

## CITY OF LAS VEGAS, NEVADA

PERMIT NO. 92-136309

DEPARTMENT OF BUILDING AND SAFETY  
PHONE 386-6251

FOR INSPECTIONS, CALL 799-2071

## BUILDING PERMIT

FOR: Single Family Dwelling, Remodel  
Additions, Misc. Residential ConstructionLOG NO. & AREA M-3519 DATE 2-14-92 CONST. VAL. \$ADDRESS OF CONSTRUCTION 7300 RESTFUL SPRINGS DR OWNER KEITH B. SPAIN PHONE 254-6331LOT(s) 8 BLOCK 1 SUBDIVISION LOS PRADOS PHASE 2 UNIT 2 ZONE R-CLPROPOSED CONSTRUCTION Patio Cover - New Permit USE 91-106094THIS PERMIT FOR BLDG. ☐ A/C ☐ ELEC. ☐ PLBG. ☐ OTHER PERMITS REQD.: FENCE ☐ OFF SITE ☐ SWIM POOL ☐FLOOR AREA BSMT 0 1ST 0 2ND 0 GARAGE 0 PORCH 0 TOTAL 0CONTRACTOR Owner G. Spain 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.

BY: Keith B. Spain  
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.

## SPECIAL CONDITIONS:

Re-New Permit  
91-106094  
per 8-28-92

as per City Design  
not convertible

LAND DEVELOPMENT AND FLOOD CONTROL ENGINEER

DATE

Law. Comen 2/14/92  
PLANNING DEPT.

DATE

Don Hertz 2/14/92  
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                      | 6.50  |     |
| VENTILATION FAN                        | 2.35  |     |
| 2310 - 2435                            | TOTAL |     |

## ELECTRICAL

## FEE

|                                                   |       |
|---------------------------------------------------|-------|
| RECEPTACLE _____ SWITCH _____                     | .40   |
| EACH LIGHT FIXTURE OR SOCKET _____                | .30   |
| SPECIAL OUTLET, APPLIANCE ETC.                    | .70   |
| SERVICE/PANEL - SUB/3.00 - 200A/6.00 - 400A/12.50 |       |
| A.C. UNIT OR MOTORS                               | 3.00  |
| 2310 - 2432                                       | TOTAL |
| MISC.                                             |       |

02/14/92

2310 - 2431 PLAN REVIEW

2310 - 2401 BLDG. PERMIT

7143 - 2973 SEWER CONNECTION

6122 - 3352 TORTOISE

- 2897 P.I.F.

88100-1232 TRANSPORT

TOTAL FEES

38.00 ÷ 2  
19.00

RECEIPT  
MUST BE MACHINE VALIDATED  
SFD 19.00  
CHK 19.00  
0212A000 09:21

PERMIT NO.

Permit Expires 180 Days After Abandonment of Work

## 57

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

Permit Expires 180 Days After Abandonment of Work

# DEPARTMENT OF BUILDING & SAFETY CITY OF LAS VEGAS



PERMIT  
NUMBER

92-136309

INSPECTION  
NUMBER

7

JOB ADDRESS

7300 RESTFUL SPRINGS CT

LOT NO.

8

BLOCK NO.

1

SUBDIVISION NAME

LOS PRADOS 2-2

FIRE DEPT. MAP NO.

2318-54

JOB PHONE

254-6331

CALL-IN DATE

02/20/92

CALL-IN TIME

13:44

SCHEDULE DATE

02/21/92

INSPECTOR NO.

57

INSPECTOR NAME

JESSE SCHELL

INSPECTION  
REQUESTED

DRYWALL NAILING (125)

254-6331

<Patio Cover>

permit renewed - show no  
Frame insp - only Footings

① 107 Inspected ROOF

NAILING - O.K.

② Footings Required at Posts  
next to house

☒ PARTIAL  
INSPECTION

☒ PARTIAL  
APPROVAL (P)

