

## CITY OF LAS VEGAS, NEVADA

PERMIT NO.

93 05049

DEPARTMENT OF BUILDING AND SAFETY  
PHONE 229-6251

FOR INSPECTIONS, CALL 229-2071

## BUILDING PERMIT

FOR: Single Family Dwelling, Remodel,  
Additions, Misc. Residential Construction

PLAN CHECK NO. P-247

DATE

CONST. VAL. \$ 41,820.00

ADDRESS OF  
CONSTRUCTION 8221 Hercules Drive

OWNER Bivins Construction Co., Inc. PHONE 384-7575

LOT(s) 273 BLOCK 8 SUBDIVISION Cimarron Ridge Unit 6

ZONE

PROPOSED CONSTRUCTION Single family dwelling USE resale

THIS PERMIT FOR BLDG. ☒ A/C ☒ ELEC. ☒ PLBG ☒OTHER PERMITS REQD.: FENCE ☐ OFF SITE ☐ SWIM POOL ☐

FLOOR AREA BSMT 1ST 675 2ND 775 GARAGE 400 PORCH TOTAL 1850

CONTRACTOR Bivins Construction Co., Inc.

STATE  
LICENSE NO. 0008255ACITY  
LICENSE NO. C11-00734-0101711

ARCHITECT

ENGINEER

MASTER PLUMBER/  
CONTRACTORMASTER ELECTRICIAN/  
CONTRACTOR

## 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: *Ronald C. Bivins*  
I HEREBY DECLARE THAT I AM THE LEGAL OWNER OF THE ABOVE PROPERTY OWNERBY: \_\_\_\_\_  
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.

Kent Nash 4/17/93  
LAND DEVELOPMENT AND FLOOD CONTROL ENGINEER DATE4/28/93  
PLANNING DEPT DATE4/28/93  
BUILDING DEPT DATE

| PLUMBING                               |       | FEE   |
|----------------------------------------|-------|-------|
| WATER DISTRIBUTION                     | 6.00  |       |
| SEWER SYSTEM - NEW OR MODIFICATION     | 10.00 |       |
| FIXTURES - WATER SOFTENER, H.W. HEATER | 2.00  |       |
| GARBAGE DISPOSAL - WASHER              | 2.00  |       |
| FUEL PIPING                            | 6.00  |       |
| IRRIGATION SYSTEM                      | 8.00  |       |
| MISC.                                  |       |       |
| 2310 - 2433                            |       |       |
| TOTAL                                  |       | 64.00 |
| AIR CONDITIONING                       |       | FEE   |
| NEW UNIT - 3 TON = 9.00 OVER = 16.50   |       |       |
| FURNACE TO 100,000/9.00 OVER/11.00     |       |       |
| VAPORATIVE COOLER                      | 6.95  |       |
| VENTILATION FAN                        | 2.55  |       |
| 2310 - 2435                            |       |       |
| TOTAL                                  |       | 48.00 |

| ELECTRICAL                                        |        | FEE   |
|---------------------------------------------------|--------|-------|
| RECEPTACLE                                        | SWITCH | .45   |
| EACH LIGHT FIXTURE OR SOCKET                      |        | .35   |
| SPECIAL OUTLET, APPLIANCE ETC.                    |        | .75   |
| SERVICE/PANEL - SUB/3.25 - 200A/6.45 - 400A/13.40 |        |       |
| A.C. UNIT OR MOTORS                               |        | 3.25  |
| 2310 - 2432                                       | TOTAL  | 64.00 |
| MISC.                                             |        |       |

|                              |         |         |
|------------------------------|---------|---------|
| 2310 - 2431 PLAN REVIEW      | 10.00   | 64.00   |
| 2310 - 2401 BLDG. PERMIT     |         | 318.00  |
| 2310 - 2433 SEWER CONNECTION | 1100.00 | 1418.00 |
| 6122 - 3352 TORTOISE         |         | 48.00   |
| _____ - 2897 P.I.F.          |         | 64.00   |
| 88100-1232 TRANSPORT         |         | 500.00  |
| TOTAL FEES                   |         | 2120.00 |

## SPECIAL CONDITIONS:

See house plans 1430RB

RECEIPT  
MUST BE MACHINE VALIDATED

PERMIT NO.

Permit Expires 180 Days After Abandonment of Work

## CITY OF LAS VEGAS, NEVADA

PERMIT NO.

93-184949

DEPARTMENT OF BUILDING AND SAFETY  
PHONE 229-6251

## BUILDING PERMIT

FOR: Single Family Dwelling, Remodel  
Additions, Misc. Residential Construction

PLAN CHECK NO. P-247

DATE

CONST. VAL. \$ 41,700.00

ADDRESS OF  
CONSTRUCTION 8221 Hercules Drive

OWNER Bivins Construction Co., Inc. PHONE 384-7575

LOT(s) 273 BLOCK 8 SUBDIVISION Cimarron Ridge Unit 6

ZONE

PROPOSED CONSTRUCTION Single family dwelling

USE resale

THIS PERMIT FOR BLDG. ☒ A/C ☒ ELEC ☒ PLBG ☒OTHER PERMITS REQD.: FENCE ☐ OFF SITE ☐ SWIM POOL ☐

FLOOR AREA BSMT 1ST 675 2ND 775 GARAGE 400 PORCH TOTAL 1850

CONTRACTOR Bivins Construction Co., Inc.

STATE  
LICENSE NO. 0008255ACITY  
LICENSE NO. C11-00734-0101711

ARCHITECT

ENGINEER

MASTER PLUMBER/  
CONTRACTORMASTER ELECTRICIAN/  
CONTRACTOR

## 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: *Ronald C. Bivins*  
I HEREBY DECLARE THAT I AM THE LEGAL OWNER OF THE ABOVE PROPERTY OWNERBY: \_\_\_\_\_  
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.

Kent Nash 4/27/93  
LAND DEVELOPMENT AND FLOOD CONTROL ENGINEER DATE4/28/93  
PLANNING DEPT. DATE4/28/93  
BUILDING DEPT. DATE

| PLUMBING                               | FEE   |
|----------------------------------------|-------|
| WATER DISTRIBUTION                     | 6.00  |
| SEWER SYSTEM - NEW OR MODIFICATION     | 10.00 |
| FIXTURES - WATER SOFTENER, H.W. HEATER | 2.00  |
| GARBAGE DISPOSAL - WASHER              | 2.00  |
| FUEL PIPING                            | 6.00  |
| IRRIGATION SYSTEM                      | 8.00  |
| MISC.                                  |       |
| 2310 - 2433 TOTAL                      | 64.00 |

| AIR CONDITIONING                     | FEE   |
|--------------------------------------|-------|
| NEW UNIT - 3 TON = 9.00 OVER = 16.50 |       |
| FURNACE TO 100,000/9.00 OVER/11.00   |       |
| VAPORATIVE COOLER                    | 6.95  |
| VENTILATION FAN                      | 2.55  |
| 2310 - 2435 TOTAL                    | 48.00 |

| ELECTRICAL                                        | FEE   |
|---------------------------------------------------|-------|
| RECEPTACLE _____ SWITCH _____                     | .45   |
| EACH LIGHT FIXTURE OR SOCKET _____                | .35   |
| SPECIAL OUTLET, APPLIANCE ETC.                    | .75   |
| SERVICE/PANEL - SUB/3.25 - 200A/6.45 - 400A/13.40 |       |
| A.C. UNIT OR MOTORS                               | 3.25  |
| 2310 - 2432 TOTAL                                 | 64.00 |
| MISC.                                             |       |

|                             |         |
|-----------------------------|---------|
| 2310 - 2431 PLAN REVIEW     | 10.00   |
| 2310 - 2401 BLDG. PERMIT    | 318.00  |
| 143 - 2973 SEWER CONNECTION | 1100.00 |
| 6122 - 3352 TORTOISE        | 48.00   |
| _____ - 2897 P.I.F.         | 64.00   |
| 88100-1232 TRANSPORT        | 500.00  |
| TOTAL FEES                  | 2120.00 |

