

## CITY OF LAS VEGAS, NEVADA

DEPARTMENT OF BUILDING AND SAFETY  
PHONE 386-6251

PERMIT NO. 91-128051

## BUILDING PERMIT

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

LOG NO. &amp; AREA P-178

ADDRESS OF CONSTRUCTION 1349 Torington Drive OWNER Lewis Homes of Nevada PHONE 736-8960

LOT(s) 1066 BLOCK S SUBDIVISION Rainbow Vista-Festival ZONE R-CL

PROPOSED CONSTRUCTION Single Family Residence USE Dwelling

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

FLOOR AREA BSMT 1ST 1194 2ND — GARAGE 407 PORCH 29 TOTAL 1630

CONTRACTOR Lewis Homes of Nevada STATE LICENSE NO. 14761 CITY LICENSE NO. 8707

ARCHITECT Lewis Homes of Nevada ENGINEER G.C. Wallace

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:

PLAN #6-933-M2

SEE PLOT PLAN

BY: I HEREBY DECLARE THAT I AM THE LEGAL OWNER OF THE ABOVE PROPERTY OWNER

BY: Sandy Norskog-Project Coordinator 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.

LAND DEVELOPMENT AND FLOOD CONTROL ENGINEER DATE 11/21/91

PLANNING DEPT. DATE 11/20/91

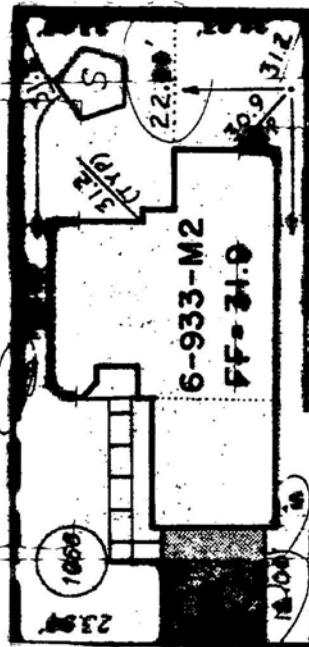
BUILDING DEPT. DATE 11-11-91

| PLUMBING                               |       | FEE | ELECTRICAL                                        |      | FEE    |
|----------------------------------------|-------|-----|---------------------------------------------------|------|--------|
| WATER DISTRIBUTION                     | 6.00  |     | RECEPTACLE _____ SWITCH _____                     |      | .40    |
| SEWER SYSTEM - NEW OR MODIFICATION     | 10.00 |     | EACH LIGHT FIXTURE OR SOCKET _____                |      | .30    |
| FIXTURES - WATER SOFTENER, H.W. HEATER | 2.00  |     | SPECIAL OUTLET, APPLIANCE ETC.                    |      | .70    |
| GARBAGE DISPOSAL - WASHER              | 2.00  |     | SERVICE/PANEL - SUB/3.00 - 200A/6.00 - 400A/12.50 |      |        |
| FUEL PIPING                            | 6.00  |     | A.C. UNIT OR MOTORS                               | 3.00 |        |
| IRRIGATION SYSTEM                      | 8.00  |     | 2310 - 2432 TOTAL                                 |      |        |
| MISC.                                  |       |     | MISC.                                             |      |        |
| 2310 - 2433 TOTAL                      |       |     | 2310 - 2431 ISSUANCE FEE                          |      | 625.00 |
| AIR CONDITIONING                       |       | FEE | 7143 - 2973 SEWER CONNECTION                      |      | 10.00  |
| NEW UNIT - 3 TON = 9.00 OVER = 16.50   |       |     | 2310 - 2431 PLAN REVIEW FEE                       |      | 263.00 |
| FURNACE TO 100,000/9.00 OVER/11.00     |       |     | 2310 - 2431 BLDG. PERMIT FEE                      |      | 898.00 |
| VAPORATIVE COOLER                      | 6.50  |     | TOTAL FEES                                        |      |        |
| VENTILATION FAN                        | 2.35  |     |                                                   |      |        |
| 2310 - 2435 TOTAL                      |       |     |                                                   |      |        |

## RECEIPT

PERMIT NO. \_\_\_\_\_  
MUST BE MACHINE VALIDATED

Permit Expires 180 Days After Abandonment of Work



APPROVED

By [Signature] 11/6/41  
COMMUNITY PLANNING & DEVELOPMENT

**PLOT PLAN**

**LEWIS HOMES OF NEVADA**

**SUBDIVISION** Rainbow Vista No. 13 **PHASE:** \_\_\_\_\_

**Lot:** 1066/S **Address:** 1349 Torrington Drive  
Refer to plot plan for model number.

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POST TENSION OF NEVADA, INC  
630 Middlegate Road Henderson, Nevada 89015  
Tel: (702) 565 8700 Fax: (702) 565 1886

State Contractors License # 0026844

\*\*\*\*\*

## CERTIFICATE OF STRESSING

We hereby certify that tension was applied to all tendons  
in accordance with engineered specifications on the projects  
listed hereunder:

PROJECT/SUBDIVISION: RAINBOW VISTA

| <u>BUILDING</u>  | <u>ADDRESS</u>    | <u>RAM NO</u> | <u>DATE STRESSED</u> |
|------------------|-------------------|---------------|----------------------|
| LOT 1066 BLOCK 5 | 1349 TORINGTON DR | 1             | 12/31/91             |
| LOT 1065 BLOCK 5 | 1341 TORINGTON DR | 1             | 12/31/91             |
| LOT 1064 BLOCK 5 | 1333 TORINGTON DR | 1             | 12/31/91             |
| LOT 1063 BLOCK 5 | 1325 TORINGTON DR | 1             | 12/31/91             |
| LOT 1062 BLOCK 5 | 1317 TORINGTON DR | 1             | 12/31/91             |
| LOT 1061 BLOCK 5 | 1309 TORINGTON DR | 1             | 12/31/91             |
| LOT 1060 BLOCK 5 | 1301 TORINGTON DR | 1             | 12/31/91             |
| LOT 1059 BLOCK 5 | 1221 TORINGTON DR | 1             | 12/31/91             |
| LOT 1058 BLOCK 5 | 1217 TORINGTON DR | 1             | 12/31/91             |
| LOT 1057 BLOCK 5 | 1213 TORINGTON DR | 1             | 12/31/91             |
| LOT 1056 BLOCK 5 | 1209 TORINGTON DR | 1             | 12/31/91             |
| LOT 1055 BLOCK 5 | 1205 TORINGTON DR | 1             | 12/31/91             |
| LOT 1054 BLOCK 5 | 1201 TORINGTON DR | 1             | 12/31/91             |

AUTHORIZED BY:

CHARLES A. RITTER  
OPERATIONS MANAGER

ISSUED TO:

LEWIS HOMES

COMPANY: Suncoast Post Tension

TECHNICIAN: Rce Neville opms

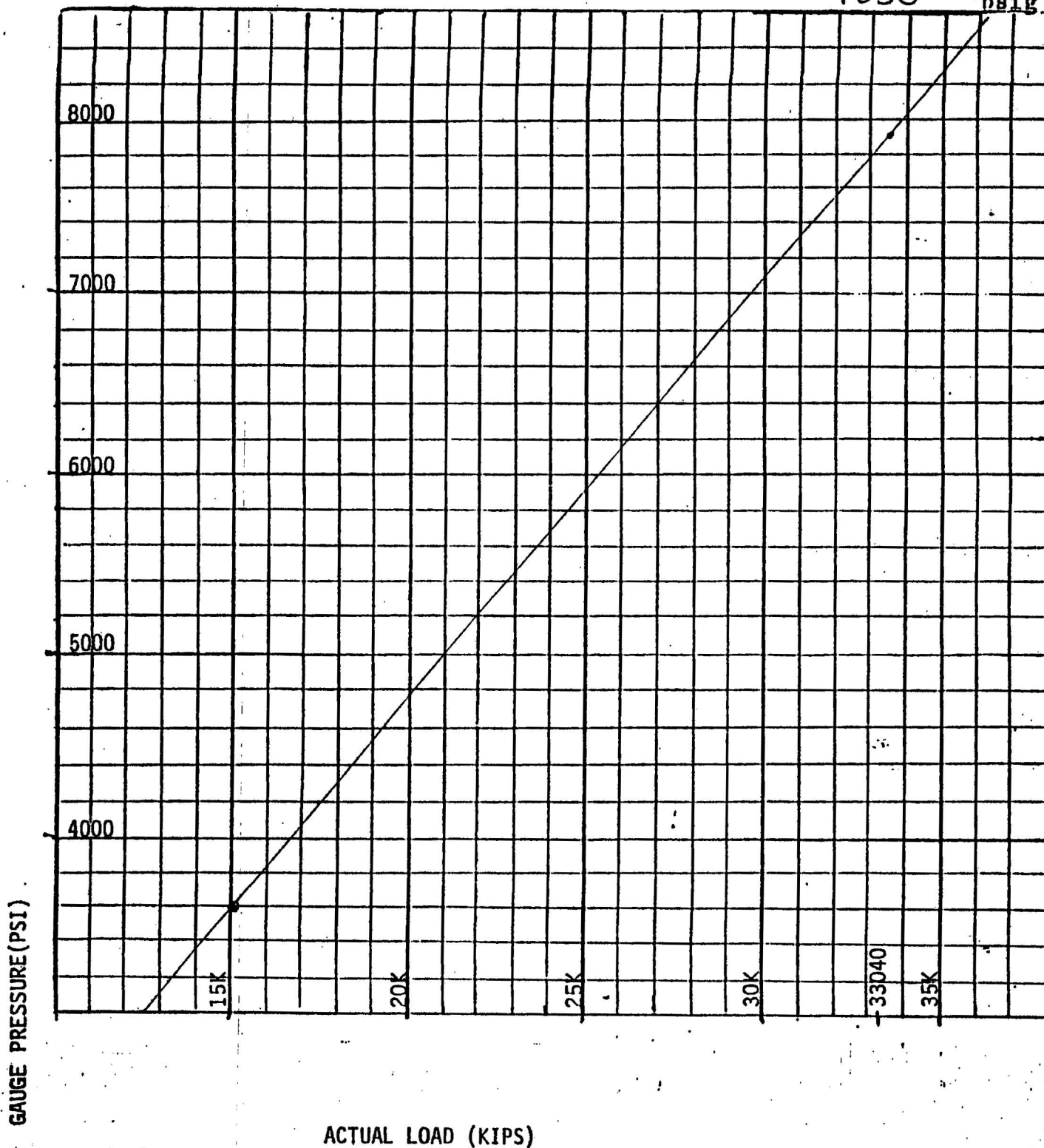
Cal. Date: 9/30/91

serial # GAGE 1

gauge pressure at temp,

overstress 33,04 kips

7850 psig



## CITY OF LAS VEGAS, NEVADA

PERMIT NO.

91-128160

DEPARTMENT OF BUILDING AND SAFETY  
PHONE 386-6251

FOR



64294

ELECTRICAL PERMIT

LOG NO. & AREA 178

L

CONST. VAL. \$

ADDRESS OF  
CONSTRUCTION 1349 Torington DriveOWNER Lewis HomesCONTRACTOR JOHNSON ELECTRICSTATE  
LICENSE NO. 21520CITY  
LICENSE NO. 26363Michael Johnson69PHONE 739-7781

(PRINT NAME OF MASTER ELECTRICIAN)

MASTER CARD NO.

