="checkbox"/> <b>REFEE (F)</b>                                                                                   | <b>REINSPECTION FEE REQUIRED - PAY AT CITY HALL 3RD FLOOR - 400 E. STEWART STREET.</b>                                             |                                              |                                                                |
| <b>INSPECTOR SIGNATURE</b> E h                                                                                              |                                                                                                                                    | <b>INSPECTION DATE</b> 4291                  |                                                                |
| <input type="checkbox"/> <b>PROJECT COMPLETE</b>                                                                            | BRING HARD CARD WITH FIRE, QUALITY CONTROL & PLANNING APPROVALS SIGNED OFF TO BLDG & SAFETY FOR C. of O ISSUANCE (Commercial Only) |                                              |                                                                |
| IF YOU HAVE ANY QUESTIONS ON THIS INSPECTION, YOU MAY CALL THE INSPECTOR FROM 7 00 A M - 7:15 A M OR 2:45 P.M - 3:00 P M AT |                                                                                                                                    |                                              |                                                                |

FOR ADDITIONAL ASSISTANCE CALL 386-6251  
SEE REVERSE SIDE FOR INSPECTION TYPES

# DEPARTMENT OF BUILDING & SAFETY CITY OF LAS VEGAS

|                                                |                      |                        |                                   |
|------------------------------------------------|----------------------|------------------------|-----------------------------------|
| JOB ADDRESS<br><b>9425 Eagle Valley</b>        |                      |                        | PERMIT NO.<br><b>91485</b>        |
| LOT NO<br><b>158</b>                           | MAP NO<br><b>107</b> | INSPECTOR<br><b>85</b> | DATE<br><b>3-13-91</b>            |
| SUBDIVISION NAME<br><b>Sun City 4107</b>       |                      |                        | PHONE                             |
| INSPECTOR SIGNATURE<br><b>72</b><br><b>cmr</b> |                      |                        | INSPECTION DATE<br><b>3-13-91</b> |

☐ PARTIAL INSPECTION - DESCRIPTION:

☒ **APPROVED**
☐ **PERMIT REQUIRED**
☐ **STOP WORK**

☐ **REJECTED - CORRECTION NOTICE - REINSPECTION REQUIRED CALL 799-2071**

| INSPECT                                 | DESCRIPTION                     | INSPECT                      | DESCRIPTION                 | INSPECT                      | DESCRIPTION            |
|-----------------------------------------|---------------------------------|------------------------------|-----------------------------|------------------------------|------------------------|
| <input checked="" type="checkbox"/> B-1 | FOOTING, LAYOUT, REBAR, ZONING  | <input type="checkbox"/> P-1 | ON SITE SEWER               | <input type="checkbox"/> X-2 | UNDERGROUND HYDRO      |
| <input type="checkbox"/> B-2            | STEM WALL - FORMS & REBAR       | <input type="checkbox"/> P-2 | ON SITE WATER               | <input type="checkbox"/> X-3 | UNDERGROUND FINAL/FLOW |
| <input type="checkbox"/> B-3            | PRE-SLAB                        | <input type="checkbox"/> P-3 | BUILDING SEWER (YARD LINES) | <input type="checkbox"/> X-4 | SPRINKLER SYSTEM HYDRO |
| <input type="checkbox"/> B-4            | ROOF SHEATHING                  | <input type="checkbox"/> P-4 | UNDERSLAB PLUMBING          | <input type="checkbox"/> X-5 | FIRE ALARM             |
| <input type="checkbox"/> B-5            | FRAMING                         | <input type="checkbox"/> P-5 | TOP OUT-WATER, GAS, WASTE   | <input type="checkbox"/> X-6 | OTHER:                 |
| <input type="checkbox"/> B-6            | INSULATION                      | <input type="checkbox"/> P-6 | FINAL GAS TEST              | <input type="checkbox"/> X-7 | FINAL FIRE             |
| <input type="checkbox"/> B-7            | DRYWALL NAILING                 | <input type="checkbox"/> P-7 | FINAL PLUMBING              |                              |                        |
| <input type="checkbox"/> B-8            | EXTERIOR LATH/STUCCO            |                              |                             | <input type="checkbox"/> E-1 | UNDERGROUND ELETRICAL  |
| <input type="checkbox"/> B-9            | WALL GROUT & STEEL              | <input type="checkbox"/> M-1 | ROUGH VENT                  | <input type="checkbox"/> E-2 | ROUGH ELECTRICAL       |
| <input type="checkbox"/> B-10           | <u>POOL</u> PRE-GUNITE          | <input type="checkbox"/> M-2 | HOOD                        | <input type="checkbox"/> E-3 | LOW VOLTAGE ELECTRICAL |
| <input type="checkbox"/> B-11           | <u>POOL</u> PRE-PLASTER / FINAL | <input type="checkbox"/> M-3 | FINAL MECHANICAL            | <input type="checkbox"/> E-4 | SIGN INSPECTION        |
| <input type="checkbox"/> B-12           | BUILDING FINAL                  |                              |                             | <input type="checkbox"/> E-5 | FINAL ELECTRICAL       |
| <input type="checkbox"/> B-13           | CERT OF OCC                     | <input type="checkbox"/> X-1 | KICKER / FLUSH              | <input type="checkbox"/> E-6 | TEMP POWER             |

☐ **FINAL INSPECTION**

BRING HARD CARD WITH FIRE, QUALITY CONTROL & PLANNING APPROVALS  
SIGNED OFF TO BLDG & SAFETY FOR C. of O. ISSUANCE (Commercial Only)

**FOR ASSISTANCE -CALL: 393-6251**



VEGAS  
10.026

This image shows a single sheet of white paper with horizontal blue or grey ruling lines. A vertical line runs down the left side, creating a margin. The paper appears to be part of a binder or notebook, as evidenced by the hole punches at the top edge. There are some faint, dark marks near the top center, possibly from a staple or a pen mark.

|                                              |                                          |                                    |
|----------------------------------------------|------------------------------------------|------------------------------------|
| <input checked="" type="checkbox"/> APPROVED | <input type="checkbox"/> PERMIT REQUIRED | <input type="checkbox"/> STOP WORK |
|----------------------------------------------|------------------------------------------|------------------------------------|

☐ REJECTED - CORRECTION NOTICE - REINSPECTION REQUIRED CALL 799-2071

|                                                  |                                                                                                                                    |
|--------------------------------------------------|------------------------------------------------------------------------------------------------------------------------------------|
| <input type="checkbox"/> <b>FINAL INSPECTION</b> | BRING HARD CARD WITH FIRE, QUALITY CONTROL & PLANNING APPROVALS SIGNED OFF TO BLDG & SAFETY FOR C of O. ISSUANCE (Commercial Only) |
|--------------------------------------------------|------------------------------------------------------------------------------------------------------------------------------------|

**FOR ASSISTANCE -CALL: 386-6251**

# DEPARTMENT OF BUILDING & SAFETY CITY OF LAS VEGAS

|                                                                                             |                                                                           |                                                                            |                                                                                       |  |
|---------------------------------------------------------------------------------------------|---------------------------------------------------------------------------|----------------------------------------------------------------------------|---------------------------------------------------------------------------------------|--|
| JOB ADDRESS<br><div style="font-size: 1.2em; font-family: cursive;">9425 Eagle Valley</div> |                                                                           |                                                                            | PERMIT NO.<br><div style="font-size: 1.2em; font-family: cursive;">91485</div>        |  |
| LOT NO<br><div style="font-size: 1.2em; font-family: cursive;">158</div>                    | MAP NO.<br><div style="font-size: 1.2em; font-family: cursive;">107</div> | INSPECTOR<br><div style="font-size: 1.2em; font-family: cursive;">85</div> | DATE<br><div style="font-size: 1.2em; font-family: cursive;">2-22-91</div>            |  |
| SUBDIVISION NAME<br><div style="font-size: 1.2em; font-family: cursive;">Sun City</div>     |                                                                           |                                                                            | PHONE<br><div style="font-size: 1.2em; font-family: cursive;">4107</div>              |  |
| INSPECTOR SIGNATURE<br><div style="font-size: 1.2em; font-family: cursive;">73</div>        |                                                                           |                                                                            | INSPECTION DATE<br><div style="font-size: 1.2em; font-family: cursive;">2-22-91</div> |  |

☐ PARTIAL INSPECTION - DESCRIPTION:

☒ **APPROVED**

☐ **PERMIT REQUIRED**

☐ **STOP WORK**

☐ **REJECTED - CORRECTION NOTICE - REINSPECTION REQUIRED CALL 799-2071**

| INSPECT                                 | DESCRIPTION                     | INSPECT                      | DESCRIPTION                 | INSPECT                      | DESCRIPTION            |
|-----------------------------------------|---------------------------------|------------------------------|-----------------------------|------------------------------|------------------------|
| <input type="checkbox"/> B-1            | FOOTING, LAYOUT, REBAR, ZONING  | <input type="checkbox"/> P-1 | ON SITE SEWER               | <input type="checkbox"/> X-2 | UNDERGROUND HYDRO      |
| <input type="checkbox"/> B-2            | STEM WALL - FORMS & REBAR       | <input type="checkbox"/> P-2 | ON SITE WATER               | <input type="checkbox"/> X-3 | UNDERGROUND FINAL/FLOW |
| <input type="checkbox"/> B-3            | PRE-SLAB                        | <input type="checkbox"/> P-3 | BUILDING SEWER (YARD LINES) | <input type="checkbox"/> X-4 | SPRINKLER SYSTEM HYDRO |
| <input type="checkbox"/> B-4            | ROOF SHEATHING                  | <input type="checkbox"/> P-4 | UNDERSLAB PLUMBING          | <input type="checkbox"/> X-5 | FIRE ALARM             |
| <input type="checkbox"/> B-5            | FRAMING                         | <input type="checkbox"/> P-5 | TOP OUT-WATER, GAS, WASTE   | <input type="checkbox"/> X-6 | OTHER.                 |
| <input type="checkbox"/> B-6            | INSULATION                      | <input type="checkbox"/> P-6 | FINAL GAS TEST              | <input type="checkbox"/> X-7 | FINAL FIRE             |
| <input type="checkbox"/> B-7            | DRYWALL NAILING                 | <input type="checkbox"/> P-7 | FINAL PLUMBING              |                              |                        |
| <input checked="" type="checkbox"/> B-8 | EXTERIOR LATH/STUCCO            |                              |                             | <input type="checkbox"/> E-1 | UNDERGROUND ELECTRICAL |
| <input type="checkbox"/> B-9            | WALL GROUT & STEEL              | <input type="checkbox"/> M-1 | ROUGH VENT                  | <input type="checkbox"/> E-2 | ROUGH ELECTRICAL       |
| <input type="checkbox"/> B-10           | <b>POOL</b> PRE-GUNITE          | <input type="checkbox"/> M-2 | HOOD                        | <input type="checkbox"/> E-3 | LOW VOLTAGE ELECTRICAL |
| <input type="checkbox"/> B-11           | <b>POOL</b> PRE-PLASTER / FINAL | <input type="checkbox"/> M-3 | FINAL MECHANICAL            | <input type="checkbox"/> E-4 | SIGN INSPECTION        |
| <input type="checkbox"/> B-12           | BUILDING FINAL                  |                              |                             | <input type="checkbox"/> E-5 | FINAL ELECTRICAL       |
| <input type="checkbox"/> B-13           | CERT OF OCC                     | <input type="checkbox"/> X-1 | KICKER / FLUSH              | <input type="checkbox"/> E-6 | TEMP POWER             |

☐ **FINAL INSPECTION**

BRING HARD CARD WITH FIRE, QUALITY CONTROL & PLANNING APPROVALS  
SIGNED OFF TO BLDG & SAFETY FOR C. of O. ISSUANCE (Commercial Only)

**FOR ASSISTANCE -CALL: 386-6251**

# DEPARTMENT OF BUILDING & SAFETY CITY OF LAS VEGAS

6026

|                                                                                               |                                                                          |           |                                                                                       |
|-----------------------------------------------------------------------------------------------|--------------------------------------------------------------------------|-----------|---------------------------------------------------------------------------------------|
| JOB ADDRESS<br><div style="font-size: 1.2em; font-family: cursive;">9425 Eagle Valley</div>   |                                                                          |           | PERMIT NO.<br><div style="font-size: 1.2em; font-family: cursive;">91485</div>        |
| LOT NO<br><div style="font-size: 1.2em; font-family: cursive;">158</div>                      | MAP NO<br><div style="font-size: 1.2em; font-family: cursive;">107</div> | INSPECTOR | DATE<br><div style="font-size: 1.2em; font-family: cursive;">2-15-91</div>            |
| SUBDIVISION NAME<br><div style="font-size: 1.2em; font-family: cursive;">Sun City</div>       |                                                                          |           | PHONE<br><div style="font-size: 1.2em; font-family: cursive;">4107</div>              |
| INSPECTOR SIGNATURE<br><div style="font-size: 1.5em; font-family: cursive;">[Signature]</div> |                                                                          |           | INSPECTION DATE<br><div style="font-size: 1.2em; font-family: cursive;">2/15/91</div> |

☐ PARTIAL INSPECTION - DESCRIPTION:

☒ **APPROVED**
                         
 ☐ **PERMIT REQUIRED**
                         
 ☐ **STOP WORK**

☐ **REJECTED - CORRECTION NOTICE - REINSPECTION REQUIRED CALL 799-2071**

| INSPECT                       | DESCRIPTION                                                                        | INSPECT                      | DESCRIPTION                 | INSPECT                                 | DESCRIPTION            |
|-------------------------------|------------------------------------------------------------------------------------|------------------------------|-----------------------------|-----------------------------------------|------------------------|
| <input type="checkbox"/> B-1  | FOOTING, LAYOUT, REBAR, ZONING                                                     | <input type="checkbox"/> P-1 | ON SITE SEWER               | <input type="checkbox"/> X-2            | UNDERGROUND HYDRO      |
| <input type="checkbox"/> B-2  | STEM WALL — FORMS & REBAR                                                          | <input type="checkbox"/> P-2 | ON SITE WATER               | <input type="checkbox"/> X-3            | UNDERGROUND FINAL/FLOW |
| <input type="checkbox"/> B-3  | PRE-SLAB                                                                           | <input type="checkbox"/> P-3 | BUILDING SEWER (YARD LINES) | <input type="checkbox"/> X-4            | SPRINKLER SYSTEM HYDRO |
| <input type="checkbox"/> B-4  | ROOF SHEATHING                                                                     | <input type="checkbox"/> P-4 | UNDERSLAB PLUMBING          | <input type="checkbox"/> X-5            | FIRE ALARM             |
| <input type="checkbox"/> B-5  | FRAMING                                                                            | <input type="checkbox"/> P-5 | TOP OUT-WATER, GAS, WASTE   | <input type="checkbox"/> X-6            | OTHER                  |
| <input type="checkbox"/> B-6  | INSULATION                                                                         | <input type="checkbox"/> P-6 | FINAL GAS TEST              | <input type="checkbox"/> X-7            | FINAL FIRE             |
| <input type="checkbox"/> B-7  | DRYWALL NAILING                                                                    | <input type="checkbox"/> P-7 | FINAL PLUMBING              |                                         |                        |
| <input type="checkbox"/> B-8  | EXTERIOR LATH/STUCCO                                                               |                              |                             | <input type="checkbox"/> E-1            | UNDERGROUND ELETRICAL  |
| <input type="checkbox"/> B-9  | WALL GROUT & STEEL                                                                 | <input type="checkbox"/> M-1 | ROUGH VENT                  | <input checked="" type="checkbox"/> E-2 | ROUGH ELECTRICAL       |
| <input type="checkbox"/> B-10 | <div style="border: 1px solid black; padding: 2px;">POOL</div> PRE-GUNITE          | <input type="checkbox"/> M-2 | HOOD                        | <input type="checkbox"/> E-3            | LOW VOLTAGE ELECTRICAL |
| <input type="checkbox"/> B-11 | <div style="border: 1px solid black; padding: 2px;">POOL</div> PRE-PLASTER / FINAL | <input type="checkbox"/> M-3 | FINAL MECHANICAL            | <input type="checkbox"/> E-4            | SIGN INSPECTION        |
| <input type="checkbox"/> B-12 | BUILDING FINAL                                                                     |                              |                             | <input type="checkbox"/> E-5            | FINAL ELECTRICAL       |
| <input type="checkbox"/> B-13 | CERT OF OCC                                                                        | <input type="checkbox"/> X-1 | KICKER / FLUSH              | <input type="checkbox"/> E-6            | TEMP POWER             |

☐ **FINAL INSPECTION**

BRING HARD CARD WITH FIRE, QUALITY CONTROL & PLANNING APPROVALS  
SIGNED OFF TO BLDG & SAFETY FOR C. of O. ISSUANCE (Commercial Only)

FOR ASSISTANCE -CALL: 393-8251

# DEPARTMENT OF BUILDING & SAFETY CITY OF LAS VEGAS

6026

|                                                                                               |                                                                          |                                                                              |                                                                                       |  |
|-----------------------------------------------------------------------------------------------|--------------------------------------------------------------------------|------------------------------------------------------------------------------|---------------------------------------------------------------------------------------|--|
| JOB ADDRESS<br><div style="font-size: 1.2em; font-family: cursive;">9425 Eagle Valley</div>   |                                                                          |                                                                              | PERMIT NO<br><div style="font-size: 1.2em; font-family: cursive;">91485</div>         |  |
| LOT NO<br><div style="font-size: 1.2em; font-family: cursive;">158</div>                      | MAP NO<br><div style="font-size: 1.2em; font-family: cursive;">107</div> | INSPECTOR<br><div style="font-size: 1.2em; font-family: cursive;">4107</div> | DATE<br><div style="font-size: 1.2em; font-family: cursive;">2-15-91</div>            |  |
| SUBDIVISION NAME<br><div style="font-size: 1.2em; font-family: cursive;">Sun City</div>       |                                                                          |                                                                              | PHONE<br><div style="font-size: 1.2em; font-family: cursive;">4107</div>              |  |
| INSPECTOR SIGNATURE<br><div style="font-size: 1.2em; font-family: cursive;">[Signature]</div> |                                                                          |                                                                              | INSPECTION DATE<br><div style="font-size: 1.2em; font-family: cursive;">2/11/91</div> |  |

☐ PARTIAL INSPECTION - DESCRIPTION.

