

## CITY OF LAS VEGAS, NEVADA

PERMIT NO.

91-128906

DEPARTMENT OF BUILDING AND SAFETY  
PHONE 386-6251

FOR IN



65173

## BUILDING PERMIT

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

LOG NO. &amp; AREA

P-259

DATE

4/26/90

CONST. VAL. \$

31,900.00

ADDRESS OF  
CONSTRUCTION

2221 SILVER PINE DR.

OWNER JAW PROPERTIES

PHONE 361-1451

LOT(S)

48-B

BLOCK

Bldg. 4

SUBDIVISION

TORREY PINES PHASE III

ZONE

R-3 361-5000

PROPOSED CONSTRUCTION

SFD W/F.P 'B'

USE

RESIDENCE

THIS PERMIT FOR

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

FLOOR AREA

BSMT NA

1ST

504.5

2ND

504.5

GARAGE

458

PORCH

NA

TOTAL

1467

CONTRACTOR

EML CONSTRUCTION CO, INC.

STATE LICENSE NO.

0020778

CITY LICENSE NO.

11-02594-2-035635

ARCHITECT

DENNIS E. RUSK

ENGINEER

DEA

MASTER PLUMBER/  
CONTRACTORMASTER ELECTRICIAN/  
CONTRACTOR

## OTHER INSPECTIONS AND FEES

- Inspections outside of normal business hours = \$30.00 per hour (minimum charge three hours).
- Re-inspection fee during normal business hours assessed under provisions of TABLE 3-A of the Uniform Building Code = \$30.00 per hour.
- Inspections during normal business hours for which no fee is specifically indicated = \$30.00 per hour (minimum charge one half hour).
- Additional plan review required by changes, additions, or revisions to approved plans = \$30.00 per hour (minimum charge two hours).

## CONDITIONS OF THE PERMIT:

- 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.
- I agree that when the job is completed that I will call for final inspection before occupancy.
- I agree to perform all construction in accordance with City Ordinances and Building Codes.
- 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.
- I have read and understand the contents of this application and permit; I hereby state that the information I have supplied on this application is true and correct.
- Approval for the work under this permit will be given only after refuse and debris have been removed from job site and public right of way.
- 24 HOUR MINIMUM NOTICE REQUIRED FOR INSPECTIONS.

BY

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

OWNER

BY

AGENT

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

LAND DEVELOPMENT AND FLOOD CONTROL ENGINEER

DATE

PLANNING DEPT.

DATE

BUILDING DEPT.

DATE

## SPECIAL CONDITIONS:

SEE PLANS FOR CONDITIONS  
OF APPROVAL

ATTENTION BUILDING & SAFETY  
NO FINAL INSPECTION  
WITHOUT PLANNING APPROVAL

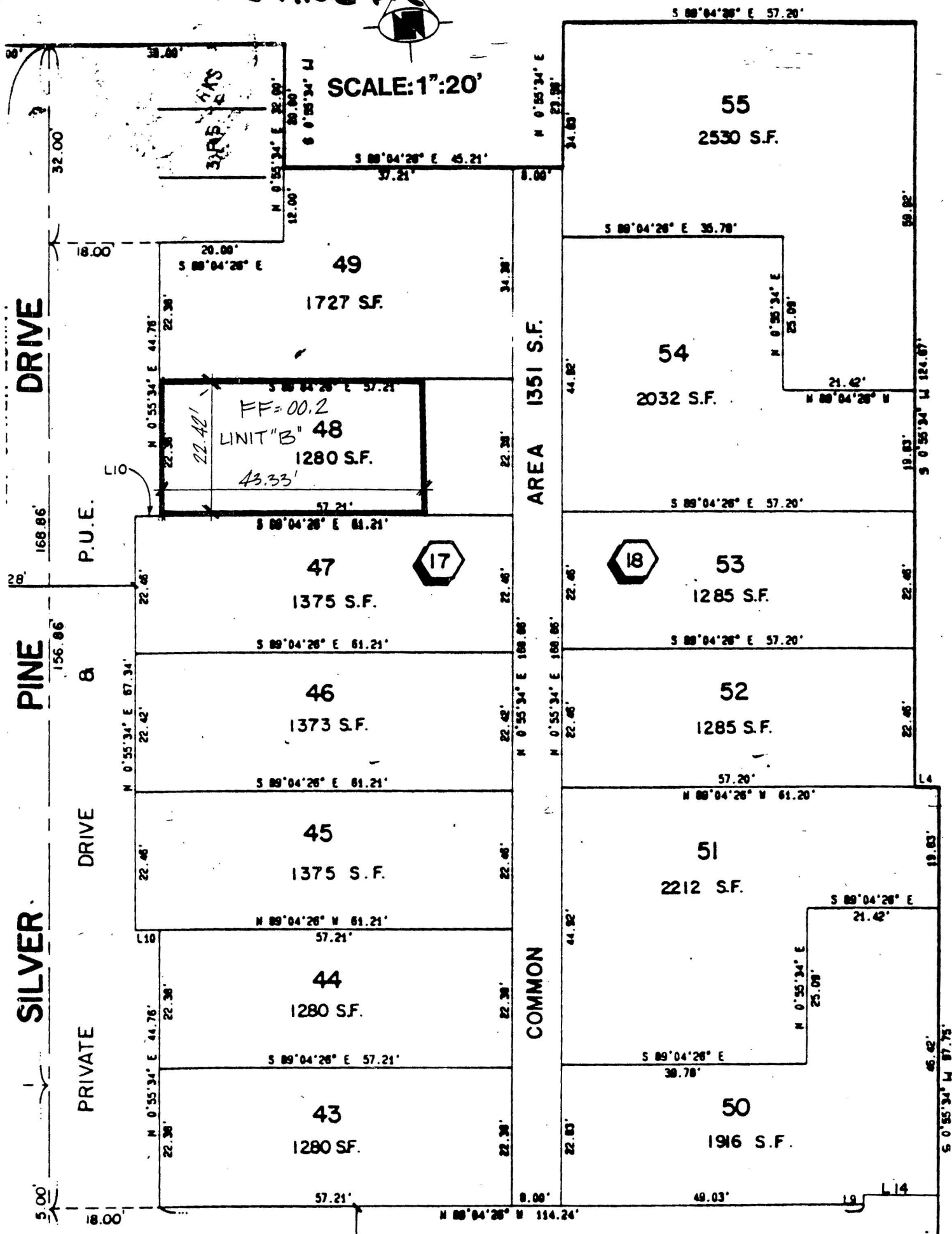
## RECEIPT

| 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                          |       |     |
| AIR CONDITIONING                       |       | FEE | 7143 - 2973 SEWER CONNECTION                      |       |     |
| NEW UNIT - 3 TON = 9.00 OVER = 16.50   |       |     | 2310 - 2431 PLAN REVIEW FEE                       |       |     |
| FURNACE TO 100,000/9.00 OVER/11.00     |       |     | 2310 - 2431 BLDG. PERMIT FEE                      |       |     |
| VAPORATIVE COOLER                      | 6.50  |     | TOTAL FEES                                        |       |     |
| VENTILATION FAN                        | 2.35  |     |                                                   |       |     |
| 2310 - 2435                            | TOTAL |     |                                                   |       |     |

Permit Expires 180 Days After Abandonment of Work

PERMIT NO.

MUST BE MACHINE VALIDATED





## CITY OF LAS VEGAS, NEVADA

PERMIT NO.

92-139719

DEPARTMENT OF BUILDING AND SAFETY  
PHONE 229-6251

FOR INSPECTIONS, CALL 229-2071

ELECTRICAL PERMIT

PLAN CHECK NO. P-259 DATE March 18, 1992 CONST. VAL. \$ADDRESS OF CONSTRUCTION 2221 Silver Pine WY OWNER EMC CONST.CONTRACTOR Edison Electric INC STATE LICENSE NO. 21662 CITY LICENSE NO. C1101246-2(PRINT NAME OF MASTER ELECTRICIAN) James W. Tully MASTER CARD NO. MI-0049 CONTRACTOR PHONE 871-6467PROPOSED CONSTRUCTION: Electrical wiring for new town homesELECTRIC 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                                                                                                                                                                                                                                       | 10.70 | 10.70 |
|                                                                                                                           | Supplemental Fee                                                                                                                                                                                                                                              | 4.85  |       |
| <b>APPLIANCE CHARGE</b>                                                                                                   |                                                                                                                                                                                                                                                               |       |       |
| <b>Residential or General Commercial</b>                                                                                  |                                                                                                                                                                                                                                                               |       |       |
| 35                                                                                                                        | Receptacle <u>25</u> Switch <u>10</u>                                                                                                                                                                                                                         | .45   | 15.75 |
| 8                                                                                                                         | Each Light Fixture, Socket, or Exit Light, Smoke Detector or Exhaust Fan                                                                                                                                                                                      | .35   | 2.80  |
| 6                                                                                                                         | EACH OUTLET FOR SPECIAL PURPOSE:<br>Dishwasher, Garbage Grinder, Trash Compactor, G.F.I., Clothes Washer, Dryer, Electric Range, Ovens, Water Heater, Space Heater, Blast Coil Heater, (PER K.W.), Mercury Lamp, Quartz Lamp, Sodium Lamp, 20AMP Sign Circuit | .75   | 4.50  |
|                                                                                                                           | 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, 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>                                                                                |                                                                                                                                                                                                                                                               |       |       |
| 1                                                                                                                         | Up to 200 AMP                                                                                                                                                                                                                                                 | 6.45  | 6.45  |
|                                                                                                                           | 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 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           |       |
|                                                                               | Permanent A/C Unit (5 Tons or Less)                                                                                                                                          | 3.25           |       |
|                                                                               | 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            |       |
| 2                                                                             | TV Master System                                                                                                                                                             | .35            | .70   |
| 2                                                                             | Telephone or Computer Outlet                                                                                                                                                 | .35            | .70   |
| <b>OTHER INSPECTIONS AND FEES:<br/>INCLUDES ISSUANCE FEES WHEN APPLICABLE</b> |                                                                                                                                                                              |                |       |
|                                                                               | Inspections outside of normal business hours (minimum charge — three hours)                                                                                                  | 30.00 per hour |       |
|                                                                               | Reinspection fee assessed under provisions of TABLE 3-A of the Uniform Building Code = \$30.00 EACH.                                                                         | 30.00 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 — one-half hour). After work hours — \$30.00 per hour — minimum 1 hour. | 30.00 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

LESS STARTER PERMIT

TOTAL FEES

PERMIT NO.

MUST BE MACHINE VALIDATED

Permit Expires 180 Days After Abandonment of Work

## CITY OF LAS VEGAS, NEVADA

PERMIT NO.

