

DEPARTMENT OF BUILDING AND SAFETY  
PHONE 229-6251

FOR INSPECTIONS, CALL 229-2071

DEVELOPMENT PERMIT

FOR: Commercial and Public Structures

PLAN CHECK NO.

DATE

CONST. VAL. \$

ADDRESS OF  
CONSTRUCTION

OWNER

PHONE

CONTRACTOR

STATE  
LICENSE NO.CITY  
LICENSE NO.

LOT(S) BLOCK

SUBDIVISION

ZONE

PROPOSED CONSTRUCTION:

USE:

ADD'L. PERMITS REQ'D.:

Air Cond. ☐Elec. ☐Plumbing ☐Signs ☐Paving ☐Fence ☐Fire S.S. ☐Off-Site P. ☐

OCCUPANCY GROUP

CONSTRUCTION TYPE

MATERIALS OF CONSTRUCTION:

Wood Frame ☐Concrete Block ☐Reinforced Concrete ☐Steel Frame ☐

SQUARE FEET OF FLOOR AREAS:

1st

2nd

3rd

Other

TOTAL SQ. FT.

ARCHITECT:

ENGINEER:

NO. of UNITS

NO. of STORIES

## 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 each.
3. Inspections during normal business hours for which no fee is specifically indicated = \$30.00 per hour (minimum charge one half hour).
4. Additional plan review required by changes, additions or revisions to approved plans = \$30.00 per hour (minimum charge two hours).

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## 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.

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.

## SPECIAL CONDITIONS:

James A. McHellar

SIGNED

CONTRACTOR

7114-3654 SEWER CONNECTION

Kenneth T. Yeoman

BY

AGENT/OWNER

USE CODE

LICENSE DEPT.

DATE

PLANNING DEPT.

DATE

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

LAND DEVELOPMENT AND FLOOD CONTROL ENGINEER

DATE

FIRE DEPARTMENT

DATE

BUILDING DEPT.

DATE

FIXTURES

X

12/15/92

FEE

2310-2431 PLAN REVIEW

2310-2401 BUILDING PERMIT

88100-1207 TRANSPORT

6122-3352 TORTOISE

88100-1211 WATER

TOTAL FEES

## RECEIPT

MUST BE MACHINE VALIDATED

CASH 25.00  
CHECK 25.00  
0851A000 15:19

PERMIT NO.

Permit Expires 180 Days After Abandonment of Work

CITY OF LAS VEGAS, NEVADA

PERMIT NO 92-170336

DEPARTMENT OF BUILDING AND SAFETY  
PHONE 229-6251



DEVELOPMENT PERMIT  
FOR: Commercial and Public Structures

PLAN CHECK NO. L-2038 DATE 12/15/92 CONST. VAL. \$ 1100.00

ADDRESS OF CONSTRUCTION 3121 SIENA CI OWNER McKellar Dev PHONE 795-8700

CONTRACTOR McKellar Dev. STATE LICENSE NO. 0027100 CITY LICENSE NO. 032606

LOT(s) \_\_\_\_\_ BLOCK \_\_\_\_\_ SUBDIVISION VILLA FINESTRA U-2A ZONE R-PDS

PROPOSED CONSTRUCTION: Temp. CONST TRAILER USE: \_\_\_\_\_

ADD'L. PERMITS REQ'D.: Air Cond. ☐ Elec. ☐ Plumbing ☐ Signs ☐ Paving ☐ Fence ☐ Fire S.S. ☐ Off-Site P. ☐

OCCUPANCY GROUP \_\_\_\_\_ CONSTRUCTION TYPE \_\_\_\_\_

MATERIALS OF CONSTRUCTION: Wood Frame ☐ Concrete Block ☐ Reinforced Concrete ☐ Steel Frame ☐

SQUARE FEET OF FLOOR AREAS: 1st \_\_\_\_\_ 2nd \_\_\_\_\_ 3rd \_\_\_\_\_ Other \_\_\_\_\_ TOTAL SQ. FT. \_\_\_\_\_

ARCHITECT: \_\_\_\_\_ ENGINEER: \_\_\_\_\_ NO. of UNITS \_\_\_\_\_ NO. of STORIES \_\_\_\_\_

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SPECIAL CONDITIONS:

James A. McKellar  
SIGNED \_\_\_\_\_ CONTRACTOR  
Kenneth H. Yeoman  
BY \_\_\_\_\_ AGENT/OWNER

7114-3654 SEWER CONNECTION \_\_\_\_\_

LICENSE DEPT. \_\_\_\_\_ DATE \_\_\_\_\_  
PLANNING DEPT. \_\_\_\_\_ DATE \_\_\_\_\_

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

LAND DEVELOPMENT AND FLOOD CONTROL ENGINEER \_\_\_\_\_ DATE \_\_\_\_\_  
FIRE DEPARTMENT \_\_\_\_\_  
BUILDING DEPT. 12/15/92 DATE \_\_\_\_\_

USE CODE \_\_\_\_\_

FIXTURES \_\_\_\_\_ X \_\_\_\_\_ 12/15/92

FEE \_\_\_\_\_

2310-2431 PLAN REVIEW 25.00

2310-2401 BUILDING PERMIT 25.00

88100-1207 TRANSPORT \_\_\_\_\_

6122-3352 TORTOISE \_\_\_\_\_

88100-1211 WATER 25.00

TOTAL FEES 25.00

RECEIPT  
MUST BE MACHINE VALIDATED  
COMM 25.00  
CHK 25.00  
8851A000 15:19

PERMIT NO.