☒ **APPROVED**
☐ **PERMIT REQUIRED**
☐ **STOP WORK**

☐ **REJECTED - CORRECTION NOTICE - REINSPECTION REQUIRED CALL 799-2071**

| INSPECT                       | DESCRIPTION                    | INSPECT                                 | DESCRIPTION                 | INSPECT                      | DESCRIPTION            |
|-------------------------------|--------------------------------|-----------------------------------------|-----------------------------|------------------------------|------------------------|
| <input type="checkbox"/> B-1  | FOOTING, LAYOUT, REBAR, ZONING | <input type="checkbox"/> P-1            | ON SITE SEWER               | <input type="checkbox"/> X-2 | UNDERGROUND HYDRO      |
| <input type="checkbox"/> B-2  | STEM WALL - FORMS & REBAR      | <input type="checkbox"/> P-2            | ON SITE WATER               | <input type="checkbox"/> X-3 | UNDERGROUND FINAL/FLOW |
| <input type="checkbox"/> B-3  | PRE-SLAB                       | <input type="checkbox"/> P-3            | BUILDING SEWER (YARD LINES) | <input type="checkbox"/> X-4 | SPRINKLER SYSTEM HYDRO |
| <input type="checkbox"/> B-4  | ROOF SHEATHING                 | <input type="checkbox"/> P-4            | UNDERSLAB PLUMBING          | <input type="checkbox"/> X-5 | FIRE ALARM             |
| <input type="checkbox"/> B-5  | FRAMING                        | <input type="checkbox"/> P-5            | TOP OUT-WATER, GAS, WASTE   | <input type="checkbox"/> X-6 | OTHER                  |
| <input type="checkbox"/> B-6  | INSULATION                     | <input type="checkbox"/> P-6            | FINAL GAS TEST              | <input type="checkbox"/> X-7 | FINAL FIRE             |
| <input type="checkbox"/> B-7  | DRYWALL NAILING                | <input type="checkbox"/> P-7            | FINAL PLUMBING              |                              |                        |
| <input type="checkbox"/> B-8  | EXTERIOR LATH/STUCCO           |                                         |                             | <input type="checkbox"/> E-1 | UNDERGROUND ELECTRICAL |
| <input type="checkbox"/> B-9  | WALL GROUT & STEEL             | <input checked="" type="checkbox"/> M-1 | ROUGH VENT                  | <input type="checkbox"/> E-2 | ROUGH ELECTRICAL       |
| <input type="checkbox"/> B-10 | POOL PRE-GUNITE                | <input type="checkbox"/> M-2            | HOOD                        | <input type="checkbox"/> E-3 | LOW VOLTAGE ELECTRICAL |
| <input type="checkbox"/> B-11 | POOL PRE-PLASTER / FINAL       | <input type="checkbox"/> M-3            | FINAL MECHANICAL            | <input type="checkbox"/> E-4 | SIGN INSPECTION        |
| <input type="checkbox"/> B-12 | BUILDING FINAL                 |                                         |                             | <input type="checkbox"/> E-5 | FINAL ELECTRICAL       |
| <input type="checkbox"/> B-13 | CERT OF OCC                    | <input type="checkbox"/> X-1            | KICKER / FLUSH              | <input type="checkbox"/> E-6 | TEMP POWER             |

☐ **FINAL INSPECTION**

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SIGNED OFF TO BLDG & SAFETY FOR C. of O. ISSUANCE (Commercial Only)

**FOR ASSISTANCE -CALL: 388-6251**

VEGAS  
6026

[illegible]

☒ **APPROVED**      ☐ **PERMIT REQUIRED**      ☐ **STOP WORK**

**REJECTED - CORRECTION NOTICE - REINSPECTION REQUIRED CALL 799-2071**

|                                                  |                                                                                                                                       |
|--------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------|
| <input type="checkbox"/> <b>FINAL INSPECTION</b> | BRING HARD CARD WITH FIRE, QUALITY CONTROL & PLANNING APPROVALS<br>SIGNED OFF TO BLDG & SAFETY FOR C of O. ISSUANCE (Commercial Only) |
|--------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------|

**FOR ASSISTANCE -CALL: 386-6251**

VEGAS  
6026

[illegible]

|                                              |                                          |                                    |
|----------------------------------------------|------------------------------------------|------------------------------------|
| <input checked="" type="checkbox"/> APPROVED | <input type="checkbox"/> PERMIT REQUIRED | <input type="checkbox"/> STOP WORK |
|----------------------------------------------|------------------------------------------|------------------------------------|

☐ REJECTED - CORRECTION NOTICE - REINSPECTION REQUIRED CALL 799-2071

|                                                  |                                                                                                                                    |
|--------------------------------------------------|------------------------------------------------------------------------------------------------------------------------------------|
| <input type="checkbox"/> <b>FINAL INSPECTION</b> | BRING HARD CARD WITH FIRE, QUALITY CONTROL & PLANNING APPROVALS SIGNED OFF TO BLDG & SAFETY FOR C of O. ISSUANCE (Commercial Only) |
|--------------------------------------------------|------------------------------------------------------------------------------------------------------------------------------------|

**FOR ASSISTANCE -CALL- 386-8251**

# DEPARTMENT OF BUILDING & SAFETY CITY OF LAS VEGAS

|                                                                                                          |                       |                        |                                  |
|----------------------------------------------------------------------------------------------------------|-----------------------|------------------------|----------------------------------|
| JOB ADDRESS<br><b>9425 Elmbrook</b>                                                                      |                       |                        | PERMIT NO.<br><b>91495</b>       |
| LOT NO.<br><b>185</b>                                                                                    | MAP NO.<br><b>117</b> | INSPECTOR<br><b>85</b> | DATE<br><b>2-7-91</b>            |
| SUBDIVISION NAME<br><b>Sun City</b>                                                                      |                       |                        | PHONE<br><b>4104</b>             |
| INSPECTOR SIGNATURE<br> |                       |                        | INSPECTION DATE<br><b>2-7-91</b> |

OK LOOSE AR'S

☐ PARTIAL INSPECTION - DESCRIPTION:

| <input checked="" type="checkbox"/> <b>APPROVED</b>                                                |                                 | <input type="checkbox"/> <b>PERMIT REQUIRED</b> |                             | <input type="checkbox"/> <b>STOP WORK</b> |                        |
|----------------------------------------------------------------------------------------------------|---------------------------------|-------------------------------------------------|-----------------------------|-------------------------------------------|------------------------|
| <input type="checkbox"/> <b>REJECTED - CORRECTION NOTICE - REINSPECTION REQUIRED CALL 799-2071</b> |                                 |                                                 |                             |                                           |                        |
| INSPECT                                                                                            | DESCRIPTION                     | INSPECT                                         | DESCRIPTION                 | INSPECT                                   | DESCRIPTION            |
| <input type="checkbox"/> B-1                                                                       | FOOTING, LAYOUT, REBAR, ZONING  | <input type="checkbox"/> P-1                    | ON SITE SEWER               | <input type="checkbox"/> X-2              | UNDERGROUND HYDRO      |
| <input type="checkbox"/> B-2                                                                       | STEM WALL -- FORMS & REBAR      | <input type="checkbox"/> P-2                    | ON SITE WATER               | <input type="checkbox"/> X-3              | UNDERGROUND FINAL/FLOW |
| <input type="checkbox"/> B-3                                                                       | PRE-SLAB                        | <input type="checkbox"/> P-3                    | BUILDING SEWER (YARD LINES) | <input type="checkbox"/> X-4              | SPRINKLER SYSTEM HYDRO |
| <input checked="" type="checkbox"/> B-4                                                            | ROOF SHEATHING                  | <input type="checkbox"/> P-4                    | UNDERSLAB PLUMBING          | <input type="checkbox"/> X-5              | FIRE ALARM             |
| <input type="checkbox"/> B-5                                                                       | FRAMING                         | <input type="checkbox"/> P-5                    | TOP OUT-WATER, GAS, WASTE   | <input type="checkbox"/> X-6              | OTHER                  |
| <input type="checkbox"/> B-6                                                                       | INSULATION                      | <input type="checkbox"/> P-6                    | FINAL GAS TEST              | <input type="checkbox"/> X-7              | FINAL FIRE             |
| <input type="checkbox"/> B-7                                                                       | DRYWALL NAILING                 | <input type="checkbox"/> P-7                    | FINAL PLUMBING              |                                           |                        |
| <input type="checkbox"/> B-8                                                                       | EXTERIOR LATH/STUCCO            |                                                 |                             | <input type="checkbox"/> E-1              | UNDERGROUND ELETRICAL  |
| <input type="checkbox"/> B-9                                                                       | WALL GROUT & STEEL              | <input type="checkbox"/> M-1                    | ROUGH VENT                  | <input type="checkbox"/> E-2              | ROUGH ELECTRICAL       |
| <input type="checkbox"/> B-10                                                                      | <b>POOL</b> PRE-GUNITE          | <input type="checkbox"/> M-2                    | HOOD                        | <input type="checkbox"/> E-3              | LOW VOLTAGE ELECTRICAL |
| <input type="checkbox"/> B-11                                                                      | <b>POOL</b> PRE-PLASTER / FINAL | <input type="checkbox"/> M-3                    | FINAL MECHANICAL            | <input type="checkbox"/> E-4              | SIGN INSPECTION        |
| <input type="checkbox"/> B-12                                                                      | BUILDING FINAL                  |                                                 |                             | <input type="checkbox"/> E-5              | FINAL ELECTRICAL       |
| <input type="checkbox"/> B-13                                                                      | CERT OF OCC                     | <input type="checkbox"/> X-1                    | KICKER / FLUSH              | <input type="checkbox"/> E-6              | TEMP POWER             |

☐ **FINAL INSPECTION**

BRING HARD CARD WITH FIRE, QUALITY CONTROL & PLANNING APPROVALS  
SIGNED OFF TO BLDG & SAFETY FOR C. OF O. ISSUANCE (Commercial Only)

**FOR ASSISTANCE -CALL: 396-6251**

# DEPARTMENT OF BUILDING & SAFETY CITY OF LAS VEGAS

|                                         |                       |                        |                                  |
|-----------------------------------------|-----------------------|------------------------|----------------------------------|
| JOB ADDRESS<br><b>9425 EAGLE VALLEY</b> |                       |                        | PERMIT NO.<br><b>91485</b>       |
| LOT NO.<br><b>158</b>                   | MAP NO.<br><b>107</b> | INSPECTOR<br><b>85</b> | DATE<br><b>2-1-91</b>            |
| SUBDIVISION NAME<br><b>Sun City</b>     |                       |                        | PHONE                            |
| INSPECTOR SIGNATURE<br>                 |                       |                        | INSPECTION DATE<br><b>2-1-91</b> |

BIK FRONT VALLEY  
 ADD A.B.S EAST LONG  
 WALL  
 OK AT FRAME

☐ PARTIAL INSPECTION - DESCRIPTION:

☒ **APPROVED**

☐ **PERMIT REQUIRED**

☐ **STOP WORK**

☐ **REJECTED - CORRECTION NOTICE - REINSPECTION REQUIRED CALL 799-2071**

| INSPECT                                 | DESCRIPTION                     | INSPECT                      | DESCRIPTION                 | INSPECT                      | DESCRIPTION            |
|-----------------------------------------|---------------------------------|------------------------------|-----------------------------|------------------------------|------------------------|
| <input type="checkbox"/> B-1            | FOOTING, LAYOUT, REBAR, ZONING  | <input type="checkbox"/> P-1 | ON SITE SEWER               | <input type="checkbox"/> X-2 | UNDERGROUND HYDRO      |
| <input type="checkbox"/> B-2            | STEM WALL - FORMS & REBAR       | <input type="checkbox"/> P-2 | ON SITE WATER               | <input type="checkbox"/> X-3 | UNDERGROUND FINAL/FLOW |
| <input type="checkbox"/> B-3            | PRE-SLAB                        | <input type="checkbox"/> P-3 | BUILDING SEWER (YARD LINES) | <input type="checkbox"/> X-4 | SPRINKLER SYSTEM HYDRO |
| <input checked="" type="checkbox"/> B-4 | ROOF SHEATHING                  | <input type="checkbox"/> P-4 | UNDERSLAB PLUMBING          | <input type="checkbox"/> X-5 | FIRE ALARM             |
| <input type="checkbox"/> B-5            | FRAMING                         | <input type="checkbox"/> P-5 | TOP OUT-WATER, GAS, WASTE   | <input type="checkbox"/> X-6 | OTHER                  |
| <input type="checkbox"/> B-6            | INSULATION                      | <input type="checkbox"/> P-6 | FINAL GAS TEST              | <input type="checkbox"/> X-7 | FINAL FIRE             |
| <input type="checkbox"/> B-7            | DRYWALL NAILING                 | <input type="checkbox"/> P-7 | FINAL PLUMBING              |                              |                        |
| <input type="checkbox"/> B-8            | EXTERIOR LATH/STUCCO            |                              |                             | <input type="checkbox"/> E-1 | UNDERGROUND ELECTRICAL |
| <input type="checkbox"/> B-9            | WALL GROUT & STEEL              | <input type="checkbox"/> M-1 | ROUGH VENT                  | <input type="checkbox"/> E-2 | ROUGH ELECTRICAL       |
| <input type="checkbox"/> B-10           | <b>POOL</b> PRE-GUNITE          | <input type="checkbox"/> M-2 | HOOD                        | <input type="checkbox"/> E-3 | LOW VOLTAGE ELECTRICAL |
| <input type="checkbox"/> B-11           | <b>POOL</b> PRE-PLASTER / FINAL | <input type="checkbox"/> M-3 | FINAL MECHANICAL            | <input type="checkbox"/> E-4 | SIGN INSPECTION        |
| <input type="checkbox"/> B-12           | BUILDING FINAL                  |                              |                             | <input type="checkbox"/> E-5 | FINAL ELECTRICAL       |
| <input type="checkbox"/> B-13           | CERT OF OCC                     | <input type="checkbox"/> X-1 | KICKER / FLUSH              | <input type="checkbox"/> E-6 | TEMP POWER             |

☐ **FINAL INSPECTION**

BRING HARD CARD WITH FIRE, QUALITY CONTROL & PLANNING APPROVALS  
SIGNED OFF TO BLDG & SAFETY FOR C. of O. ISSUANCE (Commercial Only)

**FOR ASSISTANCE -CALL: 393-6251**



# DEPARTMENT OF BUILDING & SAFETY CITY OF LAS VEGAS

6036

|                                                                                               |                                                                          |           |                                                                                      |
|-----------------------------------------------------------------------------------------------|--------------------------------------------------------------------------|-----------|--------------------------------------------------------------------------------------|
| JOB ADDRESS<br><div style="font-size: 1.2em; font-family: cursive;">9425 Eagle Valley</div>   |                                                                          |           | PERMIT NO.<br><div style="font-size: 1.2em; font-family: cursive;">91485</div>       |
| LOT NO<br><div style="font-size: 1.2em; font-family: cursive;">158</div>                      | MAP NO<br><div style="font-size: 1.2em; font-family: cursive;">107</div> | INSPECTOR | DATE<br><div style="font-size: 1.2em; font-family: cursive;">1-9-91</div>            |
| SUBDIVISION NAME<br><div style="font-size: 1.2em; font-family: cursive;">Sun City</div>       |                                                                          |           | PHONE<br><div style="font-size: 1.2em; font-family: cursive;">4107</div>             |
| INSPECTOR SIGNATURE<br><div style="font-size: 1.5em; font-family: cursive;">[Signature]</div> |                                                                          |           | INSPECTION DATE<br><div style="font-size: 1.2em; font-family: cursive;">1/9/91</div> |

☐ PARTIAL INSPECTION - DESCRIPTION:

| <input checked="" type="checkbox"/> <b>APPROVED</b>                                                |                                     | <input type="checkbox"/> <b>PERMIT REQUIRED</b> |                             | <input type="checkbox"/> <b>STOP WORK</b> |                        |
|----------------------------------------------------------------------------------------------------|-------------------------------------|-------------------------------------------------|-----------------------------|-------------------------------------------|------------------------|
| <input type="checkbox"/> <b>REJECTED - CORRECTION NOTICE - REINSPECTION REQUIRED CALL 799-2071</b> |                                     |                                                 |                             |                                           |                        |
| INSPECT                                                                                            | DESCRIPTION                         | INSPECT                                         | DESCRIPTION                 | INSPECT                                   | DESCRIPTION            |
| <input type="checkbox"/> B-1                                                                       | FOOTING, LAYOUT, REBAR, ZONING      | <input type="checkbox"/> P-1                    | ON SITE SEWER               | <input type="checkbox"/> X-2              | UNDERGROUND HYDRO      |
| <input type="checkbox"/> B-2                                                                       | STEM WALL - FORMS & REBAR           | <input type="checkbox"/> P-2                    | ON SITE WATER               | <input type="checkbox"/> X-3              | UNDERGROUND FINAL/FLOW |
| <input checked="" type="checkbox"/> B-3                                                            | PRE-SLAB                            | <input type="checkbox"/> P-3                    | BUILDING SEWER (YARD LINES) | <input type="checkbox"/> X-4              | SPRINKLER SYSTEM HYDRO |
| <input type="checkbox"/> B-4                                                                       | ROOF SHEATHING                      | <input type="checkbox"/> P-4                    | UNDERSLAB PLUMBING          | <input type="checkbox"/> X-5              | FIRE ALARM             |
| <input type="checkbox"/> B-5                                                                       | FRAMING                             | <input type="checkbox"/> P-5                    | TOP OUT-WATER, GAS, WASTE   | <input type="checkbox"/> X-6              | OTHER                  |
| <input type="checkbox"/> B-6                                                                       | INSULATION                          | <input type="checkbox"/> P-6                    | FINAL GAS TEST              | <input type="checkbox"/> X-7              | FINAL FIRE             |
| <input type="checkbox"/> B-7                                                                       | DRYWALL NAILING                     | <input type="checkbox"/> P-7                    | FINAL PLUMBING              |                                           |                        |
| <input type="checkbox"/> B-8                                                                       | EXTERIOR LATH/STUCCO                |                                                 |                             | <input type="checkbox"/> E-1              | UNDERGROUND ELETRICAL  |
| <input type="checkbox"/> B-9                                                                       | WALL GROUT & STEEL                  | <input type="checkbox"/> M-1                    | ROUGH VENT                  | <input type="checkbox"/> E-2              | ROUGH ELECTRICAL       |
| <input type="checkbox"/> B-10                                                                      | <del>POOL</del> PRE-GUNITE          | <input type="checkbox"/> M-2                    | HOOD                        | <input type="checkbox"/> E-3              | LOW VOLTAGE ELECTRICAL |
| <input type="checkbox"/> B-11                                                                      | <del>POOL</del> PRE-PLASTER / FINAL | <input type="checkbox"/> M-3                    | FINAL MECHANICAL            | <input type="checkbox"/> E-4              | SIGN INSPECTION        |
| <input type="checkbox"/> B-12                                                                      | BUILDING FINAL                      |                                                 |                             | <input type="checkbox"/> E-5              | FINAL ELECTRICAL       |
| <input type="checkbox"/> B-13                                                                      | CERT OF OCC                         | <input type="checkbox"/> X-1                    | KICKER / FLUSH              | <input type="checkbox"/> E-6              | TEMP POWER             |

☐ **FINAL INSPECTION**

BRING HARD CARD WITH FIRE, QUALITY CONTROL & PLANNING APPROVALS  
SIGNED OFF TO BLDG & SAFETY FOR C. of O. ISSUANCE (Commercial Only)

**FOR ASSISTANCE -CALL: 386-8251**

# DEPARTMENT OF BUILDING & SAFETY CITY OF LAS VEGAS

6026

|                                          |                      |                        |                                    |
|------------------------------------------|----------------------|------------------------|------------------------------------|
| JOB ADDRESS<br><b>9425 Eagle Valley</b>  |                      |                        | PERMIT NO<br><b>91485</b>          |
| LOT NO<br><b>158</b>                     | MAP NO<br><b>107</b> | INSPECTOR<br><b>85</b> | DATE<br><b>12-18-90</b>            |
| SUBDIVISION NAME<br><b>Sum City 4107</b> |                      |                        | PHONE                              |
| INSPECTOR SIGNATURE<br>                  |                      |                        | INSPECTION DATE<br><b>12-18-90</b> |