92-136322

DEPARTMENT OF BUILDING AND SAFETY  
PHONE 386-6251

FOR INSPECTIONS; CALL 799-2071

PLUMBING PERMIT

LOG NO. & AREA T 259-90 DATE 2-13-92 CONST. VAL. \$ADDRESS OF CONSTRUCTION 2221 Silver Pine Way OWNER EML PHONE 361-5000CONTRACTOR Pioneer STATE LICENSE NO. 7507A CITY LICENSE NO. C1168107677LOT(S) BLOCK SUBDIVISION Torrey Pines Village ZONEPROPOSED CONSTRUCTION: plumbing 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                                             | 10.70    | 10.70 |
|                                  | For Issuing Each Supplemental Permit                                | 4.85     |       |
| <b>FIXTURE CHARGE</b>            |                                                                     |          |       |
| 7                                | Bathub, Shower, Lavatory, Toilet, Urinal                            | EA, 2.15 | 15.05 |
| 1                                | Floor Drain, Floor Sink, Wash Tray, Sink                            | EA, 2.15 | 2.15  |
| 3                                | Garbage Disposal, Clothes Washer, Dishwasher, (residential)         | EA, 2.15 | 6.45  |
|                                  | Garbage Disposal (commercial)                                       | EA, 8.60 |       |
|                                  | Clothes Washer, Dishwasher (commercial)                             | EA, 2.15 |       |
| 1                                | Clothes Dryer (gas) (venting)                                       | 2.15     | 2.15  |
|                                  | Dental Unit                                                         | 8.60     |       |
|                                  | Drinking Fountain                                                   | 2.15     |       |
|                                  | Refrigerator - Ice Maker, Water Dispenser                           | 2.15     |       |
|                                  | Any other water using equipment, Attached Coffee Makers, Ice Makers | 2.15     |       |
| 1                                | Hot Water Heater (Gas or Electric)                                  | EA, 2.15 | 2.15  |
| <b>SEWER SYSTEM</b>              |                                                                     |          |       |
| 1                                | New, Replacement, Modification, or Any Drainage Work                | 10.70    | 10.70 |
|                                  | Grease or Sand Trap or Interceptor                                  | 2.15     |       |
|                                  | Trailer Trap (rental parks)                                         | 5.35     |       |
| <b>WATER SOFTENERS</b>           |                                                                     |          |       |
|                                  | Non Permanent Type (rental)                                         | 2.15     |       |
|                                  | Permanent Type (connected to drain)                                 | 2.15     |       |
| <b>WATER DISTRIBUTION SYSTEM</b> |                                                                     |          |       |
| 1                                | Single Family Dwelling                                              | 6.45     | 6.45  |
|                                  | Multi-Family Dwelling                                               | 6.45     |       |
|                                  | Plus Each Dwelling Unit                                             | 3.25     |       |
|                                  | Commercial Building per floor                                       | 3.25     |       |
|                                  | Plus Each Unit (leased space or office)                             | 2.15     |       |
|                                  | Hotel or Motel                                                      | 8.60     |       |
|                                  | Plus Each Unit                                                      | 3.25     |       |
|                                  | Trailer Park                                                        | 32.10    |       |
|                                  | Plus Each Space                                                     | 2.15     |       |
|                                  | Irrigation Single Family Dwelling                                   | 8.60     |       |
|                                  | Irrigation Commercial Fee Based on Building Code Valuation Chart    |          |       |
|                                  | Construction Valuation                                              |          |       |

| UNITS                              | DESCRIPTION                                                                                                                                                                                                           | FEE            | TOTAL |
|------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------|-------|
| <b>FUEL PIPING SYSTEM</b>          |                                                                                                                                                                                                                       |                |       |
| 1                                  | Single Family Dwelling                                                                                                                                                                                                | 6.45           | 6.45  |
|                                    | Multi-Family Dwelling                                                                                                                                                                                                 | 10.70          |       |
|                                    | Plus Each Unit                                                                                                                                                                                                        | 2.15           |       |
|                                    | Commercial Building (per floor)                                                                                                                                                                                       | 6.45           |       |
|                                    | Plus Each Unit (leased space or office)                                                                                                                                                                               | 6.45           |       |
| 4                                  | Medium Pressure System (Plan Check)                                                                                                                                                                                   | 12.85          |       |
|                                    | Each Gas Appliance (Any Type)                                                                                                                                                                                         | 2.15           | 8.60  |
|                                    | Steam Boilers                                                                                                                                                                                                         | 5.60           |       |
| <b>SOLAR ENERGY SYSTEMS</b>        |                                                                                                                                                                                                                       |                |       |
|                                    | Collectors (including piping) (per collector)                                                                                                                                                                         | 5.60           |       |
|                                    | Storage Tanks (each)                                                                                                                                                                                                  | 5.60           |       |
| <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 XFEE 70.852310-2403  
PERMIT  
FEETOTAL  
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.

SIGNED Pioneer Plumbing CONTRACTOR 18 MASTER CARD NO.BY [Signature] Registered Master Plumber, Spec. Contr. or OwnerBUILDING DEPT. DATE 2/14/92

DEPARTMENT OF BUILDING AND SAFETY  
PHONE 229-6251

FOR INSPECTIONS, CALL 229-2071

AIR CONDITIONING PERMIT

PLAN CHECK NO. T-259-92 DATE 3/19/92 CONST. VAL. \$  
ADDRESS OF CONSTRUCTION 2221 SILVER PINE DR. OWNER E.M.L. CONST. PHONE 362-9878CONTRACTOR NEVCO AIR STATE LICENSE NO. 24377 CITY LICENSE NO. CH02312033289LOT(s) 48 BLOCK 17 SUBDIVISION TORREY PINES VILLAGE - I ZONE:

PROPOSED CONSTRUCTION \_\_\_\_\_ USE: \_\_\_\_\_

| UNITS                    | DESCRIPTION                                                                                                                                                                                                                                                | FEE   | TOTAL |
|--------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------|-------|
| <b>PERMIT ISSUANCE</b>   |                                                                                                                                                                                                                                                            |       |       |
| 1                        | For the issuance of each permit.                                                                                                                                                                                                                           | 16.05 | 16.05 |
|                          | For issuing each supplemental permit.                                                                                                                                                                                                                      | 4.85  |       |
| <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.                                                                          | 9.65  |       |
|                          | 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.                                                                                          | 11.80 |       |
|                          | For the installation or relocation of each floor furnace, including vent.                                                                                                                                                                                  | 9.65  |       |
|                          | For the installation or relocation of each suspended heater, recessed wall heater or floor-mounted unit heater.                                                                                                                                            | 9.65  |       |
|                          | For the installation, relocation or replacement of each appliance vent installed and not included in an appliance permit.                                                                                                                                  | 4.85  |       |
|                          | 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. | 9.65  |       |
| 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.                                                                                                     | 9.65  | 9.65  |
|                          | 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.                                                                        | 17.65 |       |
|                          | 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.                                                                      | 24.15 |       |
|                          | 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.                                                                | 35.85 |       |
|                          | For the installation or relocation of each boiler or refrigeration compressor over 50 tons, or each absorption system over 1,750,000 Btu/h.                                                                                                                | 59.95 |       |

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 |
|------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------|-------|
|                                    | 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. | 6.95           |       |
|                                    | For each air-handling unit over 10,000 cfm.                                                                                                                                                                                                                                                                                                  | 11.80          |       |
|                                    | For each evaporative cooler, other than portable type.                                                                                                                                                                                                                                                                                       | 6.95           |       |
|                                    | For each ventilation fan. <span style="float:right">COMMERCIAL<br/>RESIDENTIAL</span>                                                                                                                                                                                                                                                        | 4.85<br>2.55   |       |
|                                    | For each ventilation system which is not a portion of any heating or air-conditioning system authorized by a permit.                                                                                                                                                                                                                         | 6.95           |       |
|                                    | For the installation of each hood which is served by mechanical exhaust, including the ducts for such hood.                                                                                                                                                                                                                                  | 6.95           |       |
|                                    | For each fire damper installed in an existing system.                                                                                                                                                                                                                                                                                        | 4.85           |       |
| <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.                                                                                                                                                                        | 6.45           |       |

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.

SIGNER \_\_\_\_\_ CONTRACTOR \_\_\_\_\_ MASTER CARD NO. \_\_\_\_\_

BY \_\_\_\_\_ Spec. Contr'r. or Owner

BUILDING DEPT. \_\_\_\_\_ DATE \_\_\_\_\_

PERMIT FEE 16.05TOTAL FEES 25.70

MUST BE MACHINE VALIDATED

## CITY OF LAS VEGAS, NEVADA

PERMIT NO. 91-120906

DEPARTMENT OF BUILDING AND SAFETY  
PHONE 386-6251

FOR INSPECTIONS, CALL 799-2071

## BUILDING PERMIT

FOR: Single Family Dwelling, Remodel  
Additions, Misc. Residential ConstructionLOG NO. & AREA P-259 DATE 4/26/90 CONST. VAL. \$ 31,900.00ADDRESS OF CONSTRUCTION 2221 SILVER PINE DR OWNER JAW PROPERTIES PHONE 361-4451LOT(S) 48-B BLOCK BLK. 17 SUBDIVISION TORREY PINES PHASE III ZONE R-3PROPOSED CONSTRUCTION SFD W/F.P. 'B' USE RESIDENCETHIS PERMIT FOR BLDG. ☒ A/C ☐ ELEC. ☐ PLBG. ☐ OTHER PERMITS REQD: FENCE ☐ OFF SITE ☐ SWIM POOL ☐FLOOR AREA BSMT NA 1ST 504.5 2ND 504.5 GARAGE 458 PORCH NA TOTAL 1467CONTRACTOR EML CONSTRUCTION CO, INC STATE LICENSE NO. 0020778 CITY LICENSE NO. 011-02594-2-035635ARCHITECT DENNIS E. RUSK ENGINEER DEA C11-02-0446-2-04321MASTER PLUMBER/CONTRACTOR 024321 MASTER ELECTRICIAN/CONTRACTOR 024321

## OTHER INSPECTIONS AND FEES

- Inspections outside of normal business hours = \$30.00 per hour (minimum charge three hours).
- Re-inspection fee during normal business hours assessed under provisions of TABLE 3-A of the Uniform Building Code = \$30.00 per hour.
- Inspections during normal business hours for which no fee is specifically indicated = \$30.00 per hour (minimum charge one half hour).
- Additional plan review required by changes, additions, or revisions to approved plans = \$30.00 per hour (minimum charge two hours).

## CONDITIONS OF THE PERMIT:

- 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.
- I agree that when the job is completed that I will call for final inspection before occupancy.
- I agree to perform all construction in accordance with City Ordinances and Building Codes.
- 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.
- I have read and understand the contents of this application and permit; I hereby state that the information I have supplied on this application is true and correct.
- Approval for the work under this permit will be given only after refuse and debris have been removed from job site and public right of way.
- 24 HOUR MINIMUM NOTICE REQUIRED FOR INSPECTIONS.

BY:

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

OWNER

BY:

AGENT

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

LAND DEVELOPMENT AND FLOOD CONTROL ENGINEER

DATE

PLANNING DEPT.

DATE

BUILDING DEPT.