Permit Expires 180 Days After Abandonment of Work

|                                                   |                                     |                                         |                       |
|---------------------------------------------------|-------------------------------------|-----------------------------------------|-----------------------|
| <input checked="" type="checkbox"/> PERMIT NUMBER | 92-170336                           | INSPECTION NUMBER                       | 64                    |
| JOB ADDRESS: 3121 SIENA CI                        |                                     |                                         |                       |
| LOT NO.                                           | BLOCK NO.                           | SUBDIVISION NAME<br>VILLA FINESTRA U-2A |                       |
| FIRE DEPT. MAP NO.<br>2117-16                     | JOB PHONE<br>363-5474               | CALL-IN DATE<br>12/16/92                | CALL-IN TIME<br>14:28 |
| SCHEDULE DATE<br>12/17/92                         |                                     |                                         |                       |
| INSPECTOR NO.<br>5865                             | INSPECTOR NAME<br>BOB GATES BRUNSON |                                         |                       |
| INSPECTION REQUESTED                              | TEMP ELEC/POLE/CONST POWER (239)    |                                         |                       |

MEKELLAR HOMES, TRAILER

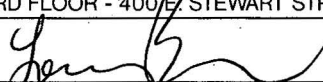
OK

ISSUED

E

TAG # 48444

|                                                                                                                                 |                                                                                                                                     |                                       |                                                         |
|---------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------|---------------------------------------------------------|
| <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                                                                                                             | 12-17-92                                                                                                                            |                                       | INSPECTION DATE                                         |
| <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                                                |

|                                                                                                                                                                                                                                                                                                                         |                      |                                                                                                                                     |  |                                          |                                                         |
|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------|-------------------------------------------------------------------------------------------------------------------------------------|--|------------------------------------------|---------------------------------------------------------|
| <input checked="" type="checkbox"/>                                                                                                                                                                                                                                                                                     | <b>PERMIT NUMBER</b> | 92-170336                                                                                                                           |  | <b>INSPECTION NUMBER</b>                 | 64                                                      |
| <b>JOB ADDRESS</b>                                                                                                                                                                                                                                                                                                      |                      |                                                                                                                                     |  |                                          |                                                         |
| 3121 SIENA CI                                                                                                                                                                                                                                                                                                           |                      |                                                                                                                                     |  |                                          |                                                         |
| <b>LOT NO.</b>                                                                                                                                                                                                                                                                                                          |                      | <b>BLOCK NO.</b>                                                                                                                    |  | <b>SUBDIVISION NAME</b>                  |                                                         |
|                                                                                                                                                                                                                                                                                                                         |                      |                                                                                                                                     |  | VILLA FINESTRA U-2A                      |                                                         |
| <b>FIRE DEPT. MAP NO.</b>                                                                                                                                                                                                                                                                                               |                      | <b>JOB PHONE</b>                                                                                                                    |  | <b>CALL-IN DATE</b>                      | <b>CALL-IN TIME</b>                                     |
| 2117-16                                                                                                                                                                                                                                                                                                                 |                      | 363-5474                                                                                                                            |  | 12/16/92                                 | 14:28                                                   |
| <b>SCHEDULE DATE</b>                                                                                                                                                                                                                                                                                                    |                      |                                                                                                                                     |  |                                          |                                                         |
|                                                                                                                                                                                                                                                                                                                         |                      | 12/17/92                                                                                                                            |  |                                          |                                                         |
| <b>INSPECTOR NO.</b>                                                                                                                                                                                                                                                                                                    |                      | <b>INSPECTOR NAME</b>                                                                                                               |  |                                          |                                                         |
| 5965                                                                                                                                                                                                                                                                                                                    |                      | BOB GATES BRUNSON                                                                                                                   |  |                                          |                                                         |
| <b>INSPECTION REQUESTED</b>                                                                                                                                                                                                                                                                                             |                      | <b>TEMP ELEC/POLE/CONST POWER (239)</b>                                                                                             |  |                                          |                                                         |
| <p style="font-size: 1.2em;">— MEKOLAR HOMES, TRAILER</p> <p style="font-size: 1.2em;">— OK</p><br><br><br><br><br><br><br><br><br><br><p style="font-size: 1.2em;">— ISSUED <span style="border: 1px solid black; padding: 5px; font-size: 1.5em; display: inline-block; text-align: center;">E</span> TAG # 48444</p> |                      |                                                                                                                                     |  |                                          |                                                         |
| <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"/> 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.                                                     |  | <input type="checkbox"/> PERMIT REQUIRED |                                                         |
| <b>INSPECTOR SIGNATURE</b>                                                                                                                                                                                                                                                                                              |                      |                                                  |  | <b>INSPECTION DATE</b>                   |                                                         |
|                                                                                                                                                                                                                                                                                                                         |                      |                                                                                                                                     |  | 12-17-92                                 |                                                         |
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