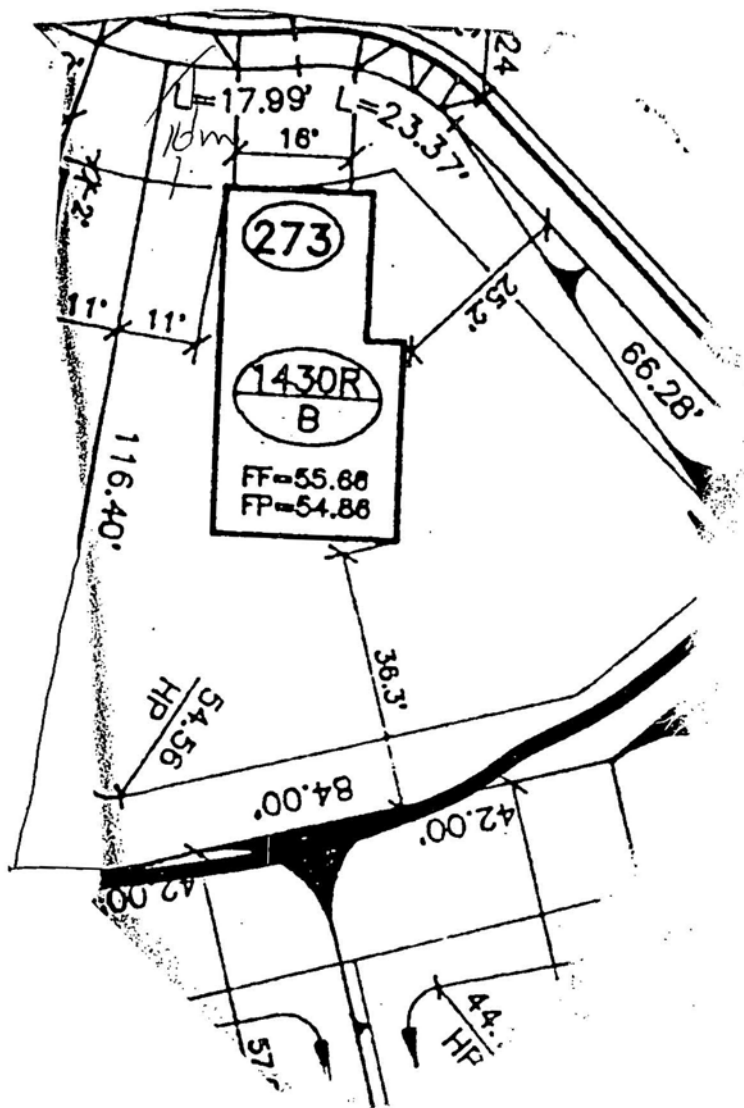
## SPECIAL CONDITIONS:

See house plans 1430RB

RECEIPT  
MUST BE MACHINE VALIDATED

PERMIT NO.

Permit Expires 180 Days After Abandonment of Work



APPROVED

8221 Hercules Drive  
 Lot 273 Block 8

*[Signature]* 4/28/93  
 COMMUNITY PLANNING & DEVELOPMENT  
 City of Las Vegas

# DEPARTMENT OF BUILDING & SAFETY CITY OF LAS VEGAS

|                                                          |                                                     |                           |                       |
|----------------------------------------------------------|-----------------------------------------------------|---------------------------|-----------------------|
| <input checked="" type="checkbox"/> <b>PERMIT NUMBER</b> | 93-184949                                           | <b>APPLICATION NUMBER</b> | 120965                |
| JOB ADDRESS<br>8221 HERCULES DR                          |                                                     | INSPECTION NUMBER<br>6    |                       |
| LOT/BLOCK<br>273 8                                       | RECORDED SUBDIVISION NAME<br>CIMAARRON RIDGE UNIT 6 |                           |                       |
| FIRE DEPT. MAP NO.<br>2317-23                            | JOB PHONE<br>254-8955                               | CALL-IN-DATE<br>06/04/93  | CALL-IN TIME<br>13:02 |
| SCHEDULE DATE<br>06/07/93                                |                                                     |                           |                       |
| INSPECTOR/NAME<br>FRED ZIMMERMAN - 85                    |                                                     | MARKETING/BUSINESS NAME   |                       |
| <b>INSPECTION REQUESTED</b> → SHEAR (109)                |                                                     |                           |                       |

NAIL THA HANGAR ABOUR STAIRS

|                                                                                                                                 |                                                                                                                                     |                                       |                                                         |
|---------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------|---------------------------------------------------------|
| <input type="checkbox"/> PARTIAL INSPECTION                                                                                     | <input type="checkbox"/> PARTIAL APPROVAL (P)                                                                                       | PARTIAL DESCRIPTION                   |                                                         |
| <input checked="" type="checkbox"/> APPROVED (A)                                                                                | <input type="checkbox"/> STOP WORK (S)                                                                                              | <input type="checkbox"/> COMMENTS (C) | <input type="checkbox"/> TEMPORARY APPROVAL (T) - UNTIL |
| <input type="checkbox"/> REJECTED (R)                                                                                           | <input type="checkbox"/> HOLD (H)                                                                                                   |                                       |                                                         |
| <input type="checkbox"/> REFEED (F)                                                                                             | REINSPECTION FEE REQUIRED - PAY AT CITY HALL 3RD FLOOR - 400 E. STEWART STREET.                                                     |                                       | <input type="checkbox"/> PERMIT REQUIRED                |
| INSPECTOR SIGNATURE<br>                      |                                                                                                                                     | INSPECTION DATE<br>6793               |                                                         |
| <input type="checkbox"/> 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 |                                                                                                                                     |                                       | 229-6765                                                |

For Additional Assistance Call \* 229-6251. See Reverse Side For Inspection Types.

## DEPARTMENT OF BUILDING &amp; SAFETY CITY OF LAS VEGAS

PERMIT  
NUMBER

93-184949

APPLICATION  
NUMBER

120965

JOB ADDRESS

8221 HERCULES DR

INSPECTION NUMBER

8

LOT/BLOCK

273 8

RECORDED SUBDIVISION NAME

CIMARRON RIDGE UNIT 6

FIRE DEPT. MAP NO.

2317-23

JOB PHONE

254-8955

CALL-IN-DATE

05/17/93

CALL-IN TIME

13:02

SCHEDULE DATE

05/18/93

INSPECTOR/NAME

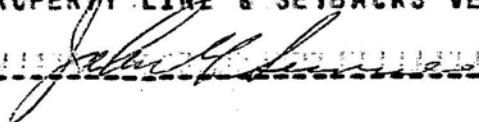
FRED ZIMMERMAN - 85

MARKETING/BUSINESS NAME

INSPECTION  
REQUESTED

PRE-SLAB (105)

PROPERTY LINE &amp; SETBACKS VERIFIED BY:

☐ 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 \* 229-2071☐ REFEE (F) REINSPECTION FEE REQUIRED - PAY AT CITY HALL  
3RD FLOOR - 400 E. STEWART STREET.☐ PERMIT  
REQUIREDINSPECTOR  
SIGNATURE

INSPECTION DATE

5/18/93

☐ PROJECT  
COMPLETEBRING 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

229-6765

For Additional Assistance Call \* 229-6251. See Reverse Side For Inspection Types.