DATE

## SPECIAL CONDITIONS:

SEE PLANS FOR CONDITIONS  
OF APPROVALATTENTION BUILDING & SAFETY  
NO FINAL INSPECTION  
WITHOUT PLANNING APPROVAL

## RECEIPT

| 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                          |      |     |
| AIR CONDITIONING                       |       | FEE | 7143 - 2973 SEWER CONNECTION                      |      |     |
| NEW UNIT - 3 TON = 9.00 OVER = 16.50   |       |     | 2310 - 2431 PLAN REVIEW FEE                       |      |     |
| FURNACE TO 100,000/9.00 OVER/11.00     |       |     | 2310 - 2431 BLDG. PERMIT FEE                      |      |     |
| VAPORATIVE COOLER                      | 6.50  |     | TOTAL FEES                                        |      |     |
| VENTILATION FAN                        | 2.35  |     |                                                   |      |     |
| 2310 - 2435 TOTAL                      |       |     |                                                   |      |     |

650.00  
10  
255.00  
915.00

Permit Expires 180 Days After Abandonment of Work

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



## CITY OF LAS VEGAS, NEVADA

PERMIT NO.

92-140536

DEPARTMENT OF BUILDING AND SAFETY  
PHONE 229-6251

FOR INS

AIR CONDITIONING PERMIT

PLAN CHECK NO. T-259-92

DATE



76639

CONST. VAL. \$

ADDRESS OF CONSTRUCTION 2221 SILVER PINE DR.

OWNER

E.M.L. CONST.

PHONE

362-9878

CONTRACTOR NEVCO AIR

STATE

LICENSE NO.

24377

CITY

LICENSE NO.

04023112033289

LOT(s) 48

BLOCK 17

SUBDIVISION

TORREY PINES VILLAGE - I

ZONE:

PROPOSED CONSTRUCTION

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.                                                                                                                                                                                                                           | 16.05 | 16.05 |
|                          | For issuing each supplemental permit.                                                                                                                                                                                                                      | 4.85  |       |
| <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.                                                                          | 9.65  |       |
|                          | 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.                                                                                          | 11.80 |       |
|                          | For the installation or relocation of each floor furnace, including vent.                                                                                                                                                                                  | 9.65  |       |
|                          | For the installation or relocation of each suspended heater, recessed wall heater or floor-mounted unit heater.                                                                                                                                            | 9.65  |       |
|                          | For the installation, relocation or replacement of each appliance vent installed and not included in an appliance permit.                                                                                                                                  | 4.85  |       |
|                          | 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. | 9.65  |       |
| 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.                                                                                                     | 9.65  | 9.65  |
|                          | 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.                                                                        | 17.65 |       |
|                          | 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.                                                                      | 24.15 |       |
|                          | 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.                                                                | 35.85 |       |
|                          | For the installation or relocation of each boiler or refrigeration compressor over 50 tons, or each absorption system over 1,750,000 Btu/h.                                                                                                                | 59.95 |       |

| 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. | 6.95                                |       |
|       | For each air-handling unit over 10,000 cfm.                                                                                                                                                                                                                                                                                                  | 11.80                               |       |
|       | For each evaporative cooler other than portable type.                                                                                                                                                                                                                                                                                        | 6.95                                |       |
|       | For each ventilation fan.                                                                                                                                                                                                                                                                                                                    | COMMERCIAL 4.85<br>RESIDENTIAL 2.55 |       |
|       | For each ventilation system which is not a portion of any heating or air-conditioning system authorized by a permit.                                                                                                                                                                                                                         | 6.95                                |       |
|       | For the installation of each hood which is served by mechanical exhaust, including the ducts for such hood.                                                                                                                                                                                                                                  | 6.95                                |       |
|       | For each fire damper installed in an existing system.                                                                                                                                                                                                                                                                                        | 4.85                                |       |

## OTHER INSPECTIONS AND FEES:

|  |                                                                                                                                                                                      |                |  |
|--|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------|--|
|  | 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.                | 6.45           |  |

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.

SIGNER CONTRACTOR MASTER CARD NO.

BY Spec. Contr'r. or Owner

BUILDING DEPT.

DATE

PERMIT FEE 16.05

TOTAL FEES 25.70

MUST BE MACHINE VALIDATED

PERMIT EXPIRES 180 DAYS AFTER ABANDONMENT OF WORK



## CITY OF LAS VEGAS, NEVADA

PERMIT NO. 92-167515

DEPARTMENT OF BUILDING AND SAFETY  
PHONE 229-6251

FOR



105569

AIR CONDITIONING PERMIT

PLAN CHECK NO. T-259-92

DATE

CONST. VAL. \$

ADDRESS OF CONSTRUCTION 2221 SHORT PINE DRIVE

OWNER E.M.L. CONSTRUCTION

PHONE 362-9878

CONTRACTOR NEVCO AIR

STATE LICENSE NO. 24377

CITY LICENSE NO. C11023112033289

LOT(s) 34 BLOCK 15 SUBDIVISION TORREY PINES VILLAGE

Phase III

ZONE:

PROPOSED CONSTRUCTION

USE:

| UNITS                    | DESCRIPTION                                                                                                                                                                                                                                                | FEE   | TOTAL |
|--------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------|-------|
| <b>PERMIT ISSUANCE</b>   |                                                                                                                                                                                                                                                            |       |       |
|                          | For the issuance of each permit.                                                                                                                                                                                                                           | 16.05 | 13.50 |
|                          | For issuing each supplemental permit.                                                                                                                                                                                                                      | 4.85  |       |
| <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.                                                                          | 9.65  |       |
|                          | 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.                                                                                          | 11.80 |       |
|                          | For the installation or relocation of each floor furnace, including vent.                                                                                                                                                                                  | 9.65  |       |
|                          | For the installation or relocation of each suspended heater, recessed wall heater or floor-mounted unit heater.                                                                                                                                            | 9.65  |       |
|                          | For the installation, relocation or replacement of each appliance vent installed and not included in an appliance permit.                                                                                                                                  | 4.85  |       |
|                          | 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. | 9.65  |       |
|                          | 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.                                                                                                     | 9.65  | 10.00 |
|                          | 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.                                                                        | 17.65 |       |
|                          | 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.                                                                      | 24.15 |       |
|                          | 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.                                                                | 35.85 |       |
|                          | For the installation or relocation of each boiler or refrigeration compressor over 50 tons, or each absorption system over 1,750,000 Btu/h.                                                                                                                | 59.95 |       |

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 |
|------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------|-------|
|                                    | 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. | 6.95                                |       |
|                                    | For each air-handling unit over 10,000 cfm.                                                                                                                                                                                                                                                                                                  | 11.80                               |       |
|                                    | For each evaporative cooler other than portable type.                                                                                                                                                                                                                                                                                        | 6.95                                |       |
|                                    | For each ventilation fan.                                                                                                                                                                                                                                                                                                                    | COMMERCIAL 4.85<br>RESIDENTIAL 2.55 |       |
|                                    | For each ventilation system which is not a portion of any heating or air-conditioning system authorized by a permit.                                                                                                                                                                                                                         | 6.95                                |       |
|                                    | For the installation of each hood which is served by mechanical exhaust, including the ducts for such hood.                                                                                                                                                                                                                                  | 6.95                                |       |
|                                    | For each fire damper installed in an existing system.                                                                                                                                                                                                                                                                                        | 4.85                                |       |
| <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.                                                                                                                                                                        | 6.45                                |       |

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.

PERMIT FEE

25.50

BY

BUILDING DEPT.

Spec. Cont'r. or Owner

DATE

TOTAL FEES

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

FOR



O.

92-136322

PLUMBING PERMIT

LOG NO. & AREA T 259-90DATE 2-13-92

CONST. VAL. \$

ADDRESS OF CONSTRUCTION 2221 Silver Pine Way OWNER EML PHONE 361-5000CONTRACTOR Pioneer STATE LICENSE NO. 7507A CITY LICENSE NO. C1168107677LOT(s) BLOCK SUBDIVISION Torrey Pines Village ZONEPROPOSED CONSTRUCTION: plumbing 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>1</b> | <b>PERMIT ISSUANCE</b>                                                                  |          |              |
|          | For Issuing Each Permit                                                                 | 10.70    | <u>10.70</u> |
|          | For Issuing Each Supplemental Permit                                                    | 4.85     |              |
| <b>7</b> | <b>FIXTURE CHARGE</b>                                                                   |          |              |
|          | Bathtub, Shower, Lavatory, Toilet, Urinal                                               | EA. 2.15 | <u>15.05</u> |
| <b>1</b> | Floor Drain, Floor Sink, Wash Tray, Sink                                                | EA. 2.15 | <u>2.15</u>  |
| <b>3</b> | Garbage Disposal, Clothes Washer, Dishwasher (residential)                              | EA. 2.15 | <u>6.45</u>  |
|          | Garbage Disposal (commercial)                                                           | EA. 8.60 |              |
|          | Clothes Washer, Dishwasher (commercial)                                                 | EA. 2.15 |              |
| <b>1</b> | Clothes Dryer (gas) (venting)                                                           | 2.15     | <u>2.15</u>  |
|          | Dental Unit                                                                             | 8.60     |              |
|          | Drinking Fountain                                                                       | 2.15     |              |
|          | Refrigerator - Ice Maker, Water Dispenser                                               | 2.15     |              |
|          | Any other water using equipment, Attached Coffee Makers, Ice Makers                     | 2.15     |              |
| <b>1</b> | Hot Water Heater (Gas or Electric)                                                      | EA. 2.15 | <u>2.15</u>  |
|          | <b>SEWER SYSTEM</b>                                                                     |          |              |
| <b>1</b> | New, Replacement, Modification, or Any Drainage Work                                    | 10.70    | <u>10.70</u> |
|          | Grease or Sand Trap or Interceptor                                                      | 2.15     |              |
|          | Trailer Trap (rental parks)                                                             | 5.35     |              |
|          | <b>WATER SOFTENERS</b>                                                                  |          |              |
|          | Non Permanent Type (rental)                                                             | 2.15     |              |
|          | Permanent Type (connected to drain)                                                     | 2.15     |              |
| <b>1</b> | <b>WATER DISTRIBUTION SYSTEM</b>                                                        |          |              |
|          | Single Family Dwelling                                                                  | 6.45     | <u>6.45</u>  |
|          | Multi-Family Dwelling                                                                   | 6.45     |              |
|          | Plus Each Dwelling Unit                                                                 | 3.25     |              |
|          | Commercial Building per floor                                                           | 3.25     |              |
|          | Plus Each Unit (leased space or office)                                                 | 2.15     |              |
|          | Hotel or Motel                                                                          | 8.60     |              |
|          | Plus Each Unit                                                                          | 3.25     |              |
|          | Trailer Park                                                                            | 32.10    |              |
|          | Plus Each Space                                                                         | 2.15     |              |
|          | Irrigation Single Family Dwelling                                                       | 8.60     |              |
|          | Irrigation Commercial Fee Based on Building Code Valuation Chart Construction Valuation |          |              |

| UNITS    | DESCRIPTION                                                                                                                                                                                                           | FEE            | TOTAL        |
|----------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------|--------------|
| <b>1</b> | <b>FUEL PIPING SYSTEM</b>                                                                                                                                                                                             |                |              |
|          | Single Family Dwelling                                                                                                                                                                                                | 6.45           | <u>6.45</u>  |
|          | Multi-Family Dwelling                                                                                                                                                                                                 | 10.70          |              |
|          | Plus Each Unit                                                                                                                                                                                                        | 2.15           |              |
|          | Commercial Building (per floor)                                                                                                                                                                                       | 6.45           |              |
|          | Plus Each Unit (leased space or office)                                                                                                                                                                               | 6.45           |              |
| <b>4</b> | Medium Pressure System (Plan Check)                                                                                                                                                                                   | 12.85          | <u>86.00</u> |
|          | Each Gas Appliance (Any Type)                                                                                                                                                                                         | 2.15           |              |
|          | Steam Boilers                                                                                                                                                                                                         | 5.60           |              |
|          | <b>SOLAR ENERGY SYSTEMS</b>                                                                                                                                                                                           |                |              |
|          | Collectors (including piping) (per collector)                                                                                                                                                                         | 5.60           |              |
|          | Storage Tanks (each)                                                                                                                                                                                                  | 5.60           |              |
|          | <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 799-2071.SEWER # 7114-3654  
CONNECTION

RECEIPT

FIXTURES XFEE 70.852310-2403  
PERMIT  
FEETOTAL  
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.