PROPOSED CONSTRUCTION: New SFR Plan 933 R/V Festival 13C-3

USE:

ELECTRIC  
PERMIT NO. \_\_\_\_\_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.

| UNITS                                                                                                                         | DESCRIPTION                                                                                                                                                                                                                                                               | FEE   | TOTAL        |
|-------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------|--------------|
| <b>PERMIT ISSUANCE</b>                                                                                                        |                                                                                                                                                                                                                                                                           |       |              |
| <u>1</u>                                                                                                                      | For Issuing Each Permit                                                                                                                                                                                                                                                   | 10.70 | <u>10.70</u> |
|                                                                                                                               | Supplemental Fee                                                                                                                                                                                                                                                          | 4.85  |              |
| <b>APPLIANCE CHARGE</b>                                                                                                       |                                                                                                                                                                                                                                                                           |       |              |
| <b>Residential or General Commercial</b>                                                                                      |                                                                                                                                                                                                                                                                           |       |              |
| <u>56</u>                                                                                                                     | Receptacle <u>30</u> Switch <u>10</u>                                                                                                                                                                                                                                     | .45   | <u>25.20</u> |
| <u>14</u>                                                                                                                     | Each Light Fixture, Socket, or Exit Light,<br>Smoke Detector or Exhaust Fan                                                                                                                                                                                               | .35   | <u>4.90</u>  |
| <u>6</u>                                                                                                                      | EACH OUTLET FOR SPECIAL PURPOSE:<br>Dishwasher, Garbage Grinder, Trash Compactor,<br>G.F.I., Clothes Washer, Dryer, Electric Range,<br>Ovens, Water Heater, Space Heater, Blast Coil<br>Heater, (PER K.W.), Mercury Lamp, Quartz Lamp,<br>Sodium Lamp, 20AMP Sign Circuit | .75   | <u>4.50</u>  |
|                                                                                                                               | X-Ray Unit                                                                                                                                                                                                                                                                | 10.70 |              |
|                                                                                                                               | Area Lighting (First 3,000 Watts)                                                                                                                                                                                                                                         | 8.60  |              |
|                                                                                                                               | Each Additional 1,000 Watts                                                                                                                                                                                                                                               | 3.25  |              |
| <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                                                                                                                                                                                                                                           | 3.25  |              |
|                                                                                                                               | First KVA For Each Unit                                                                                                                                                                                                                                                   | 3.25  |              |
|                                                                                                                               | Each Additional H.P., Ton or KVA up to 50                                                                                                                                                                                                                                 | .55   |              |
|                                                                                                                               | Each Additional H.P., Ton or KVA over 50                                                                                                                                                                                                                                  | .40   |              |
|                                                                                                                               | Temporary power or Pole                                                                                                                                                                                                                                                   | 6.45  |              |
| <b>ELECTRIC SERVICE OR MAIN DISCONNECT</b>                                                                                    |                                                                                                                                                                                                                                                                           |       |              |
| <u>1</u>                                                                                                                      | Up to 200 AMP                                                                                                                                                                                                                                                             | 6.45  | <u>6.45</u>  |
|                                                                                                                               | 400 AMP And 600 AMP                                                                                                                                                                                                                                                       | 13.40 |              |
|                                                                                                                               | Over 600 AMP To 1200 AMP                                                                                                                                                                                                                                                  | 26.75 |              |
|                                                                                                                               | Over 1200 AMP                                                                                                                                                                                                                                                             | 53.50 |              |
|                                                                                                                               | Each Additional Meter Socket                                                                                                                                                                                                                                              | .55   |              |
|                                                                                                                               | Sub Panel, Motor Control Center<br>Disconnect Switch, Transfer Switch (Each)                                                                                                                                                                                              | 3.25  |              |
|                                                                                                                               | Swimming Pool (Residential)                                                                                                                                                                                                                                               | 21.40 |              |
|                                                                                                                               | Swimming Pool (Semi-Public)                                                                                                                                                                                                                                               | 32.10 |              |
|                                                                                                                               | Spas                                                                                                                                                                                                                                                                      | 8.60  |              |
|                                                                                                                               | Recreational Vehicle Spaces (Each)                                                                                                                                                                                                                                        | 3.25  |              |

| UNITS                                                                         | DESCRIPTION                                                                                                                                                                           | FEE               | TOTAL       |
|-------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------|-------------|
|                                                                               | Busways-Trolley or Plug-in (Ea. 100 Ft.)                                                                                                                                              | 3.25              |             |
|                                                                               | Gas Pumps, Dispensers (Each)                                                                                                                                                          | 3.25              |             |
| <u>1</u>                                                                      | Permanent A/C Unit (5 Tons or Less)                                                                                                                                                   | 3.25              | <u>3.25</u> |
|                                                                               | Each Air Handler                                                                                                                                                                      | 1.10              |             |
| <b>RESIDENTIAL LOW VOLTAGE INSTALLATIONS</b>                                  |                                                                                                                                                                                       |                   |             |
|                                                                               | Speaker Outlets (Each)                                                                                                                                                                | .35               |             |
|                                                                               | Signal or Alarm Outlets (Each)                                                                                                                                                        | .35               |             |
|                                                                               | Amplifiers                                                                                                                                                                            | 2.15              |             |
|                                                                               | Control Panel                                                                                                                                                                         | .55               |             |
| <u>1</u>                                                                      | TV Master System                                                                                                                                                                      | .35               | <u>.35</u>  |
| <u>2</u>                                                                      | Telephone or Computer Outlet                                                                                                                                                          | .35               | <u>.70</u>  |
| <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

BUILDING DEPT.

DATE

PERMIT

FEE \$56.05

LESS

STARTER PERMIT

TOTAL

FEES

PERMIT NO. \_\_\_\_\_

MUST BE MACHINE VALIDATED

Permit Expires 180 Days After Abandonment of Work

## CITY OF LAS VEGAS, NEVADA

DEPARTMENT OF BUILDING AND SAFETY  
PHONE 386-6251

F



72654

NO.

91-129166

PLUMBING PERMIT

LOG NO. & AREA T 178 DATE \_\_\_\_\_ CONST. VAL. \$ \_\_\_\_\_ADDRESS OF CONSTRUCTION 1349 TORINGTON DR. OWNER LEWIS HOMES OF NEV. PHONE 873-2116CONTRACTOR CARDINAL PLBG. INC. STATE LICENSE NO. 010848 A CITY LICENSE NO. 05775LOT(S) 1066 BLOCK S SUBDIVISION RAINBOW VISTA 13B 5 13C 3 ZONE: \_\_\_\_\_PROPOSED CONSTRUCTION: TRACT HOUSE USE: \_\_\_\_\_PLUMBING  
PERMIT NO. \_\_\_\_\_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.

| UNITS                            | DESCRIPTION                                                                                   | FEE      | TOTAL |
|----------------------------------|-----------------------------------------------------------------------------------------------|----------|-------|
| <b>PERMIT ISSUANCE</b>           |                                                                                               |          |       |
| 1                                | For Issuing Each Permit                                                                       | 10.00    | 10.00 |
|                                  | For Issuing Each Supplemental Permit                                                          | 4.50     |       |
| <b>FIXTURE CHARGE</b>            |                                                                                               |          |       |
| 7                                | Bathtub, Shower, Lavatory, Toilet, Urinal                                                     | EA. 2.00 | 14.00 |
| 2                                | Floor Drain, Floor Sink, Wash Tray, Sink                                                      | EA. 2.00 | 4.00  |
| 1                                | Garbage Disposal, Clothes Washer, Dishwasher (residential)                                    | EA. 2.00 | 2.00  |
|                                  | Garbage Disposal (commercial)                                                                 | EA. 8.00 |       |
|                                  | Clothes Washer, Dishwasher (commercial)                                                       | EA. 2.00 |       |
|                                  | Clothes Dryer (gas) (venting)                                                                 | 2.00     |       |
|                                  | Dental Unit                                                                                   | 8.00     |       |
|                                  | Drinking Fountain                                                                             | 2.00     |       |
|                                  | Refrigerator - Ice Maker, Water Dispenser                                                     | 2.00     |       |
|                                  | Any other water using equipment, Attached Coffee Makers, Ice Makers                           | 2.00     |       |
| 1                                | Hot Water Heater (Gas or Electric)                                                            | EA. 2.00 | 2.00  |
| <b>SEWER SYSTEM</b>              |                                                                                               |          |       |
| 1                                | New, Replacement, Modification, or Any Drainage Work                                          | 10.00    | 10.00 |
|                                  | Grease or Sand Trap or Interceptor                                                            | 2.00     |       |
|                                  | Trailer Trap (rental parks)                                                                   | 5.00     |       |
| <b>WATER SOFTENERS</b>           |                                                                                               |          |       |
|                                  | Non Permanent Type (rental)                                                                   | 2.00     |       |
|                                  | Permanent Type (connected to drain)                                                           | 2.00     |       |
| <b>WATER DISTRIBUTION SYSTEM</b> |                                                                                               |          |       |
| 1                                | Single Family Dwelling                                                                        | 6.00     | 6.00  |
|                                  | Multi-Family Dwelling                                                                         | 6.00     |       |
|                                  | Plus Each Dwelling Unit                                                                       | 3.00     |       |
|                                  | Commercial Building per floor                                                                 | 3.00     |       |
|                                  | Plus Each Unit (leased space or office)                                                       | 2.00     |       |
|                                  | Hotel or Motel                                                                                | 8.00     |       |
|                                  | Plus Each Unit                                                                                | 3.00     |       |
|                                  | Trailer Park                                                                                  | 30.00    |       |
|                                  | Plus Each Space                                                                               | 2.00     |       |
|                                  | Irrigation Single Family Dwelling                                                             | 8.00     |       |
|                                  | Irrigation Commercial Fee Based on Building Code Valuation Chart Construction Valuation _____ |          |       |

| UNITS                              | DESCRIPTION                                                                                                                                                                                                           | FEE            | TOTAL |
|------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------|-------|
| <b>FUEL PIPING SYSTEM</b>          |                                                                                                                                                                                                                       |                |       |
| 1                                  | Single Family Dwelling                                                                                                                                                                                                | 6.00           | 6.00  |
|                                    | Multi-Family Dwelling                                                                                                                                                                                                 | 10.00          |       |
|                                    | Plus Each Unit                                                                                                                                                                                                        | 2.00           |       |
|                                    | Commercial Building (per floor)                                                                                                                                                                                       | 6.00           |       |
|                                    | Plus Each Unit (leased space or office)                                                                                                                                                                               | 6.00           |       |
|                                    | Medium Pressure System (Plan Check)                                                                                                                                                                                   | 12.00          |       |
| 4                                  | Each Gas Appliance (Any Type)                                                                                                                                                                                         | 2.00           | 8.00  |
|                                    | Steam Boilers                                                                                                                                                                                                         | 5.00           |       |
| <b>SOLAR ENERGY SYSTEMS</b>        |                                                                                                                                                                                                                       |                |       |
|                                    | Collectors (including piping) (per collector)                                                                                                                                                                         | 5.00           |       |
|                                    | Storage Tanks (each)                                                                                                                                                                                                  | 5.00           |       |
| <b>PIPELINE CONTRACT</b>           |                                                                                                                                                                                                                       |                |       |
|                                    | For Onsite Sewer, Gas or Water Contract Value. Fee based on Building Code Permit Valuation Chart.                                                                                                                     |                |       |
| <b>OTHER INSPECTIONS AND FEES:</b> |                                                                                                                                                                                                                       |                |       |
|                                    | Inspections outside of normal business hours (minimum charge—three hours).                                                                                                                                            | 25.00 per hour |       |
|                                    | Under provisions of Table 3-A of the Uniform Building Code, work which has been inspected once and not approved may be subject to a Reinspection Fee not less than \$30.00 per each inspection during business hours. | 30.00 each     |       |
|                                    | Additional plan review required by changes. Additions to or revisions to approved plans (minimum charge two hours).                                                                                                   | 30.00 per hour |       |
|                                    | Plumbing 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.                                    |                |       |
|                                    | Construction Valuation _____                                                                                                                                                                                          |                |       |

FOR INSPECTIONS  
CALL 799-2071SEWER # 7114-3654  
CONNECTION

RECEIPT

FIXTURES \_\_\_\_\_ X \_\_\_\_\_

FEE 62.004.342310-2403  
PERMIT 66.34  
FEE \_\_\_\_\_TOTAL  
FEES \_\_\_\_\_

PERMIT NO. \_\_\_\_\_

MUST BE MACHINE VALIDATED

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.

