

## CITY OF LAS VEGAS, NEVADA

PERMIT NO

90-161336

DEPARTMENT OF BUILDING AND SAFETY  
PHONE 386-6251

FOR



54769

ELECTRICAL PERMIT

LOG NO &amp; AREA

DATE

CONST VAL \$

ADDRESS OF  
CONSTRUCTION 1798 Town Center Drive

OWNER Howard Hughes Properties (Town Ctr Dr )

CONTRACTOR Acme Electric

STATE  
LICENSE NO

2307 C&amp;D

CITY  
LICENSE NO

1048

Loy G O'Brien

405

PHONE 876-1116

(PRINT NAME OF MASTER ELECTRICIAN)

MASTER CARD NO

PROPOSED CONSTRUCTION Installation of service meter for irrigation

USE

ELECTRIC  
PERMIT NOApproval 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

| UNITS                                                                                                                   | DESCRIPTION                                                                                                                                                                                                                                          | FEE   | TOTAL |
|-------------------------------------------------------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------|-------|
| <b>PERMIT ISSUANCE</b>                                                                                                  |                                                                                                                                                                                                                                                      |       |       |
| 1                                                                                                                       | For Issuing Each Permit                                                                                                                                                                                                                              | 10 00 | 10 00 |
|                                                                                                                         | Supplemental Fee                                                                                                                                                                                                                                     | 4 50  |       |
| <b>APPLIANCE CHARGE</b>                                                                                                 |                                                                                                                                                                                                                                                      |       |       |
| <b>Residential or General Commercial</b>                                                                                |                                                                                                                                                                                                                                                      |       |       |
|                                                                                                                         | Receptacle _____ Switch _____                                                                                                                                                                                                                        | 40    |       |
|                                                                                                                         | Each Light Fixture Socket or Exit Light<br>Smoke Detector or Exhaust Fan                                                                                                                                                                             | 30    |       |
|                                                                                                                         | EACH OUTLET FOR SPECIAL PURPOSE<br>Dishwasher Garbage Grinder Trash Compactor<br>GFI Clothes Washer Dryer Electric Range<br>Ovens Water Heater Space Heater Blast Coil<br>Heater (PER KW) Mercury Lamp Quartz Lamp<br>Sodium Lamp 20AMP Sign Circuit | 70    |       |
|                                                                                                                         | X Ray Unit                                                                                                                                                                                                                                           | 10 00 |       |
|                                                                                                                         | Area Lighting (First 3 000 Watts)                                                                                                                                                                                                                    | 8 00  |       |
|                                                                                                                         | Each Additional 1 000 Watts                                                                                                                                                                                                                          | 3 00  |       |
| <b>MOTORS (1 H P AND OVER) TRANSFORMERS ELEVATORS WELDERS<br/>GENERATORS CHILLERS SIGNS AND A/C UNITS (OVER 5 TONS)</b> |                                                                                                                                                                                                                                                      |       |       |
|                                                                                                                         | First H P or Ton For each Unit                                                                                                                                                                                                                       | 3 00  |       |
|                                                                                                                         | First KVA For Each Unit                                                                                                                                                                                                                              | 3 00  |       |
|                                                                                                                         | Each Additional H P Ton or KVA up to 50                                                                                                                                                                                                              | 50    |       |
|                                                                                                                         | Each Additional H P Ton or KVA over 50                                                                                                                                                                                                               | 35    |       |
|                                                                                                                         | Temporary power or Pole                                                                                                                                                                                                                              | 6 00  |       |
| <b>ELECTRIC SERVICE OR MAIN DISCONNECT</b>                                                                              |                                                                                                                                                                                                                                                      |       |       |
| 1                                                                                                                       | Up to 200 AMP                                                                                                                                                                                                                                        | 6 00  | 6.00  |
|                                                                                                                         | 400 AMP And 600 AMP                                                                                                                                                                                                                                  | 12 50 |       |
|                                                                                                                         | Over 600 AMP To 1200 AMP                                                                                                                                                                                                                             | 25 00 |       |
|                                                                                                                         | Over 1200 AMP                                                                                                                                                                                                                                        | 50 00 |       |
|                                                                                                                         | Each Additional Meter Socket                                                                                                                                                                                                                         | 50    |       |
|                                                                                                                         | Sub Panel Motor Control Center<br>Disconnect Switch Transfer Switch (Each)                                                                                                                                                                           | 3 00  |       |
|                                                                                                                         | Swimming Pool (Residential)                                                                                                                                                                                                                          | 20 00 |       |
|                                                                                                                         | Swimming Pool (Semi Public)                                                                                                                                                                                                                          | 30 00 |       |
|                                                                                                                         | Spas                                                                                                                                                                                                                                                 | 8 00  |       |
|                                                                                                                         | Recreational Vehicle Spaces (Each)                                                                                                                                                                                                                   | 3 00  |       |