# DEPARTMENT OF BUILDING & SAFETY CITY OF LAS VEGAS

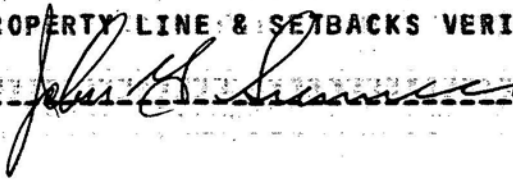
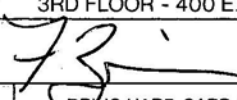
|                                     |                       |                                 |                          |                              |
|-------------------------------------|-----------------------|---------------------------------|--------------------------|------------------------------|
| <input checked="" type="checkbox"/> | <b>PERMIT NUMBER:</b> | <b>93-184949</b>                | <b>INSPECTION NUMBER</b> | <b>7</b>                     |
| <b>JOB ADDRESS</b>                  |                       |                                 |                          |                              |
| <b>8221 HERCULES DR</b>             |                       |                                 | <b>120965</b>            |                              |
| <b>LOT NO.</b>                      |                       | <b>BLOCK NO.</b>                |                          | <b>SUBDIVISION NAME</b>      |
| <b>273</b>                          |                       | <b>8</b>                        |                          | <b>CIMARRON RIDGE UNIT 6</b> |
| <b>FIRE DEPT. MAP NO.</b>           | <b>JOB PHONE</b>      | <b>CALL-IN DATE</b>             | <b>CALL-IN TIME</b>      | <b>SCHEDULE DATE</b>         |
| <b>2317-23</b>                      | <b>254-8955</b>       | <b>05/11/93</b>                 | <b>13:54</b>             | <b>05/12/93</b>              |
| <b>INSPECTOR NO.</b>                |                       | <b>INSPECTOR NAME</b>           |                          |                              |
| <b>85/81</b>                        |                       | <b>FRED ZIMMERMAN</b>           |                          |                              |
| <b>INSPECTION REQUESTED</b>         |                       | <b>UNDERSLAB PLUMBING (407)</b> |                          |                              |

Need to remove rocks.  
larger than pipe size snap plugging  
ditch.

|                                                                                                                                    |                                                      |                                                                                                                                        |                                                                |                                                 |
|------------------------------------------------------------------------------------------------------------------------------------|------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------|-------------------------------------------------|
| <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 * 229-2071</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>                                                                                                         |                                                      | M. Toul                                                                                                                                |                                                                | <b>INSPECTION DATE</b>                          |
| <input type="checkbox"/> <b>PROJECT COMPLETE</b>                                                                                   |                                                      | BRING HARD CARD WITH FIRE, QUALITY CONTROL & PLANNING APPROVALS<br>SIGNED OFF TO BLDG & SAFETY FOR C. of O. ISSUANCE (Commercial Only) |                                                                |                                                 |
|                                                                                                                                    |                                                      |                                                                                                                                        |                                                                |                                                 |
| IF YOU HAVE ANY QUESTIONS ON THIS INSPECTION, YOU MAY<br>CALL THE INSPECTOR FROM 7:00 A.M. - 7:15 A.M. OR 2:45 P.M. - 3:00 P.M. AT |                                                      |                                                                                                                                        |                                                                | <b>229-6765</b>                                 |

For Additional Assistance Call \* 229-6251. See Reverse Side For Inspection Types.

# DEPARTMENT OF BUILDING & SAFETY CITY OF LAS VEGAS

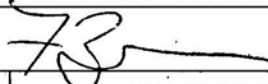
|                                                                                                                                 |                          |                                                                                                                                     |                                     |                                       |          |
|---------------------------------------------------------------------------------------------------------------------------------|--------------------------|-------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------|---------------------------------------|----------|
| <input checked="" type="checkbox"/>                                                                                             | <b>PERMIT<br/>NUMBER</b> | 93-184949                                                                                                                           | <input checked="" type="checkbox"/> | <b>INSPECTION<br/>NUMBER</b>          | 26       |
| JOB ADDRESS                                                                                                                     |                          |                                                                                                                                     |                                     |                                       |          |
| 8221 HERCULES DR                                                                                                                |                          |                                                                                                                                     |                                     |                                       | 120965   |
| LOT NO.                                                                                                                         |                          | BLOCK NO.                                                                                                                           | SUBDIVISION NAME                    |                                       |          |
| 273                                                                                                                             |                          | 8                                                                                                                                   | CIMARRON RIDGE UNIT 6               |                                       |          |
| FIRE DEPT. MAP NO.                                                                                                              | JOB PHONE                | CALL-IN DATE                                                                                                                        | CALL-IN TIME                        | SCHEDULE DATE                         |          |
| 2317-23                                                                                                                         | 254-8955                 | 04/30/93                                                                                                                            | 13:06                               | 05/03/93                              |          |
| INSPECTOR NO.                                                                                                                   |                          | INSPECTOR NAME                                                                                                                      |                                     |                                       |          |
| 85                                                                                                                              |                          | FRED ZIMMERMAN                                                                                                                      |                                     |                                       |          |
| <b>INSPECTION<br/>REQUESTED</b>                                                                                                 |                          | FOOTING, LAYOUT, REBAR, ZONING (101)                                                                                                |                                     |                                       |          |
| PROPERTY LINE & SETBACKS VERIFIED BY:                                                                                           |                          |                                                                                                                                     |                                     |                                       |          |
|                                                |                          |                                                                                                                                     |                                     |                                       |          |
|                                                                                                                                 |                          |                                                                                                                                     |                                     |                                       |          |
| <input type="checkbox"/> PARTIAL INSPECTION                                                                                     |                          | <input type="checkbox"/> PARTIAL APPROVAL (P)                                                                                       |                                     | PARTIAL DESCRIPTION                   |          |
| <input checked="" type="checkbox"/> APPROVED (A)                                                                                |                          | <input type="checkbox"/> STOP WORK (S)                                                                                              |                                     | <input type="checkbox"/> COMMENTS (C) |          |
|                                                                                                                                 |                          | <input type="checkbox"/> TEMPORARY APPROVAL (T)                                                                                     |                                     | - UNTIL                               |          |
|                                                                                                                                 |                          |                                                                                                                                     |                                     | <input type="checkbox"/> HOLD (H)     |          |
| <input type="checkbox"/> REJECTED (R)                                                                                           |                          | REINSPECTION REQUIRED - CALL *229-2071                                                                                              |                                     |                                       |          |
| <input type="checkbox"/> REFEE (F)                                                                                              |                          | REINSPECTION FEE REQUIRED - PAY AT CITY HALL 3RD FLOOR - 400 E. STEWART STREET.                                                     |                                     |                                       |          |
|                                                                                                                                 |                          | <input type="checkbox"/> PERMIT REQUIRED                                                                                            |                                     |                                       |          |
| <b>INSPECTOR<br/>SIGNATURE</b>                                                                                                  |                          |                                                  |                                     | INSPECTION DATE                       |          |
|                                                                                                                                 |                          |                                                                                                                                     |                                     | 5393                                  |          |
| <input type="checkbox"/> 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 |                          |                                                                                                                                     |                                     |                                       | 229-6765 |

For Additional Assistance Call \*229-6251. See Reverse Side For Inspection Types.