*Thomas P. Edgar*  
 SIGNED \_\_\_\_\_ CONTRACTOR \_\_\_\_\_ MASTER CARD NO. \_\_\_\_\_

BY *Ted* \_\_\_\_\_ Registered Master Plumber, Spec. Cont'r. or Owner

BUILDING DEPT.

DATE

## CITY OF LAS VEGAS, NEVADA

PERMIT NO.

92-132104

DEPARTMENT OF BUILDING AND SAFETY  
PHONE 386-6251

FC



1

AIR CONDITIONING PERMIT

LOG NO. & AREA P-178 L

67029

CONST. VAL. \$

ADDRESS OF CONSTRUCTION 1349 TORINGTON DR

OWNER

Lewis Homes

PHONE

362-0638CONTRACTOR D & H A/C

STATE LICENSE NO.

19606

CITY LICENSE NO.

23425LOT(S) 1066 BLOCK S SUBDIVISIONRV 13B-5

ZONE:

PROPOSED CONSTRUCTION

A/C

USE:

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.

| UNITS                    | DESCRIPTION                                                                                                                                                                                                                                                | FEE   | TOTAL |
|--------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------|-------|
| <b>PERMIT ISSUANCE</b>   |                                                                                                                                                                                                                                                            |       |       |
| 1                        | For the issuance of each permit.                                                                                                                                                                                                                           | 15.00 | 15-   |
|                          | For issuing each supplemental permit.                                                                                                                                                                                                                      | 4.50  |       |
| <b>UNIT FEE SCHEDULE</b> |                                                                                                                                                                                                                                                            |       |       |
|                          | For the installation or relocation of each forced-air or gravity-type furnace or burner, including ducts and vents attached to such appliance, up to and including 100,000 Btu/h.                                                                          | 9.00  |       |
|                          | For the installation or relocation of each forced-air or gravity-type furnace or burner, including ducts and vents attached to such appliance over 100,000 Btu/h.                                                                                          | 11.00 |       |
|                          | For the installation or relocation of each floor furnace, including vent.                                                                                                                                                                                  | 9.00  |       |
|                          | For the installation or relocation of each suspended heater, recessed wall heater or floor-mounted unit heater.                                                                                                                                            | 9.00  |       |
|                          | For the installation, relocation or replacement of each appliance vent installed and not included in an appliance permit.                                                                                                                                  | 4.50  |       |
|                          | For the repair of, alteration of, or addition to each heating appliance, refrigeration unit, cooling unit, absorption unit, or each heating, cooling absorption, or evaporative cooling system, including installation of controls regulated by this code. | 9.00  |       |
| 1                        | For the installation or relocation of each boiler or compressor to and including three tons, or each absorption system to and including 100,000 Btu/h.                                                                                                     | 9.00  | 9-    |
|                          | For the installation or relocation of each boiler or compressor over three tons to and including 15 tons, or each absorption system over 100,000 Btu/h and including 500,000 Btu/h.                                                                        | 16.50 |       |
|                          | For the installation or relocation of each boiler or compressor over 15 tons to and including 30 tons, or each absorption system over 500,000 Btu/h to and including 1,000,000 Btu/h.                                                                      | 22.50 |       |
|                          | For the installation or relocation of each boiler or compressor over 30 tons to and including 50 tons, or for each absorption system over 1,000,000 Btu/h to and including 1,750,000 Btu/h.                                                                | 33.50 |       |
|                          | For the installation or relocation of each boiler or refrigeration compressor over 50 tons, or each absorption system over 1,750,000 Btu/h.                                                                                                                | 56.00 |       |

| UNITS                              | DESCRIPTION                                                                                                                                                                                                                                                                                                                                  | FEE            | TOTAL |
|------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------|-------|
|                                    | For each air-handling unit to and including 10,000 cubic feet per minute, including ducts attached thereto.<br><b>Note:</b> This fee shall not apply to an air-handling unit which is a portion of a factory-assembled appliance, cooling unit, evaporative cooler or absorption unit for which a permit is required elsewhere in this code. | 6.50           |       |
|                                    | For each air-handling unit over 10,000 cfm.                                                                                                                                                                                                                                                                                                  | 11.00          |       |
|                                    | For each evaporative cooler other than portable type.                                                                                                                                                                                                                                                                                        | 6.50           |       |
| 2                                  | For each ventilation fan. <span style="float: right;">COMMERCIAL<br/>RESIDENTIAL</span>                                                                                                                                                                                                                                                      | 4.50<br>2.35   | 4.70  |
|                                    | For each ventilation system which is not a portion of any heating or air-conditioning system authorized by a permit.                                                                                                                                                                                                                         | 6.50           |       |
|                                    | For the installation of each hood which is served by mechanical exhaust, including the ducts for such hood.                                                                                                                                                                                                                                  | 6.50           |       |
|                                    | For each fire damper installed in an existing system.                                                                                                                                                                                                                                                                                        | 4.50           |       |
| <b>OTHER INSPECTIONS AND FEES:</b> |                                                                                                                                                                                                                                                                                                                                              |                |       |
|                                    | Inspections outside of normal business hours (minimum charge — three hours.)                                                                                                                                                                                                                                                                 | 25.00 per hour |       |
|                                    | Reinspection fee assessed under provisions of TABLE 3-A of the Uniform Building Code = \$15.00 EACH.                                                                                                                                                                                                                                         | 15.00 each     |       |
|                                    | Inspections for which no fee is specifically indicated (minimum charge — one-half hour).                                                                                                                                                                                                                                                     | 30.00 per hour |       |
|                                    | Additional plan review required by changes, additions or revisions to approved plans (minimum charge — two hours).                                                                                                                                                                                                                           | 30.00 per hour |       |
|                                    | Mechanical 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.                                                                                                                                                         |                |       |
|                                    | Gas piping which is directly related and necessary to the repair or replacement of heating, air conditioning, or refrigeration systems not exceeding 500,000 B.T.U.H.                                                                                                                                                                        | 6.00           |       |

2310-2435

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

CONTRACTOR

MASTER CARD NO.

BY

Spec. Cont'r. or Owner

BUILDING DEPT.

DATE

PERMIT FEE

TOTAL FEES

28.70

7.00

30.70

MUST BE MACHINE VALIDATED

PERMIT EXPIRES 180 DAYS AFTER ABANDONMENT OF WORK

# TRACT SEQUENCE & PRODUCTION RELEASE SCHEDULE

LOTS - 13

LEWIS HOMES - RAINBOW VISTA NO. 13-B, PHASE 5, and

LEWIS HOMES - RAINBOW VISTA NO. 13-C, PHASE 3 "Festival"

Start Date: 12/9/91

Super: Margo Williams

| <u>Lot/Block</u> | <u>Plan No.</u> | <u>Street Address</u> |             |
|------------------|-----------------|-----------------------|-------------|
| 1066/S           | 6-933-M2        | 1349 Torington Drive  | 91-128051 ✓ |
| 1065/S           | 6-095-M2R       | 1341 Torington Drive  | 91-128050 ✓ |
| 1064/S           | 6-933-M2        | 1333 Torington Drive  | 91-128049 ✓ |
| 1063/S           | 6-095-M1R       | 1325 Torington Drive  | 91-128048 ✓ |
| 1062/S           | 6-933-M1        | 1317 Torington Drive  | 91-128047 ✓ |
| 1061/S           | 6-095-M2R       | 1309 Torington Drive  | 91-128046 ✓ |
| 1060/S           | 6-933-M2        | 1301 Torington Drive  | 91-128045 ✓ |
| 1059/S           | 6-095-M2R       | 1221 Torington Drive  | 91-128044 ✓ |
| 1058/S           | 6-933-M1        | 1217 Torington Drive  | 91-128043 ✓ |
| 1057/S           | 6-095-M1R       | 1213 Torington Drive  | 91-128042 ✓ |
| 1056/S           | 6-933-M2        | 1209 Torington Drive  | 91-128041 ✓ |
| 1055/S           | 6-933-M1R       | 1205 Torington Drive  | 91-128040 ✓ |
| 1054/S*          | 6-933-M2R       | 1201 Torington Drive  | 91-128039   |

\* - Corner Lots

Page 1 of 1

RV13B-5:smw:11/5/91

# Lewis Homes Management Corp.

3325 Ali Baba Lane / Suite 603 / P.O. Box 19297 / Las Vegas, Nevada 89132 / (702) 736-8960

CITY OF LAS VEGAS  
BUILDING DEPARTMENT  
RECORDS DIVISION  
400 East Stewart  
Las Vegas, NV 89101

RE:

Rainbow Vista  
13-B-5/C-3

GAS LOG DELAY LETTER

PERMIT #: 91-128051

LOT: 1066 BLOCK: S

ADDRESS: 1349 Torington Drive.

DATE: 3/4/92

"FESTIVAL"

This is to certify that Lewis Homes of Nevada will install a gas log unit in each fireplace just prior to OR within 10 days of the new homeowner move-in.

Very truly yours,

LEWIS HOMES OF NEVADA



Leah S.W. Bryant  
Regional Manager



# LEWIS HOMES

3325 Ali Baba Lane / Suite 603 / P.O. Box 19297 / Las Vegas, Nevada 89132 / (702) 736-8960

## LETTER OF TRANSMITTAL

TO: CLV Bldg/Records  
Dept.

DATE: 3/6/92

REFERENCE: Gas Log Delay  
Letters

ATTN: Bob Clark / John Tucker

Enclosed Please Find:

### No. Copies   Description

| <u>No. Copies</u> | <u>Description</u>                                                                                                                                                                                                                                                                                                             |
|-------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| <u>12 (x2)</u>    | <u>phases of gas log delay letters</u><br><u>per John Tucker &amp; Sandy Horskog's</u><br><u>agreement</u><br><u>- Cypress 5-6, Polo Greens 8, Rainbow Vista</u><br><u>13-B-4/C-2, 13-B-5/C-3, The Shores No. 1-C-2/B-5,</u><br><u>The Shores No. 2-C-4/B-6a, 2-C-5/b-6b, 2-C-6,</u><br><u>Denaya East 1-B-4, 1-B-5, 1-B-6</u> |

REMARKS: pls. dist. 1 set of each to field  
inspectors as needed. If you  
have any questions pls. call me  
@ 736-8960 - Thx

Shannon

Above materials received by: \_\_\_\_\_

By: Shannon Johnson

Date: \_\_\_\_\_

WD/cmm  
3-26-81

# INSTALLATION CARD

**JOB ADDRESS:**

Lewis Homes  
Rainbow Vista 13B-5 & C-3  
1349 Tarrington Dr.