☐ PARTIAL INSPECTION - DESCRIPTION

☒ **APPROVED**
☐ **PERMIT REQUIRED**
☐ **STOP WORK**

☐ **REJECTED - CORRECTION NOTICE - REINSPECTION REQUIRED CALL 799-2071**

| INSPECT                                 | DESCRIPTION                     | INSPECT                      | DESCRIPTION                 | INSPECT                      | DESCRIPTION            |
|-----------------------------------------|---------------------------------|------------------------------|-----------------------------|------------------------------|------------------------|
| <input checked="" type="checkbox"/> B-1 | FOOTING, LAYOUT, REBAR, ZONING  | <input type="checkbox"/> P-1 | ON SITE SEWER               | <input type="checkbox"/> X-2 | UNDERGROUND HYDRO      |
| <input type="checkbox"/> B-2            | STEM WALL - FORMS & REBAR       | <input type="checkbox"/> P-2 | ON SITE WATER               | <input type="checkbox"/> X-3 | UNDERGROUND FINAL/FLOW |
| <input type="checkbox"/> B-3            | PRE-SLAB                        | <input type="checkbox"/> P-3 | BUILDING SEWER (YARD LINES) | <input type="checkbox"/> X-4 | SPRINKLER SYSTEM HYDRO |
| <input type="checkbox"/> B-4            | ROOF SHEATHING                  | <input type="checkbox"/> P-4 | UNDERSLAB PLUMBING          | <input type="checkbox"/> X-5 | FIRE ALARM             |
| <input type="checkbox"/> B-5            | FRAMING                         | <input type="checkbox"/> P-5 | TOP OUT-WATER, GAS, WASTE   | <input type="checkbox"/> X-6 | OTHER:                 |
| <input type="checkbox"/> B-6            | INSULATION                      | <input type="checkbox"/> P-6 | FINAL GAS TEST              | <input type="checkbox"/> X-7 | FINAL FIRE             |
| <input type="checkbox"/> B-7            | DRYWALL NAILING                 | <input type="checkbox"/> P-7 | FINAL PLUMBING              |                              |                        |
| <input type="checkbox"/> B-8            | EXTERIOR LATH/STUCCO            |                              |                             | <input type="checkbox"/> E-1 | UNDERGROUND ELECTRICAL |
| <input type="checkbox"/> B-9            | WALL GROUT & STEEL              | <input type="checkbox"/> M-1 | ROUGH VENT                  | <input type="checkbox"/> E-2 | ROUGH ELECTRICAL       |
| <input type="checkbox"/> B-10           | <b>POOL</b> PRE-GUNITE          | <input type="checkbox"/> M-2 | HOOD                        | <input type="checkbox"/> E-3 | LOW VOLTAGE ELECTRICAL |
| <input type="checkbox"/> B-11           | <b>POOL</b> PRE-PLASTER / FINAL | <input type="checkbox"/> M-3 | FINAL MECHANICAL            | <input type="checkbox"/> E-4 | SIGN INSPECTION        |
| <input type="checkbox"/> B-12           | BUILDING FINAL                  |                              |                             | <input type="checkbox"/> E-5 | FINAL ELECTRICAL       |
| <input type="checkbox"/> B-13           | CERT. OF OCC                    | <input type="checkbox"/> X-1 | KICKER / FLUSH              | <input type="checkbox"/> E-6 | TEMP POWER             |

☐ **FINAL INSPECTION**

BRING HARD CARD WITH FIRE, QUALITY CONTROL & PLANNING APPROVALS  
SIGNED OFF TO BLDG & SAFETY FOR C of O. ISSUANCE (Commercial Only)

**FOR ASSISTANCE -CALL: 393-6251**

# DEPARTMENT OF BUILDING & SAFETY CITY OF LAS VEGAS



PERMIT  
NUMBER

91485

INSPECTION  
NUMBER

440

6026

JOB ADDRESS

9425 Eagle Valley

LOT NO

158

BLOCK NO.

107

SUBDIVISION NAME

Sun City

4107

FIRE DEPT MAP NO.

JOB PHONE

CALL-IN DATE

CALL-IN TIME

SCHEDULE DATE

4-24-91

INSPECTOR NO.

73

INSPECTOR NAME

EH

INSPECTION  
REQUESTED

final plumbing

☐ PARTIAL  
INSPECTION

☐ PARTIAL  
APPROVAL (P)

PARTIAL DESCRIPTION

☒ APPROVED  
(A)

☐ STOP  
WORK (S)

☐ COMMENTS  
(C)

☐ TEMPORARY  
APPROVAL (T) - UNTIL

☐ HOLD  
(H)

☐ REJECTED (R)

REINSPECTION REQUIRED - CALL 799-2071

☐ REFEE (F)

REINSPECTION FEE REQUIRED - PAY AT CITY HALL  
3RD FLOOR - 400 E. STEWART STREET.

☐ PERMIT  
REQUIRED

INSPECTOR  
SIGNATURE

EH

INSPECTION DATE

4-24-91

☐ PROJECT  
COMPLETE

BRING HARD CARD WITH FIRE, QUALITY CONTROL & PLANNING APPROVALS  
SIGNED OFF TO BLDG & SAFETY FOR C of O. ISSUANCE (Commercial Only)

IF YOU HAVE ANY QUESTIONS ON THIS INSPECTION, YOU MAY  
CALL THE INSPECTOR FROM 7:00 A.M. - 7 15 A.M. OR 2 45 P.M. - 3 00 P.M. AT

FOR ADDITIONAL ASSISTANCE CALL 386-6251  
SEE REVERSE SIDE FOR INSPECTION TYPES

# DEPARTMENT OF BUILDING & SAFETY CITY OF LAS VEGAS

6026

|                                                                                                          |                       |                        |                                  |
|----------------------------------------------------------------------------------------------------------|-----------------------|------------------------|----------------------------------|
| JOB ADDRESS<br><b>9425 Eagle Valley</b>                                                                  |                       |                        | PERMIT NO.<br><b>91485</b>       |
| LOT NO<br><b>158</b>                                                                                     | MAP NO.<br><b>107</b> | INSPECTOR<br><b>85</b> | DATE<br><b>1-3-91</b>            |
| SUBDIVISION NAME<br><b>Sun City</b>                                                                      |                       |                        | PHONE<br><b>4107</b>             |
| INSPECTOR SIGNATURE<br> |                       |                        | INSPECTION DATE<br><b>1-3-91</b> |

☐ PARTIAL INSPECTION - DESCRIPTION.

☒ **APPROVED** ☐ **PERMIT REQUIRED** ☐ **STOP WORK**

☐ **REJECTED - CORRECTION NOTICE - REINSPECTION REQUIRED CALL 799-2071**

| INSPECT                       | DESCRIPTION                     | INSPECT                                 | DESCRIPTION                 | INSPECT                      | DESCRIPTION            |
|-------------------------------|---------------------------------|-----------------------------------------|-----------------------------|------------------------------|------------------------|
| <input type="checkbox"/> B-1  | FOOTING, LAYOUT, REBAR, ZONING  | <input type="checkbox"/> P-1            | ON SITE SEWER               | <input type="checkbox"/> X-2 | UNDERGROUND HYDRO      |
| <input type="checkbox"/> B-2  | STEM WALL - FORMS & REBAR       | <input type="checkbox"/> P-2            | ON SITE WATER               | <input type="checkbox"/> X-3 | UNDERGROUND FINAL/FLOW |
| <input type="checkbox"/> B-3  | PRE-SLAB                        | <input checked="" type="checkbox"/> P-3 | BUILDING SEWER (YARD LINES) | <input type="checkbox"/> X-4 | SPRINKLER SYSTEM HYDRO |
| <input type="checkbox"/> B-4  | ROOF SHEATHING                  | <input checked="" type="checkbox"/> P-4 | UNDERSLAB PLUMBING          | <input type="checkbox"/> X-5 | FIRE ALARM             |
| <input type="checkbox"/> B-5  | FRAMING                         | <input type="checkbox"/> P-5            | TOP OUT-WATER, GAS, WASTE   | <input type="checkbox"/> X-6 | OTHER                  |
| <input type="checkbox"/> B-6  | INSULATION                      | <input type="checkbox"/> P-6            | FINAL GAS TEST              | <input type="checkbox"/> X-7 | FINAL FIRE             |
| <input type="checkbox"/> B-7  | DRYWALL NAILING                 | <input type="checkbox"/> P-7            | FINAL PLUMBING              |                              |                        |
| <input type="checkbox"/> B-8  | EXTERIOR LATH/STUCCO            |                                         |                             | <input type="checkbox"/> E-1 | UNDERGROUND ELETRICAL  |
| <input type="checkbox"/> B-9  | WALL GROUT & STEEL              | <input type="checkbox"/> M-1            | ROUGH VENT                  | <input type="checkbox"/> E-2 | ROUGH ELECTRICAL       |
| <input type="checkbox"/> B-10 | <b>POOL</b> PRE-GUNITE          | <input type="checkbox"/> M-2            | HOOD                        | <input type="checkbox"/> E-3 | LOW VOLTAGE ELECTRICAL |
| <input type="checkbox"/> B-11 | <b>POOL</b> PRE-PLASTER / FINAL | <input type="checkbox"/> M-3            | FINAL MECHANICAL            | <input type="checkbox"/> E-4 | SIGN INSPECTION        |
| <input type="checkbox"/> B-12 | BUILDING FINAL                  |                                         |                             | <input type="checkbox"/> E-5 | FINAL ELECTRICAL       |
| <input type="checkbox"/> B-13 | CERT. OF OCC                    | <input type="checkbox"/> X-1            | KICKER / FLUSH              | <input type="checkbox"/> E-6 | TEMP POWER             |

☐ **FINAL INSPECTION**

BRING HARD CARD WITH FIRE, QUALITY CONTROL & PLANNING APPROVALS  
SIGNED OFF TO BLDG & SAFETY FOR C. of O ISSUANCE (Commercial Only)

**FOR ASSISTANCE -CALL: 386-6251**

## CITY OF LAS VEGAS, NEVADA

DEPARTMENT OF BUILDING AND SAFETY  
PHONE 386-6251

PERMIT NO.

