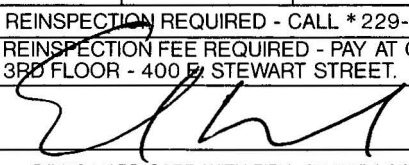


# DEPARTMENT OF BUILDING & SAFETY CITY OF LAS VEGAS

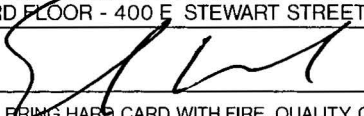
|                                     |                       |                                    |                          |                      |
|-------------------------------------|-----------------------|------------------------------------|--------------------------|----------------------|
| <input checked="" type="checkbox"/> | <b>PERMIT NUMBER</b>  | <b>93-174951</b>                   | <b>INSPECTION NUMBER</b> | <b>11</b>            |
| <b>JOB ADDRESS</b>                  |                       |                                    |                          |                      |
| <b>2704 DUNE COVE RD</b>            |                       |                                    | <b>111956</b>            |                      |
| <b>LOT NO.</b>                      | <b>BLOCK NO.</b>      | <b>SUBDIVISION NAME</b>            |                          |                      |
| <b>64</b>                           | <b>1</b>              | <b>LAKES UNIT 1 RICHMOND AMERI</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>2615-14</b>                      | <b>254-8710</b>       | <b>02/12/93</b>                    | <b>14:01</b>             | <b>02/16/93</b>      |
| <b>INSPECTOR NO.</b>                | <b>INSPECTOR NAME</b> |                                    |                          |                      |
| <b>69</b>                           | <b>ED BALLARD</b>     |                                    |                          |                      |
| <b>INSPECTION REQUESTED</b>         | <b>FRAMING (120)</b>  |                                    |                          |                      |