**MAGNAWALL 1-KOTE  
REINFORCED STUCCO SYSTEM**

**1-KOTE STUCCO PRODUCTS**

**ICBO Evaluation Service, Inc. Report No. 4776**

**Date of Job Completion:** \_\_\_\_\_

**PLASTERING CONTRACTOR:**

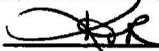
**Name:** D.L. PETERSON & SONS, INC.

**Address:** 5151 TEE PEE  
LAS VEGAS, NV 89129

**Approved Contractor Number as Issued by  
the Plastering Manufacturing** 30

**Phone:** (702) 645-4622

This is to certify that the plastering 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**

1-24-92  
**Date**

# DEPARTMENT OF BUILDING & SAFETY CITY OF LAS VEGAS

|                                         |                              |                                     |                                                      |                                  |
|-----------------------------------------|------------------------------|-------------------------------------|------------------------------------------------------|----------------------------------|
| <input checked="" type="checkbox"/>     | <b>PERMIT<br/>NUMBER</b>     | 91-129166                           | <b>INSPECTION<br/>NUMBER</b>                         | 12                               |
| JOB ADDRESS<br><b>1349 TORINGTON DR</b> |                              |                                     |                                                      |                                  |
| LOT NO.                                 |                              | BLOCK NO.<br><b>S</b>               | SUBDIVISION NAME<br><b>RAINBOW VISTA 13B 5 13C 5</b> |                                  |
| FIRE DEPT. MAP NO.<br><b>2319-34</b>    | JOB PHONE<br><b>873-2116</b> | CALL-IN DATE<br><b>12/17/91</b>     | CALL-IN TIME<br><b>14:51</b>                         | SCHEDULE DATE<br><b>12/18/91</b> |
| INSPECTOR NO.<br><b>83</b>              |                              | INSPECTOR NAME<br><b>JOHN LASKY</b> |                                                      |                                  |
| <b>INSPECTION<br/>REQUESTED</b>         |                              | <b>UNDERSLAB PLUMBING (407)</b>     |                                                      |                                  |

|                                                                                                                                    |                                                                                                                                        |                                          |                                                            |                                             |
|------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------|------------------------------------------|------------------------------------------------------------|---------------------------------------------|
| <input type="checkbox"/> PARTIAL<br>INSPECTION                                                                                     | <input type="checkbox"/> PARTIAL<br>APPROVAL (P)                                                                                       | PARTIAL DESCRIPTION                      |                                                            |                                             |
| <input checked="" type="checkbox"/> APPROVED<br>(A)                                                                                | <input type="checkbox"/> STOP<br>WORK (S)                                                                                              | <input type="checkbox"/> COMMENTS<br>(C) | <input type="checkbox"/> TEMPORARY<br>APPROVAL (T) — UNTIL | <input type="checkbox"/> HOLD<br>(H)        |
| <input type="checkbox"/> REJECTED (R)                                                                                              | REINSPECTION REQUIRED - CALL *799-2071                                                                                                 |                                          |                                                            | <input type="checkbox"/> PERMIT<br>REQUIRED |
| <input type="checkbox"/> REFEE (F)                                                                                                 | REINSPECTION FEE REQUIRED - PAY AT CITY HALL<br>3RD FLOOR - 400 E. STEWART STREET.                                                     |                                          |                                                            |                                             |
| INSPECTOR<br>SIGNATURE <i>John Lasky</i>                                                                                           |                                                                                                                                        |                                          | INSPECTION DATE<br><b>12-18-91</b>                         |                                             |
| <input type="checkbox"/> <b>PROJECT<br/>COMPLETE</b>                                                                               | BRING HARD CARD WITH FIRE, QUALITY CONTROL & PLANNING APPROVALS<br>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 |                                                                                                                                        |                                          |                                                            | <b>229-6765</b>                             |

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

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

# DEPARTMENT OF BUILDING & SAFETY CITY OF LAS VEGAS



PERMIT  
NUMBER

91-129166

INSPECTION  
NUMBER

12

JOB ADDRESS

1349 TORINGTON DR

LOT NO.

BLOCK NO.

SUBDIVISION NAME

S

RAINBOW VISTA 13B 5 13C 3

FIRE DEPT. MAP NO.

JOB PHONE

CALL-IN DATE

CALL-IN TIME

SCHEDULE DATE

2319-34

873-2116

12/17/91

14:51

12/18/91

INSPECTOR NO.

INSPECTOR NAME

83

JOHN LASKY

INSPECTION  
REQUESTED

UNDERSLAB PLUMBING (407)

☐ PARTIAL INSPECTION ☐ PARTIAL APPROVAL (P) PARTIAL DESCRIPTION

☒ APPROVED (A) ☐ STOP WORK (S) ☐ COMMENTS (C) ☐ TEMPORARY APPROVAL (T) - UNTIL ☐ HOLD (H)

☐ REJECTED (R) REINSPECTION REQUIRED - CALL \*799-2071

☐ REFEE (F) REINSPECTION FEE REQUIRED - PAY AT CITY HALL 3RD FLOOR - 400 E. STEWART STREET.

☐ PERMIT REQUIRED

INSPECTOR  
SIGNATURE

INSPECTION DATE

☐ 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 \*386-6251  
SEE REVERSE SIDE FOR INSPECTION TYPES

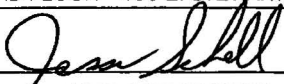
\* EFFECTIVE JULY 1, 1991  
PHONE PREFIX WILL BE 229.

# DEPARTMENT OF BUILDING & SAFETY CITY OF LAS VEGAS

|                                     |                      |                             |                          |                                   |
|-------------------------------------|----------------------|-----------------------------|--------------------------|-----------------------------------|
| <input checked="" type="checkbox"/> | <b>PERMIT NUMBER</b> | <b>91-128051</b>            | <b>INSPECTION NUMBER</b> | <b>28</b>                         |
| <b>JOB ADDRESS</b>                  |                      |                             |                          |                                   |
| <b>1349 TORINGTON DR</b>            |                      |                             |                          |                                   |
| <b>LOT NO.</b>                      |                      | <b>BLOCK NO.</b>            |                          | <b>SUBDIVISION NAME</b>           |
|                                     |                      | <b>S</b>                    |                          | <b>RAINBOW VISTA FESTIVAL 13B</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>2319-34</b>                      | <b>736-8960</b>      | <b>03/23/92</b>             | <b>17:00</b>             | <b>03/24/92</b>                   |
| <b>INSPECTOR NO.</b>                |                      | <b>INSPECTOR NAME</b>       |                          |                                   |
| <b>67</b>                           |                      | <b>JESSE SCHELL</b>         |                          |                                   |
| <b>INSPECTION REQUESTED</b>         |                      | <b>BUILDING FINAL (140)</b> |                          |                                   |

- ① install nite Lock
- ② install gas Log & glass doors on Fireplace

Sewer

|                                                                                                                                 |                                                                                 |                                                                                                                                     |                                                         |                                   |
|---------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------|-----------------------------------|
| <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>                                                                                                      |                                                                                 |                                                                                                                                     | <b>INSPECTION DATE</b>                                  |                                   |
|                                              |                                                                                 |                                                                                                                                     | <b>3-24-92</b>                                          |                                   |
| <input checked="" 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 CALL THE INSPECTOR FROM 7:00 A.M. - 7:15 A.M. OR 2:45 P.M. - 3:00 P.M. AT |                                                                                 |                                                                                                                                     |                                                         | 229-6769                          |

# DEPARTMENT OF BUILDING & SAFETY CITY OF LAS VEGAS



PERMIT  
NUMBER

91-128160

INSPECTION  
NUMBER

14

JOB ADDRESS

1349 TORINGTON DR

LOT NO.

BLOCK NO.

SUBDIVISION NAME

RAINBOW VISTA FESTIVAL

FIRE DEPT. MAP NO.

JOB PHONE

CALL-IN DATE

CALL-IN TIME

SCHEDULE DATE

2319-34

739-7781

02/19/92

15:57

02/20/92

INSPECTOR NO.

INSPECTOR NAME

71

KEEFE BEYER

INSPECTION  
REQUESTED

FINAL ELECTRICAL (240)

☐ PARTIAL  
INSPECTION

☐ PARTIAL  
APPROVAL (P)

PARTIAL DESCRIPTION

☒ 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

INSPECTION DATE

*KRB*

20 FEB 92

☐ PROJECT  
COMPLETE

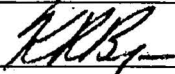
BRING HARD CARD WITH FIRE, QUALITY CONTROL & PLANNING APPROVALS  
SIGNED OFF TO BLDG & SAFETY FOR C. of O. ISSUANCE (Commercial Only)

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

229-6769

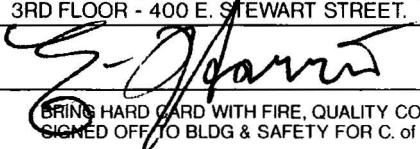
For Additional Assistance Call \* 229-6251. See Reverse Side For Inspection Types.

# DEPARTMENT OF BUILDING & SAFETY CITY OF LAS VEGAS

|                                                                                                                                 |  |                                                                                                                                     |  |                                                   |  |                                                         |                 |
|---------------------------------------------------------------------------------------------------------------------------------|--|-------------------------------------------------------------------------------------------------------------------------------------|--|---------------------------------------------------|--|---------------------------------------------------------|-----------------|
| <b>PERMIT NUMBER</b>                                                                                                            |  | <b>91-128160</b>                                                                                                                    |  | <b>INSPECTION NUMBER</b>                          |  | <b>203</b>                                              |                 |
| JOB ADDRESS <b>1349 TORINGTON DR</b>                                                                                            |  |                                                                                                                                     |  |                                                   |  |                                                         |                 |
| LOT NO.                                                                                                                         |  | BLOCK NO.                                                                                                                           |  | SUBDIVISION NAME<br><b>RAINBOW VISTA FESTIVAL</b> |  |                                                         |                 |
| FIRE DEPT. MAP NO.<br><b>2319-34</b>                                                                                            |  | JOB PHONE<br><b>739-7781</b>                                                                                                        |  | CALL-IN DATE<br><b>01/08/92</b>                   |  | CALL-IN TIME<br><b>16:09</b>                            |                 |
| SCHEDULE DATE<br><b>01/09/92</b>                                                                                                |  |                                                                                                                                     |  |                                                   |  |                                                         |                 |
| INSPECTOR NO.<br><b>71</b>                                                                                                      |  | INSPECTOR NAME<br><b>KEEFE BEYER</b>                                                                                                |  |                                                   |  |                                                         |                 |
| <b>INSPECTION REQUESTED</b>                                                                                                     |  | <b>ROUGH ELECTRICAL (220)</b>                                                                                                       |  |                                                   |  |                                                         |                 |
|                                                                                                                                 |  |                                                                                                                                     |  |                                                   |  |                                                         |                 |
| <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<br>                      |  |                                                                                                                                     |  | INSPECTION DATE<br><b>9 JAN 92</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 |  |                                                                                                                                     |  |                                                   |  |                                                         | <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>                                                                                                                               | <b>92-132104</b>                             | <b>INSPECTION NUMBER</b>                                       | <b>14</b>                                       |
| <b>JOB ADDRESS</b>                                                                                                                     |                                                                                                                                                    |                                              |                                                                |                                                 |
| <b>1349 TORINGTON DR</b>                                                                                                               |                                                                                                                                                    |                                              |                                                                |                                                 |
| <b>LOT NO.</b>                                                                                                                         |                                                                                                                                                    | <b>BLOCK NO.</b>                             |                                                                | <b>SUBDIVISION NAME</b>                         |
|                                                                                                                                        |                                                                                                                                                    | <b>S</b>                                     |                                                                | <b>R V 13B-5</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>2319-34</b>                                                                                                                         | <b>362-0638</b>                                                                                                                                    | <b>01/15/92</b>                              | <b>16:01</b>                                                   | <b>01/16/92</b>                                 |
| <b>INSPECTOR NO.</b>                                                                                                                   |                                                                                                                                                    | <b>INSPECTOR NAME</b>                        |                                                                |                                                 |
| <b>83</b>                                                                                                                              |                                                                                                                                                    | <b>JOHN LASKY</b>                            |                                                                |                                                 |
| <b>INSPECTION REQUESTED</b>                                                                                                            |                                                                                                                                                    |                                              |                                                                |                                                 |
| <b>ROUGH MECHANICAL (320)</b>                                                                                                          |                                                                                                                                                    |                                              |                                                                |                                                 |
| 320                                                                                                                                    |                                                                                                                                                    |                                              |                                                                |                                                 |
| <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>                       |                                                                |                                                 |
|                                                     |                                                                                                                                                    | <b>1/16/92</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> |                                              |                                                                |                                                 |
| <b>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</b> |                                                                                                                                                    |                                              |                                                                | <b>229-6765</b>                                 |