| UNITS                                                                        | DESCRIPTION                                                                                                                                                                        | FEE               | TOTAL |
|------------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------|-------|
|                                                                              | Busways Trolley or Plug in (Ea 100 Ft )                                                                                                                                            | 3 00              |       |
|                                                                              | Gas Pumps Dispensers (Each)                                                                                                                                                        | 3 00              |       |
|                                                                              | Permanent A/C Unit (5 Tons or Less)                                                                                                                                                | 3 00              |       |
|                                                                              | Each Air Handler                                                                                                                                                                   | 1 00              |       |
| <b>RESIDENTIAL LOW VOLTAGE INSTALLATIONS</b>                                 |                                                                                                                                                                                    |                   |       |
|                                                                              | Speaker Outlets (Each)                                                                                                                                                             | 30                |       |
|                                                                              | Signal or Alarm Outlets (Each)                                                                                                                                                     | 30                |       |
|                                                                              | Amplifiers                                                                                                                                                                         | 2 00              |       |
|                                                                              | Control Panel                                                                                                                                                                      | 50                |       |
|                                                                              | TV Master System                                                                                                                                                                   | 30                |       |
|                                                                              | Telephone or Computer Outlet                                                                                                                                                       | 30                |       |
| <b>OTHER INSPECTIONS AND FEES<br/>INCLUDES ISSUANCE FEES WHEN APPLICABLE</b> |                                                                                                                                                                                    |                   |       |
|                                                                              | Inspections outside of normal business hours<br>(minimum charge — three hours)                                                                                                     | 30 00<br>per hour |       |
|                                                                              | Reinspection fee assessed under provisions of TABLE<br>3 A of the Uniform Building Code = \$30 00 EACH                                                                             | 30 00<br>each     |       |
|                                                                              | Inspections for which no fee is specifically<br>indicated (minimum charge — one half hour)                                                                                         | 30 00<br>per hour |       |
|                                                                              | Additional plan review required by changes additions<br>or revisions to approved plans (minimum charge —<br>one half hour) After work hours — \$30 00 per hour<br>— minimum 1 hour | 30 00<br>per hour |       |
|                                                                              | Starter Permit                                                                                                                                                                     | 50 00             |       |
| <b>CONTRACT PRICE OR COST OF INSTALLATION</b>                                |                                                                                                                                                                                    |                   |       |
|                                                                              | Commercial —Burglar Alarms                                                                                                                                                         |                   |       |
|                                                                              | —Music Systems                                                                                                                                                                     |                   |       |
|                                                                              | —Data Processing                                                                                                                                                                   |                   |       |
|                                                                              | —Communication                                                                                                                                                                     |                   |       |
|                                                                              | Conduit Only—Contract Price                                                                                                                                                        |                   |       |
|                                                                              | All Misc Electric                                                                                                                                                                  |                   |       |

Electrical permit fees may be computed  
the same as building permit fees by  
using the cost of installation for valuation  
amount when such work is not included  
in the above schedule

# 2310-2432

RECEIPT

I hereby certify that I have carefully examined and read the above application that the  
same is true and correct and that the work herein described is to be done in accordance  
with all the provisions of the applicable Ordinances of the City of Las Vegas Nevada and  
the State Laws whether herein specified or not