# DEPARTMENT OF BUILDING & SAFETY CITY OF LAS VEGAS

|                                     |                      |                                 |                                     |                          |    |
|-------------------------------------|----------------------|---------------------------------|-------------------------------------|--------------------------|----|
| <input checked="" type="checkbox"/> | <b>PERMIT NUMBER</b> | 93-184949                       | <input checked="" type="checkbox"/> | <b>INSPECTION NUMBER</b> | 16 |
| <b>JOB ADDRESS</b>                  |                      |                                 |                                     |                          |    |
| 8221 HERCULES DR                    |                      |                                 |                                     | 120965                   |    |
| <b>LOT NO.</b>                      |                      | <b>BLOCK NO.</b>                |                                     | <b>SUBDIVISION NAME</b>  |    |
| 273                                 |                      | 8                               |                                     | CIMARRON RIDGE UNIT 6    |    |
| <b>FIRE DEPT. MAP NO.</b>           |                      | <b>JOB PHONE</b>                |                                     | <b>CALL-IN DATE</b>      |    |
| 2317-23                             |                      | 254-8955                        |                                     | 05/10/93                 |    |
|                                     |                      |                                 |                                     | <b>CALL-IN TIME</b>      |    |
|                                     |                      |                                 |                                     | 13:34                    |    |
| <b>INSPECTOR NO.</b>                |                      | <b>INSPECTOR NAME</b>           |                                     |                          |    |
| 85                                  |                      | FRED ZIMMERMAN                  |                                     |                          |    |
| <b>INSPECTION REQUESTED</b>         |                      | <b>UNDERSLAB PLUMBING (407)</b> |                                     |                          |    |

NR

|                                                                                                                                 |                                               |                                                                                                                                     |                                                         |                                   |                                                                                                                                          |
|---------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------|-----------------------------------|------------------------------------------------------------------------------------------------------------------------------------------|
| <input type="checkbox"/> PARTIAL INSPECTION                                                                                     | <input type="checkbox"/> PARTIAL APPROVAL (P) | <b>PARTIAL DESCRIPTION</b>                                                                                                          |                                                         |                                   |                                                                                                                                          |
| <input type="checkbox"/> APPROVED (A)                                                                                           | <input type="checkbox"/> STOP WORK (S)        | <input type="checkbox"/> COMMENTS (C)                                                                                               | <input type="checkbox"/> TEMPORARY APPROVAL (T) — UNTIL | <input type="checkbox"/> HOLD (H) |                                                                                                                                          |
| <input checked="" type="checkbox"/> REJECTED (R)                                                                                |                                               | REINSPECTION REQUIRED - CALL * 229-2071                                                                                             |                                                         |                                   | <input type="checkbox"/> PERMIT REQUIRED                                                                                                 |
| <input type="checkbox"/> REFEE (F)                                                                                              |                                               | REINSPECTION FEE REQUIRED - PAY AT CITY HALL 3RD FLOOR - 400 E. STEWART STREET.                                                     |                                                         |                                   |                                                                                                                                          |
| <b>INSPECTOR SIGNATURE</b>                                                                                                      |                                               |                                                  |                                                         | <b>INSPECTION DATE</b>            |                                                                                                                                          |
|                                                                                                                                 |                                               |                                                                                                                                     |                                                         | 5/11/93                           |                                                                                                                                          |
| <input type="checkbox"/> 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 |                                               |                                                                                                                                     |                                                         |                                   | <div style="display: inline-block; width: 20px; height: 20px; border: 1px solid black; transform: rotate(45deg);"></div> <b>229-6765</b> |

For Additional Assistance Call \* 229-6251. See Reverse Side For Inspection Types.

DEPARTMENT OF BUILDING & SAFETY CITY OF LAS VEGAS

|                                                                    |                               |                                                                 |                    |
|--------------------------------------------------------------------|-------------------------------|-----------------------------------------------------------------|--------------------|
| <input checked="" type="checkbox"/> <b>PERMIT NUMBER</b> 93-184949 |                               | <input checked="" type="checkbox"/> <b>INSPECTION NUMBER</b> 15 |                    |
| JOB ADDRESS 8221 HERCULES DR 120965                                |                               |                                                                 |                    |
| LOT NO. 273                                                        | BLOCK NO. 8                   | SUBDIVISION NAME CIMARRON RIDGE UNIT 6                          |                    |
| FIRE DEPT. MAP NO. 2317-23                                         | JOB PHONE 254-8955            | CALL-IN DATE 05/10/93                                           | CALL-IN TIME 13:33 |
| SCHEDULE DATE 05/11/93                                             |                               |                                                                 |                    |
| INSPECTOR NO. 85                                                   | INSPECTOR NAME FRED ZIMMERMAN |                                                                 |                    |

☒ **INSPECTION REQUESTED** BUILDING SENER (YARD LINES) (405)

N R

|                                                  |                                                                                 |                                       |                                                         |
|--------------------------------------------------|---------------------------------------------------------------------------------|---------------------------------------|---------------------------------------------------------|
| <input type="checkbox"/> PARTIAL INSPECTION      | <input type="checkbox"/> PARTIAL APPROVAL (P)                                   | PARTIAL DESCRIPTION                   |                                                         |
| <input type="checkbox"/> APPROVED (A)            | <input type="checkbox"/> STOP WORK (S)                                          | <input type="checkbox"/> COMMENTS (C) | <input type="checkbox"/> TEMPORARY APPROVAL (T) - UNTIL |
| <input checked="" type="checkbox"/> REJECTED (R) | REINSPECTION REQUIRED - CALL *229-2071                                          |                                       | <input type="checkbox"/> HOLD (H)                       |
| <input type="checkbox"/> REFEE (F)               | REINSPECTION FEE REQUIRED - PAY AT CITY HALL 3RD FLOOR - 400 E. STEWART STREET. |                                       | <input type="checkbox"/> PERMIT REQUIRED                |

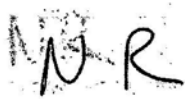
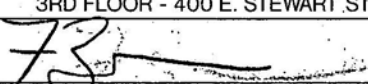
**INSPECTOR SIGNATURE** *[Signature]* **INSPECTION DATE** 5/11/93

|                                                  |                                                                                                                                     |
|--------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------|
| <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 **229-6765**

For Additional Assistance Call \* 229-6251. See Reverse Side For Inspection Types.