90-091485

## BUILDING PERMIT

FOR: Single Family Dwelling, Remodel  
Additions, Misc. Residential ConstructionLOG NO. & AREA T-115 DATE 12/4/90 CONST. VAL. \$ 74,500.00ADDRESS OF CONSTRUCTION 9425 Eagle Valley Drive OWNER Del Webb Corporation PHONE 363-2111LOT(s) 158 BLOCK 1 SUBDIVISION Sun City Summerlin #22 ZONE P.C.PROPOSED CONSTRUCTION S.F.D. W/FP. USE ResidentialTHIS PERMIT FOR BLDG ☒ A/C ☐ ELEC. ☐ PLBG. ☐ OTHER PERMITS REQD. FENCE ☐ OFF SITE ☐ SWIM POOL ☐FLOOR AREA BSMT N/A 1ST 2491 2ND N/A GARAGE 620 PORCH 346 TOTAL 3457CONTRACTOR Del Webb Corporation STATE LICENSE NO. 0026603 CITY LICENSE NO. C11-02622-2036077ARCHITECT Walter J. Richardson ENGINEER G.C. WallaceMASTER PLUMBER/  
CONTRACTOR Imperial Plumbing MASTER ELECTRICIAN/  
CONTRACTOR Roberts Electric

## OTHER INSPECTIONS AND FEES

- 1 Inspections outside of normal business hours = \$30.00 per hour (minimum charge three hours)
- 2 Re-inspection fee during normal business hours assessed under provisions of TABLE 3-A of the Uniform Building Code = \$30.00 per hour
- 3 Inspections during normal business hours for which no fee is specifically indicated = \$30.00 per hour (minimum charge one half hour)
- 4 Additional plan review required by changes, additions, or revisions to approved plans = \$30.00 per hour (minimum charge two hours)

## 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, drywall 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
- 6 Approval for the work under this permit will be given only after refuse and debris have been removed from job site and public right of way.
- 7 24 HOUR MINIMUM NOTICE REQUIRED FOR INSPECTIONS

BY [Signature] I HEREBY DECLARE THAT I AM THE LEGAL OWNER OF THE ABOVE PROPERTY OWNERBY [Signature] AGENT

I hereby certify that I have reviewed this application and the proposed plans and have found that the proposed development meets the requirements of the City of Las Vegas Flood Hazard Reduction Ordinance for the issuance of this Development Permit.

LAND DEVELOPMENT AND FLOOD CONTROL ENGINEER [Signature] DATE 12/6/90PLANNING DEPT. [Signature] DATE 12/6/90BUILDING DEPT. [Signature] DATE 12/5/90

## SPECIAL CONDITIONS

H4107B

## RECEIPT

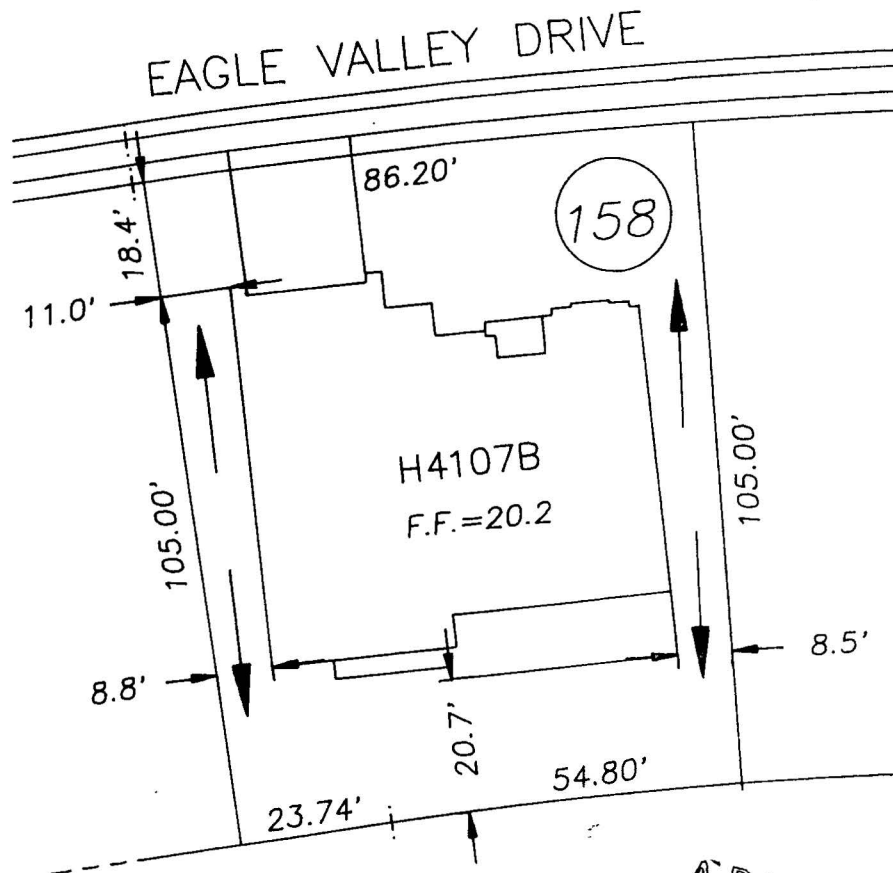
| PLUMBING                               |       | FEE | ELECTRICAL                                        |       | FEE      |
|----------------------------------------|-------|-----|---------------------------------------------------|-------|----------|
| WATER DISTRIBUTION                     | 6.00  |     | RECEPTACLE _____ SWITCH _____                     |       | 40       |
| SEWER SYSTEM - NEW OR MODIFICATION     | 10.00 |     | EACH LIGHT FIXTURE OR SOCKET _____                |       | .30      |
| FIXTURES - WATER SOFTENER, H.W. HEATER | 2.00  |     | SPECIAL OUTLET, APPLIANCE ETC.                    |       | 70       |
| GARBAGE DISPOSAL - WASHER              | 2.00  |     | SERVICE/PANEL - SUB/3 00 - 200A/6 00 - 400A/12 50 |       |          |
| FUEL PIPING                            | 6.00  |     | A.C. UNIT OR MOTORS                               | 3.00  |          |
| IRRIGATION SYSTEM                      | 8.00  |     | 2310 - 2432                                       | TOTAL |          |
| MISC                                   |       |     | MISC.                                             |       |          |
| 2310 - 2433                            | TOTAL |     | 2310 - 2431 ISSUANCE FEE                          |       | 625.00   |
| AIR CONDITIONING                       |       | FEE | 7143 - 2973 SEWER CONNECTION                      |       |          |
| NEW UNIT - 3 TON = 9.00 OVER = 16.50   |       |     | 2310 - 2431 PLAN REVIEW FEE                       |       | 430.00   |
| FURNACE TO 100,000/9.00 OVER/11.00     |       |     | 2310 - 2431 BLDG PERMIT FEE                       |       | 1,055.00 |
| VAPORATIVE COOLER                      | 6.50  |     | TOTAL FEES                                        |       |          |
| VENTILATION FAN                        | 2.35  |     |                                                   |       |          |
| 2310 - 2435                            | TOTAL |     |                                                   |       |          |

PERMIT NO. \_\_\_\_\_  
MUST BE MACHINE VALIDATED

Permit Expires 180 Days After Abandonment of Work

9425 Eagle Valley Dr.

# 90-09/485



APPROVED

*[Signature]*  
12/6/90  
COMMUNITY PLAN

THIS PLOT PLAN IS TENTATIVE,  
AND SUBJECT TO CHANGE  
PENDING FINAL GOVERNMENTAL  
APPROVAL.

## PLOT PLAN

SCALE: 1" = 30'

ACCORDANCE WITH  
CONSTRUCTION  
SEQUENCE SCHEDULE  
DATED 12/13/90

CONSULT THE RECORDED  
SUBDIVISION PLAT FOR  
ACCURATE LOT SIZE AND  
BOUNDARY INFORMATION.

SUN CITY LAS VEGAS, NEVADA

UNIT #22

LOT 158 PLAN H4107B ADDRESS

9425 Eagle Valley Drive

DEL E. WEBB COMMUNITIES

## CITY OF LAS VEGAS, NEVADA

PERMIT NO.