APPROVED SUBJECT TO  
ROUGH ELECTRICAL APPROVAL

|                                                                                                                                    |                                                                                       |                                                                                                                                                    |                                                                |                                                 |
|------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------|-------------------------------------------------|
| <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>                                                                                                         |    |                                                                                                                                                    | <b>INSPECTION DATE</b>                                         |                                                 |
| <input type="checkbox"/> <b>PROJECT COMPLETE</b>                                                                                   |                                                                                       | <b>BRING HARD CARD WITH FIRE, QUALITY CONTROL &amp; PLANNING APPROVALS SIGNED OFF TO BLDG &amp; SAFETY FOR C. of O. ISSUANCE (Commercial Only)</b> |                                                                |                                                 |
| 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>229-6769</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>                                                                  | <b>93-174951</b>                                                                                                                                     | <b>INSPECTION<br/>NUMBER</b>                                       | <b>6</b>                                            |
| <b>JOB ADDRESS</b> <span style="float: right;"><b>111956</b></span>                                                                     |                                                                                           |                                                                                                                                                      |                                                                    |                                                     |
| <b>LOT NO</b><br><b>64</b>                                                                                                              |                                                                                           | <b>BLOCK NO</b><br><b>1</b>                                                                                                                          | <b>SUBDIVISION NAME</b><br><b>LAKES UNIT 1 RICHMOND APARTMENTS</b> |                                                     |
| <b>FIRE DEPT. MAP NO</b><br><b>2615-14</b>                                                                                              | <b>JOB PHONE</b><br><b>254-8710</b>                                                       | <b>CALL-IN DATE</b><br><b>03/08/93</b>                                                                                                               | <b>CALL-IN TIME</b><br><b>08:42</b>                                | <b>SCHEDULE DATE</b><br><b>03/09/93</b>             |
| <b>INSPECTOR NO</b><br><b>69</b>                                                                                                        |                                                                                           | <b>INSPECTOR NAME</b><br><b>ED BALLARD</b>                                                                                                           |                                                                    |                                                     |
| <b>INSPECTION REQUESTED</b> <span style="float: right;"><b>BUILDING FINAL (14C)</b></span>                                              |                                                                                           |                                                                                                                                                      |                                                                    |                                                     |
|                                                                                                                                         |                                                                                           |                                                                                                                                                      |                                                                    |                                                     |
| <input type="checkbox"/> <b>PARTIAL<br/>INSPECTION</b>                                                                                  | <input type="checkbox"/> <b>PARTIAL<br/>APPROVAL (P)</b>                                  | <b>PARTIAL DESCRIPTION</b>                                                                                                                           |                                                                    |                                                     |
| <input checked="" type="checkbox"/> <b>APPROVED<br/>(A)</b>                                                                             | <input type="checkbox"/> <b>STOP<br/>WORK (S)</b>                                         | <input type="checkbox"/> <b>COMMENTS<br/>(C)</b>                                                                                                     | <input type="checkbox"/> <b>TEMPORARY<br/>APPROVAL (T) — UNTIL</b> | <input type="checkbox"/> <b>HOLD<br/>(H)</b>        |
| <input type="checkbox"/> <b>REJECTED (R)</b>                                                                                            | <b>REINSPECTION REQUIRED - CALL *229-2071</b>                                             |                                                                                                                                                      |                                                                    | <input type="checkbox"/> <b>PERMIT<br/>REQUIRED</b> |
| <input type="checkbox"/> <b>REFEE (F)</b>                                                                                               | <b>REINSPECTION FEE REQUIRED - PAY AT CITY HALL<br/>3RD FLOOR - 400 E STEWART STREET.</b> |                                                                                                                                                      |                                                                    |                                                     |
| <b>INSPECTOR<br/>SIGNATURE</b>                                                                                                          |                                                                                           | <b>INSPECTION DATE</b>                                                                                                                               |                                                                    |                                                     |
|                                                      |                                                                                           | <b>3-9</b>                                                                                                                                           |                                                                    |                                                     |
| <input checked="" type="checkbox"/> <b>PROJECT<br/>COMPLETE</b>                                                                         |                                                                                           | <b>BRING HARD CARD WITH FIRE, QUALITY CONTROL &amp; PLANNING APPROVALS<br/>SIGNED OFF TO BLDG &amp; SAFETY FOR C of O ISSUANCE (Commercial Only)</b> |                                                                    |                                                     |
| <b>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> |                                                                                           |                                                                                                                                                      |                                                                    | <b>229-6769</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>  | 93-174951                 | <b>INSPECTION NUMBER:</b> | 2                    |
| <b>JOB ADDRESS</b>                  |                        |                           |                           |                      |
| 2704 DUNE COVE RD                   |                        |                           | 111956                    |                      |
| <b>LOT NO.</b>                      | <b>BLOCK NO.</b>       | <b>SUBDIVISION NAME</b>   |                           |                      |
| 64                                  | 1                      | LAKES UNIT 1 RICHMOND AVE |                           |                      |
| <b>FIRE DEPT. MAP NO.</b>           | <b>JOB PHONE</b>       | <b>CALL-IN DATE</b>       | <b>CALL-IN TIME</b>       | <b>SCHEDULE DATE</b> |
| 2615-14                             | 254-8710               | 03/08/93                  | 08:43                     | 03/09/93             |
| <b>INSPECTOR NO.</b>                | <b>INSPECTOR NAME</b>  |                           |                           |                      |
| 72                                  | BOB SMITH              |                           |                           |                      |
| <b>INSPECTION REQUESTED</b>         | FINAL ELECTRICAL (240) |                           |                           |                      |

No copy of Permit

|                                                                                                                                 |                                                                                                                                   |                                       |                                                         |                                          |
|---------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------|---------------------------------------|---------------------------------------------------------|------------------------------------------|
| <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>                                                                                                      | Robert Smith                                                                                                                      |                                       | <b>INSPECTION DATE</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 |                                                                                                                                   |                                       |                                                         | 229-6765                                 |

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

# UltraKote, Inc.

FIBER - REINFORCED STUCCO

#93-174951

2865 N.W. Grand Avenue • Phoenix, AZ 85017 • (602) 224-6012

Job Address

INSTALLATION CARD

ICBO Report No. 4658

2709 DUNK COUNTRY RD

Date of Job Completion \_\_\_\_\_

Plastering Contractor

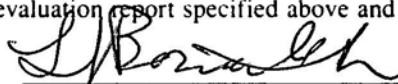
Name: CEDCO, INC.