# DEPARTMENT OF BUILDING & SAFETY CITY OF LAS VEGAS

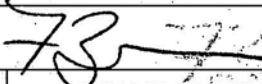
|                                                                                                                                 |  |                                                                                                                                     |  |                                          |  |                                                         |  |
|---------------------------------------------------------------------------------------------------------------------------------|--|-------------------------------------------------------------------------------------------------------------------------------------|--|------------------------------------------|--|---------------------------------------------------------|--|
| <b>PERMIT NUMBER</b>                                                                                                            |  | 93-184949                                                                                                                           |  | <b>INSPECTION NUMBER</b>                 |  | 15                                                      |  |
| <b>JOB ADDRESS</b>                                                                                                              |  |                                                                                                                                     |  |                                          |  |                                                         |  |
| 8221 HERCULES DR                                                                                                                |  |                                                                                                                                     |  | 120965                                   |  |                                                         |  |
| <b>LOT NO.</b>                                                                                                                  |  | <b>BLOCK NO.</b>                                                                                                                    |  | <b>SUBDIVISION NAME</b>                  |  |                                                         |  |
| 273                                                                                                                             |  | 8                                                                                                                                   |  | CIMARRON RIDGE UNIT 6                    |  |                                                         |  |
| <b>FIRE DEPT. MAP NO.</b>                                                                                                       |  | <b>JOB PHONE</b>                                                                                                                    |  | <b>CALL-IN DATE</b>                      |  | <b>CALL-IN TIME</b>                                     |  |
| 2317-23                                                                                                                         |  | 254-8955                                                                                                                            |  | 05/10/93                                 |  | 13:33                                                   |  |
| <b>INSPECTOR NO.</b>                                                                                                            |  | <b>INSPECTOR NAME</b>                                                                                                               |  |                                          |  |                                                         |  |
| 85                                                                                                                              |  | FRED ZIMMERMAN                                                                                                                      |  |                                          |  |                                                         |  |
| <b>INSPECTION REQUESTED</b>                                                                                                     |  | <b>BUILDING SEWER (YARD LINES) (405)</b>                                                                                            |  |                                          |  |                                                         |  |
|                                                |  |                                                                                                                                     |  |                                          |  |                                                         |  |
| <input type="checkbox"/> PARTIAL INSPECTION                                                                                     |  | <input type="checkbox"/> PARTIAL APPROVAL (P)                                                                                       |  | <b>PARTIAL DESCRIPTION</b>               |  |                                                         |  |
| <input type="checkbox"/> APPROVED (A)                                                                                           |  | <input type="checkbox"/> STOP WORK (S)                                                                                              |  | <input type="checkbox"/> COMMENTS (C)    |  | <input type="checkbox"/> TEMPORARY APPROVAL (T) - UNTIL |  |
| <input checked="" type="checkbox"/> REJECTED (R)                                                                                |  | REINSPECTION REQUIRED - CALL *229-2071                                                                                              |  | <input type="checkbox"/> PERMIT REQUIRED |  |                                                         |  |
| <input type="checkbox"/> REFEE (F)                                                                                              |  | REINSPECTION FEE REQUIRED - PAY AT CITY HALL 3RD FLOOR - 400 E. STEWART STREET.                                                     |  |                                          |  |                                                         |  |
| <b>INSPECTOR SIGNATURE</b>                                                                                                      |  |                                                  |  |                                          |  | <b>INSPECTION DATE</b>                                  |  |
|                                                                                                                                 |  |                                                                                                                                     |  |                                          |  | 5/11/93                                                 |  |
| <input type="checkbox"/> 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 |  |                                                                                                                                     |  |                                          |  | 229-6765                                                |  |

For Additional Assistance Call \* 229-6251. See Reverse Side For Inspection Types.

# DEPARTMENT OF BUILDING & SAFETY      CITY OF LAS VEGAS

|                                 |                          |                      |                              |               |
|---------------------------------|--------------------------|----------------------|------------------------------|---------------|
| <b>W</b>                        | <b>PERMIT<br/>NUMBER</b> | 93-184949            | <b>INSPECTION<br/>NUMBER</b> | 16            |
| JOB ADDRESS                     |                          |                      |                              |               |
| 8221 HERCULES DR                |                          |                      | 120965                       |               |
| LOT NO.                         | BLOCK NO.                | SUBDIVISION NAME     |                              |               |
| 273                             | 8                        | CHARRON RIDGE UNIT 6 |                              |               |
| FIRE DEPT. MAP NO.              | JOB PHONE                | CALL-IN DATE         | CALL-IN TIME                 | SCHEDULE DATE |
| 2317-23                         | 254-8955                 | 05/10/93             | 13:34                        | 05/11/93      |
| INSPECTOR NO.                   | INSPECTOR NAME           |                      |                              |               |
| 85                              | FRED ZIMMERMAN           |                      |                              |               |
| <b>INSPECTION<br/>REQUESTED</b> | UNDERSLAB PLUMBING (407) |                      |                              |               |

NR 2

|                                                                                                                                 |                                                                                                                                     |                                       |                                                         |                                          |
|---------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------|---------------------------------------------------------|------------------------------------------|
| <input type="checkbox"/> PARTIAL INSPECTION                                                                                     | <input type="checkbox"/> PARTIAL APPROVAL (P)                                                                                       | PARTIAL DESCRIPTION                   |                                                         |                                          |
| <input type="checkbox"/> APPROVED (A)                                                                                           | <input type="checkbox"/> STOP WORK (S)                                                                                              | <input type="checkbox"/> COMMENTS (C) | <input type="checkbox"/> TEMPORARY APPROVAL (T) — UNTIL | <input type="checkbox"/> HOLD (H)        |
| <input checked="" type="checkbox"/> REJECTED (R)                                                                                | REINSPECTION REQUIRED - CALL *229-2071                                                                                              |                                       |                                                         | <input type="checkbox"/> PERMIT REQUIRED |
| <input type="checkbox"/> REFEE (F)                                                                                              | REINSPECTION FEE REQUIRED - PAY AT CITY HALL 3RD FLOOR - 400 E. STEWART STREET.                                                     |                                       |                                                         |                                          |
| <b>INSPECTOR<br/>SIGNATURE</b>                                                                                                  |                                                                                                                                     | <b>INSPECTION DATE</b>                |                                                         |                                          |
|                                              |                                                                                                                                     | 5/11/93                               |                                                         |                                          |
| <input type="checkbox"/> 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 |                                                                                                                                     |                                       |                                                         | 229-6765                                 |

For Additional Assistance Call \* 229-6251. See Reverse Side For Inspection Types.

|                                               |                                         |                                                 |                              |
|-----------------------------------------------|-----------------------------------------|-------------------------------------------------|------------------------------|
| <b>PERMIT NUMBER</b><br>93-184949             |                                         | <b>INSPECTION NUMBER</b><br>26                  |                              |
| <b>JOB ADDRESS</b><br>8221 HERCULES DR 120065 |                                         |                                                 |                              |
| <b>LOT NO.</b><br>273                         | <b>BLOCK NO.</b><br>8                   | <b>SUBDIVISION NAME</b><br>CINARON RIDGE UNIT 6 |                              |
| <b>FIRE DEPT. MAP NO.</b><br>2317-23          | <b>JOB PHONE</b><br>254-8055            | <b>CALL-IN DATE</b><br>04/30/93                 | <b>CALL-IN TIME</b><br>13:06 |
| <b>INSPECTOR NO.</b><br>85                    | <b>INSPECTOR NAME</b><br>FRED ZIMMERMAN |                                                 |                              |
| <b>SCHEDULE DATE</b><br>05/03/93              |                                         |                                                 |                              |

**INSPECTION REQUESTED** FOOTING, LAYOUT, REBAR, ZONING (101)

PROPERTY LINE & SETBACKS VERIFIED BY:

*[Signature]*

|                                                                                                                                                 |                                                                                 |                                                                                                                                     |                                                         |
|-------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------|
| <input type="checkbox"/> PARTIAL INSPECTION                                                                                                     | <input type="checkbox"/> PARTIAL APPROVAL (P)                                   | PARTIAL DESCRIPTION                                                                                                                 |                                                         |
| <input checked="" type="checkbox"/> APPROVED (A)                                                                                                | <input type="checkbox"/> STOP WORK (S)                                          | <input type="checkbox"/> COMMENTS (C)                                                                                               | <input type="checkbox"/> TEMPORARY APPROVAL (T) - UNTIL |
| <input type="checkbox"/> REJECTED (R)                                                                                                           | REINSPECTION REQUIRED - CALL *229-2071                                          |                                                                                                                                     | <input type="checkbox"/> HOLD (H)                       |
| <input type="checkbox"/> REFEE (F)                                                                                                              | REINSPECTION FEE REQUIRED - PAY AT CITY HALL 3RD FLOOR - 400 E. STEWART STREET. |                                                                                                                                     | <input type="checkbox"/> PERMIT REQUIRED                |
| <b>INSPECTOR SIGNATURE</b><br><i>[Signature]</i>                                                                                                |                                                                                 | <b>INSPECTION DATE</b><br>5393                                                                                                      |                                                         |
| <input type="checkbox"/> 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 <b>229-6765</b> |                                                                                 |                                                                                                                                     |                                                         |

For Additional Assistance Call \*229-6251. See Reverse Side For Inspection Types.

# DEPARTMENT OF BUILDING & SAFETY CITY OF LAS VEGAS

|                                                                                                                                             |                                                                                                                    |                                                                                                                                     |                                                                                                               |                                                                                                                                   |
|---------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------|
| <b>1</b>                                                                                                                                    | <b>PERMIT NUMBER</b><br><div style="border: 1px solid black; padding: 2px; display: inline-block;">93-184949</div> | <b>INSPECTION NUMBER</b><br><div style="border: 1px solid black; padding: 2px; display: inline-block;">6</div>                      |                                                                                                               |                                                                                                                                   |
| <b>JOB ADDRESS</b><br><div style="display: flex; justify-content: space-between;"> <span>8221 HERCULES DR</span> <span>120965</span> </div> |                                                                                                                    |                                                                                                                                     |                                                                                                               |                                                                                                                                   |
| <b>LOT NO.</b><br><div style="border: 1px solid black; padding: 2px; display: inline-block;">273</div>                                      |                                                                                                                    | <b>BLOCK NO.</b><br><div style="border: 1px solid black; padding: 2px; display: inline-block;">8</div>                              |                                                                                                               | <b>SUBDIVISION NAME</b><br><div style="border: 1px solid black; padding: 2px; display: inline-block;">CINARRON RIDGE UNIT 6</div> |
| <b>FIRE DEPT. MAP NO.</b><br><div style="border: 1px solid black; padding: 2px; display: inline-block;">2317-23</div>                       | <b>JOB PHONE</b><br><div style="border: 1px solid black; padding: 2px; display: inline-block;">254-8955</div>      | <b>CALL-IN DATE</b><br><div style="border: 1px solid black; padding: 2px; display: inline-block;">05/11/93</div>                    | <b>CALL-IN TIME</b><br><div style="border: 1px solid black; padding: 2px; display: inline-block;">13:53</div> | <b>SCHEDULE DATE</b><br><div style="border: 1px solid black; padding: 2px; display: inline-block;">05/12/93</div>                 |
| <b>INSPECTOR NO.</b><br><div style="border: 1px solid black; padding: 2px; display: inline-block;">85/81</div>                              |                                                                                                                    | <b>INSPECTOR NAME</b><br><div style="border: 1px solid black; padding: 2px; display: inline-block;">FRED ZIMMERMAN</div>            |                                                                                                               |                                                                                                                                   |
| <b>INSPECTION REQUESTED</b>                                                                                                                 |                                                                                                                    | <div style="border: 1px solid black; padding: 5px;">BUILDING SEWER (YARD LINES) (405)</div>                                         |                                                                                                               |                                                                                                                                   |
|                                                                                                                                             |                                                                                                                    |                                                                                                                                     |                                                                                                               |                                                                                                                                   |
| <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>                                                                                                |                                                                                                                    | <input type="checkbox"/> <b>REINSPECTION REQUIRED - CALL * 229-2071</b>                                                             |                                                                                                               | <input type="checkbox"/> <b>PERMIT REQUIRED</b>                                                                                   |
| <input type="checkbox"/> <b>REFEE (F)</b>                                                                                                   |                                                                                                                    | <input type="checkbox"/> <b>REINSPECTION FEE REQUIRED - PAY AT CITY HALL 3RD FLOOR - 400 E. STEWART STREET.</b>                     |                                                                                                               |                                                                                                                                   |
| <b>INSPECTOR SIGNATURE</b><br><div style="font-family: cursive; font-size: 1.5em;">P. Tail</div>                                            |                                                                                                                    | <b>INSPECTION DATE</b><br><div style="font-family: cursive; font-size: 1.5em;">5/12/93</div>                                        |                                                                                                               |                                                                                                                                   |
| <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             |                                                                                                                    |                                                                                                                                     |                                                                                                               | <div style="border: 1px solid black; padding: 5px; display: inline-block;">229-6765</div>                                         |

For Additional Assistance Call \* 229-6251. See Reverse Side For Inspection Types.

# DEPARTMENT OF BUILDING & SAFETY CITY OF LAS VEGAS

|                                     |                      |                                 |                          |                      |
|-------------------------------------|----------------------|---------------------------------|--------------------------|----------------------|
| <input checked="" type="checkbox"/> | <b>PERMIT NUMBER</b> | 93-184949                       | <b>INSPECTION NUMBER</b> | 7                    |
| <b>JOB ADDRESS</b>                  |                      |                                 |                          |                      |
| 8221 HERCULES DR                    |                      |                                 | 120965                   |                      |
| <b>LOT NO.</b>                      |                      | <b>BLOCK NO.</b>                | <b>SUBDIVISION NAME</b>  |                      |
| 273                                 |                      | 8                               | CIMARRON RIDGE UNIT 6    |                      |
| <b>FIRE DEPT. MAP NO.</b>           | <b>JOB PHONE</b>     | <b>CALL-IN DATE</b>             | <b>CALL-IN TIME</b>      | <b>SCHEDULE DATE</b> |
| 2317-23                             | 254-8955             | 05/11/93                        | 13:54                    | 05/12/93             |
| <b>INSPECTOR NO.</b>                |                      | <b>INSPECTOR NAME</b>           |                          |                      |
| 85/81                               |                      | FRED ZIMMERMAN                  |                          |                      |
| <b>INSPECTION REQUESTED</b>         |                      | <b>UNDERSLAB PLUMBING (407)</b> |                          |                      |

Need to move rocks  
larger than pipe size snatching  
ditch.

|                                                                                                                                 |                                                                                                                                     |                                       |                                                         |                                          |
|---------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------|---------------------------------------------------------|------------------------------------------|
| <input type="checkbox"/> PARTIAL INSPECTION                                                                                     | <input type="checkbox"/> PARTIAL APPROVAL (P)                                                                                       | <b>PARTIAL DESCRIPTION</b>            |                                                         |                                          |
| <input checked="" type="checkbox"/> APPROVED (A)                                                                                | <input type="checkbox"/> STOP WORK (S)                                                                                              | <input type="checkbox"/> COMMENTS (C) | <input type="checkbox"/> TEMPORARY APPROVAL (T) — UNTIL | <input type="checkbox"/> HOLD (H)        |
| <input type="checkbox"/> REJECTED (R)                                                                                           | REINSPECTION REQUIRED - CALL * 229-2071                                                                                             |                                       |                                                         | <input type="checkbox"/> PERMIT REQUIRED |
| <input type="checkbox"/> REFEE (F)                                                                                              | REINSPECTION FEE REQUIRED - PAY AT CITY HALL 3RD FLOOR - 400 E. STEWART STREET                                                      |                                       |                                                         |                                          |
| <b>INSPECTOR SIGNATURE</b>                                                                                                      |                                                                                                                                     | <b>INSPECTION DATE</b>                |                                                         |                                          |
| P. Paul                                                                                                                         |                                                                                                                                     | 5/12/93                               |                                                         |                                          |
| <input type="checkbox"/> 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 |                                                                                                                                     |                                       |                                                         | 229-6765                                 |

For Additional Assistance Call \* 229-6251. See Reverse Side For Inspection Types.