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

# DEPARTMENT OF BUILDING & SAFETY CITY OF LAS VEGAS



**PERMIT  
NUMBER**

**91-129166**

**INSPECTION  
NUMBER**

**10**

**JOB ADDRESS**

**1349 TORINGTON DR**

**LOT NO.**

**BLOCK NO.**

**SUBDIVISION NAME**

**S**

**RAINBOW VISTA 13B 5 13C 3**

**FIRE DEPT. MAP NO.**

**JOB PHONE**

**CALL-IN DATE**

**CALL-IN TIME**

**SCHEDULE DATE**

**2319-34**

**873-2116**

**01/15/92**

**16:00**

**01/16/92**

**INSPECTOR NO.**

**INSPECTOR NAME**

**83**

**JOHN LASKY**

**INSPECTION  
REQUESTED**

**TOP OUT-WATER, GAS, WASTE (420)**

**420**

☐ **PARTIAL  
INSPECTION**

☐ **PARTIAL  
APPROVAL (P)**

**PARTIAL DESCRIPTION**

☒ **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**

*[Signature]*

**INSPECTION DATE**

**1/16/92**

☐ **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**

**229-6765**

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

# DEPARTMENT OF BUILDING & SAFETY CITY OF LAS VEGAS



PERMIT  
NUMBER

91-128051

INSPECTION  
NUMBER

29

JOB ADDRESS

1349 TORINGTON DR

LOT NO.

BLOCK NO.

SUBDIVISION NAME

S

RAINBOW VISTA FESTIVAL 13B

FIRE DEPT. MAP NO.

JOB PHONE

CALL-IN DATE

CALL-IN TIME

SCHEDULE DATE

2319-34

736-8960

01/16/92

16:56

01/17/92

INSPECTOR NO.

INSPECTOR NAME

67

JESSE SCHELL

INSPECTION  
REQUESTED

FRAMING (120)

① complete Fire place steps

<will v on final>

☐ PARTIAL  
INSPECTION

☐ PARTIAL  
APPROVAL (P)

PARTIAL DESCRIPTION

☒ 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

Jesse Schell

INSPECTION DATE

1-17-92

☐ 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

229-6769

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

# DEPARTMENT OF BUILDING & SAFETY CITY OF LAS VEGAS



**PERMIT  
NUMBER**

**91-128051**

**INSPECTION  
NUMBER**

**10**

**JOB ADDRESS**

**1349 TORINGTON DR**

**LOT NO.**

**BLOCK NO.**

**SUBDIVISION NAME**

**S**

**RAINBOW VISTA FESTIVAL 13B**

**FIRE DEPT. MAP NO.**

**JOB PHONE**

**CALL-IN DATE**

**CALL-IN TIME**

**SCHEDULE DATE**

**2319-34**

**736-8960**

**01/17/92**

**11:37**

**01/21/92**

**INSPECTOR NO.**

**INSPECTOR NAME**

**67**

**JESSE SCHELL**

**INSPECTION  
REQUESTED**

**INSULATION (123)**

|                                                                                                                                 |                                                                                                                                     |                                       |                                                         |                                          |
|---------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------|---------------------------------------------------------|------------------------------------------|
| <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.                                                     |                                       |                                                         |                                          |
| <b>INSPECTOR SIGNATURE</b>                                                                                                      |                                                                                                                                     | <b>INSPECTION DATE</b>                |                                                         |                                          |
|                                                                                                                                 |                                                                                                                                     | 1-21-92                               |                                                         |                                          |
| <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 |                                                                                                                                     |                                       |                                                         | <b>229-6769</b>                          |

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

# DEPARTMENT OF BUILDING & SAFETY CITY OF LAS VEGAS



**PERMIT  
NUMBER**

**91-128051**

**INSPECTION  
NUMBER**

**10**

**JOB ADDRESS**

**1349 TORINGTON DR**

**LOT NO.**

**BLOCK NO.**

**SUBDIVISION NAME**

**S**

**RAINBOW VISTA FESTIVAL 13B**

**FIRE DEPT. MAP NO.**

**JOB PHONE**

**CALL-IN DATE**

**CALL-IN TIME**

**SCHEDULE DATE**

**2319-34**

**736-8960**

**01/21/92**

**16:18**

**01/22/92**

**INSPECTOR NO.**

**INSPECTOR NAME**

**67**

**JESSE SCHELL**

**INSPECTION  
REQUESTED**

**DRYWALL NAILING (125)**

☐ **PARTIAL  
INSPECTION**

☐ **PARTIAL  
APPROVAL (P)**

**PARTIAL DESCRIPTION**

☒ **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**

*Jesse Schell*

**INSPECTION DATE**

*1-22-92*

☐ **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**

**229-6769**

**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> | <b>91-128051</b> | <b>INSPECTION NUMBER</b> | <b>18</b> |
|----------------------------------------------------------|------------------|--------------------------|-----------|

|                    |                          |
|--------------------|--------------------------|
| <b>JOB ADDRESS</b> | <b>1349 TORINGTON DR</b> |
|--------------------|--------------------------|

|                |                  |                                   |
|----------------|------------------|-----------------------------------|
| <b>LOT NO.</b> | <b>BLOCK NO.</b> | <b>SUBDIVISION NAME</b>           |
|                | <b>S</b>         | <b>RAINBOW VISTA FESTIVAL 13B</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>2319-34</b>            | <b>736-8960</b>  | <b>01/22/92</b>     | <b>15:48</b>        | <b>01/23/92</b>      |

|                      |                       |
|----------------------|-----------------------|
| <b>INSPECTOR NO.</b> | <b>INSPECTOR NAME</b> |
| <b>67</b>            | <b>JESSE SCHELL</b>   |

|                             |                                   |
|-----------------------------|-----------------------------------|
| <b>INSPECTION REQUESTED</b> | <b>EXTERIOR LATH/STUCCO (129)</b> |
|-----------------------------|-----------------------------------|

|                                                         |                                                                                        |                                              |                                                                 |                                                 |
|---------------------------------------------------------|----------------------------------------------------------------------------------------|----------------------------------------------|-----------------------------------------------------------------|-------------------------------------------------|
| <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> | <i>Jesse Schell</i> | <b>INSPECTION DATE</b> | <b>1-23-92</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 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



PERMIT  
NUMBER

91-128160

INSPECTION  
NUMBER

20

JOB ADDRESS

1349 TORINGTON DR

LOT NO.

BLOCK NO.

SUBDIVISION NAME

RAINBOW VISTA FESTIVAL

FIRE DEPT. MAP NO.

2319-34

JOB PHONE

739-7781

CALL-IN DATE

01/08/92

CALL-IN TIME

16:09

SCHEDULE DATE

01/09/92

INSPECTOR NO.

71

INSPECTOR NAME

KEEFE BEYER

INSPECTION  
REQUESTED

ROUGH ELECTRICAL (220)

28  
21  
3  
1

☐ PARTIAL  
INSPECTION

☐ PARTIAL  
APPROVAL (P)

PARTIAL DESCRIPTION

☒ 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

*KEEFE*

INSPECTION DATE

9 JAN 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

229-6769

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

# DEPARTMENT OF BUILDING & SAFETY CITY OF LAS VEGAS



PERMIT  
NUMBER

91-128051

INSPECTION  
NUMBER

59

JOB ADDRESS

1349 TORINGTON DR

LOT NO.

BLOCK NO.

SUBDIVISION NAME

S

RAINBOW VISTA FESTIVAL 13B

FIRE DEPT. MAP NO.

JOB PHONE

CALL-IN DATE

CALL-IN TIME

SCHEDULE DATE

2319-34

736-8960

12/31/91

15:10

01/02/92

INSPECTOR NO.

INSPECTOR NAME

6764

JESSE SCHELL

INSPECTION  
REQUESTED

ROOF SHEATHING (107)

☐ PARTIAL  
INSPECTION

☐ PARTIAL  
APPROVAL (P)

PARTIAL DESCRIPTION

☒ 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

*[Signature]*

INSPECTION DATE

1/2/92

☐ 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

229-6769

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

# DEPARTMENT OF BUILDING & SAFETY CITY OF LAS VEGAS



PERMIT  
NUMBER

91-128051

INSPECTION  
NUMBER

63

JOB ADDRESS

1349 TORINGTON DR

LOT NO.

937

BLOCK NO.

S

SUBDIVISION NAME

RAINBOW VISTA FESTIVAL 133

FIRE DEPT. MAP NO.

2319-34

JOB PHONE

736-8960

CALL-IN DATE

12/31/91

CALL-IN TIME

15:11

SCHEDULE DATE

01/02/92

INSPECTOR NO.

67/64

INSPECTOR NAME

JESSE SCHELL

INSPECTION  
REQUESTED

SHEAR (109)

A.D. C 32" O.C. GAB. SHEAR

A.D. C 16" O.C. BATH SHEAR

Will ✓ on FRAMING

☐ PARTIAL  
INSPECTION

☐ PARTIAL  
APPROVAL (P)

PARTIAL DESCRIPTION

☒ 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

INSPECTION DATE

☐ 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



**PERMIT  
NUMBER**

**91-129166**

**INSPECTION  
NUMBER**

**12**

**JOB ADDRESS**

**1349 TORINGTON DR**

**LOT NO.**

**BLOCK NO.**

**SUBDIVISION NAME**

**S**

**RAINBOW VISTA 13B 5 13C 3**

**FIRE DEPT. MAP NO.**

**JOB PHONE**

**CALL-IN DATE**

**CALL-IN TIME**

**SCHEDULE DATE**

**2319-34**

**873-2116**

**12/17/91**

**14:51**

**12/18/91**

**INSPECTOR NO.**

**INSPECTOR NAME**

**83**

**JOHN LASKY**

**INSPECTION  
REQUESTED**

**UNDERSLAB PLUMBING (407)**

☐ **PARTIAL  
INSPECTION**

☐ **PARTIAL  
APPROVAL (P)**

**PARTIAL DESCRIPTION**

☒ **APPROVED  
(A)**

☐ **STOP  
WORK (S)**

☐ **COMMENTS  
(C)**

☐ **TEMPORARY  
APPROVAL (T) — UNTIL**

☐ **HOLD  
(H)**

☐ **REJECTED (R)**

**REINSPECTION REQUIRED - CALL \*799-2071**

☐ **REFEE (F)**

**REINSPECTION FEE REQUIRED - PAY AT CITY HALL  
3RD FLOOR - 400 E. STEWART STREET.**

☐ **PERMIT  
REQUIRED**

**INSPECTOR  
SIGNATURE**

*John Lasky*

**INSPECTION DATE**

**12-18-91**

☐ **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 \*386-6251  
SEE REVERSE SIDE FOR INSPECTION TYPES**

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

# DEPARTMENT OF BUILDING & SAFETY CITY OF LAS VEGAS



PERMIT  
NUMBER

91-128051

INSPECTION  
NUMBER

20

JOB ADDRESS

1349 TORINGTON DR

LOT NO.