Address: 3280 W. Hacienda, Suite 205, Las Vegas, NV 89118

Telephone No. ( 702 ) 361-6550

Above contractor is approved by UltraKote, Inc.

This is to certify that the exterior coating system on the building exterior at the above address has been installed in accordance with the evaluation report specified above and the manufacturer's instructions.



Signature of authorized representative  
of plastering contractor

2-15-93

Date

This installation card must be presented to the building inspector after completion of work and before final inspection.

## CITY OF LAS VEGAS, NEVADA

DEPARTMENT OF BUILDING AND SAFETY  
PHONE 229-6251

MIT NO. 93-174951

## BUILDING PERMIT

FOR: Single Family Dwelling, Remodel  
Additions, Misc. Residential ConstructionPLAN CHECK NO. 4-456193

DATE

CONST. VAL. \$ 1170.00ADDRESS OF CONSTRUCTION 2704 DUNE COVE RD.OWNER BERINGHELE, JOSEPH M. PHONE 254-8710LOT(s) 64 BLOCK 1 SUBDIVISION Johns Unit #1 Richmond Manor RPOCPROPOSED CONSTRUCTION ADD ON TO EXISTING BEDROOMUSE Enlarge BedroomTHIS PERMIT FOR BLDG: ☒ A/C ☐ ELEC: ☒ PLBG: ☐OTHER PERMITS REQD.: FENCE ☐ OFF SITE ☐ SWIM POOL ☐FLOOR AREA BSMT 78 1ST 78 2ND 78 GARAGE 78 PORCH 78 TOTAL 78CONTRACTOR ownerSTATE  
LICENSE NO.CITY  
LICENSE NO.

ARCHITECT

ENGINEER

MASTER PLUMBER/  
CONTRACTORMASTER ELECTRICIAN/  
CONTRACTOR

## OTHER INSPECTIONS AND FEES

- 1 Inspections outside of normal business hours = \$40.00 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 = \$40.00 per hour
- 3 Inspections during normal business hours for which no fee is specifically indicated = \$40.00 per hour (minimum charge one hour)
- 4 Additional plan review required by changes, additions, or revisions to approved plans = \$40.00 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: Joseph M Beringhele  
I HEREBY DECLARE THAT I AM THE LEGAL OWNER OF THE ABOVE PROPERTY

OWNER

BY: \_\_\_\_\_  
AGENT

## SPECIAL CONDITIONS



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

LAND DEVELOPMENT AND FLOOD CONTROL ENGINEER

DATE

PLANNING DEPT

BUILDING DEPT

| PLUMBING                               |       | FEE |
|----------------------------------------|-------|-----|
| WATER DISTRIBUTION                     | 6.70  |     |
| SEWER SYSTEM - NEW OR MODIFICATION     | 11.05 |     |
| FIXTURES - WATER SOFTENER, H.W. HEATER | 2.25  |     |
| GARBAGE DISPOSAL - WASHER              | 2.25  |     |
| FUEL PIPING                            | 6.70  |     |
| IRRIGATION SYSTEM                      | 8.90  |     |
| MISC                                   |       |     |
| 2310 - 2433                            |       |     |
| TOTAL                                  |       |     |
| AIR CONDITIONING                       |       | FEE |
| NEW UNIT - 3 TON = 10.00 OVER = 18.20  |       |     |
| FURNACE TO 100,000/10.00 OVER/12.20    |       |     |
| VAPORATIVE COOLER                      | 7.20  |     |
| VENTILATION FAN                        | 2.65  |     |
| 2310 - 2435                            |       |     |
| TOTAL                                  |       |     |