# DEPARTMENT OF BUILDING & SAFETY CITY OF LAS VEGAS

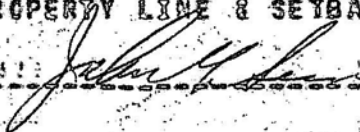
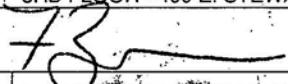
|                                                  |                              |                                                    |                              |
|--------------------------------------------------|------------------------------|----------------------------------------------------|------------------------------|
| <b>PERMIT NUMBER</b><br>93-184949                |                              | <b>INSPECTION NUMBER</b><br>27                     |                              |
| <b>JOB ADDRESS</b><br>8229 HERCULES DR 120045    |                              |                                                    |                              |
| <b>LOT NO.</b><br>223                            | <b>BLOCK NO.</b><br>8        | <b>SUBDIVISION NAME</b><br>CINCINNATI RIDGE UNIT 6 |                              |
| <b>FIRE DEPT. MAP NO.</b><br>2317-23             | <b>JOB PHONE</b><br>254-8955 | <b>CALL-IN DATE</b><br>04/30/93                    | <b>CALL-IN TIME</b><br>13:06 |
| <b>INSPECTOR NO.</b><br>85                       |                              | <b>INSPECTOR NAME</b><br>FRED ZIMMERMAN            |                              |
| <b>INSPECTION REQUESTED</b><br>UFER GROUND (203) |                              |                                                    |                              |

|                        |  |                                                                                 |  |                          |  |                                    |  |
|------------------------|--|---------------------------------------------------------------------------------|--|--------------------------|--|------------------------------------|--|
| [ ] PARTIAL INSPECTION |  |                                                                                 |  | [ ] PARTIAL APPROVAL (P) |  | PARTIAL DESCRIPTION                |  |
| [X] APPROVED (A)       |  | [ ] STOP WORK (S)                                                               |  | [ ] COMMENTS (C)         |  | [ ] TEMPORARY APPROVAL (T) - UNTIL |  |
|                        |  |                                                                                 |  |                          |  | [ ] HOLD (H)                       |  |
| [ ] REJECTED (R)       |  | REINSPECTION REQUIRED - CALL *229-2071                                          |  |                          |  | [ ] PERMIT REQUIRED                |  |
| [ ] REFEE (F)          |  | REINSPECTION FEE REQUIRED - PAY AT CITY HALL 3RD FLOOR - 400 E. STEWART STREET. |  |                          |  |                                    |  |

|                                                                                                                                 |  |                                                                                                                                      |          |
|---------------------------------------------------------------------------------------------------------------------------------|--|--------------------------------------------------------------------------------------------------------------------------------------|----------|
| <b>INSPECTOR SIGNATURE</b><br>               |  | <b>INSPECTION DATE</b><br>5/3/93                                                                                                     |          |
| [ ] 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 |  |                                                                                                                                      | 229-6765 |

For Additional Assistance Call \* 229-6251. See Reverse Side For Inspection Types.

# DEPARTMENT OF BUILDING & SAFETY · CITY OF LAS VEGAS

|                                                                                                                                       |                                                                                                                                        |                                                                                     |                                                            |                                      |
|---------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------|------------------------------------------------------------|--------------------------------------|
| <b>[X]</b>                                                                                                                            | <b>PERMIT<br/>NUMBER</b>                                                                                                               | <b>93-184949</b>                                                                    | <b>APPLICATION<br/>NUMBER</b>                              | <b>120965</b>                        |
| JOB ADDRESS                                                                                                                           |                                                                                                                                        |                                                                                     | INSPECTION NUMBER                                          |                                      |
| <b>8221 HERCULES DR</b>                                                                                                               |                                                                                                                                        |                                                                                     | <b>8</b>                                                   |                                      |
| LOT/BLOCK                                                                                                                             |                                                                                                                                        | RECORDED SUBDIVISION NAME                                                           |                                                            |                                      |
| <b>273 8</b>                                                                                                                          |                                                                                                                                        | <b>CIMARRON RIDGE UNIT 6</b>                                                        |                                                            |                                      |
| FIRE DEPT. MAP NO.                                                                                                                    | JOB PHONE                                                                                                                              | CALL-IN-DATE                                                                        | CALL-IN TIME                                               | SCHEDULE DATE                        |
| <b>2317-23</b>                                                                                                                        | <b>254-8555</b>                                                                                                                        | <b>05/17/93</b>                                                                     | <b>13:02</b>                                               | <b>05/18/93</b>                      |
| INSPECTOR/NAME                                                                                                                        |                                                                                                                                        | MARKETING/BUSINESS NAME                                                             |                                                            |                                      |
| <b>FRED ZIMMERMAN JR. 85</b>                                                                                                          |                                                                                                                                        |                                                                                     |                                                            |                                      |
| <b>INSPECTION<br/>REQUESTED</b>                                                                                                       |                                                                                                                                        | <b>PRE-SLAB (105)</b>                                                               |                                                            |                                      |
| <b>PROPERTY LINE &amp; SETBACKS VERIFIED BY:</b><br> |                                                                                                                                        |                                                                                     |                                                            |                                      |
|                                                                                                                                       |                                                                                                                                        |                                                                                     |                                                            |                                      |
| <input type="checkbox"/> PARTIAL<br>INSPECTION                                                                                        | <input type="checkbox"/> PARTIAL<br>APPROVAL (P)                                                                                       | PARTIAL DESCRIPTION                                                                 |                                                            |                                      |
| <input checked="" type="checkbox"/> APPROVED<br>(A)                                                                                   | <input type="checkbox"/> STOP<br>WORK (S)                                                                                              | <input type="checkbox"/> COMMENTS<br>(C)                                            | <input type="checkbox"/> TEMPORARY<br>APPROVAL (T) - UNTIL | <input type="checkbox"/> HOLD<br>(H) |
| <input type="checkbox"/> REJECTED (R)                                                                                                 | REINSPECTION REQUIRED - CALL * 229-2071                                                                                                |                                                                                     | <input type="checkbox"/> PERMIT<br>REQUIRED                |                                      |
| <input type="checkbox"/> REFEE (F)                                                                                                    | REINSPECTION FEE REQUIRED - PAY AT CITY HALL<br>3RD FLOOR - 400 E. STEWART STREET.                                                     |                                                                                     |                                                            |                                      |
| INSPECTOR<br>SIGNATURE                                                                                                                |                                                                                                                                        |  |                                                            | INSPECTION DATE<br><b>5/18/93</b>    |
| <input type="checkbox"/> PROJECT<br>COMPLETE                                                                                          | BRING HARD CARD WITH FIRE, QUALITY CONTROL & PLANNING APPROVALS<br>SIGNED OFF TO BLDG & SAFETY FOR C. OF O. ISSUANCE (Commercial Only) |                                                                                     |                                                            |                                      |
| IF YOU HAVE ANY QUESTIONS ON THIS INSPECTION, YOU MAY<br>CALL THE INSPECTOR FROM 7:00 A.M. - 7:15 A.M. OR 2:45 P.M. - 3:00 P.M. AT    |                                                                                                                                        |                                                                                     |                                                            | <b>229-6765</b>                      |

For Additional Assistance Call \* 229-6251. See Reverse Side For Inspection Types.