SIGNED Pioneer Plumbing 18 CONTRACTOR MASTER CARD NO.By [Signature] Registered Master Plumber, Spec. Contr. or OwnerBUILDING DEPT. DATE 2/14/92

## CITY OF LAS VEGAS, NEVADA

PERMIT NO.

92-139719

DEPARTMENT OF BUILDING AND SAFETY  
PHONE 229-6251

75940

ELECTRICAL PERMIT

PLAN CHECK NO.

P-259

DATE

10/10/92

CONST. VAL. \$

ADDRESS OF  
CONSTRUCTION

2221 Silver Pine Wy

OWNER

EML CONST.

CONTRACTOR

Edison Electric Inc

STATE

LICENSE NO.

21662

CITY

LICENSE NO.

C1101246-2

(PRINT NAME OF MASTER ELECTRICIAN)

PROPOSED CONSTRUCTION:

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>                                                                                                    |                                                                                                                                                                                                                                                               |       |       |
| 1                                                                                                                         | For Issuing Each Permit                                                                                                                                                                                                                                       | 10.70 | 10.70 |
|                                                                                                                           | Supplemental Fee                                                                                                                                                                                                                                              | 4.85  |       |
| <b>APPLIANCE CHARGE</b>                                                                                                   |                                                                                                                                                                                                                                                               |       |       |
| <b>Residential or General Commercial</b>                                                                                  |                                                                                                                                                                                                                                                               |       |       |
| 35                                                                                                                        | Receptacle 25 Switch 10                                                                                                                                                                                                                                       | .45   | 15.75 |
| 8                                                                                                                         | Each Light Fixture, Socket, or Exit Light, Smoke Detector or Exhaust Fan                                                                                                                                                                                      | .35   | 2.80  |
| 6                                                                                                                         | EACH OUTLET FOR SPECIAL PURPOSE:<br>Dishwasher, Garbage Grinder, Trash Compactor, G.F.I., Clothes Washer, Dryer, Electric Range, Ovens, Water Heater, Space Heater, Blast Coil Heater, (PER K.W.), Mercury Lamp, Quartz Lamp, Sodium Lamp, 20AMP Sign Circuit | .75   | 4.50  |
|                                                                                                                           | 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, 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>                                                                                |                                                                                                                                                                                                                                                               |       |       |
| 1                                                                                                                         | Up to 200 AMP                                                                                                                                                                                                                                                 | 6.45  | 16.45 |
|                                                                                                                           | 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 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           |       |
|                                                                               | Permanent A/C Unit (5 Tons or Less)                                                                                                                                          | 3.25           |       |
|                                                                               | 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            |       |
| 2                                                                             | TV Master System                                                                                                                                                             | .35            | .70   |
| 2                                                                             | Telephone or Computer Outlet                                                                                                                                                 | .35            | .70   |
| <b>OTHER INSPECTIONS AND FEES:<br/>INCLUDES ISSUANCE FEES WHEN APPLICABLE</b> |                                                                                                                                                                              |                |       |
|                                                                               | Inspections outside of normal business hours (minimum charge — three hours)                                                                                                  | 30.00 per hour |       |
|                                                                               | Reinspection fee assessed under provisions of TABLE 3-A of the Uniform Building Code = \$30.00 EACH.                                                                         | 30.00 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 — one-half hour). After work hours — \$30.00 per hour — minimum 1 hour. | 30.00 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

41.60

LESS  
STARTER PERMITTOTAL  
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 229-6251

089388

T NO.

92-150759

PLUMBING PERMIT

LOG NO. & AREA T259 92 DATE 6-23-92 CONST. VAL. \$ADDRESS OF CONSTRUCTION 2221 Silver Pine Way OWNER AMA Devel PHONECONTRACTOR Squaly's Landscape STATE LICENSE NO. 30345 CITY LICENSE NO. C11043242050962LOT(S) 48 BLOCK 17 SUBDIVISION Torrey Pines Village I ZONE

PROPOSED CONSTRUCTION: 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>           |                                                                                         |          |       |
|                                  | For Issuing Each Permit                                                                 | 10.70    |       |
|                                  | For Issuing Each Supplemental Permit                                                    | 4.85     |       |
| <b>FIXTURE CHARGE</b>            |                                                                                         |          |       |
|                                  | Bathtub, Shower, Lavatory, Toilet, Urinal                                               | EA. 2.15 |       |
|                                  | Floor Drain, Floor Sink, Wash Tray, Sink                                                | EA. 2.15 |       |
|                                  | Garbage Disposal, Clothes Washer, Dishwasher (residential)                              | EA. 2.15 |       |
|                                  | Garbage Disposal (commercial)                                                           | EA. 8.60 |       |
|                                  | Clothes Washer, Dishwasher (commercial)                                                 | EA. 2.15 |       |
|                                  | Clothes Dryer (gas) (venting)                                                           | 2.15     |       |
|                                  | Dental Unit                                                                             | 8.60     |       |
|                                  | Drinking Fountain                                                                       | 2.15     |       |
|                                  | Refrigerator - Ice Maker, Water Dispenser                                               | 2.15     |       |
|                                  | Any other water using equipment, Attached Coffee Makers, Ice Makers                     | 2.15     |       |
|                                  | Hot Water Heater (Gas or Electric)                                                      | EA. 2.15 |       |
| <b>SEWER SYSTEM</b>              |                                                                                         |          |       |
|                                  | New, Replacement, Modification, or Any Drainage Work                                    | 10.70    |       |
|                                  | Grease or Sand Trap or Interceptor                                                      | 2.15     |       |
|                                  | Trailer Trap (rental parks)                                                             | 5.35     |       |
| <b>WATER SOFTENERS</b>           |                                                                                         |          |       |
|                                  | Non Permanent Type (rental)                                                             | 2.15     |       |
|                                  | Permanent Type (connected to drain)                                                     | 2.15     |       |
| <b>WATER DISTRIBUTION SYSTEM</b> |                                                                                         |          |       |
|                                  | Single Family Dwelling                                                                  | 6.45     |       |
|                                  | Multi-Family Dwelling                                                                   | 6.45     |       |
|                                  | Plus Each Dwelling Unit                                                                 | 3.25     |       |
|                                  | Commercial Building per floor                                                           | 3.25     |       |
|                                  | Plus Each Unit (leased space or office)                                                 | 2.15     |       |
|                                  | Hotel or Motel                                                                          | 8.60     |       |
|                                  | Plus Each Unit                                                                          | 3.25     |       |
|                                  | Trailer Park                                                                            | 32.10    |       |
|                                  | Plus Each Space                                                                         | 2.15     |       |
|                                  | Irrigation Single Family Dwelling                                                       | 8.60     |       |
|                                  | Irrigation Commercial Fee Based on Building Code Valuation Chart Construction Valuation |          |       |

| UNITS                              | DESCRIPTION                                                                                                                                                                                                           | FEE            | TOTAL |
|------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------|-------|
| <b>FUEL PIPING SYSTEM</b>          |                                                                                                                                                                                                                       |                |       |
|                                    | Single Family Dwelling                                                                                                                                                                                                | 6.45           |       |
|                                    | Multi-Family Dwelling                                                                                                                                                                                                 | 10.70          |       |
|                                    | Plus Each Unit                                                                                                                                                                                                        | 2.15           |       |
|                                    | Commercial Building (per floor)                                                                                                                                                                                       | 6.45           |       |
|                                    | Plus Each Unit (leased space or office)                                                                                                                                                                               | 6.45           |       |
|                                    | Medium Pressure System (Plan Check)                                                                                                                                                                                   | 12.85          |       |
|                                    | Each Gas Appliance (Any Type)                                                                                                                                                                                         | 2.15           |       |
|                                    | Steam Boilers                                                                                                                                                                                                         | 5.60           |       |
| <b>SOLAR ENERGY SYSTEMS</b>        |                                                                                                                                                                                                                       |                |       |
|                                    | Collectors (including piping) (per collector)                                                                                                                                                                         | 5.60           |       |
|                                    | Storage Tanks (each)                                                                                                                                                                                                  | 5.60           |       |
| <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 229-2071SEWER # 7114-3654  
CONNECTION

RECEIPT

FIXTURES XFEE 10.702310-2403  
PERMIT FEE 8.60TOTAL FEES 19.30

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.

SIGNED Squaly's Landscape CONTRACTOR MASTER CARD NO.BY K. Long Registered Master Plumber, Spec. Contr. or Owner

BUILDING DEPT.