## ELECTRICAL

## FEE

|                                                   |       |      |
|---------------------------------------------------|-------|------|
| RECEPTACLE <u>X</u> SWITCH                        | .50   |      |
| EACH LIGHT FIXTURE OR SOCKET                      | 40    |      |
| SPECIAL OUTLET, APPLIANCE ETC                     | .80   |      |
| SERVICE/PANEL - SUB/3 40 - 200A/6.70 - 400A/13 85 |       |      |
| A.C. UNIT OR MOTORS                               | 3 40  |      |
| MISC                                              |       |      |
| 2310 - 2432                                       | TOTAL | 6.00 |

1113 - 2437 ZONING  
2310 - 2431 PLAN REVIEW  
2310 - 2401 BLDG PERMIT

7143 - 2973 SEWER CONNECTION

6122 - 3352 TORTOISE

- 2897 PIF.

88100-1232 TRANSPORT

TOTAL FEES

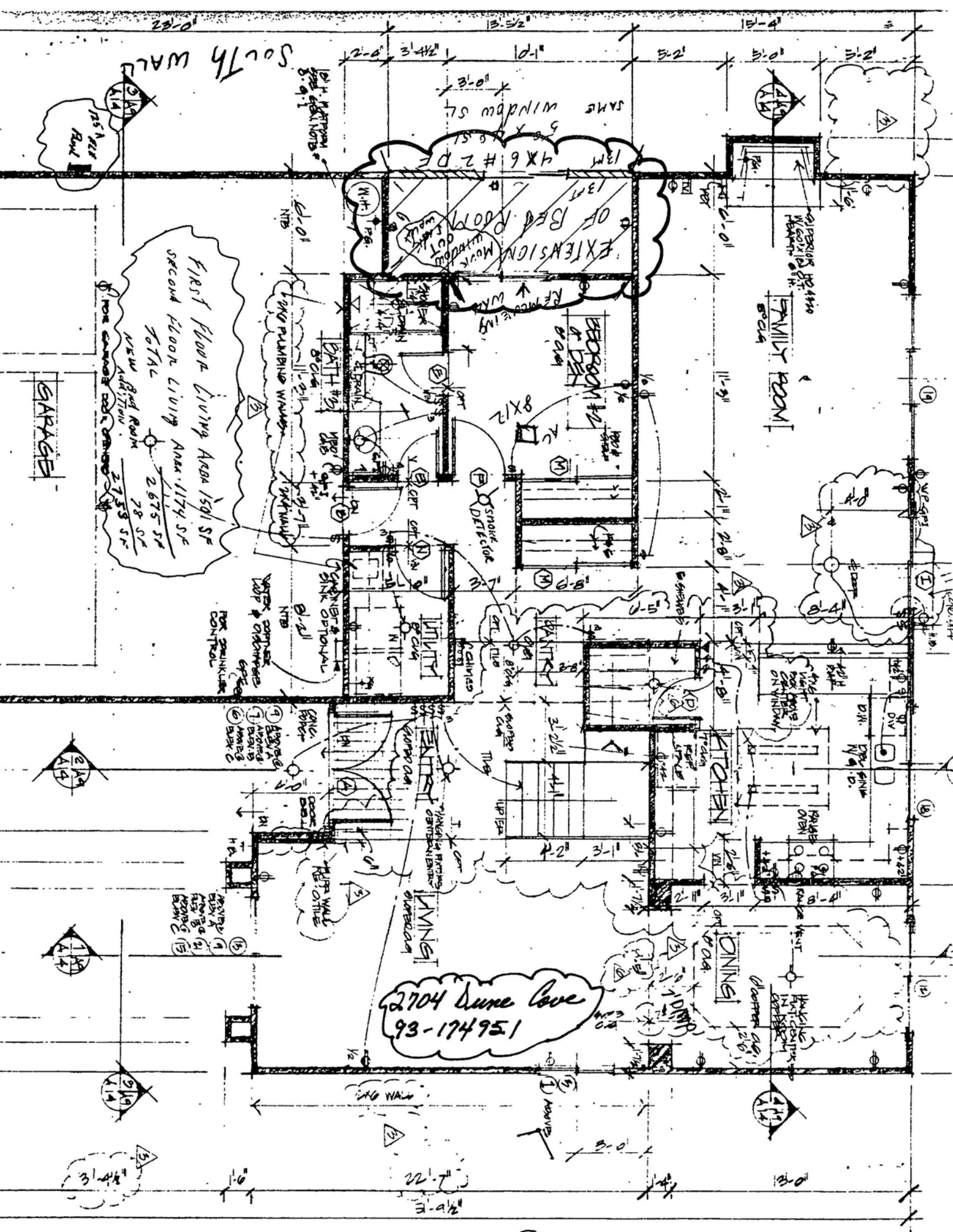
84.00RECEIPT  
MUST BE MACHINE VALIDATED