# DEPARTMENT OF BUILDING & SAFETY CITY OF LAS VEGAS

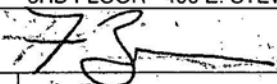
|                                                                                                                                 |                                                                                                                                     |                                       |                                                         |                                          |                   |
|---------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------|---------------------------------------------------------|------------------------------------------|-------------------|
| <input checked="" type="checkbox"/> <b>PERMIT NUMBER</b>                                                                        | 93-184949                                                                                                                           |                                       | <b>APPLICATION NUMBER</b>                               | 120965                                   |                   |
| JOB ADDRESS                                                                                                                     |                                                                                                                                     |                                       | 8221 HERCULES DR                                        |                                          | INSPECTION NUMBER |
| 5                                                                                                                               |                                                                                                                                     |                                       |                                                         |                                          |                   |
| LOT/BLOCK                                                                                                                       |                                                                                                                                     | RECORDED SUBDIVISION NAME             |                                                         |                                          |                   |
| 273 8                                                                                                                           |                                                                                                                                     | CIMARRON RIDGE UNIT 6                 |                                                         |                                          |                   |
| FIRE DEPT. MAP NO.                                                                                                              | JOB PHONE                                                                                                                           | CALL-IN DATE                          | CALL-IN TIME                                            | SCHEDULE DATE                            |                   |
| 2317-23                                                                                                                         | 254-8955                                                                                                                            | 06/04/93                              | 13:01                                                   | 06/07/93                                 |                   |
| INSPECTOR/NAME                                                                                                                  |                                                                                                                                     | MARKETING/BUSINESS NAME               |                                                         |                                          |                   |
| FRED ZIMMERMAN - 85                                                                                                             |                                                                                                                                     |                                       |                                                         |                                          |                   |
| <b>INSPECTION REQUESTED</b>                                                                                                     |                                                                                                                                     | ROOF SHEATHING (107)                  |                                                         |                                          |                   |
|                                                                                                                                 |                                                                                                                                     |                                       |                                                         |                                          |                   |
| <input type="checkbox"/> PARTIAL INSPECTION                                                                                     | <input type="checkbox"/> PARTIAL APPROVAL (P)                                                                                       | PARTIAL DESCRIPTION                   |                                                         |                                          |                   |
| <input checked="" type="checkbox"/> APPROVED (A)                                                                                | <input type="checkbox"/> STOP WORK (S)                                                                                              | <input type="checkbox"/> COMMENTS (C) | <input type="checkbox"/> TEMPORARY APPROVAL (T) - UNTIL | <input type="checkbox"/> HOLD (H)        |                   |
| <input type="checkbox"/> REJECTED (R)                                                                                           | REINSPECTION REQUIRED - CALL * 229-2071                                                                                             |                                       |                                                         | <input type="checkbox"/> PERMIT REQUIRED |                   |
| <input type="checkbox"/> REFEE (F)                                                                                              | REINSPECTION FEE REQUIRED - PAY AT CITY HALL 3RD FLOOR - 400 E. STEWART STREET.                                                     |                                       |                                                         |                                          |                   |
| INSPECTOR SIGNATURE                                                                                                             |                                                                                                                                     | 75                                    |                                                         | INSPECTION DATE                          |                   |
|                                                                                                                                 |                                                                                                                                     |                                       |                                                         | 6/7/93                                   |                   |
| <input type="checkbox"/> 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 |                                                                                                                                     |                                       |                                                         |                                          | 229-6765          |

For Additional Assistance Call \* 229-6251. See Reverse Side For Inspection Types.

# DEPARTMENT OF BUILDING & SAFETY CITY OF LAS VEGAS

|                                                          |                                                           |                                                               |                              |
|----------------------------------------------------------|-----------------------------------------------------------|---------------------------------------------------------------|------------------------------|
| <input checked="" type="checkbox"/> <b>PERMIT NUMBER</b> | <b>93-184949</b>                                          | <input checked="" type="checkbox"/> <b>APPLICATION NUMBER</b> | <b>120965</b>                |
| JOB ADDRESS<br><b>8221 HERCULES DR</b>                   |                                                           | INSPECTION NUMBER<br><b>6</b>                                 |                              |
| LOT/BLOCK<br><b>273 8</b>                                | RECORDED SUBDIVISION NAME<br><b>CIPARRON RIDGE UNIT 6</b> |                                                               |                              |
| FIRE DEPT. MAP NO.<br><b>2317-23</b>                     | JOB PHONE<br><b>254-8955</b>                              | CALL-IN-DATE<br><b>06/04/93</b>                               | CALL-IN TIME<br><b>13:02</b> |
| SCHEDULE DATE<br><b>06/07/93</b>                         |                                                           |                                                               |                              |
| INSPECTOR/NAME<br><b>FRED ZIMMERMAN - 85</b>             |                                                           | MARKETING/BUSINESS NAME                                       |                              |
| INSPECTION REQUESTED <b>SHEAR (109)</b>                  |                                                           |                                                               |                              |

NAIL THA HANGAR ABOVE STAIRS

|                                                                                                                                 |                                                                                                                                     |                                                                                   |                                                         |
|---------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------|---------------------------------------------------------|
| <input type="checkbox"/> PARTIAL INSPECTION                                                                                     | <input type="checkbox"/> PARTIAL APPROVAL (P)                                                                                       | PARTIAL DESCRIPTION                                                               |                                                         |
| <input checked="" type="checkbox"/> APPROVED (A)                                                                                | <input type="checkbox"/> STOP WORK (S)                                                                                              | <input type="checkbox"/> COMMENTS (C)                                             | <input type="checkbox"/> TEMPORARY APPROVAL (T) - UNTIL |
| <input type="checkbox"/> REJECTED (R)                                                                                           | <input type="checkbox"/> REFEED (F)                                                                                                 | <input type="checkbox"/> HOLD (H)                                                 |                                                         |
| REINSPECTION REQUIRED - CALL * 229-2071                                                                                         |                                                                                                                                     | REINSPECTION FEE REQUIRED - PAY AT CITY HALL - 3RD FLOOR - 400 E. STEWART STREET. |                                                         |
| INSPECTOR SIGNATURE<br>                      |                                                                                                                                     | INSPECTION DATE<br><b>6/7/93</b>                                                  |                                                         |
| <input type="checkbox"/> 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 |                                                                                                                                     |                                                                                   | <b>229-6765</b>                                         |

For Additional Assistance Call \* 229-6251. See Reverse Side For Inspection Types.