DATE 6/20/92

Permit Expires 180 Days After Abandonment of Work



# DEPARTMENT OF BUILDING & SAFETY CITY OF LAS VEGAS

|                             |                       |                          |                     |
|-----------------------------|-----------------------|--------------------------|---------------------|
| <b>PERMIT NUMBER</b>        | 92-139719             | <b>INSPECTION NUMBER</b> | 42                  |
| <b>JOB ADDRESS</b>          |                       |                          |                     |
| 2221 SILVER PINE DR         |                       |                          |                     |
| <b>LOT NO.</b>              | <b>BLOCK NO.</b>      | <b>SUBDIVISION NAME</b>  |                     |
|                             |                       |                          |                     |
| <b>FIRE DEPT. MAP NO.</b>   | <b>JOB PHONE</b>      | <b>CALL-IN DATE</b>      | <b>CALL-IN TIME</b> |
| 2219-24                     | 871-6467              | 05/29/92                 | 14:52               |
| <b>INSPECTOR NO.</b>        | <b>INSPECTOR NAME</b> |                          |                     |
| 67                          | JESSE SCHELL          |                          |                     |
| <b>INSPECTION REQUESTED</b> |                       |                          |                     |
| FINAL ELECTRICAL (240)      |                       |                          |                     |

① Recepticle For dedicated circuit  
D. washer & disposal must be 20 Amp

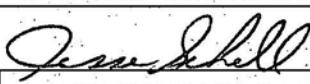
② All recept in garage must be  
on GFI or single dedicated outlet (?)  
E tag # 42779

30 DAY temp power

|                                                                                                                                    |                                                                                 |                                                                                                                                        |                                                         |
|------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------|
| <input type="checkbox"/> PARTIAL INSPECTION                                                                                        | <input type="checkbox"/> PARTIAL APPROVAL (P)                                   | <b>PARTIAL DESCRIPTION</b>                                                                                                             |                                                         |
| <input checked="" type="checkbox"/> APPROVED (A)                                                                                   | <input type="checkbox"/> STOP WORK (S)                                          | <input type="checkbox"/> COMMENTS (C)                                                                                                  | <input type="checkbox"/> TEMPORARY APPROVAL (T) - UNTIL |
| <input type="checkbox"/> REJECTED (R)                                                                                              | REINSPECTION REQUIRED - CALL * 229-2071                                         |                                                                                                                                        | <input type="checkbox"/> HOLD (H)                       |
| <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>                                                                                                                 |                                                         |
| Jesse Schell                                                                                                                       |                                                                                 | 6-1-92                                                                                                                                 |                                                         |
| <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 |                                                                                 |                                                                                                                                        |                                                         |
|                                                                                                                                    |                                                                                 |                                                                                                                                        | 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>                                                                        |  | 92-139719                                                                                                                           |  | <input checked="" type="checkbox"/> <b>INSPECTION NUMBER</b> |  | 15                                                      |                                                                                               |
| JOB ADDRESS: 2221 SILVER PINE DR                                                                                                |  |                                                                                                                                     |  |                                                              |  |                                                         |                                                                                               |
| LOT NO.                                                                                                                         |  | BLOCK NO.                                                                                                                           |  | SUBDIVISION NAME                                             |  |                                                         |                                                                                               |
| FIRE DEPT. MAP NO.                                                                                                              |  | JOB PHONE                                                                                                                           |  | CALL-IN DATE                                                 |  | CALL-IN TIME                                            |                                                                                               |
| 2219-24                                                                                                                         |  | 871-6467                                                                                                                            |  | 05/28/92                                                     |  | 09:13                                                   |                                                                                               |
| INSPECTOR NO.                                                                                                                   |  | INSPECTOR NAME                                                                                                                      |  |                                                              |  |                                                         |                                                                                               |
| 67                                                                                                                              |  | JESSE SCHELL                                                                                                                        |  |                                                              |  |                                                         |                                                                                               |
| <input checked="" type="checkbox"/> <b>INSPECTION REQUESTED</b>                                                                 |  | FINAL ELECTRICAL (240)                                                                                                              |  |                                                              |  |                                                         |                                                                                               |
| <p>see 2217 List</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.                                                     |  |                                                              |  |                                                         |                                                                                               |
| <b>INSPECTOR SIGNATURE</b>                                                                                                      |  |                                                  |  |                                                              |  | <b>INSPECTION DATE</b>                                  |                                                                                               |
|                                                                                                                                 |  |                                                                                                                                     |  |                                                              |  | 5-29-92                                                 |                                                                                               |
| <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 |  |                                                                                                                                     |  |                                                              |  |                                                         |  229-67 69 |

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

PERMIT  
NUMBER

92-139719

INSPECTION  
NUMBER

17

JOB ADDRESS

2221 SILVER PINE DR

LOT NO.

BLOCK NO.

SUBDIVISION NAME

FIRE DEPT. MAP NO.

JOB PHONE

CALL-IN DATE

CALL-IN TIME

SCHEDULE DATE

22219-24

871-6467

05/11/92

16:42

05/12/92

INSPECTOR NO.

INSPECTOR NAME

67

JESSE SCHELL

INSPECTION  
REQUESTED

UFER GROUND (203)

A.M.

2 services to 1 common  
UFER (cad weld) OK AS  
per #42 Bob Wagner

☐ 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  
REQUIREDINSPECTOR  
SIGNATURE

Jesse Schell

INSPECTION DATE

5-12-92

☐ PROJECT  
COMPLETEBRING 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

|                                                       |                              |                                       |                              |                                             |
|-------------------------------------------------------|------------------------------|---------------------------------------|------------------------------|---------------------------------------------|
| <b>M</b>                                              | <b>PERMIT NUMBER</b>         | 91-128906                             | <b>INSPECTION NUMBER</b>     | 11                                          |
| <b>JOB ADDRESS</b><br>2221 SILVER PINE DR             |                              |                                       |                              |                                             |
| <b>LOT NO.</b><br>48                                  |                              | <b>BLOCK NO.</b><br>17                |                              | <b>SUBDIVISION NAME</b><br>TORREY PINES III |
| <b>FIRE DEPT. MAP NO.</b><br>2219-24                  | <b>JOB PHONE</b><br>361-5000 | <b>CALL-IN DATE</b><br>04/06/92       | <b>CALL-IN TIME</b><br>14:30 | <b>SCHEDULE DATE</b><br>04/07/92            |
| <b>INSPECTOR NO.</b><br>67                            |                              | <b>INSPECTOR NAME</b><br>JESSE SCHELL |                              |                                             |
| <b>INSPECTION REQUESTED</b><br>ROUGH ELECTRICAL (220) |                              |                                       |                              |                                             |

① install wfer ground cable

will ✓ before FINAL

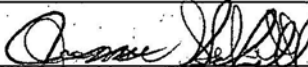
BAL of corrections made

|                                                                                                                                 |                                                                                 |                                                                                                                                     |                                                         |                                          |
|---------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------|------------------------------------------|
| <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><br><i>Jesse Schell</i>                                                                               |                                                                                 | <b>INSPECTION DATE</b><br>4-7-92                                                                                                    |                                                         |                                          |
| <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 &amp; SAFETY CITY OF LAS VEGAS

|                                                                                                                                                 |                                                                                                                                      |                                       |                                                         |
|-------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------|---------------------------------------------------------|
| <b>PERMIT NUMBER</b><br>92-139719                                                                                                               |                                                                                                                                      | <b>INSPECTION NUMBER</b><br>41        |                                                         |
| JOB ADDRESS<br><b>2221 SILVER PINE DR</b>                                                                                                       |                                                                                                                                      |                                       |                                                         |
| LOT NO.                                                                                                                                         |                                                                                                                                      | BLOCK NO.                             | SUBDIVISION NAME                                        |
| FIRE DEPT. MAP NO.                                                                                                                              | JOB PHONE                                                                                                                            | CALL-IN DATE                          | CALL-IN TIME                                            |
| 2219-24                                                                                                                                         | 871-6447                                                                                                                             | 05/29/92                              | 14:51                                                   |
| INSPECTOR NO.                                                                                                                                   |                                                                                                                                      | INSPECTOR NAME                        |                                                         |
| 67                                                                                                                                              |                                                                                                                                      | JESSE SCHELL                          |                                                         |
| <b>INSPECTION REQUESTED</b>                                                                                                                     |                                                                                                                                      | <b>FINAL ELECTRICAL (240)</b>         |                                                         |
| <p><i>Dup call</i><br/><i>not ready</i></p>                                                                                                     |                                                                                                                                      |                                       |                                                         |
| <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 checked="" type="checkbox"/> REJECTED (R)                                                                                                | REINSPECTION REQUIRED - CALL * 229-2071                                                                                              |                                       | <input type="checkbox"/> HOLD (H)                       |
| <input type="checkbox"/> REFEE (F)                                                                                                              | REINSPECTION FEE REQUIRED - PAY AT CITY HALL 3RD FLOOR - 400 E. STEWART STREET.                                                      |                                       | <input type="checkbox"/> PERMIT REQUIRED                |
| INSPECTOR SIGNATURE<br>                                      |                                                                                                                                      | INSPECTION DATE<br>05/29/92           |                                                         |
| <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

|                                           |                          |                                       |                              |               |
|-------------------------------------------|--------------------------|---------------------------------------|------------------------------|---------------|
| 1                                         | <b>PERMIT<br/>NUMBER</b> | 92-139719                             | <b>INSPECTION<br/>NUMBER</b> | 33            |
| JOB ADDRESS<br><b>2229 SILVER PINE DR</b> |                          |                                       |                              |               |
| LOT NO.                                   |                          | BLOCK NO.                             | SUBDIVISION NAME             |               |
| FIRE DEPT. MAP NO.                        | JOB PHONE                | CALL-IN DATE                          | CALL-IN TIME                 | SCHEDULE DATE |
| 2219-26                                   | 879-6467                 | 03/27/92                              | 14:00                        | 03/30/92      |
| INSPECTOR NO.<br><b>67</b>                |                          | INSPECTOR NAME<br><b>JESSE SCHELL</b> |                              |               |

**INSPECTION REQUESTED** **ROUGH ELECTRICAL (220)**

- ① Remove Living circuit From Dining window
- ② Add Kitch recep Frig wall
- ③ move Dishwasher - other side
- ④ install 3-way From garage to Hall
- ⑤ install recept - gas dryer
- ⑥ missing recept - water softener

|                                                                                                                                  |                                                                                 |                                                                                                                                     |                                                         |                                          |
|----------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------|------------------------------------------|
| <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><i>Jesse Schell</i>                                                                                       |                                                                                 | INSPECTION DATE<br><b>3-30-92</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>                                                                        |  | 92-139719                                                                                                                           |  | <input checked="" type="checkbox"/> <b>INSPECTION NUMBER</b> |  | 28                                                      |                 |
| JOB ADDRESS<br><b>2221 SILVER PINE DR</b>                                                                                       |  |                                                                                                                                     |  |                                                              |  |                                                         |                 |
| LOT NO.                                                                                                                         |  | BLOCK NO.                                                                                                                           |  | SUBDIVISION NAME                                             |  |                                                         |                 |
| FIRE DEPT. MAP NO.                                                                                                              |  | JOB PHONE                                                                                                                           |  | CALL-IN DATE                                                 |  | CALL-IN TIME                                            |                 |
| 2219-24                                                                                                                         |  | 871-6667                                                                                                                            |  | 04/09/92                                                     |  | 15:18                                                   |                 |
| INSPECTOR NO.                                                                                                                   |  | INSPECTOR NAME                                                                                                                      |  |                                                              |  |                                                         |                 |
| 67                                                                                                                              |  | JESSE SCHELL                                                                                                                        |  |                                                              |  |                                                         |                 |
| <input checked="" type="checkbox"/> <b>INSPECTION REQUESTED</b>                                                                 |  | ROUGH ELECTRICAL (220)                                                                                                              |  |                                                              |  |                                                         |                 |
| <p><i>passed on 4-9-92</i></p>                                                                                                  |  |                                                                                                                                     |  |                                                              |  |                                                         |                 |
| <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                                                                                                             |  |                                                                                                                                     |  | INSPECTION DATE                                              |  |                                                         |                 |
| <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

|                                    |                                |                                          |                       |                           |
|------------------------------------|--------------------------------|------------------------------------------|-----------------------|---------------------------|
| <input type="checkbox"/>           | PERMIT<br>NUMBER               | 92-136322                                | INSPECTION<br>NUMBER  | 13                        |
| JOB ADDRESS<br>2221 SILVER PINE DR |                                |                                          |                       |                           |
| LOT NO.                            | BLOCK NO.                      | SUBDIVISION NAME<br>TORREY PINES VILLAGE |                       |                           |
| FIRE DEPT. MAP NO.<br>2219-24      | JOB PHONE<br>876-2933          | CALL-IN DATE<br>06/18/92                 | CALL-IN TIME<br>12:28 | SCHEDULE DATE<br>06/19/92 |
| INSPECTOR NO.<br>67                | INSPECTOR NAME<br>JESSE SCHELL |                                          |                       |                           |
| INSPECTION<br>REQUESTED            | FINAL PLUMBING (440)           |                                          |                       |                           |

|                                                                                                                                    |                                                                                                                                        |                                          |                                                            |                                             |
|------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------|------------------------------------------|------------------------------------------------------------|---------------------------------------------|
| <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<br>SIGNATURE                                                                                                             | <i>M. Hall</i>                                                                                                                         |                                          | INSPECTION DATE<br>6-19-92                                 |                                             |
| <input type="checkbox"/> PROJECT<br>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 |                                                                                                                                        |                                          |                                                            | 229-6769                                    |