90-092956

DEPARTMENT OF BUILDING AND SAFETY  
PHONE 386-6251

AIR CONDITIONING PERMIT

LOG NO. & AREA 1208DATE 12/26/90

CONST. VAL. \$

ADDRESS OF  
CONSTRUCTION 9425 Eagle Valley DriveOWNER Del WebbPHONE 732-2545CONTRACTOR Quality Mechanical, Inc.STATE  
LICENSE NO. 10867ACITY  
LICENSE NO. C11766-200577LOT(s) 158 BLOCK SUBDIVISION Sun City Prod. 98-135

ZONE

PROPOSED CONSTRUCTION 1-3.5 ton, 1-2.0 ton, 2 bath fans, 1 kitchen hood

USE

| UNITS                    | DESCRIPTION                                                                                                                                                                                                                                               | FEE   | TOTAL |
|--------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------|-------|
| <b>PERMIT ISSUANCE</b>   |                                                                                                                                                                                                                                                           |       |       |
| 1                        | For the issuance of each permit                                                                                                                                                                                                                           | 15 00 | 15.00 |
|                          | For issuing each supplemental permit                                                                                                                                                                                                                      | 4 50  |       |
| <b>UNIT FEE SCHEDULE</b> |                                                                                                                                                                                                                                                           |       |       |
|                          | For the installation or relocation of each forced-air or gravity-type furnace or burner, including ducts and vents attached to such appliance, up to and including 100,000 Btu/h                                                                          | 9 00  |       |
|                          | For the installation or relocation of each forced-air or gravity-type furnace or burner, including ducts and vents attached to such appliance over 100,000 Btu/h                                                                                          | 11 00 |       |
|                          | For the installation or relocation of each floor furnace, including vent                                                                                                                                                                                  | 9 00  |       |
|                          | For the installation or relocation of each suspended heater, recessed wall heater or floor-mounted unit heater                                                                                                                                            | 9 00  |       |
|                          | For the installation, relocation or replacement of each appliance vent installed and not included in an appliance permit.                                                                                                                                 | 4 50  |       |
|                          | For the repair of, alteration of, or addition to each heating appliance, refrigeration unit, cooling unit, absorption unit, or each heating, cooling absorption, or evaporative cooling system, including installation of controls regulated by this code | 9 00  |       |
| 1                        | For the installation or relocation of each boiler or compressor to and including three tons, or each absorption system to and including 100 000 Btu/h                                                                                                     | 9 00  | 9.00  |
| 1                        | For the installation or relocation of each boiler or compressor over three tons to and including 15 tons, or each absorption system over 100,000 Btu/h and including 500,000 Btu/h                                                                        | 16 50 | 16.50 |
|                          | For the installation or relocation of each boiler or compressor over 15 tons to and including 30 tons, or each absorption system over 500,000 Btu/h to and including 1,000,000 Btu/h                                                                      | 22 50 |       |
|                          | For the installation or relocation of each boiler or compressor over 30 tons to and including 50 tons, or for each absorption system over 1,000,000 Btu/h to and including 1,750,000 Btu/h                                                                | 33 50 |       |
|                          | For the installation or relocation of each boiler or refrigeration compressor over 50 tons, or each absorption system over 1,750,000 Btu/h                                                                                                                | 56 00 |       |

Approval for the work under this permit will be given only after refuse and debris have been removed from job site and public right of way.

| UNITS                              | DESCRIPTION                                                                                                                                                                                                                                                                                                                                | FEE            | TOTAL |
|------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------|-------|
|                                    | For each air-handling unit to and including 10,000 cubic feet per minute, including ducts attached thereto<br><b>Note:</b> This fee shall not apply to an air-handling unit which is a portion of a factory-assembled appliance, cooling unit, evaporative cooler or absorption unit for which a permit is required elsewhere in this code | 6 50           |       |
|                                    | For each air-handling unit over 10,000 cfm                                                                                                                                                                                                                                                                                                 | 11 00          |       |
|                                    | For each evaporative cooler other than portable type                                                                                                                                                                                                                                                                                       | 6.50           |       |
| 3                                  | For each ventilation fan<br>COMMERCIAL<br>RESIDENTIAL                                                                                                                                                                                                                                                                                      | 4 50<br>2 35   | 7.05  |
|                                    | For each ventilation system which is not a portion of any heating or air-conditioning system authorized by a permit                                                                                                                                                                                                                        | 6 50           |       |
|                                    | For the installation of each hood which is served by mechanical exhaust, including the ducts for such hood                                                                                                                                                                                                                                 | 6 50           |       |
|                                    | For each fire damper installed in an existing system                                                                                                                                                                                                                                                                                       | 4 50           |       |
| <b>OTHER INSPECTIONS AND FEES:</b> |                                                                                                                                                                                                                                                                                                                                            |                |       |
|                                    | Inspections outside of normal business hours (minimum charge — three hours)                                                                                                                                                                                                                                                                | 25 00 per hour |       |
|                                    | Reinspection fee assessed under provisions of TABLE 3-A of the Uniform Building Code — \$15 00 EACH                                                                                                                                                                                                                                        | 15 00 each     |       |
|                                    | Inspections for which no fee is specifically indicated (minimum charge — one-half hour)                                                                                                                                                                                                                                                    | 30 00 per hour |       |
|                                    | Additional plan review required by changes, additions or revisions to approved plans (minimum charge — two hours)                                                                                                                                                                                                                          | 30 00 per hour |       |
|                                    | Mechanical permit fees may be computed the same as building permit fees by using the cost of installation for valuation amount when such work is not included in the above schedule                                                                                                                                                        |                |       |
|                                    | Gas piping which is directly related and necessary to the repair or replacement of heating, air conditioning, or refrigeration systems not exceeding 500,000 BTU H                                                                                                                                                                         | 6 00           |       |

2310-2435

RECEIPT

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 Vanesa Jordan  
CONTRACTOR  
Quality Mechanical, Inc.

MASTER CARD NO

BY Don Hooley  
BUILDING DEPT  
Spec Contr or Owner  
DATE 12/26/90

PERMIT  
FEETOTAL  
FEES 47.55

MUST BE MACHINE VALIDATED

PERMIT EXPIRES 180 DAYS AFTER ABANDONMENT OF WORK

## CITY OF LAS VEGAS, NEVADA

DEPARTMENT OF BUILDING AND SAFETY  
PHONE 386-6251

PERMIT NO.

90-093104

PLUMBING PERMIT

LOG NO. &amp; AREA

P115

DATE

1/22/12

CONST. VAL. \$

ADDRESS OF  
CONSTRUCTION

9425 Eagle Valley Drive

OWNER

Del Webb

PHONE

876-5952

CONTRACTOR

Cox &amp; Sons Plumbing &amp; Heating

STATE  
LICENSE NO

7596A

CITY  
LICENSE NO

10100

LOT(s)

158

BLOCK

SUBDIVISION

Sun City Summerlin

ZONE

PROPOSED CONSTRUCTION

SFD

USE

RES

•PLUMBING  
PERMIT NOApproval for the work under this permit will be given only after refuse  
and debris have been removed from job site and public right of way

| UNITS                            | DESCRIPTION                                                                             | FEE     | TOTAL |
|----------------------------------|-----------------------------------------------------------------------------------------|---------|-------|
| <b>PERMIT ISSUANCE</b>           |                                                                                         |         |       |
| 1                                | For Issuing Each Permit                                                                 | 10 00   | 10.00 |
|                                  | For Issuing Each Supplemental Permit                                                    | 4 50    |       |
| <b>FIXTURE CHARGE</b>            |                                                                                         |         |       |
| 7                                | Bathtub, Shower, Lavatory, Toilet, Urinal                                               | EA 2 00 | 14.00 |
| 2                                | Floor Drain, Floor Sink, Wash Tray, Sink                                                | EA 2 00 | 4.00  |
| 3                                | Garbage Disposal, Clothes Washer, Dishwasher (residential)                              | EA 2 00 | 6.00  |
|                                  | Garbage Disposal (commercial)                                                           | EA 8 00 |       |
|                                  | Clothes Washer, Dishwasher (commercial)                                                 | EA 2 00 |       |
|                                  | Clothes Dryer (gas) (venting)                                                           | 2 00    |       |
|                                  | Dental Unit                                                                             | 8 00    |       |
|                                  | Drinking Fountain                                                                       | 2 00    |       |
| 1                                | Refrigerator - Ice Maker, Water Dispenser                                               | 2 00    | 2.00  |
|                                  | Any other water using equipment, Attached Coffee Makers, Ice Makers                     | 2 00    |       |
| 1                                | Hot Water Heater (Gas or Electric)                                                      | EA 2 00 | 2.00  |
| <b>SEWER SYSTEM</b>              |                                                                                         |         |       |
| 1                                | New, Replacement, Modification, or Any Drainage Work                                    | 10 00   | 10.00 |
|                                  | Grease or Sand Trap or Interceptor                                                      | 2 00    |       |
|                                  | Trailer Trap (rental parks)                                                             | 5 00    |       |
| <b>WATER SOFTENERS</b>           |                                                                                         |         |       |
|                                  | Non Permanent Type (rental)                                                             | 2 00    |       |
|                                  | Permanent Type (connected to drain)                                                     | 2 00    |       |
| <b>WATER DISTRIBUTION SYSTEM</b> |                                                                                         |         |       |
| 1                                | Single Family Dwelling                                                                  | 6 00    | 6.00  |
|                                  | Multi-Family Dwelling                                                                   | 6 00    |       |
|                                  | Plus Each Dwelling Unit                                                                 | 3 00    |       |
|                                  | Commercial Building per floor                                                           | 3 00    |       |
|                                  | Plus Each Unit (leased space or office)                                                 | 2 00    |       |
|                                  | Hotel or Motel                                                                          | 8 00    |       |
|                                  | Plus Each Unit                                                                          | 3 00    |       |
|                                  | Trailer Park                                                                            | 30 00   |       |
|                                  | Plus Each Space                                                                         | 2 00    |       |
|                                  | Irrigation Single Family Dwelling                                                       | 8 00    |       |
|                                  | Irrigation Commercial Fee Based on Building Code Valuation Chart Construction Valuation |         |       |

| UNITS                              | DESCRIPTION                                                                                                                                                                                                          | FEE            | TOTAL |
|------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------|-------|
| <b>FUEL PIPING SYSTEM</b>          |                                                                                                                                                                                                                      |                |       |
| 1                                  | Single Family Dwelling                                                                                                                                                                                               | 6 00           | 6.00  |
|                                    | Multi-Family Dwelling                                                                                                                                                                                                | 10 00          |       |
|                                    | Plus Each Unit                                                                                                                                                                                                       | 2 00           |       |
|                                    | Commercial Building (per floor)                                                                                                                                                                                      | 6 00           |       |
|                                    | Plus Each Unit (leased space or office)                                                                                                                                                                              | 6 00           |       |
|                                    | Medium Pressure System (Plan Check)                                                                                                                                                                                  | 12 00          |       |
|                                    | Each Gas Appliance (Any Type)                                                                                                                                                                                        | 2 00           |       |
|                                    | Steam Boilers                                                                                                                                                                                                        | 5 00           |       |
| <b>SOLAR ENERGY SYSTEMS</b>        |                                                                                                                                                                                                                      |                |       |
|                                    | Collectors (including piping) (per collector)                                                                                                                                                                        | 5 00           |       |
|                                    | Storage Tanks (each)                                                                                                                                                                                                 | 5 00           |       |
| <b>PIPELINE CONTRACT</b>           |                                                                                                                                                                                                                      |                |       |
|                                    | For Onsite Sewer, Gas or Water Contract Value Fee based on Building Code Permit Valuation Chart                                                                                                                      |                |       |
| <b>OTHER INSPECTIONS AND FEES:</b> |                                                                                                                                                                                                                      |                |       |
|                                    | Inspections outside of normal business hours (minimum charge—three hours)                                                                                                                                            | 25 00 per hour |       |
|                                    | Under provisions of Table 3-A of the Uniform Building Code, work which has been inspected once and not approved may be subject to a Reinspection Fee not less than \$30.00 per each inspection during business hours | 30 00 each     |       |
|                                    | Additional plan review required by changes. Additions to or revisions to approved plans (minimum charge two hours)                                                                                                   | 30 00 per hour |       |
|                                    | Plumbing permit fees may be computed the same as building permit fees by using the cost of installation for valuation amount when such work is not included in the above schedule                                    |                |       |
|                                    | Construction Valuation                                                                                                                                                                                               |                |       |

