

## CITY OF LAS VEGAS, NEVADA

DEPARTMENT OF BUILDING AND SAFETY  
PHONE 386 6251

FOR INS

PERMIT NO

90-000131

DEVELOPMENT PERMIT

FOR Fence Wall Retaining Wall

LOG NO &amp; AREA

350-466-063  
M 4935

DATE

10/01

CONST VAL \$

3180

ADDRESS OF  
CONSTRUCTION

8313 SWAN LAKE AV

OWNER

LINDA K. LONGHOFFER

PHONE

CONTRACTOR

OWNER

STATE  
LICENSE NOCITY  
LICENSE NO

LOT(S)

278

BLOCK

8

SUBDIVISION

SOUTH SHORE ESTATES UNITS

ZONE R-PDS

☐ CONSTRUCTION PLANS SUBMITTED BY OWNER/CONTRACTOR☒ CONSTRUCTION DESIGN BY CITY DESIGN SHEET

ENGINEER

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

| DESCRIPTION                                 | TOTAL LIN FT | TOTAL SQ FT |
|---------------------------------------------|--------------|-------------|
| CHAIN LINK OR WIRE MESH                     |              |             |
| ORNAMENTAL IRON                             |              |             |
| WOOD                                        |              |             |
| <input checked="" type="checkbox"/> MASONRY | 6'           | 212         |
| RETAINING                                   |              | 1272        |

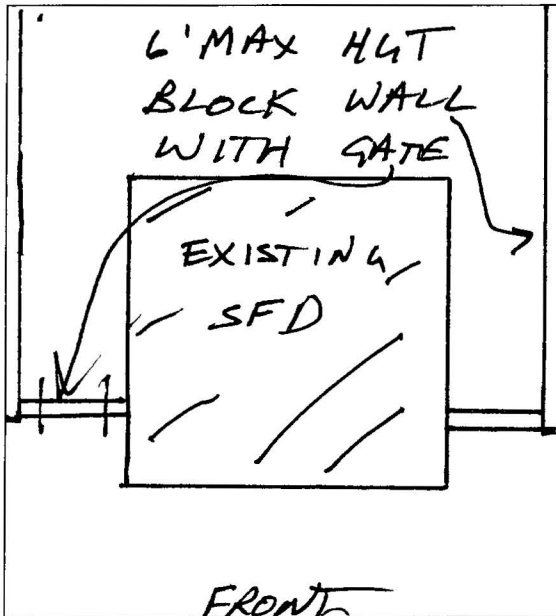
## OTHER INSPECTIONS AND FEES

- 1 Inspect on site outside of normal business hours = \$30.00 per hour (minimum charge three hours)
- 2 Re-inspect on fee during normal business hours assessed under provisions of TABLE 3 A of the Uniform Building Code = \$30.00 each
- 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 at approved plans = \$30.00 per hour (minimum charge two hours)

## CONDITIONS OF THE PERMIT

- 1 Any type of retaining wall must be engineered by a Civil or Structural Engineer
- 2 If a home owner takes out the Building Permit and if the owner sublets the work to a Contractor then the Contractor must take out the permit and pay for it
- 3 No fence or wall can be built on City property or rights of way but this is not intended to preclude construction within utility easements if utilities will not be damaged or made inaccessible
- 4 The fence or wall shall not enclose any water meter, light standard or fire alarm box and shall not come closer than 24" from the nearest fire hydrant outlet
- 5 Department Inspectors must approve footings before concrete is poured and block wall reinforcing before grouting is done
- 6 Maximum height of any wall or fence is 6' side and rear yards 4' maximum in front yard with the vertical surface above the height of 2' - 50% open
- 7 I must not obstruct required onsite parking space (2 spaces for each dwelling unit) by the erection of this fence or wall
- 8 By the signing of this application I herewith agree to the requirements outlined above

FOR INSPECTIONS CALL 799 2071



SIGNED

CONTRACTOR (AGENT - OWNER)

PLANNING DEPT

DATE

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

BUILDING DEPT

PLAN  
REVIEW  
FEEPERMIT  
FEETOTAL  
FEES

## RECEIPT

\*\*0006\*\*

WALL 53 00

CASH 53 00

2924A000 14 34

10/08/90

MUST BE MACHINE VALIDATED

PERMIT EXPIRES 180 DAYS AFTER ABANDONMENT OF WORK

September 27, 1990

To Whom It May Concern

I give permission to Miguel's Services to put a block wall on my property at 8313 Swan Lake Aveune, Las Vegas, Nevada 89128

A handwritten signature in cursive script, reading "Linda K Longhofer", written over a horizontal dashed line.