ELEC 6.00  
ZONE 1.00  
PLCK 19.00  
SFD 58.00  
CHEK 84.00  
1451A000 14:27

D. Fee

PERMIT NO.

Permit Expires 180 Days After Abandonment of Work



First Floor Living Area 1501 SF  
Second Floor Living Area 1174 SF  
TOTAL 2675 SF  
NEW Dining Room 78 SF  
NEW Addition 275 SF  
TOTAL 2950 SF

2704 Dune Cove  
93-174951

GARAGE

FAMILY ROOM

KITCHEN

DINING

LIVING

BED ROOM #2

EXTENSION  
OF BED ROOM #2  
4x6 #2 D.E.

BATH #2

LONG PUMPED WATER  
HOLDWAY

WATER COMPRESSOR  
LOP & OILCHANGES  
PER MANUAL

REAR PORCH  
11' x 12' x 12'

SOUTH WALL

2' x 4' x 4'

2' x 4' x 4'

2' x 4' x 4'

2' x 4' x 4'

2' x 4' x 4'

2' x 4' x 4'

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2' x 4' x 4'

2' x 4' x 4'

2' x 4' x 4'

2' x 4' x 4'

2704 DUNE COVE RD

6X13 EXTENSION OF  
BED ROOM 78 SF

ROOF TRUSS direction  
S LIKE TILE BY LIFE TILE

EXISTING HOME SQ FT 2675  
BED ROOM NEW + 78

RECEPTACLE OUTLETS SHALL BE  
PROVIDED NO MORE THAN 6 FEET  
FROM ANY POINT ALONG THE FLOOR  
LINE, INCLUDING WALL SPACE  
2 FEET OR MORE IN WIDTH.  
KITCHEN AND DINING COUNTER  
TOPS WIDER THAN 12 INCHES  
SHALL BE PROVIDED WITH A  
RECEPTACLE OUTLET  
PROVIDE AN OUTLET ADJACENT  
TO EACH BATHROOM SINK