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

# DEPARTMENT OF BUILDING & SAFETY CITY OF LAS VEGA

|                                                                                                                                 |  |                                                                                                                                     |  |                                       |  |                                                         |          |
|---------------------------------------------------------------------------------------------------------------------------------|--|-------------------------------------------------------------------------------------------------------------------------------------|--|---------------------------------------|--|---------------------------------------------------------|----------|
| <b>PERMIT NUMBER</b>                                                                                                            |  | 92-136327                                                                                                                           |  | <b>INSPECTION NUMBER</b>              |  | 25                                                      |          |
| <b>JOB ADDRESS:</b> 2221 SILVER PINE                                                                                            |  |                                                                                                                                     |  |                                       |  |                                                         |          |
| <b>LOT NO.</b>                                                                                                                  |  | <b>BLOCK NO.</b>                                                                                                                    |  | <b>SUBDIVISION NAME</b>               |  |                                                         |          |
|                                                                                                                                 |  |                                                                                                                                     |  | TORREY PINES VILLAGE                  |  |                                                         |          |
| <b>FIRE DEPT. MAP NO.</b>                                                                                                       |  | <b>JOB PHONE</b>                                                                                                                    |  | <b>CALL-IN DATE</b>                   |  | <b>CALL-IN TIME</b>                                     |          |
| 2219-24                                                                                                                         |  | 361-5000                                                                                                                            |  | 04/14/92                              |  | 13:02                                                   |          |
| <b>INSPECTOR NO.</b>                                                                                                            |  | <b>INSPECTOR NAME</b>                                                                                                               |  |                                       |  |                                                         |          |
| 67                                                                                                                              |  | JESSE SCHELL                                                                                                                        |  |                                       |  |                                                         |          |
| <b>INSPECTION REQUESTED</b>                                                                                                     |  | OTHER (450)                                                                                                                         |  |                                       |  |                                                         |          |
| <p>PLUMBING ONLY</p> <p>423</p>               |  |                                                                                                                                     |  |                                       |  |                                                         |          |
| <input type="checkbox"/> PARTIAL INSPECTION                                                                                     |  | <input type="checkbox"/> PARTIAL APPROVAL (P)                                                                                       |  | <b>PARTIAL DESCRIPTION</b>            |  |                                                         |          |
| <input checked="" type="checkbox"/> APPROVED (A)                                                                                |  | <input type="checkbox"/> STOP WORK (S)                                                                                              |  | <input type="checkbox"/> COMMENTS (C) |  | <input type="checkbox"/> TEMPORARY APPROVAL (T) - UNTIL |          |
| <input type="checkbox"/> 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>                |  |                                                         |          |
| <i>JW L...</i>                                                                                                                  |  |                                                                                                                                     |  | 4-15-92                               |  |                                                         |          |
| <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 |

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# DEPARTMENT OF BUILDING & SAFETY CITY OF LAS VEGAS

|                                                          |                                     |                                                        |                                     |
|----------------------------------------------------------|-------------------------------------|--------------------------------------------------------|-------------------------------------|
| <input checked="" type="checkbox"/> <b>PERMIT NUMBER</b> | <b>92-136322</b>                    | <b>INSPECTION NUMBER</b>                               | <b>2</b>                            |
| <b>JOB ADDRESS</b><br><b>2221 SILVER PINE DR</b>         |                                     |                                                        |                                     |
| <b>LOT NO.</b>                                           | <b>BLOCK NO.</b>                    | <b>SUBDIVISION NAME</b><br><b>TORREY PINES VILLAGE</b> |                                     |
| <b>FIRE DEPT. MAP NO.</b><br><b>2219-24</b>              | <b>JOB PHONE</b><br><b>361-5000</b> | <b>CALL-IN DATE</b><br><b>04/03/92</b>                 | <b>CALL-IN TIME</b><br><b>10:52</b> |
| <b>INSPECTOR NO.</b><br><b>67</b>                        |                                     | <b>INSPECTOR NAME</b><br><b>JESSE SCHELL</b>           |                                     |

**INSPECTION REQUESTED** **PLUMBING INVESTIGATION (415)**

① see List 2209

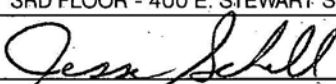
(Typical)

|                                                                                                                                 |                                                                                                                                                    |                                              |                                                                |
|---------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------|----------------------------------------------------------------|
| <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 checked="" type="checkbox"/> <b>REJECTED (R)</b>                                                                         | <b>REINSPECTION REQUIRED - CALL *229-2071</b>                                                                                                      |                                              | <input type="checkbox"/> <b>HOLD (H)</b>                       |
| <input type="checkbox"/> <b>REFEE (F)</b>                                                                                       | <b>REINSPECTION FEE REQUIRED - PAY AT CITY HALL 3RD FLOOR - 400 E. STEWART STREET.</b>                                                             |                                              | <input type="checkbox"/> <b>PERMIT REQUIRED</b>                |
| <b>INSPECTOR SIGNATURE</b><br><i>Jesse Schell</i>                                                                               |                                                                                                                                                    | <b>INSPECTION DATE</b><br><b>4-6-92</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 |                                                                                                                                                    |                                              | <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>1</b>                                              | <b>PERMIT NUMBER</b>         | 91-128906                             | <b>INSPECTION NUMBER</b>     | 18                                          |
| <b>JOB ADDRESS</b><br>2221 SILVER PINE DR             |                              |                                       |                              |                                             |
| <b>LOT NO.</b><br>48                                  |                              | <b>BLOCK NO.</b><br>17                |                              | <b>SUBDIVISION NAME</b><br>TORREY PINES III |
| <b>FIRE DEPT. MAP NO.</b><br>2219-24                  | <b>JOB PHONE</b><br>383-3415 | <b>CALL-IN DATE</b><br>06/29/92       | <b>CALL-IN TIME</b><br>11:20 | <b>SCHEDULE DATE</b><br>06/30/92            |
| <b>INSPECTOR NO.</b><br>67                            |                              | <b>INSPECTOR NAME</b><br>JESSE SCHELL |                              |                                             |
| <b>INSPECTION REQUESTED</b><br>FINAL MECHANICAL (340) |                              |                                       |                              |                                             |

|                                                                                                                                 |                                               |                                                                                                                                     |                                                         |                                          |
|---------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------|------------------------------------------|
| <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"/> REFEE (F)                                                                                              |                                               | REINSPECTION FEE REQUIRED - PAY AT CITY HALL, 3RD FLOOR - 400 E. STEWART STREET.                                                    |                                                         | <input type="checkbox"/> PERMIT REQUIRED |
| <b>INSPECTOR SIGNATURE</b><br>               |                                               | <b>INSPECTION DATE</b><br>6-30-92                                                                                                   |                                                         |                                          |
| <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 |                                               |                                                                                                                                     |                                                         | <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>                                                                                                            |  | 91-128906                                                                                                                           |  | <b>INSPECTION NUMBER</b>              |  | 27                                                      |          |
| <b>JOB ADDRESS</b><br>2221 SILVER PINE DR                                                                                       |  |                                                                                                                                     |  |                                       |  |                                                         |          |
| <b>LOT NO.</b>                                                                                                                  |  | <b>BLOCK NO.</b>                                                                                                                    |  | <b>SUBDIVISION NAME</b>               |  |                                                         |          |
| 48                                                                                                                              |  | 17                                                                                                                                  |  | TORREY PINES III                      |  |                                                         |          |
| <b>FIRE DEPT. MAP NO.</b>                                                                                                       |  | <b>JOB PHONE</b>                                                                                                                    |  | <b>CALL-IN DATE</b>                   |  | <b>CALL-IN TIME</b>                                     |          |
| 2219-24                                                                                                                         |  | 361-5000                                                                                                                            |  | 04/10/92                              |  | 12:07                                                   |          |
| <b>INSPECTOR NO.</b>                                                                                                            |  | <b>INSPECTOR NAME</b>                                                                                                               |  |                                       |  |                                                         |          |
| 67                                                                                                                              |  | JESSE SCHELL                                                                                                                        |  |                                       |  |                                                         |          |
| <b>INSPECTION REQUESTED</b>                                                                                                     |  | ROUGH MECHANICAL (320)                                                                                                              |  |                                       |  |                                                         |          |
|                                                                                                                                 |  |                                                                                                                                     |  |                                       |  |                                                         |          |
| <input type="checkbox"/> PARTIAL INSPECTION                                                                                     |  | <input type="checkbox"/> PARTIAL APPROVAL (P)                                                                                       |  | <b>PARTIAL DESCRIPTION</b>            |  |                                                         |          |
| <input checked="" type="checkbox"/> APPROVED (A)                                                                                |  | <input type="checkbox"/> STOP WORK (S)                                                                                              |  | <input type="checkbox"/> COMMENTS (C) |  | <input type="checkbox"/> TEMPORARY APPROVAL (T) — UNTIL |          |
| <input type="checkbox"/> REJECTED (R)                                                                                           |  | <input type="checkbox"/> REFEED (F)                                                                                                 |  | <input type="checkbox"/> HOLD (H)     |  |                                                         |          |
|                                                                                                                                 |  | REINSPECTION REQUIRED - CALL * 229-2071                                                                                             |  |                                       |  | <input type="checkbox"/> PERMIT REQUIRED                |          |
|                                                                                                                                 |  | REINSPECTION FEE REQUIRED - PAY AT CITY HALL 3RD FLOOR - 400 S. STEWART STREET.                                                     |  |                                       |  |                                                         |          |
| <b>INSPECTOR SIGNATURE</b><br><i>Jesse Schell</i>                                                                               |  |                                                                                                                                     |  | <b>INSPECTION DATE</b><br>4/13/92     |  |                                                         |          |
| <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**

91-128906

**INSPECTION  
NUMBER**

JOB ADDRESS

2221 SILVER PINE RD

LOT NO.

BLOCK NO.

SUBDIVISION NAME

48

17

TORREY PINES

FIRE DEPT. MAP NO.

JOB PHONE

CALL-IN DATE

CALL-IN TIME

SCHEDULE DATE

2210-26

361-5000

02/12/92

09:11

12/13/92

INSPECTOR NO.