SIGNED HOMEOWNER CONTRACTOR

Robert E. Griffith

PERMIT FEE 16 00

LESS  
STARTER PERMITTOTAL  
FEESPERMIT NO  
MUST BE MACHINE VALIDATED

BUILDING DEPT

DATE

Permit Expires 180 Days After Abandonment of Work

**DEPARTMENT OF BUILDING & SAFETY    CITY OF LAS VEGAS**

[illegible]

☐ PARTIAL INSPECTION DESCRIPTION

**APPROVED**

☐ **PERMIT REQUIRED**

☐ STOP WORK

☐ **REJECTED CORRECTION NOTICE REINSPECTION REQUIRED CALL 799 2071**

| INSPECT                       | DESCRIPTION                                                                                             | INSPECT                      | DESCRIPTION                 | INSPECT                                 | DESCRIPTION            |
|-------------------------------|---------------------------------------------------------------------------------------------------------|------------------------------|-----------------------------|-----------------------------------------|------------------------|
| <input type="checkbox"/> B 1  | FOOTING LAYOUT REBAR ZONING                                                                             | <input type="checkbox"/> P 1 | ON SITE SEWER               | <input type="checkbox"/> X 2            | UNDERGROUND HYDRO      |
| <input type="checkbox"/> B 2  | STEM WALL – FORMS & REBAR                                                                               | <input type="checkbox"/> P 2 | ON SITE WATER               | <input type="checkbox"/> X 3            | UNDERGROUND FINAL/FLOW |
| <input type="checkbox"/> B 3  | PRE SLAB                                                                                                | <input type="checkbox"/> P 3 | BUILDING SEWER (YARD LINES) | <input type="checkbox"/> X 4            | SPRINKLER SYSTEM HYDRO |
| <input type="checkbox"/> B 4  | ROOF SHEATHING                                                                                          | <input type="checkbox"/> P 4 | UNDERSLAB PLUMBING          | <input type="checkbox"/> X 5            | FIRE ALARM             |
| <input type="checkbox"/> B 5  | FRAMING                                                                                                 | <input type="checkbox"/> P 5 | TOP OUT WATER GAS WASTE     | <input type="checkbox"/> X 6            | OTHER                  |
| <input type="checkbox"/> B 6  | INSULATION                                                                                              | <input type="checkbox"/> P 6 | FINAL GAS TEST              | <input type="checkbox"/> X 7            | FINAL FIRE             |
| <input type="checkbox"/> B 7  | DRYWALL NAILING                                                                                         | <input type="checkbox"/> P 7 | FINAL PLUMBING              |                                         |                        |
| <input type="checkbox"/> B 8  | EXTERIOR LATH/STUCCO                                                                                    |                              |                             | <input type="checkbox"/> E 1            | UNDERGROUND ELETTRICAL |
| <input type="checkbox"/> B 9  | WALL GROUT & STEEL                                                                                      | <input type="checkbox"/> M 1 | ROUGH VENT                  | <input type="checkbox"/> E 2            | ROUGH ELECTRICAL       |
| <input type="checkbox"/> B 10 |  PRE GUNITE          | <input type="checkbox"/> M 2 | HOOD                        | <input type="checkbox"/> E 3            | LOW VOLTAGE ELECTRICAL |
| <input type="checkbox"/> B 11 |  PRE PLASTER / FINAL | <input type="checkbox"/> M 3 | FINAL MECHANICAL            | <input type="checkbox"/> E 4            | SIGN INSPECTION        |
| <input type="checkbox"/> B 12 | BUILDING FINAL                                                                                          |                              |                             | <input checked="" type="checkbox"/> E 5 | FINAL ELECTRICAL       |
| <input type="checkbox"/> B 13 | CERT OF OCC                                                                                             | <input type="checkbox"/> X 1 | KICKER / FLUSH              | <input type="checkbox"/> E 6            | TEMP POWER             |

☐ **FINAL INSPECTION**

BRING HARD CARD WITH FIRE QUALITY CONTROL & PLANNING APPROVALS  
SIGNED OFF TO BLDG & SAFETY FOR C of O ISSUANCE (Commercial Only)