Add 3 Plugs  
NO PLUMBING

2X4 WALLS ON 16"  $\phi$

2X4 ROOF RAFTERS ON 16"  $\phi$

1/2 CDX PLY ROOF  
30 PAPER ROOF

PAPER ON NEW WALL  
R 30+ COLLING INSULATION  
R 11 WALLS INSULATION

1 COAT BY CERTIFIED STEEL

3 TON AC TOP

3 1/2 TON AC BOTTOM

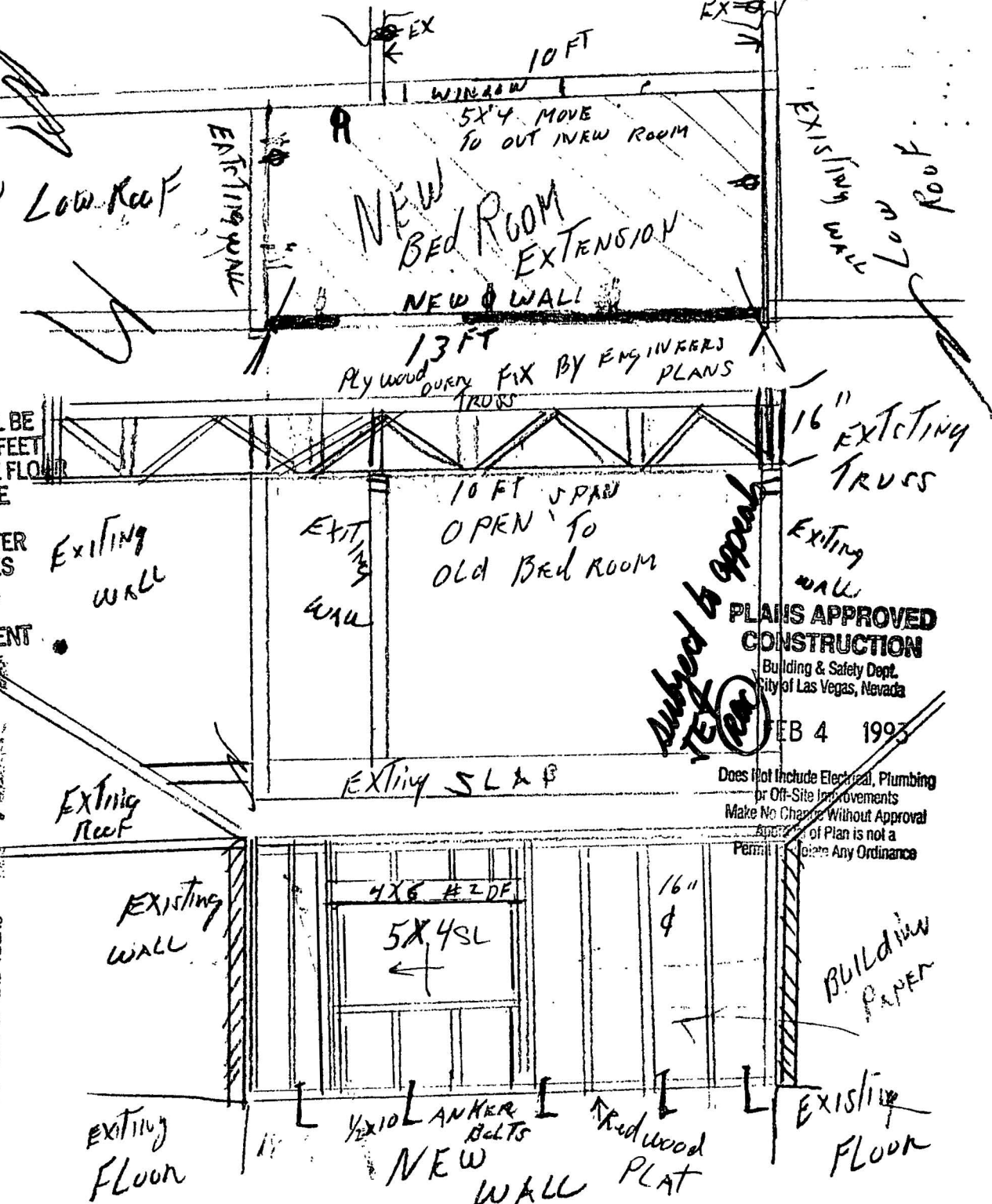
PLANS APPROVED - ELECTRICAL

DOES NOT INCLUDE PLUMBING OR CONSTRUCTION  
MAKE NO CHANGE WITHOUT APPROVAL  
APPROVAL OF PLAN IS NOT A PERMIT TO VIOLATE ANY ORDINANCE