BLOCK NO.

SUBDIVISION NAME

S

RAINBOW VISTA FESTIVAL 13B

FIRE DEPT. MAP NO.

JOB PHONE

CALL-IN DATE

CALL-IN TIME

SCHEDULE DATE

2319-34

736-8960

12/18/91

15:20

12/19/91

INSPECTOR NO.

INSPECTOR NAME

67

JESSE SCHELL

INSPECTION  
REQUESTED

PRE-SLAB (105)

☐ PARTIAL  
INSPECTION

☐ PARTIAL  
APPROVAL (P)

PARTIAL DESCRIPTION

☒ 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

*Jesse Schell*

INSPECTION DATE

12-19-91

☐ 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 checked="" type="checkbox"/> <b>PERMIT NUMBER</b>                                                                        |  | <b>91-128051</b>                                                                                                                    |  | <input checked="" type="checkbox"/> <b>INSPECTION NUMBER</b> |  | <b>20</b>                                               |                 |
| JOB ADDRESS: <b>1349 TORINGTON DR</b>                                                                                           |  |                                                                                                                                     |  |                                                              |  |                                                         |                 |
| LOT NO.                                                                                                                         |  | BLOCK NO.                                                                                                                           |  | SUBDIVISION NAME                                             |  |                                                         |                 |
|                                                                                                                                 |  | <b>S</b>                                                                                                                            |  | <b>RAINBOW VISTA FESTIVAL 13B</b>                            |  |                                                         |                 |
| FIRE DEPT. MAP NO.                                                                                                              |  | JOB PHONE                                                                                                                           |  | CALL-IN DATE                                                 |  | CALL-IN TIME                                            |                 |
| <b>2319-34</b>                                                                                                                  |  | <b>736-8960</b>                                                                                                                     |  | <b>12/30/91</b>                                              |  | <b>15:21</b>                                            |                 |
| SCHEDULE DATE                                                                                                                   |  | <b>12/31/91</b>                                                                                                                     |  |                                                              |  |                                                         |                 |
| INSPECTOR NO.                                                                                                                   |  | INSPECTOR NAME                                                                                                                      |  |                                                              |  |                                                         |                 |
| <b>67/64</b>                                                                                                                    |  | <b>JESSE SCHELL</b>                                                                                                                 |  |                                                              |  |                                                         |                 |
| <b>INSPECTION REQUESTED</b>                                                                                                     |  | <b>ROOF SHEATHING (107)</b>                                                                                                         |  |                                                              |  |                                                         |                 |
| <p><b>NOT READY</b></p>                                                                                                         |  |                                                                                                                                     |  |                                                              |  |                                                         |                 |
| <input type="checkbox"/> PARTIAL INSPECTION                                                                                     |  | <input type="checkbox"/> PARTIAL APPROVAL (P)                                                                                       |  | PARTIAL DESCRIPTION                                          |  |                                                         |                 |
| <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"/> REJECTED (R)                                                                                           |  | <input type="checkbox"/> REFE (F)                                                                                                   |  | <input type="checkbox"/> HOLD (H)                            |  |                                                         |                 |
| <input checked="" type="checkbox"/> REJECTED (R)                                                                                |  | REINSPECTION REQUIRED - CALL *229-2071                                                                                              |  |                                                              |  | <input type="checkbox"/> PERMIT REQUIRED                |                 |
| <input type="checkbox"/> REFE (F)                                                                                               |  | REINSPECTION FEE REQUIRED - PAY AT CITY HALL 3RD FLOOR - 400 E. STEWART STREET.                                                     |  |                                                              |  |                                                         |                 |
| INSPECTOR SIGNATURE                          |  |                                                                                                                                     |  | INSPECTION DATE <b>12/31/91</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 |  |                                                                                                                                     |  |                                                              |  |                                                         | <b>229-6769</b> |

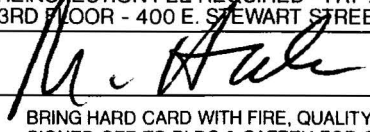
For Additional Assistance Call \*229-6251. See Reverse Side For Inspection Types.

# DEPARTMENT OF BUILDING & SAFETY CITY OF LAS VEGAS

|                                                                                                                                 |                                                                                                                                     |                                              |                                                                |                                                 |
|---------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------|----------------------------------------------------------------|-------------------------------------------------|
| <input checked="" type="checkbox"/>                                                                                             | <b>PERMIT NUMBER</b>                                                                                                                | <b>91-128051</b>                             | <b>INSPECTION NUMBER</b>                                       | <b>22</b>                                       |
| <b>JOB ADDRESS</b><br><b>1349 TORINGTON DR</b>                                                                                  |                                                                                                                                     |                                              |                                                                |                                                 |
| <b>LOT NO.</b>                                                                                                                  |                                                                                                                                     | <b>BLOCK NO.</b>                             |                                                                | <b>SUBDIVISION NAME</b>                         |
|                                                                                                                                 |                                                                                                                                     | <b>S</b>                                     |                                                                | <b>RAINBOW VISTA FESTIVAL 13B</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>2319-34</b>                                                                                                                  | <b>736-8960</b>                                                                                                                     | <b>12/30/91</b>                              | <b>15:21</b>                                                   | <b>12/31/91</b>                                 |
| <b>INSPECTOR NO.</b>                                                                                                            |                                                                                                                                     | <b>INSPECTOR NAME</b>                        |                                                                |                                                 |
| <b>67/64</b>                                                                                                                    |                                                                                                                                     | <b>JESSE SCHELL</b>                          |                                                                |                                                 |
| <b>INSPECTION REQUESTED</b>                                                                                                     |                                                                                                                                     | <b>SHEAR (109)</b>                           |                                                                |                                                 |
| <p style="font-size: 2em; font-family: cursive;">NOT READY</p>                                                                  |                                                                                                                                     |                                              |                                                                |                                                 |
| <input type="checkbox"/> <b>PARTIAL INSPECTION</b>                                                                              | <input type="checkbox"/> <b>PARTIAL APPROVAL (P)</b>                                                                                |                                              | <b>PARTIAL DESCRIPTION</b>                                     |                                                 |
| <input 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 checked="" 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><br><b>12/31/91</b>                      |                                                 |
| <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 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>                                 |

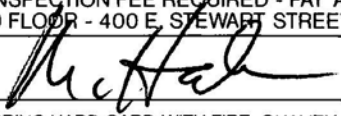
For Additional Assistance Call \*229-6251. See Reverse Side For Inspection Types.

# DEPARTMENT OF BUILDING & SAFETY CITY OF LAS VEGAS

|                                                                                                                                    |  |                                                                                                                                        |  |                                       |  |                                                         |  |
|------------------------------------------------------------------------------------------------------------------------------------|--|----------------------------------------------------------------------------------------------------------------------------------------|--|---------------------------------------|--|---------------------------------------------------------|--|
| <b>PERMIT NUMBER</b>                                                                                                               |  | <b>92-132104</b>                                                                                                                       |  | <b>INSPECTION NUMBER</b>              |  | <b>34</b>                                               |  |
| JOB ADDRESS<br><b>1349 TORINGTON DR</b>                                                                                            |  |                                                                                                                                        |  |                                       |  |                                                         |  |
| LOT NO.                                                                                                                            |  | BLOCK NO.<br><b>S</b>                                                                                                                  |  | SUBDIVISION NAME<br><b>R V 13B-5</b>  |  |                                                         |  |
| FIRE DEPT. MAP NO.<br><b>2319-34</b>                                                                                               |  | JOB PHONE<br><b>362-0638</b>                                                                                                           |  | CALL-IN DATE<br><b>02/14/92</b>       |  | CALL-IN TIME<br><b>15:18</b>                            |  |
| SCHEDULE DATE<br><b>02/18/92</b>                                                                                                   |  |                                                                                                                                        |  |                                       |  |                                                         |  |
| INSPECTOR NO.<br><b>83</b>                                                                                                         |  | INSPECTOR NAME<br><b>JOHN LASKY</b>                                                                                                    |  |                                       |  |                                                         |  |
| <b>INSPECTION REQUESTED</b>                                                                                                        |  | <b>FINAL MECHANICAL (340)</b>                                                                                                          |  |                                       |  |                                                         |  |
|                                                                                                                                    |  |                                                                                                                                        |  |                                       |  |                                                         |  |
| <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<br>3RD FLOOR - 400 E. STEWART STREET.                                                     |  |                                       |  |                                                         |  |
| INSPECTOR SIGNATURE<br>                         |  |                                                                                                                                        |  | INSPECTION DATE<br><b>2-18-92</b>     |  |                                                         |  |
| <input type="checkbox"/> PROJECT COMPLETE                                                                                          |  | BRING HARD CARD WITH FIRE, QUALITY CONTROL & PLANNING APPROVALS<br>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 |  |                                                                                                                                        |  |                                       |  | <b>229-6765</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>                                                                                                                               | <b>91-129166</b>                             | <b>INSPECTION NUMBER</b>                                       | <b>32</b>                                |
| <b>JOB ADDRESS</b><br><b>1349 TORINGTON DR</b>                                                                                         |                                                                                                                                                    |                                              |                                                                |                                          |
| <b>LOT NO.</b>                                                                                                                         |                                                                                                                                                    | <b>BLOCK NO.</b><br><b>S</b>                 | <b>SUBDIVISION NAME</b><br><b>RAINBOW VISTA 13B 5 13C 3</b>    |                                          |
| <b>FIRE DEPT. MAP NO.</b><br><b>2319-34</b>                                                                                            | <b>JOB PHONE</b><br><b>873-2116</b>                                                                                                                | <b>CALL-IN DATE</b><br><b>02/14/92</b>       | <b>CALL-IN TIME</b><br><b>15:17</b>                            | <b>SCHEDULE DATE</b><br><b>02/18/92</b>  |
| <b>INSPECTOR NO.</b><br><b>83</b>                                                                                                      |                                                                                                                                                    | <b>INSPECTOR NAME</b><br><b>JOHN LASKY</b>   |                                                                |                                          |
| <b>INSPECTION REQUESTED</b>                                                                                                            |                                                                                                                                                    | <b>FINAL PLUMBING (440)</b>                  |                                                                |                                          |
|                                                                                                                                        |                                                                                                                                                    |                                              |                                                                |                                          |
| <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><br>                      |                                                                                                                                                    | <b>INSPECTION DATE</b><br><b>2-18-92</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> |                                              |                                                                |                                          |
| <b>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</b> |                                                                                                                                                    |                                              |                                                                | <b>229-6765</b>                          |