FOR INSPECTIONS  
CALL 799-2071SEWER # 7114-3654  
CONNECTION

RECEIPT

FIXTURES \_\_\_\_\_ X \_\_\_\_\_

FEE \$60.00

2310-2403  
PERMIT  
FEE

TOTAL FEES \$60.00

PERMIT NO

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

CONTRACTOR

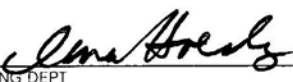
MASTER CARD NO

197

Kenneth Cox

BY

Registered Master Plumber Spec. Contr. or Owner



BUILDING DEPT

DATE

12/27/12



DEPARTMENT OF BUILDING AND SAFETY  
PHONE 386-6251

FOR



18619

ELECTRICAL PERMIT

LOG NO. &amp; AREA

P115

DATE

11/17/91

CONST. VAL. \$

ADDRESS OF  
CONSTRUCTION

9425 Eagle Valley Dr

OWNER

Del Webb

CONTRACTOR

Lucena Electric

STATE

LICENSE NO.

0024610

CITY

LICENSE NO.

031296

(PRINT NAME OF MASTER ELECTRICIAN)

PROPOSED CONSTRUCTION:

USE:

ELECTRIC  
PERMIT NO.

Approval for the work under this permit will be given only after refuse and debris have been removed from job site and public right of way.

| UNITS                                                                                                                     | DESCRIPTION                                                                                                                                                                                                                                           | FEE   | TOTAL |
|---------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------|-------|
| <b>PERMIT ISSUANCE</b>                                                                                                    |                                                                                                                                                                                                                                                       |       |       |
| 1                                                                                                                         | For Issuing Each Permit                                                                                                                                                                                                                               | 10.00 | 10.00 |
|                                                                                                                           | Supplemental Fee                                                                                                                                                                                                                                      | 4.50  |       |
| <b>APPLIANCE CHARGE</b>                                                                                                   |                                                                                                                                                                                                                                                       |       |       |
| <b>Residential or General Commercial</b>                                                                                  |                                                                                                                                                                                                                                                       |       |       |
| 58                                                                                                                        | Receptacle 36 Switch 22                                                                                                                                                                                                                               | .40   | 23.20 |
| 37                                                                                                                        | Each Light Fixture, Socket, or Exit Light, Smoke Detector or Exhaust Fan                                                                                                                                                                              | .30   | 11.10 |
| 10                                                                                                                        | EACH OUTLET FOR SPECIAL PURPOSE Dishwasher, Garbage Grinder, Trash Compactor, GFI, Clothes Washer, Dryer, Electric Range, Ovens, Water Heater, Space Heater, Blast Coil Heater, (PER KW.), Mercury Lamp, Quartz Lamp, Sodium Lamp, 20AMP Sign Circuit | 70    | 7.00  |
|                                                                                                                           | X-Ray Unit                                                                                                                                                                                                                                            | 10.00 |       |
|                                                                                                                           | Area Lighting (First 3,000 Watts)                                                                                                                                                                                                                     | 8.00  |       |
|                                                                                                                           | Each Additional 1,000 Watts                                                                                                                                                                                                                           | 3.00  |       |
| <b>MOTORS (1 H.P. AND OVER) TRANSFORMERS, ELEVATORS, WELDERS, GENERATORS, CHILLERS, SIGNS AND A/C UNITS (OVER 5 TONS)</b> |                                                                                                                                                                                                                                                       |       |       |
|                                                                                                                           | First H.P. or Ton For each Unit                                                                                                                                                                                                                       | 3.00  |       |
|                                                                                                                           | First KVA For Each Unit                                                                                                                                                                                                                               | 3.00  |       |
|                                                                                                                           | Each Additional H.P., Ton or KVA up to 50                                                                                                                                                                                                             | .50   |       |
|                                                                                                                           | Each Additional H.P., Ton or KVA over 50                                                                                                                                                                                                              | 35    |       |
|                                                                                                                           | Temporary power or Pole                                                                                                                                                                                                                               | 6.00  |       |
| <b>ELECTRIC SERVICE OR MAIN DISCONNECT</b>                                                                                |                                                                                                                                                                                                                                                       |       |       |
| 1                                                                                                                         | Up to 200 AMP                                                                                                                                                                                                                                         | 6.00  | 6.00  |
|                                                                                                                           | 400 AMP And 600 AMP                                                                                                                                                                                                                                   | 12.50 |       |
|                                                                                                                           | Over 600 AMP To 1200 AMP                                                                                                                                                                                                                              | 25.00 |       |
|                                                                                                                           | Over 1200 AMP                                                                                                                                                                                                                                         | 50.00 |       |
|                                                                                                                           | Each Additional Meter Socket                                                                                                                                                                                                                          | .50   |       |
|                                                                                                                           | Sub Panel, Motor Control Center Disconnect Switch, Transfer Switch (Each)                                                                                                                                                                             | 3.00  |       |
|                                                                                                                           | Swimming Pool (Residential)                                                                                                                                                                                                                           | 20.00 |       |
|                                                                                                                           | Swimming Pool (Semi-Public)                                                                                                                                                                                                                           | 30.00 |       |
|                                                                                                                           | Spas                                                                                                                                                                                                                                                  | 8.00  |       |
|                                                                                                                           | Recreational Vehicle Spaces (Each)                                                                                                                                                                                                                    | 3.00  |       |

| UNITS                                                                     | DESCRIPTION                                                                                                                                                                 | FEE            | TOTAL |
|---------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------|-------|
|                                                                           | Busways-Trolley or Plug-in (Ea 100 Ft.)                                                                                                                                     | 3.00           |       |
|                                                                           | Gas Pumps, Dispensers (Each)                                                                                                                                                | 3.00           |       |
| 2                                                                         | Permanent A/C Unit (5 Tons or Less)                                                                                                                                         | 3.00           | 6.00  |
| 2                                                                         | Each Air Handler                                                                                                                                                            | 1.00           | 2.00  |
| <b>RESIDENTIAL LOW VOLTAGE INSTALLATIONS</b>                              |                                                                                                                                                                             |                |       |
|                                                                           | Speaker Outlets (Each)                                                                                                                                                      | 30             |       |
|                                                                           | Signal or Alarm Outlets (Each)                                                                                                                                              | 30             |       |
|                                                                           | Amplifiers                                                                                                                                                                  | 2.00           |       |
|                                                                           | Control Panel                                                                                                                                                               | 50             |       |
| 4                                                                         | TV Master System                                                                                                                                                            | 30             | 11.20 |
| 4                                                                         | Telephone or Computer Outlet                                                                                                                                                | 30             | 1.20  |
| <b>OTHER INSPECTIONS AND FEES: INCLUDES ISSUANCE FEES WHEN APPLICABLE</b> |                                                                                                                                                                             |                |       |
|                                                                           | Inspections outside of normal business hours (minimum charge — three hours)                                                                                                 | 30.00 per hour |       |
|                                                                           | Reinspection fee assessed under provisions of TABLE 3-A of the Uniform Building Code = \$30.00 EACH                                                                         | 30.00 each     |       |
|                                                                           | Inspections for which no fee is specifically indicated (minimum charge — one-half hour)                                                                                     | 30.00 per hour |       |
|                                                                           | Additional plan review required by changes, additions or revisions to approved plans (minimum charge — one-half hour) After work hours — \$30.00 per hour — minimum 1 hour. | 30.00 per hour |       |
|                                                                           | Starter Permit                                                                                                                                                              | 50.00          |       |
| <b>CONTRACT PRICE OR COST OF INSTALLATION</b>                             |                                                                                                                                                                             |                |       |
|                                                                           | Commercial — Burglar Alarms                                                                                                                                                 |                |       |
|                                                                           | — Music Systems                                                                                                                                                             |                |       |
|                                                                           | — Data Processing                                                                                                                                                           |                |       |
|                                                                           | — Communication                                                                                                                                                             |                |       |
|                                                                           | Conduit Only—Contract Price                                                                                                                                                 |                |       |
|                                                                           | All Misc Electric                                                                                                                                                           |                |       |

Electrical permit fees may be computed the same as building permit fees by using the cost of installation for valuation amount when such work is not included in the above schedule

# 2310-2432

RECEIPT

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 HOMEOWNER, CONTRACTOR

PERMIT  
FEE

67.20

LESS  
STARTER PERMITTOTAL  
FEES

67.20

PERMIT NO.

MUST BE MACHINE VALIDATED

BUILDING DEPT

DATE

11/17/91

Permit Expires 180 Days After Abandonment of Work