**FOR ASSISTANCE CALL 386-8251**

# DEPARTMENT OF BUILDING & SAFETY CITY OF LAS VEGAS

|                                    |                           |                         |                                |  |
|------------------------------------|---------------------------|-------------------------|--------------------------------|--|
| JOB ADDRESS<br><b>1798 Town Cn</b> |                           |                         | PERMIT NO                      |  |
| LOT NO                             | MAP NO<br><b>6-12 18p</b> | INSPECTOR<br><b>873</b> | DATE<br><b>5-2</b>             |  |
| SUBDIVISION NAME                   |                           |                         | PHONE                          |  |
| INSPECTOR SIGNATURE<br>            |                           |                         | INSPECTION DATE<br><b>5390</b> |  |

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☐ APPROVED

☐ PERMIT REQUIRED

☐ STOP WORK

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| INSPECT                       | DESCRIPTION                     | INSPECT                      | DESCRIPTION                 | INSPECT                                 | DESCRIPTION                            |
|-------------------------------|---------------------------------|------------------------------|-----------------------------|-----------------------------------------|----------------------------------------|
| <input type="checkbox"/> B 1  | FOOTING LAYOUT REBAR ZONING     | <input type="checkbox"/> P 1 | ON SITE SEWER               | <input type="checkbox"/> X 2            | UNDERGROUND HYDRO                      |
| <input type="checkbox"/> B 2  | STEM WALL -- FORMS & REBAR      | <input type="checkbox"/> P 2 | ON SITE WATER               | <input type="checkbox"/> X 3            | UNDERGROUND FINAL/FLOW                 |
| <input type="checkbox"/> B 3  | PRE SLAB                        | <input type="checkbox"/> P 3 | BUILDING SEWER (YARD LINES) | <input type="checkbox"/> X 4            | SPRINKLER SYSTEM HYDRO                 |
| <input type="checkbox"/> B 4  | ROOF SHEATHING                  | <input type="checkbox"/> P 4 | UNDERSLAB PLUMBING          | <input type="checkbox"/> X 5            | FIRE ALARM                             |
| <input type="checkbox"/> B 5  | FRAMING                         | <input type="checkbox"/> P 5 | TOP OUT WATER GAS WASTE     | <input type="checkbox"/> X-6            | OTHER                                  |
| <input type="checkbox"/> B 6  | INSULATION                      | <input type="checkbox"/> P 6 | FINAL GAS TEST              | <input type="checkbox"/> X 7            | FINAL FIRE                             |
| <input type="checkbox"/> B 7  | DRYWALL NAILING                 | <input type="checkbox"/> P 7 | FINAL PLUMBING              | <input checked="" type="checkbox"/> E 1 | <i>elect.</i><br>UNDERGROUND ELETRICAL |
| <input type="checkbox"/> B 8  | EXTERIOR LATH/STUCCO            |                              |                             | <input type="checkbox"/> E 2            | ROUGH ELECTRICAL                       |
| <input type="checkbox"/> B 9  | WALL GROUT & STEEL              | <input type="checkbox"/> M 1 | ROUGH VENT                  | <input type="checkbox"/> E 3            | LOW VOLTAGE ELECTRICAL                 |
| <input type="checkbox"/> B 10 | <b>POOL</b> PRE GUNITE          | <input type="checkbox"/> M 2 | HOOD                        | <input type="checkbox"/> E 4            | SIGN INSPECTION                        |
| <input type="checkbox"/> B 11 | <b>POOL</b> PRE PLASTER / FINAL | <input type="checkbox"/> M 3 | FINAL MECHANICAL            | <input type="checkbox"/> E 5            | FINAL ELECTRICAL                       |
| <input type="checkbox"/> B 12 | BUILDING FINAL                  |                              |                             | <input type="checkbox"/> E 6            | TEMP POWER                             |
| <input type="checkbox"/> B 13 | CERT OF OCC                     | <input type="checkbox"/> X 1 | KICKER / FLUSH              |                                         |                                        |

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