DATE 2/4/93

ELECTRICAL DEPT - CITY OF LAS VEGAS

APPROVED



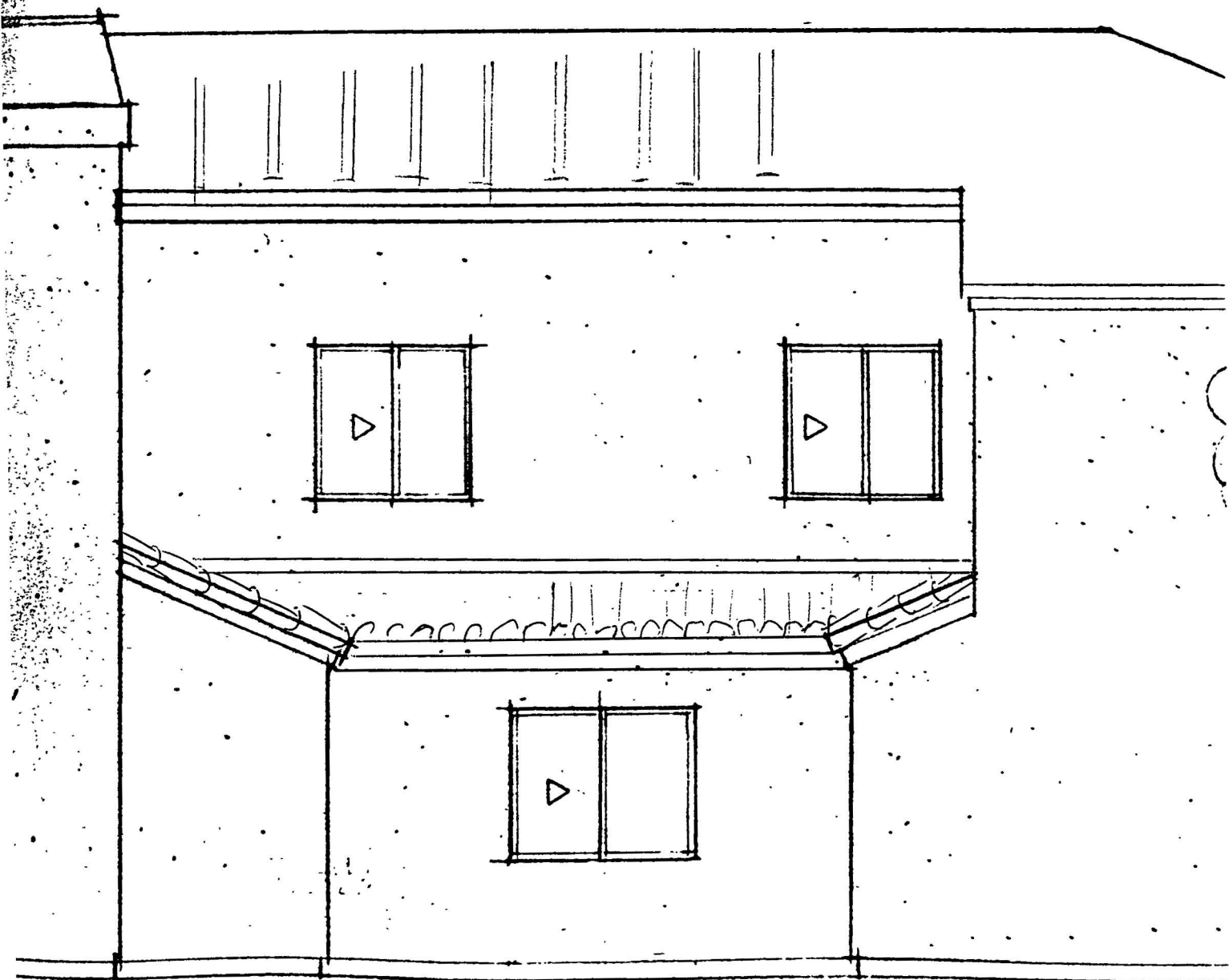
PLANS APPROVED  
CONSTRUCTION

Building & Safety Dept.  
City of Las Vegas, Nevada

FEB 4 1993

Does Not Include Electrical, Plumbing  
or Off-Site Improvements  
Make No Change Without Approval  
Approval of Plan is not a  
Permit to Violate Any Ordinance