PARTIAL DESCRIPTION

ABOVE

☐ 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  
REQUIRED

INSPECTOR  
SIGNATURE

*J. Schell*

INSPECTION DATE

2-21-92

☐ 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

229-6749

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

# DEPARTMENT OF BUILDING & SAFETY CITY OF LAS VEGAS

|                             |                       |                          |                     |
|-----------------------------|-----------------------|--------------------------|---------------------|
| <b>PERMIT NUMBER</b>        | 92-136309             | <b>INSPECTION NUMBER</b> | 13                  |
| <b>JOB ADDRESS</b>          |                       |                          |                     |
| 7300 RESTFUL SPRINGS CT     |                       |                          |                     |
| <b>LOT NO.</b>              | <b>BLOCK NO.</b>      | <b>SUBDIVISION NAME</b>  |                     |
| 8                           | 1                     | LOS PRADOS 2-2           |                     |
| <b>FIRE DEPT. MAP NO.</b>   | <b>JOB PHONE</b>      | <b>CALL-IN DATE</b>      | <b>CALL-IN TIME</b> |
| 231-8-54                    | 254-6331              | 02/24/92                 | 15:42               |
| <b>INSPECTOR NO.</b>        | <b>INSPECTOR NAME</b> |                          |                     |
| AT 57                       | JESSE SCHELL          |                          |                     |
| <b>INSPECTION REQUESTED</b> |                       |                          |                     |
| FRAMING (120)               |                       |                          |                     |

Lag ledger to house prior to final

|                                                                                                                                 |                                                                                                                                     |                                       |                                                          |
|---------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------|----------------------------------------------------------|
| <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"/> REFEE (F)                                                                                                  | <input type="checkbox"/> HOLD (H)     |                                                          |
| REINSPECTION REQUIRED - CALL *229-2071                                                                                          |                                                                                                                                     | PERMIT REQUIRED                       |                                                          |
| REINSPECTION FEE REQUIRED - PAY AT CITY HALL 3RD FLOOR - 400 E. STEWART STREET.                                                 |                                                                                                                                     |                                       |                                                          |
| <b>INSPECTOR SIGNATURE</b>                                                                                                      |                                                                                                                                     | <b>INSPECTION DATE</b>                |                                                          |
| H. Stewart                                                                                                                      |                                                                                                                                     | 2-25-92                               |                                                          |
| <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 |                                                                                                                                     |                                       | 229-6769                                                 |

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

# DEPARTMENT OF BUILDING & SAFETY      CITY OF LAS VEGAS

|                                                                                                                                    |                      |                                                                                                                                     |  |                                       |                     |
|------------------------------------------------------------------------------------------------------------------------------------|----------------------|-------------------------------------------------------------------------------------------------------------------------------------|--|---------------------------------------|---------------------|
| <input type="checkbox"/>                                                                                                           | <b>PERMIT NUMBER</b> | 106094                                                                                                                              |  | <b>INSPECTION NUMBER</b>              |                     |
| <b>JOB ADDRESS</b> 7300 Rustful Springs                                                                                            |                      |                                                                                                                                     |  |                                       |                     |
| <b>LOT NO.</b>                                                                                                                     |                      | <b>BLOCK NO.</b>                                                                                                                    |  | <b>SUBDIVISION NAME</b>               |                     |
| <b>FIRE DEPT. MAP NO.</b>                                                                                                          |                      | <b>JOB PHONE</b>                                                                                                                    |  | <b>CALL-IN DATE</b>                   | <b>CALL-IN TIME</b> |
| Keith                                                                                                                              |                      | 2546331                                                                                                                             |  | 5-23-91                               | 10 9 09a            |
| <b>INSPECTOR NO.</b>                                                                                                               |                      | <b>INSPECTOR NAME</b>                                                                                                               |  |                                       |                     |
| 57.                                                                                                                                |                      |                                                                                                                                     |  |                                       |                     |
| <b>INSPECTION REQUESTED</b>                                                                                                        |                      | Patch foundation.<br>SLAB+ FOOTINGS                                                                                                 |  |                                       |                     |
|                                                                                                                                    |                      |                                                                                                                                     |  |                                       |                     |
| <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 *799-2071                                                                                              |  |                                       |                     |
| <input type="checkbox"/> REFEE (F)                                                                                                 |                      | REINSPECTION FEE REQUIRED - PAY AT CITY HALL 3RD FLOOR - 409 E. STEWART STREET.                                                     |  |                                       |                     |
| <input type="checkbox"/> PERMIT REQUIRED                                                                                           |                      |                                                                                                                                     |  |                                       |                     |
| <b>INSPECTOR SIGNATURE</b>                                                                                                         |                      |                                                                                                                                     |  | <b>INSPECTION DATE</b>                |                     |
| JL Stewart                                                                                                                         |                      |                                                                                                                                     |  | 5-24-91                               |                     |
| <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<br>CALL THE INSPECTOR FROM 7:00 A.M. - 7:15 A.M. OR 2:45 P.M. - 3:00 P.M. AT |                      |                                                                                                                                     |  |                                       |                     |

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

\* EFFECTIVE JULY 1, 1991  
PHONE PREFIX WILL BE 229.