INSPECTOR NAME

67

JESSE SCHELL

**INSPECTION  
REQUESTED**

FOOTING, LAYOUT, REBAR, ZONING (101)

☐ 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**

*Jesse Schell*

INSPECTION DATE

2-13-92

☐ **PROJECT  
COMPLETE**

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

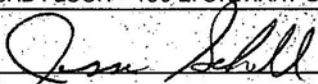
IF YOU HAVE ANY QUESTIONS ON THIS INSPECTION, YOU MAY  
CALL THE INSPECTOR FROM 7:00 A.M. - 7:15 A.M. OR 2:45 P.M. - 3:00 P.M. AT

229-6769

FOR ADDITIONAL ASSISTANCE CALL \*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

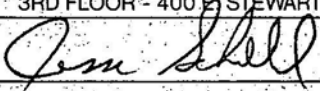
|                                                                                                                                    |                                                                                    |                                                                                                                                        |                                                            |                                      |
|------------------------------------------------------------------------------------------------------------------------------------|------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------|------------------------------------------------------------|--------------------------------------|
| <b>M</b>                                                                                                                           | <b>PERMIT<br/>NUMBER</b>                                                           | 91-128906                                                                                                                              | <b>INSPECTION<br/>NUMBER</b>                               | 21                                   |
| JOB ADDRESS<br><b>2221 SILVER PINE DR</b>                                                                                          |                                                                                    |                                                                                                                                        |                                                            |                                      |
| LOT NO.<br><b>48</b>                                                                                                               |                                                                                    | BLOCK NO.<br><b>17</b>                                                                                                                 | SUBDIVISION NAME<br><b>TORREY PINES III</b>                |                                      |
| FIRE DEPT. MAP NO.<br><b>2219-24</b>                                                                                               | JOB PHONE<br><b>361-5000</b>                                                       | CALL-IN DATE<br><b>02/19/92</b>                                                                                                        | CALL-IN TIME<br><b>14:38</b>                               | SCHEDULE DATE<br><b>02/20/92</b>     |
| INSPECTOR NO.<br><b>67</b>                                                                                                         |                                                                                    | INSPECTOR NAME<br><b>JESSE SCHELL</b>                                                                                                  |                                                            |                                      |
| <b>INSPECTION<br/>REQUESTED</b>                                                                                                    |                                                                                    | <b>PRE-SLAB (105)</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 *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<br>SIGNATURE<br>                      |                                                                                    | INSPECTION DATE<br><b>2-20-92</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>229-6769</b>                      |

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

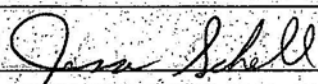


# DEPARTMENT OF BUILDING & SAFETY CITY OF LAS VEGAS

|                             |                       |                         |                          |                      |
|-----------------------------|-----------------------|-------------------------|--------------------------|----------------------|
| <b>1</b>                    | <b>PERMIT NUMBER</b>  | 91-128906               | <b>INSPECTION NUMBER</b> | 52                   |
| <b>JOB ADDRESS</b>          |                       |                         |                          |                      |
| 2221 SILVER PINE DR         |                       |                         |                          |                      |
| <b>LOT NO.</b>              | <b>BLOCK NO.</b>      | <b>SUBDIVISION NAME</b> |                          |                      |
| 48                          | 17                    | TODD PINES III          |                          |                      |
| <b>FIRE DEPT. MAP NO.</b>   | <b>JOB PHONE</b>      | <b>CALL-IN DATE</b>     | <b>CALL-IN TIME</b>      | <b>SCHEDULE DATE</b> |
| 2219-24                     | 361-5000              | 03/12/92                | 7:05 PM                  | 03/13/92             |
| <b>INSPECTOR NO.</b>        | <b>INSPECTOR NAME</b> |                         |                          |                      |
| 67                          | JESSE SCHELL          |                         |                          |                      |
| <b>INSPECTION REQUESTED</b> |                       |                         |                          |                      |
| ROOF SHEATHING (107)        |                       |                         |                          |                      |

|                                                                                                                                 |                                                                                                                                     |                                       |                                                         |                                          |
|---------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------|---------------------------------------------------------|------------------------------------------|
| <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>                                  |                                          |
|                                                                                                                                 |                                                                                                                                     |                                       | 3-13-92                                                 |                                          |
| <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                                 |

# DEPARTMENT OF BUILDING & SAFETY CITY OF LAS VEGAS

|                                                                                                                                 |                                                                                                                                     |                                       |                                                         |                                   |
|---------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------|---------------------------------------------------------|-----------------------------------|
| <b>1</b>                                                                                                                        | <b>PERMIT NUMBER</b>                                                                                                                | 91-122906                             | <b>INSPECTION NUMBER</b>                                | 42                                |
| <b>JOB ADDRESS</b>                                                                                                              |                                                                                                                                     |                                       |                                                         |                                   |
| 2221 SILVER PINE DR                                                                                                             |                                                                                                                                     |                                       |                                                         |                                   |
| <b>LOT NO.</b>                                                                                                                  | <b>BLOCK NO.</b>                                                                                                                    | <b>SUBDIVISION NAME</b>               |                                                         |                                   |
| 48                                                                                                                              | 17                                                                                                                                  | TORREY PINES III                      |                                                         |                                   |
| <b>FIRE DEPT. MAP NO.</b>                                                                                                       | <b>JOB PHONE</b>                                                                                                                    | <b>CALL-IN DATE</b>                   | <b>CALL-IN TIME</b>                                     | <b>SCHEDULE DATE</b>              |
| 2219-24                                                                                                                         | 361-5000                                                                                                                            | 03/20/92                              | 16:47                                                   | 03/23/92                          |
| <b>INSPECTOR NO.</b>                                                                                                            | <b>INSPECTOR NAME</b>                                                                                                               |                                       |                                                         |                                   |
| 67                                                                                                                              | JESSE SCHELL                                                                                                                        |                                       |                                                         |                                   |
| <b>INSPECTION REQUESTED</b>                                                                                                     | SHEAR (109)                                                                                                                         |                                       |                                                         |                                   |
|                                                                                                                                 |                                                                                                                                     |                                       |                                                         |                                   |
| <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>                                  |                                   |
|                                                                                                                                 |                                                                                                                                     |                                       | 3-23-92                                                 |                                   |
| <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>M</b>                                  | <b>PERMIT NUMBER</b>         | 91-128906                             | <b>INSPECTION NUMBER</b>                    | 52                               |
| JOB ADDRESS<br><b>2221 SILVER PINE DR</b> |                              |                                       |                                             |                                  |
| LOT NO.<br><b>48</b>                      |                              | BLOCK NO.<br><b>17</b>                | SUBDIVISION NAME<br><b>LAUREL PINES III</b> |                                  |
| FIRE DEPT. MAP NO.<br><b>2219-24</b>      | JOB PHONE<br><b>361-5000</b> | CALL-IN DATE<br><b>04/13/92</b>       | CALL-IN TIME<br><b>16:07</b>                | SCHEDULE DATE<br><b>04/14/92</b> |
| INSPECTOR NO.<br><b>67</b>                |                              | INSPECTOR NAME<br><b>JESSE SCHELL</b> |                                             |                                  |

**INSPECTION REQUESTED** **FRAMING (120)**

- ① ~~plumb not passed~~
- ② ~~inst 48 strap - 2nd Floor At stairs~~
- ③ ~~Draftstop 1st Floor Fireplace~~
- ④ ~~repair holes Kitchen wall - 2hr~~
- ⑤ HAVE approved system penetration thru envelope 2nd Floor
- ⑥ insulate behind tube before Lath
- ⑦ install envelopes Both sides garage - run 2hr wall to roof
- ⑧ penetrations - wire & hot water Flu thru envelopes

|                                                  |                                               |                                                                                 |                                                         |                                          |
|--------------------------------------------------|-----------------------------------------------|---------------------------------------------------------------------------------|---------------------------------------------------------|------------------------------------------|
| <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. |                                                         |                                          |

|                                                  |                                                                                                                                     |                                          |
|--------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------|------------------------------------------|
| <b>INSPECTOR SIGNATURE</b>                       | <i>Jesse Schell</i>                                                                                                                 | <b>INSPECTION DATE</b><br><b>4-14-92</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

**229-6769**

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

# DEPARTMENT OF BUILDING & SAFETY CITY OF LAS VEGAS

|                                              |                                       |                                             |
|----------------------------------------------|---------------------------------------|---------------------------------------------|
| <b>M</b>                                     | <b>PERMIT NUMBER</b><br>91-128906     | <b>INSPECTION NUMBER</b><br>38              |
| JOB ADDRESS<br><b>2221 SILVER PINE DR</b>    |                                       |                                             |
| LOT NO.<br><b>48</b>                         | BLOCK NO.<br><b>17</b>                | SUBDIVISION NAME<br><b>TORREY PINES III</b> |
| FIRE DEPT. MAP NO.<br><b>2219-24</b>         | JOB PHONE<br><b>361-5000</b>          | CALL-IN DATE<br><b>04/24/92</b>             |
|                                              |                                       | CALL-IN TIME<br><b>14:26</b>                |
|                                              |                                       | SCHEDULE DATE<br><b>04/27/92</b>            |
| INSPECTOR NO.<br><b>67</b>                   | INSPECTOR NAME<br><b>JESSE SCHELL</b> |                                             |
| INSPECTION REQUESTED<br><b>FRAMING (120)</b> |                                       |                                             |

As H.

- ① insulate behind tubs
  - ② wires thru 1 hr envelope - garage
  - ③ nail dry wall envelopes @ 7" o.c.
  - ④ repair Kitchen dry wall - 2 hr wall
  - ⑤ change out penetration - 1 hr envelope - 2nd Floor - Fireplace Flw
  - ⑥ Pry wall on top of metal stop 2nd Floor Fireplace chase
- (will ✓ on Insul)

|                                                                                                                                 |                                                                                                                                     |                                       |                                                         |
|---------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------|---------------------------------------------------------|
| <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>4-27-92</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



PERMIT  
NUMBER

91-128906

INSPECTION  
NUMBER

49

JOB ADDRESS

2221 SILVER PINE DR

LOT NO.

48

BLOCK NO.

17

SUBDIVISION NAME

TORREY PINES III

FIRE DEPT. MAP NO.

2219-24

JOB PHONE

361-5000

CALL-IN DATE

05/01/92

CALL-IN TIME

15:06

SCHEDULE DATE

05/04/92

INSPECTOR NO.