Linda K Longhofer

STATE OF NEVADA  
COUNTY OF CLARK

On this 27 day of September 1990,  
before me,

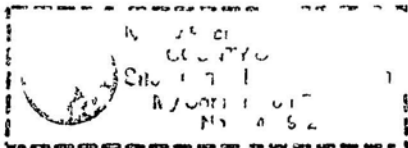
Sheri Lynne Lewis Vaughan  
the undersigned Notary Public, personally  
appeared

Linda K Longhofer  
☒ personally known to me  
☐ proved to me on the basis of satisfactory  
evidence

to be the person(s) who executed the within  
instruments and acknowledged to me that \_\_\_\_\_  
executed the same for the purposes therein  
stated

WITNESS my hand and official seal

Sheri Lynne Lewis Vaughan  
Notary Public



DEPARTMENT OF BUILDING & SAFETY CITY OF LAS VEGAS

|                               |                   |                    |
|-------------------------------|-------------------|--------------------|
| JOB ADDRESS<br>8313 Swan Lake |                   | PERMIT NO<br>81501 |
| LOT NO                        | MAR NO<br>12-247p | INSPECTOR<br>62    |
| SUBDIVISION NAME              |                   | DATE<br>10-9-90    |
| INSPECTOR SIGNATURE<br>wall   |                   | PHONE              |
| INSPECTION DATE<br>10-10-90   |                   | AM                 |

[illegible]

☒ 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           | <input type="checkbox"/> POOL PRE GUNITE          | <input type="checkbox"/> M 2 | HOOD                        | <input type="checkbox"/> E 3 | LOW VOLTAGE ELECTRICAL |
| <input type="checkbox"/> B 11           | <input type="checkbox"/> 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**

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

**FOR ASSISTANCE CALL 388-6251**

**DEPARTMENT OF BUILDING & SAFETY CITY OF LAS VEGAS**

|                               |                 |                             |
|-------------------------------|-----------------|-----------------------------|
| JOB ADDRESS<br>8313 Luan Lake |                 | PERMIT NO.<br>85154         |
| LOT NO.                       | MAP NO.<br>217p | INSPECTOR<br>62             |
| SUBDIVISION NAME<br>Estates   |                 | DATE<br>10-12-90            |
| INSPECTOR SIGNATURE<br>wall   |                 | PHONE                       |
|                               |                 | INSPECTION DATE<br>10-15-90 |
| FOR EAST SIDE OF HOUSE        |                 |                             |

☐ 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           | <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**