BUILDING  
PAPER



SOUTH WALL  
SIDE ELEVATION 2704 DUNE COVE Rd

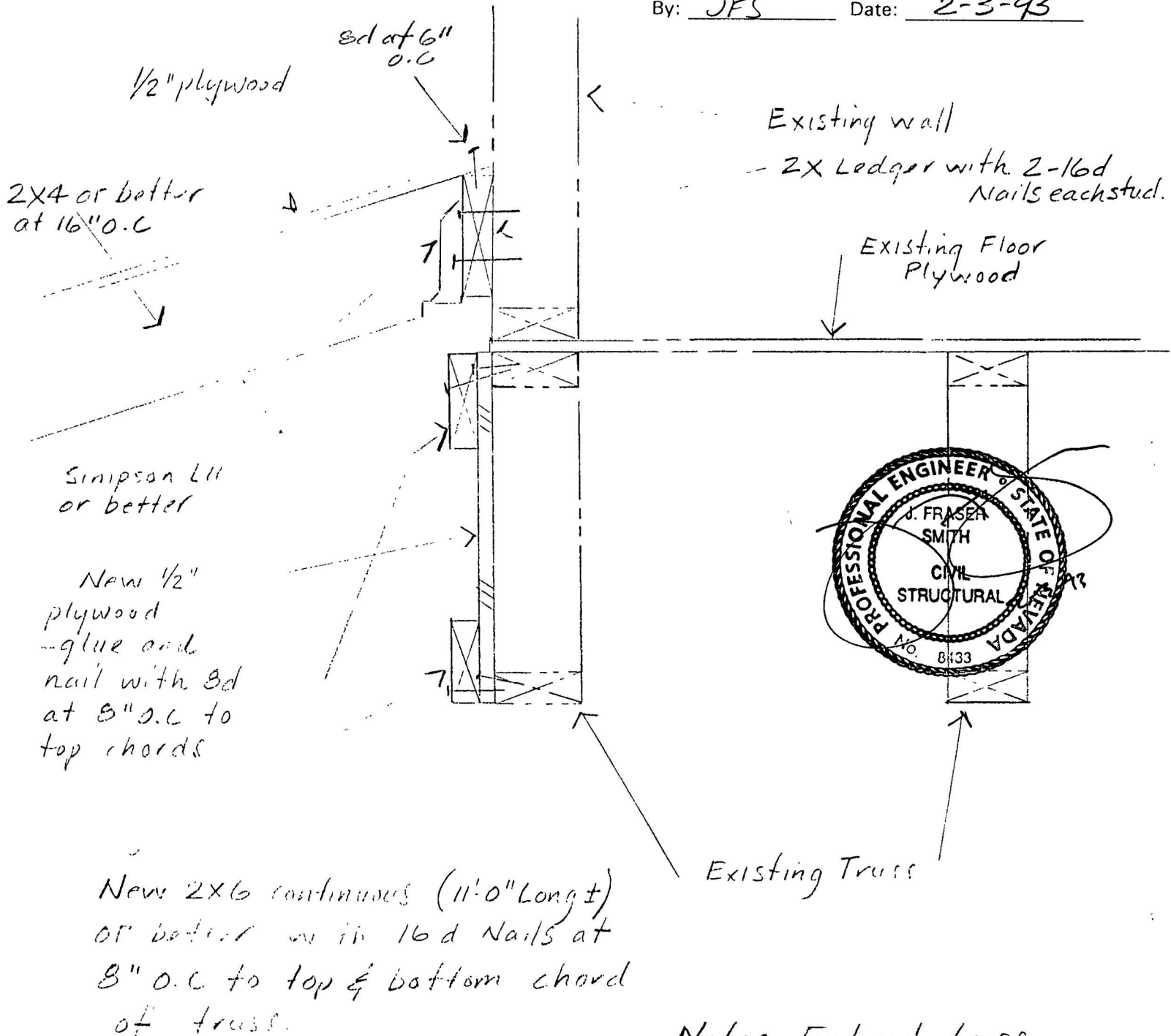
**Mendenhall Smith, Inc.**

Consulting Structural Engineers

Job Name: 2704 Dune Cove Rd.

Job No: \_\_\_\_\_ Sheet No: \_\_\_\_\_

By: JFS Date: 2-3-93



Note: Extend truss plywood & plates 1'-0" min past New bearing at bathroom wall - span about 10'-0" ±

Expansion South Wall

2704 Dune Cove Rd.