

<input type="checkbox"/> PERMIT NUMBER	92-155817	<input type="checkbox"/> INSPECTION NUMBER
--	-----------	--

JOB ADDRESS: 3200 Theresa

LOT NO.	BLOCK NO.	SUBDIVISION NAME
---------	-----------	------------------

FIRE DEPT MAP NO.	JOB PHONE	CALL-IN DATE	CALL-IN TIME	SCHEDULE DATE
-------------------	-----------	--------------	--------------	---------------

INSPECTOR NO. 44	INSPECTOR NAME THOM COLEY
---------------------	------------------------------

INSPECTION REQUESTED: 140 Final Build

certification  
original Permit # 6714/6859  
phone # 649-4591

1. SMOKE DETECTOR BEDROOMS
2. RELOCATE WINDOWS EXISTING RESIDENTS
3. WALL LIGHT & SWITCH BY EXIT DOOR
4. COMPLETE STUCCO OR SIDING (WOOD, VINYL OR METAL)
5. WITH THIS PERMIT YOU HAVE 6 MOS TO COMPLETE

<input type="checkbox"/> PARTIAL INSPECTION	<input type="checkbox"/> PARTIAL APPROVAL (P)	PARTIAL DESCRIPTION INFORMATION INSPE
---	---	--

<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 checked="" type="checkbox"/> REFEE (F)	REINSPECTION FEE REQUIRED - PAY AT CITY HALL 3RD FLOOR - 400 E. STEWART STREET.	

INSPECTOR SIGNATURE <i>Thom Coley #44</i>	INSPECTION DATE 8/6/92
--	---------------------------

<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

# CITY OF LAS VEGAS, NEVADA

PERMIT NO. 92-155817

DEPARTMENT OF BUILDING AND SAFETY  
PHONE 229-6251



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

PLAN CHECK NO. M292 '87 DATE 1/1/87 CONST. VAL. \$ 0

ADDRESS OF CONSTRUCTION 3200 Thruway OWNER Hinchcliff PHONE 649-4591

LOT(s) \_\_\_\_\_ BLOCK \_\_\_\_\_ SUBDIVISION \_\_\_\_\_ ZONE \_\_\_\_\_

PROPOSED CONSTRUCTION Certification Imp USE \_\_\_\_\_

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

FLOOR AREA BSMT \_\_\_\_\_ 1ST \_\_\_\_\_ 2ND \_\_\_\_\_ GARAGE \_\_\_\_\_ PORCH \_\_\_\_\_ TOTAL \_\_\_\_\_

CONTRACTOR Owner STATE LICENSE NO \_\_\_\_\_ CITY LICENSE NO \_\_\_\_\_

ARCHITECT \_\_\_\_\_ ENGINEER \_\_\_\_\_

MASTER PLUMBER/CONTRACTOR \_\_\_\_\_ MASTER 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.

SPECIAL CONDITIONS:  
*Certification only on  
Washroom, Room addn,  
Patio Cover*

BY J Virginia Hinchcliff  
I HEREBY DECLARE THAT I AM THE LEGAL OWNER OF THE ABOVE PROPERTY OWNER

BY \_\_\_\_\_ 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.

W/D  
LAND DEVELOPMENT AND FLOOD CONTROL ENGINEER DATE \_\_\_\_\_

P/A  
PLANNING DEPT DATE \_\_\_\_\_

Don Henry 8/10/92  
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	
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	

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
MISC	
2310 - 2432 TOTAL	08/10/92
2310 - 2431 PLAN REVIEW	
2310 - 2401 BLDG PERMIT	<u>30.00</u>
7143 - 2973 SEWER CONNECTION	
6122 - 3352 TORTOISE	
_____ - 2897 PIF	
88100-1232 TRANSPORT	
TOTAL FEES	

RECEIPT 05\*\*  
MUST BE MACHINE VALIDATED  
SPD 30.00  
CHK 30.00  
1209A000 09:23

PERMIT NO.