|                                                                                         |                             |                                                                                                                                  |                                    |
|-----------------------------------------------------------------------------------------|-----------------------------|----------------------------------------------------------------------------------------------------------------------------------|------------------------------------|
| JOB ADDRESS<br><b>8313 Swann Lake</b>                                                   |                             | PERMIT NO.<br><b>85154</b>                                                                                                       |                                    |
| LOT NO.                                                                                 | MAP NO.<br><b>9-1243P</b>   | INSPECTOR<br><b>62</b>                                                                                                           | DATE<br><b>10-18-90</b>            |
| SUBDIVISION NAME                                                                        |                             |                                                                                                                                  | PHONE                              |
| INSPECTOR SIGNATURE<br><i>[Signature]</i>                                               |                             |                                                                                                                                  | INSPECTION DATE<br><b>10-19-90</b> |
|                                                                                         |                             |                                                                                                                                  |                                    |
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|                                                                                         |                             |                                                                                                                                  |                                    |
| <input type="checkbox"/> PARTIAL INSPECTION DESCRIPTION                                 |                             |                                                                                                                                  |                                    |
| <input checked="" type="checkbox"/> APPROVED                                            |                             | <input type="checkbox"/> PERMIT REQUIRED                                                                                         |                                    |
|                                                                                         |                             | <input type="checkbox"/> STOP WORK                                                                                               |                                    |
| <input type="checkbox"/> REJECTED CORRECTION NOTICE REINSPECTION REQUIRED CALL 799 2071 |                             |                                                                                                                                  |                                    |
| INSPECT                                                                                 | DESCRIPTION                 | INSPECT                                                                                                                          | DESCRIPTION                        |
| <input type="checkbox"/> B 1                                                            | FOOTING LAYOUT REBAR ZONING | <input type="checkbox"/> P 1                                                                                                     | ON SITE SEWER                      |
| <input type="checkbox"/> B 2                                                            | STEM WALL — FORMS & REBAR   | <input type="checkbox"/> P 2                                                                                                     | ON SITE WATER                      |
| <input type="checkbox"/> B 3                                                            | PRE SLAB                    | <input type="checkbox"/> P 3                                                                                                     | BUILDING SEWER (YARD LINES)        |
| <input type="checkbox"/> B 4                                                            | ROOF SHEATHING              | <input type="checkbox"/> P 4                                                                                                     | UNDERSLAB PLUMBING                 |
| <input type="checkbox"/> B 5                                                            | FRAMING                     | <input type="checkbox"/> P 5                                                                                                     | TOP OUT WATER GAS WASTE            |
| <input type="checkbox"/> B 6                                                            | INSULATION                  | <input type="checkbox"/> P 6                                                                                                     | FINAL GAS TEST                     |
| <input type="checkbox"/> B 7                                                            | DRYWALL NAILING             | <input type="checkbox"/> P 7                                                                                                     | FINAL PLUMBING                     |
| <input type="checkbox"/> B 8                                                            | EXTERIOR LATH/STUCCO        |                                                                                                                                  |                                    |
| <input checked="" type="checkbox"/> B 9                                                 | WALL GROUT & STEEL          | <input type="checkbox"/> M 1                                                                                                     | ROUGH VENT                         |
| <input type="checkbox"/> B 10                                                           | POOL PRE GUNITE             | <input type="checkbox"/> M 2                                                                                                     | HOOD                               |
| <input type="checkbox"/> B 11                                                           | POOL PRE PLASTER / FINAL    | <input type="checkbox"/> M 3                                                                                                     | FINAL MECHANICAL                   |
| <input type="checkbox"/> B 12                                                           | BUILDING FINAL              |                                                                                                                                  |                                    |
| <input type="checkbox"/> B 13                                                           | CERT OF OCC                 | <input type="checkbox"/> X 1                                                                                                     | KICKER / FLUSH                     |
|                                                                                         |                             | <input type="checkbox"/> E 1                                                                                                     | UNDERGROUND ELETRICAL              |
|                                                                                         |                             | <input type="checkbox"/> E 2                                                                                                     | ROUGH ELECTRICAL                   |
|                                                                                         |                             | <input type="checkbox"/> E 3                                                                                                     | LOW VOLTAGE ELECTRICAL             |
|                                                                                         |                             | <input type="checkbox"/> E 4                                                                                                     | SIGN INSPECTION                    |
|                                                                                         |                             | <input type="checkbox"/> E 5                                                                                                     | FINAL ELECTRICAL                   |
|                                                                                         |                             | <input type="checkbox"/> E 6                                                                                                     | TEMP POWER                         |
| <input type="checkbox"/> 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

|                               |                            |
|-------------------------------|----------------------------|
| JOB ADDRESS<br>8313 Swan Lake | PERMIT NO.<br>78954        |
| LOT NO.                       | MAP NO.<br>0-133P          |
| SUBDIVISION NAME              | INSPECTOR<br>62            |
| <b>INSPECTOR SIGNATURE</b>    | DATE<br>9-14-90            |
|                               | PHONE                      |
|                               | INSPECTION DATE<br>9-17-90 |

☐ 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 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**

BRING HARD CARD WITH FIRE QUALITY CONTROL & PLANNING APPROVALS  
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**FOR ASSISTANCE CALL 388-8251**