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

# DEPARTMENT OF BUILDING & SAFETY CITY OF LAS VEGAS

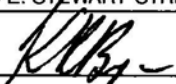
|                                                |                          |                             |                                  |                      |
|------------------------------------------------|--------------------------|-----------------------------|----------------------------------|----------------------|
| <input checked="" type="checkbox"/>            | <b>PERMIT<br/>NUMBER</b> | <b>91-129166</b>            | <b>INSPECTION<br/>NUMBER</b>     | <b>33</b>            |
| <b>JOB ADDRESS</b><br><b>1349 TORINGTON DR</b> |                          |                             |                                  |                      |
| <b>LOT NO.</b>                                 |                          | <b>BLOCK NO.</b>            | <b>SUBDIVISION NAME</b>          |                      |
|                                                |                          | <b>S</b>                    | <b>RAINBOW VISTA 13B 5 13C 3</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>2319-34</b>                                 | <b>873-2116</b>          | <b>02/14/92</b>             | <b>15:18</b>                     | <b>02/18/92</b>      |
| <b>INSPECTOR NO.</b>                           |                          | <b>INSPECTOR NAME</b>       |                                  |                      |
| <b>83</b>                                      |                          | <b>JOHN LASKY</b>           |                                  |                      |
| <b>INSPECTION<br/>REQUESTED</b>                |                          | <b>FINAL GAS TEST (423)</b> |                                  |                      |

Tag # 40571

|                                                                                                                                            |                                                                                                                                                        |                                                  |                                                                    |                                                     |
|--------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------|--------------------------------------------------------------------|-----------------------------------------------------|
| <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>                           |                                                                    |                                                     |
| <i>M. Hall</i>                                                                                                                             |                                                                                                                                                        | <b>2-18-92</b>                                   |                                                                    |                                                     |
| <input 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>229-6765</b>                                     |

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# DEPARTMENT OF BUILDING & SAFETY CITY OF LAS VEGAS

|                                                                                                                                 |  |                                                                                                                                     |  |                                            |  |                                                         |          |
|---------------------------------------------------------------------------------------------------------------------------------|--|-------------------------------------------------------------------------------------------------------------------------------------|--|--------------------------------------------|--|---------------------------------------------------------|----------|
| <input checked="" type="checkbox"/> PERMIT NUMBER                                                                               |  | 91-128160                                                                                                                           |  | <input type="checkbox"/> INSPECTION NUMBER |  | 6                                                       |          |
| JOB ADDRESS                                                                                                                     |  |                                                                                                                                     |  |                                            |  |                                                         |          |
| 1349 TORINGTON DR                                                                                                               |  |                                                                                                                                     |  |                                            |  |                                                         |          |
| LOT NO.                                                                                                                         |  | BLOCK NO.                                                                                                                           |  | SUBDIVISION NAME                           |  |                                                         |          |
|                                                                                                                                 |  |                                                                                                                                     |  | RAINBOW VISTA FESTIVAL                     |  |                                                         |          |
| FIRE DEPT. MAP NO.                                                                                                              |  | JOB PHONE                                                                                                                           |  | CALL-IN DATE                               |  | CALL-IN TIME                                            |          |
| 2319-34                                                                                                                         |  | 739-7781                                                                                                                            |  | 02/14/92                                   |  | 15:18                                                   |          |
| SCHEDULE DATE                                                                                                                   |  | 02/18/92                                                                                                                            |  |                                            |  |                                                         |          |
| INSPECTOR NO.                                                                                                                   |  | INSPECTOR NAME                                                                                                                      |  |                                            |  |                                                         |          |
| 71                                                                                                                              |  | KEEFE BEYER                                                                                                                         |  |                                            |  |                                                         |          |
| INSPECTION REQUESTED                                                                                                            |  | FINAL ELECTRICAL (240)                                                                                                              |  |                                            |  |                                                         |          |
| <p style="font-size: 24px; font-family: cursive;">NO BREAKERS INSTALLED</p>                                                     |  |                                                                                                                                     |  |                                            |  |                                                         |          |
| <input type="checkbox"/> PARTIAL INSPECTION                                                                                     |  | <input type="checkbox"/> PARTIAL APPROVAL (P)                                                                                       |  | PARTIAL DESCRIPTION                        |  |                                                         |          |
| <input type="checkbox"/> APPROVED (A)                                                                                           |  | <input type="checkbox"/> STOP WORK (S)                                                                                              |  | <input type="checkbox"/> COMMENTS (C)      |  | <input type="checkbox"/> TEMPORARY APPROVAL (T) — UNTIL |          |
| <input checked="" type="checkbox"/> REJECTED (R)                                                                                |  | <input type="checkbox"/> REFEED (F)                                                                                                 |  | <input type="checkbox"/> HOLD (H)          |  |                                                         |          |
|                                                                                                                                 |  | REINSPECTION REQUIRED - CALL *229-2071                                                                                              |  |                                            |  | <input type="checkbox"/> PERMIT REQUIRED                |          |
|                                                                                                                                 |  | REINSPECTION FEE REQUIRED - PAY AT CITY HALL 3RD FLOOR - 400 E. STEWART STREET.                                                     |  |                                            |  |                                                         |          |
| INSPECTOR SIGNATURE                                                                                                             |  |                                                                                                                                     |  | INSPECTION DATE                            |  |                                                         |          |
|                                              |  |                                                                                                                                     |  | 18 FEB 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



**PERMIT  
NUMBER**

**91-128051**

**INSPECTION  
NUMBER**

**20**

**JOB ADDRESS**

**1349 TORINGTON DR**

**LOT NO.**

**BLOCK NO.**

**SUBDIVISION NAME**

**S**

**RAINBOW VISTA FESTIVAL 13B**

**FIRE DEPT. MAP NO.**

**JOB PHONE**

**CALL-IN DATE**

**CALL-IN TIME**

**SCHEDULE DATE**

**2319-34**

**736-8960**

**12/18/91**

**15:20**

**12/19/91**

**INSPECTOR NO.**

**INSPECTOR NAME**

**67**

**JESSE SCHELL**

**INSPECTION  
REQUESTED**

**PRE-SLAB (105)**

☐ **PARTIAL  
INSPECTION**

☐ **PARTIAL  
APPROVAL (P)**

**PARTIAL DESCRIPTION**

☒ **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**

*Jesse Schell*

**INSPECTION DATE**

**12-19-91**

☐ **PROJECT  
COMPLETE**

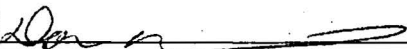
**BRING HARD CARD WITH FIRE, QUALITY CONTROL & PLANNING APPROVALS  
SIGNED OFF TO BLDG & SAFETY FOR C. of O. ISSUANCE (Commercial Only)**

**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 checked="" type="checkbox"/>                                                                                             | <b>PERMIT NUMBER</b> | 91-128051                                                                                                                           | <b>INSPECTION NUMBER</b> | 63                                    |
| <b>JOB ADDRESS</b>                                                                                                              |                      |                                                                                                                                     |                          |                                       |
| 1349 TORINGTON DR                                                                                                               |                      |                                                                                                                                     |                          |                                       |
| <b>LOT NO.</b>                                                                                                                  |                      | <b>BLOCK NO.</b>                                                                                                                    |                          | <b>SUBDIVISION NAME</b>               |
| 977                                                                                                                             |                      | S                                                                                                                                   |                          | RAINBOW VISTA FESTIVAL 138            |
| <b>FIRE DEPT. MAP NO.</b>                                                                                                       |                      | <b>JOB PHONE</b>                                                                                                                    |                          | <b>CALL-IN DATE</b>                   |
| 2319-34                                                                                                                         |                      | 736-8960                                                                                                                            |                          | 12/31/91                              |
|                                                                                                                                 |                      | <b>CALL-IN TIME</b>                                                                                                                 |                          | <b>SCHEDULE DATE</b>                  |
|                                                                                                                                 |                      | 15:11                                                                                                                               |                          | 01/02/92                              |
| <b>INSPECTOR NO.</b>                                                                                                            |                      | <b>INSPECTOR NAME</b>                                                                                                               |                          |                                       |
| 67611                                                                                                                           |                      | JESSE SCHELL                                                                                                                        |                          |                                       |
| <b>INSPECTION REQUESTED</b>                                                                                                     |                      |                                                                                                                                     |                          |                                       |
| SHEAR (109)                                                                                                                     |                      |                                                                                                                                     |                          |                                       |
| <p>A.D. C 32" O.C. G.N.P. SHEAR</p> <p>A.D. C 16" O.C. BATH SHEAR</p> <p>Will ✓ on FRAMING</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)                                                                                     |                          | <input type="checkbox"/> HOLD (H)     |
| <input type="checkbox"/> REJECTED (R)                                                                                           |                      | REINSPECTION REQUIRED - CALL * 229-2071                                                                                             |                          |                                       |
| <input type="checkbox"/> REFEE (F)                                                                                              |                      | 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>                |
|                                              |                      |                                                                                                                                     |                          | 11/2/92                               |
| <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



PERMIT  
NUMBER

91-128051

INSPECTION  
NUMBER

59

JOB ADDRESS

1349 TORINGTON DR

LOT NO.

BLOCK NO.

SUBDIVISION NAME

S

RAINBOW VISTA FESTIVAL 13B

FIRE DEPT. MAP NO.

JOB PHONE

CALL-IN DATE

CALL-IN TIME

SCHEDULE DATE

2319-34

736-8960

12/31/91

4:10

01/02/92

INSPECTOR NO.

INSPECTOR NAME

67/64

JESSE SCHELL

INSPECTION  
REQUESTED

ROOF SHEATHING (107)

|                                                  |                                                                                 |                                       |                                                         |                                          |
|--------------------------------------------------|---------------------------------------------------------------------------------|---------------------------------------|---------------------------------------------------------|------------------------------------------|
| <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

*[Signature]*

INSPECTION DATE

1/2/92

☐ 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

229-6769

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

## DEPARTMENT OF BUILDING &amp; SAFETY CITY OF LAS VEGAS

|                                                                                                                                 |  |                                                                                                                                     |  |                                                |  |                                                         |          |
|---------------------------------------------------------------------------------------------------------------------------------|--|-------------------------------------------------------------------------------------------------------------------------------------|--|------------------------------------------------|--|---------------------------------------------------------|----------|
| <input checked="" type="checkbox"/> PERMIT NUMBER                                                                               |  | 91-128051                                                                                                                           |  | <input type="checkbox"/> INSPECTION NUMBER     |  | 20                                                      |          |
| JOB ADDRESS<br>1349 TORINGTON DR                                                                                                |  |                                                                                                                                     |  |                                                |  |                                                         |          |
| LOT NO.                                                                                                                         |  | BLOCK NO.<br>S                                                                                                                      |  | SUBDIVISION NAME<br>RAINBOW VISTA FESTIVAL 133 |  |                                                         |          |
| FIRE DEPT. MAP NO.<br>2319-34                                                                                                   |  | JOB PHONE<br>736-8960                                                                                                               |  | CALL-IN DATE<br>12/30/91                       |  | CALL-IN TIME<br>15:21                                   |          |
|                                                                                                                                 |  |                                                                                                                                     |  |                                                |  | SCHEDULE DATE<br>12/31/91                               |          |
| INSPECTOR NO.<br>67/1                                                                                                           |  | INSPECTOR NAME<br>JESSE SCHELL                                                                                                      |  |                                                |  |                                                         |          |
| <input type="checkbox"/> INSPECTION REQUESTED                                                                                   |  | ROOF SHEATHING (107)                                                                                                                |  |                                                |  |                                                         |          |
| NOT READY                                                                                                                       |  |                                                                                                                                     |  |                                                |  |                                                         |          |
| <input type="checkbox"/> PARTIAL INSPECTION                                                                                     |  | <input type="checkbox"/> PARTIAL APPROVAL (P)                                                                                       |  | PARTIAL DESCRIPTION                            |  |                                                         |          |
| <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 type="checkbox"/> REFEE (F)                                                                                              |  | REINSPECTION FEE REQUIRED - PAY AT CITY HALL 3RD FLOOR - 400 E. STEWART STREET.                                                     |  |                                                |  |                                                         |          |
| INSPECTOR SIGNATURE<br>                      |  |                                                                                                                                     |  | INSPECTION DATE<br>12/31/91                    |  |                                                         |          |
| <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



**PERMIT  
NUMBER**

91-128051

**INSPECTION  
NUMBER**

22

JOB ADDRESS

1349 TORINGTON DR

LOT NO.

BLOCK NO.

SUBDIVISION NAME

S

RAINBOW VISTA FESTIVAL 13B

FIRE DEPT. MAP NO.

JOB PHONE

CALL-IN DATE

CALL-IN TIME

SCHEDULE DATE

2319-34

736-8960

12/30/91

15:21

12/31/91

INSPECTOR NO.

INSPECTOR NAME

67/611

JESSE SCHELL

**INSPECTION  
REQUESTED**

SHEAR (109)

NOT READY

☐ PARTIAL  
INSPECTION

☐ PARTIAL  
APPROVAL (P)

PARTIAL DESCRIPTION

☐ 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**

INSPECTION DATE

☐ **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

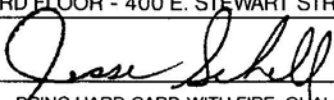
For Additional Assistance Call \* 229-6251. See Reverse Side For Inspection Types.

# DEPARTMENT OF BUILDING & SAFETY CITY OF LAS VEGAS

|                                     |                       |                                   |                          |                      |
|-------------------------------------|-----------------------|-----------------------------------|--------------------------|----------------------|
| <input checked="" type="checkbox"/> | <b>PERMIT NUMBER</b>  | <b>91-128051</b>                  | <b>INSPECTION NUMBER</b> | <b>29</b>            |
| <b>JOB ADDRESS</b>                  |                       |                                   |                          |                      |
| <b>1349 TORINGTON DR</b>            |                       |                                   |                          |                      |
| <b>LOT NO.</b>                      | <b>BLOCK NO.</b>      | <b>SUBDIVISION NAME</b>           |                          |                      |
|                                     | <b>3</b>              | <b>RAINBOW VISTA FESTIVAL 133</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>2319-34</b>                      | <b>736-8960</b>       | <b>01/16/92</b>                   | <b>16:56</b>             | <b>01/17/92</b>      |
| <b>INSPECTOR NO.</b>                | <b>INSPECTOR NAME</b> |                                   |                          |                      |
| <b>67</b>                           | <b>JESSE SCHELL</b>   |                                   |                          |                      |
| <b>INSPECTION REQUESTED</b>         |                       |                                   |                          |                      |
| <b>FRAMING (120)</b>                |                       |                                   |                          |                      |

① Complete Fire place steps

(Will ✓ on Final)

|                                                                                                                                        |                                                                                                                                                    |                                              |                                                                |                                                 |
|----------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------|----------------------------------------------------------------|-------------------------------------------------|
| <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>                       |                                                                |                                                 |
|                                                     |                                                                                                                                                    | <b>1-17-92</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> |                                              |                                                                |                                                 |
| <b>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</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



PERMIT  
NUMBER

91-128051

INSPECTION  
NUMBER

10

JOB ADDRESS

1349 TORINGTON DR

LOT NO.

BLOCK NO.

SUBDIVISION NAME

S

RAINBOW VISTA FESTIVAL 13B

FIRE DEPT. MAP NO.

JOB PHONE

CALL-IN DATE

CALL-IN TIME

SCHEDULE DATE

2319-34

736-8960

01/17/92

11:37

01/21/92

INSPECTOR NO.

INSPECTOR NAME

67

JESSE SCHELL

INSPECTION  
REQUESTED

INSULATION (123)

☐ PARTIAL  
INSPECTION

☐ PARTIAL  
APPROVAL (P)

PARTIAL DESCRIPTION

☒ 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

*Jesse Schell*

INSPECTION DATE

1-21-92

☐ 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

229-6769

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

# DEPARTMENT OF BUILDING & SAFETY CITY OF LAS VEGAS



PERMIT  
NUMBER

91-128051

INSPECTION  
NUMBER

10

JOB ADDRESS

1349 TORINGTON DR

LOT NO.

BLOCK NO.

SUBDIVISION NAME

S

RAINBOW VISTA FESTIVAL 13B

FIRE DEPT. MAP NO.

JOB PHONE

CALL-IN DATE

CALL-IN TIME

SCHEDULE DATE

2319-34

736-8960

01/21/92

16:18

01/22/92

INSPECTOR NO.

INSPECTOR NAME

67

JESSE SCHELL

INSPECTION  
REQUESTED

DRYWALL NAILING (125)

|                                                     |                                                                                    |                                          |                                                            |                                             |
|-----------------------------------------------------|------------------------------------------------------------------------------------|------------------------------------------|------------------------------------------------------------|---------------------------------------------|
| <input type="checkbox"/> PARTIAL<br>INSPECTION      | <input type="checkbox"/> PARTIAL<br>APPROVAL (P)                                   | PARTIAL DESCRIPTION                      |                                                            |                                             |
| <input checked="" type="checkbox"/> APPROVED<br>(A) | <input type="checkbox"/> STOP<br>WORK (S)                                          | <input type="checkbox"/> COMMENTS<br>(C) | <input type="checkbox"/> TEMPORARY<br>APPROVAL (T) — UNTIL | <input type="checkbox"/> HOLD<br>(H)        |
| <input type="checkbox"/> REJECTED (R)               | REINSPECTION REQUIRED - CALL * 229-2071                                            |                                          |                                                            | <input type="checkbox"/> PERMIT<br>REQUIRED |
| <input type="checkbox"/> REFEE (F)                  | REINSPECTION FEE REQUIRED - PAY AT CITY HALL<br>3RD FLOOR - 400 E. STEWART STREET. |                                          |                                                            |                                             |

INSPECTOR  
SIGNATURE

*Jesse Schell*

INSPECTION DATE

1-22-92

☐ PROJECT  
COMPLETE

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

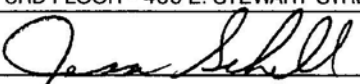
IF YOU HAVE ANY QUESTIONS ON THIS INSPECTION, YOU MAY  
CALL THE INSPECTOR FROM 7:00 A.M. - 7:15 A.M. OR 2:45 P.M. - 3:00 P.M. AT

229-6769

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> |  | <b>91-128051</b>                             |  | <b>INSPECTION NUMBER</b>                                     |  | <b>18</b>                           |  |
| <b>JOB ADDRESS</b><br><b>1349 TORINGTON DR</b>           |  |                                              |  |                                                              |  |                                     |  |
| <b>LOT NO.</b><br>✓                                      |  | <b>BLOCK NO.</b><br><b>S</b>                 |  | <b>SUBDIVISION NAME</b><br><b>RAINBOW VISTA FESTIVAL 13B</b> |  |                                     |  |
| <b>FIRE DEPT. MAP NO.</b><br><b>2319-34</b>              |  | <b>JOB PHONE</b><br><b>736-8960</b>          |  | <b>CALL-IN DATE</b><br><b>01/22/92</b>                       |  | <b>CALL-IN TIME</b><br><b>15:48</b> |  |
| <b>SCHEDULE DATE</b><br><b>01/23/92</b>                  |  |                                              |  |                                                              |  |                                     |  |
| <b>INSPECTOR NO.</b><br><b>67</b>                        |  | <b>INSPECTOR NAME</b><br><b>JESSE SCHELL</b> |  |                                                              |  |                                     |  |
| <b>INSPECTION REQUESTED</b>                              |  | <b>EXTERIOR LATH/STUCCO (129)</b>            |  |                                                              |  |                                     |  |

|                                                                                                                                        |                                                                                        |                                                                                                                                                    |                                                                |  |  |  |                                                 |
|----------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------|--|--|--|-------------------------------------------------|
| <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><br>                      |                                                                                        | <b>INSPECTION DATE</b><br><b>1-23-92</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> |                                                                |  |  |  |                                                 |
| <b>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</b> |                                                                                        |                                                                                                                                                    |                                                                |  |  |  | <b>229-6767</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"/> PERMIT NUMBER | 91-128051      |                            | INSPECTION NUMBER | 26            |  |
| JOB ADDRESS<br>1349 TORINGTON DR                  |                |                            |                   |               |  |
| LOT NO.                                           | BLOCK NO.      | SUBDIVISION NAME           |                   |               |  |
|                                                   | S              | RAINBOW VISTA FESTIVAL 13B |                   |               |  |
| FIRE DEPT. MAP NO.                                | JOB PHONE      | CALL-IN DATE               | CALL-IN TIME      | SCHEDULE DATE |  |
| 2319-34                                           | 736-8960       | 03/09/92                   | 18:37             | 03/10/92      |  |
| INSPECTOR NO.                                     | INSPECTOR NAME |                            |                   |               |  |
| 67                                                | JESSE SCHELL   |                            |                   |               |  |
| INSPECTION REQUESTED                              |                | ELEC METER TAG (133)       |                   |               |  |

E tag # 41097

|                                                                                                                                 |                                                                                                                                     |                                       |                                                         |                                          |          |
|---------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------|---------------------------------------------------------|------------------------------------------|----------|
| <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                                                                                                             | <i>Jesse Schell</i>                                                                                                                 |                                       | INSPECTION DATE<br>3-10-92                              |                                          |          |
| <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

|                                         |                              |                                                       |                              |
|-----------------------------------------|------------------------------|-------------------------------------------------------|------------------------------|
| <b>PERMIT NUMBER</b><br>91-128051       |                              | <b>INSPECTION NUMBER</b><br>28                        |                              |
| <b>JOB ADDRESS</b><br>1349 TORINGTON DR |                              |                                                       |                              |
| <b>LOT NO.</b>                          | <b>BLOCK NO.</b><br>S        | <b>SUBDIVISION NAME</b><br>RAINBOW VISTA FESTIVAL 130 |                              |
| <b>FIRE DEPT. MAP NO.</b><br>2319-34    | <b>JOB PHONE</b><br>736-8960 | <b>CALL-IN DATE</b><br>03/23/92                       | <b>CALL-IN TIME</b><br>17:00 |
| <b>INSPECTOR NO.</b><br>67              |                              | <b>INSPECTOR NAME</b><br>JESSE SCHELL                 |                              |
| <b>INSPECTION REQUESTED</b>             |                              | <b>BUILDING FINAL (140)</b>                           |                              |

① install nite Lock

② install gas Log & glass doors  
on Fireplace

|                                                                                                                                    |                                                      |                                                                                                                                        |                                                                 |
|------------------------------------------------------------------------------------------------------------------------------------|------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------|
| <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>REJECTED (R)</b>                                                                                       | <input type="checkbox"/> <b>REFEE (F)</b>            | <input type="checkbox"/> <b>HOLD (H)</b>                                                                                               | <input type="checkbox"/> <b>PERMIT REQUIRED</b>                 |
| <b>INSPECTOR SIGNATURE</b><br><i>Jesse Schell</i>                                                                                  |                                                      | <b>INSPECTION DATE</b><br>3-24-92                                                                                                      |                                                                 |
| <input checked="" type="checkbox"/> <b>PROJECT COMPLETE</b>                                                                        |                                                      | BRING HARD CARD WITH FIRE, QUALITY CONTROL & PLANNING APPROVALS<br>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 |                                                      |                                                                                                                                        | <b>229-6769</b>                                                 |

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