67/61

INSPECTOR NAME

JESSE SCHELL

INSPECTION  
REQUESTED

EXTERIOR LATH/STUCCO (129)

*Need card*

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

5-4-92

☐ 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><br>91-128906           | <b>INSPECTION NUMBER</b><br>9         |
| <b>JOB ADDRESS</b><br>62229 SILVER PINE DR  |                                       |
| <b>LOT NO.</b><br>62                        | <b>BLOCK NO.</b><br>17                |
| <b>SUBDIVISION NAME</b><br>SILVER PINES III |                                       |
| <b>FIRE DEPT. MAP NO.</b><br>2210-24        | <b>JOB PHONE</b><br>361-5000          |
| <b>CALL-IN DATE</b><br>04/28/92             | <b>CALL-IN TIME</b><br>12:08          |
| <b>SCHEDULE DATE</b><br>04/29/92            |                                       |
| <b>INSPECTOR NO.</b><br>67                  | <b>INSPECTOR NAME</b><br>JESSE SCHELL |

**INSPECTION REQUESTED** INSULATION (123)

- ① Nail drywall @ 1hr envelopes garage  
At 7" O.C. - Sleeve Bundles or Fire putty  
X Single wires - R.C. AT 16" O.C. envelopes  
X ② Draftstop walls @ 10' O.C. garage  
③ replace Holes with drywall - kitchen  
X ④ change out 2nd Floor Fire place  
penetration + putty

~~See page 1 for details~~

OK to Drywall All  
But Above areas

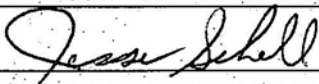
Leave open For Insp

|                                             |                                                                                    |                                         |                                                         |                                          |
|---------------------------------------------|------------------------------------------------------------------------------------|-----------------------------------------|---------------------------------------------------------|------------------------------------------|
| <input type="checkbox"/> PARTIAL INSPECTION | <input checked="" type="checkbox"/> PARTIAL APPROVAL (P)                           | <b>PARTIAL DESCRIPTION</b><br>See Above |                                                         |                                          |
| <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 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. |                                         |                                                         |                                          |

|                                                                                                                                    |                                                                                                                                        |
|------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------|
| <b>INSPECTOR SIGNATURE</b><br>Jesse Schell                                                                                         | <b>INSPECTION DATE</b><br>4-29-92                                                                                                      |
| <input 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 |                                                                                                                                        |
| 229-6769                                                                                                                           |                                                                                                                                        |

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

# DEPARTMENT OF BUILDING & SAFETY CITY OF LAS VEGAS

|                                                                                                                                            |                          |                                                                                                                                                        |                              |                                                                    |  |
|--------------------------------------------------------------------------------------------------------------------------------------------|--------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------------|--------------------------------------------------------------------|--|
| <input type="checkbox"/>                                                                                                                   | <b>PERMIT<br/>NUMBER</b> | <b>91-128906</b>                                                                                                                                       | <b>INSPECTION<br/>NUMBER</b> |                                                                    |  |
| <b>JOB ADDRESS</b>                                                                                                                         |                          |                                                                                                                                                        |                              |                                                                    |  |
| <b>2221 Silver Pine Dr</b>                                                                                                                 |                          |                                                                                                                                                        |                              |                                                                    |  |
| <b>LOT NO.</b>                                                                                                                             |                          | <b>BLOCK NO.</b>                                                                                                                                       |                              | <b>SUBDIVISION NAME</b>                                            |  |
|                                                                                                                                            |                          |                                                                                                                                                        |                              |                                                                    |  |
| <b>FIRE DEPT. MAP NO.</b>                                                                                                                  |                          | <b>JOB PHONE</b>                                                                                                                                       |                              | <b>CALL-IN DATE</b>                                                |  |
|                                                                                                                                            |                          |                                                                                                                                                        |                              | <b>CALL-IN TIME</b>                                                |  |
|                                                                                                                                            |                          |                                                                                                                                                        |                              | <b>SCHEDULE DATE</b>                                               |  |
|                                                                                                                                            |                          |                                                                                                                                                        |                              | <b>5-8-92</b>                                                      |  |
| <b>INSPECTOR NO.</b>                                                                                                                       |                          | <b>INSPECTOR NAME</b>                                                                                                                                  |                              |                                                                    |  |
| <b>67</b>                                                                                                                                  |                          |                                                                                                                                                        |                              |                                                                    |  |
| <b>INSPECTION<br/>REQUESTED</b>                                                                                                            |                          | <b>Insul / 123</b>                                                                                                                                     |                              |                                                                    |  |
|                                                                                                                                            |                          |                                                                                                                                                        |                              |                                                                    |  |
| <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>REFEE (F)</b>                                                                                                  |                          | <b>REINSPECTION FEE REQUIRED - PAY AT CITY HALL<br/>3RD FLOOR - 400 E. STEWART STREET.</b>                                                             |                              |                                                                    |  |
|                                                                                                                                            |                          | <input type="checkbox"/> <b>PERMIT<br/>REQUIRED</b>                                                                                                    |                              |                                                                    |  |
| <b>INSPECTOR<br/>SIGNATURE</b>                                                                                                             |                          |                                                                     |                              | <b>INSPECTION DATE</b>                                             |  |
|                                                                                                                                            |                          |                                                                                                                                                        |                              | <b>5-6-92</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> |                          |                                                                                                                                                        |                              |                                                                    |  |

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

# DEPARTMENT OF BUILDING & SAFETY CITY OF LAS VEGAS

|                                                                                                                                 |                                                                                                                                     |                                       |                                                         |                                          |
|---------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------|---------------------------------------------------------|------------------------------------------|
| <input type="checkbox"/>                                                                                                        | <b>PERMIT<br/>NUMBER</b>                                                                                                            | 91-128906                             | <b>INSPECTION<br/>NUMBER</b>                            | 34                                       |
| JOB ADDRESS<br>2221 SILVER PINE DR                                                                                              |                                                                                                                                     |                                       |                                                         |                                          |
| LOT NO.<br>48                                                                                                                   | BLOCK NO.<br>17                                                                                                                     | SUBDIVISION NAME<br>TORREY PINES III  |                                                         |                                          |
| FIRE DEPT. MAP NO.<br>2219-24                                                                                                   | JOB PHONE<br>361-5000                                                                                                               | CALL-IN DATE<br>05/07/92              | CALL-IN TIME<br>16:51                                   | SCHEDULE DATE<br>05/08/92                |
| INSPECTOR NO.<br>67                                                                                                             | INSPECTOR NAME<br>JESSE SCHELL                                                                                                      |                                       |                                                         |                                          |
| <b>INSPECTION REQUESTED</b> → DRYWALL NAILING (125)                                                                             |                                                                                                                                     |                                       |                                                         |                                          |
|                                                                                                                                 |                                                                                                                                     |                                       |                                                         |                                          |
| <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 *799-2071                                                                                              |                                       |                                                         | <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><i>Jesse Schell</i>                                                                                      |                                                                                                                                     | INSPECTION DATE<br>5-8-92             |                                                         |                                          |
| <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 \*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

91-128906

INSPECTION  
NUMBER

19

JOB ADDRESS

2221 SILVER PINE DR

LOT NO.

48

BLOCK NO.

17

SUBDIVISION NAME

TORREY PINES III

FIRE DEPT. MAP NO.

2219-24

JOB PHONE

383-3415

CALL-IN DATE

06/29/92

CALL-IN TIME

11:21

SCHEDULE DATE

06/30/92

INSPECTOR NO.

67

INSPECTOR NAME

JESSE SCHELL

INSPECTION  
REQUESTED

BUILDING FINAL (140)

- ① recept Garbage Disp & Dishwasher must be 20 amp
- ② no GFI Breaker in Panel Baths & ext
- ③ no Fuses AC Disconnect
- ④ garage door to self-close
- ⑤ water valve in 2 hr wall

☐ 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

6-30-92

☐ 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>1</b>                               | <b>PERMIT NUMBER</b>      | 91-128906                          | <b>INSPECTION NUMBER</b>  | 35                                       |
| <b>JOB ADDRESS</b> 2221 SILVER PINE DR |                           |                                    |                           |                                          |
| <b>LOT NO.</b> 48                      |                           | <b>BLOCK NO.</b> 17                |                           | <b>SUBDIVISION NAME</b> TORREY PINES III |
| <b>FIRE DEPT. MAP NO.</b> 2219-24      | <b>JOB PHONE</b> 387-3585 | <b>CALL-IN DATE</b> 07/09/92       | <b>CALL-IN TIME</b> 15:00 | <b>SCHEDULE DATE</b> 07/10/92            |
| <b>INSPECTOR NO.</b> 67                |                           | <b>INSPECTOR NAME</b> JESSE SCHELL |                           |                                          |

**INSPECTION REQUESTED** BUILDING FINAL (140)

- 1ST FLOOR BATH RECEPTACLES NOT OKI

- 2ND FLOOR BATH NOT OKI

- 20 AMP RECEPTACLES READ AT WASHING / DRYER

|                                                                                                                                 |                                               |                                                                                                                                     |                                                         |                                          |
|---------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------|------------------------------------------|
| <input type="checkbox"/> PARTIAL INSPECTION                                                                                     | <input type="checkbox"/> PARTIAL APPROVAL (P) | <b>PARTIAL DESCRIPTION</b>                                                                                                          |                                                         |                                          |
| <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.                                                     |                                                         |                                          |
| <b>INSPECTOR SIGNATURE</b> <i>Jesse Schell</i>                                                                                  |                                               |                                                                                                                                     | <b>INSPECTION DATE</b> 7-10-92                          |                                          |
| <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                                 |



# DEPARTMENT OF BUILDING & SAFETY CITY OF LAS VEGAS

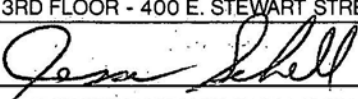
|                                                          |                             |                          |                     |
|----------------------------------------------------------|-----------------------------|--------------------------|---------------------|
| <input checked="" type="checkbox"/> <b>PERMIT NUMBER</b> | <b>91-128906</b>            | <b>INSPECTION NUMBER</b> | <b>31</b>           |
| <b>JOB ADDRESS</b> <b>2221 SILVER PINE DR</b>            |                             |                          |                     |
| <b>LOT NO.</b>                                           | <b>BLOCK NO.</b>            | <b>SUBDIVISION NAME</b>  |                     |
| <b>48</b>                                                | <b>17</b>                   | <b>TORREY PINES III</b>  |                     |
| <b>FIRE DEPT. MAP NO.</b>                                | <b>JOB PHONE</b>            | <b>CALL-IN DATE</b>      | <b>CALL-IN TIME</b> |
| <b>2219-24</b>                                           | <b>387-3585</b>             | <b>07/14/92</b>          | <b>14:29</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 water valve in 2hr wall must have rated door

|                                                                                                                                        |                                                                                                                                                    |                                              |                                                                |
|----------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------|----------------------------------------------------------------|
| <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>                                         |
|                                                                                                                                        |                                                                                                                                                    |                                              | <b>7-15-92</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 &amp; SAFETY CITY OF LAS VEGAS

|                                                                                                                                    |                                                                                                                                        |                                          |                                                            |                                                                                              |
|------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------|------------------------------------------|------------------------------------------------------------|----------------------------------------------------------------------------------------------|
|                                                      | PERMIT<br>NUMBER                                                                                                                       | 91-128906                                | INSPECTION<br>NUMBER                                       | 18                                                                                           |
| JOB ADDRESS<br>2221 SILVER PINE DR                                                                                                 |                                                                                                                                        |                                          |                                                            |                                                                                              |
| LOT NO.<br>48                                                                                                                      | BLOCK NO.<br>17                                                                                                                        | SUBDIVISION NAME<br>TORREY PINES III     |                                                            |                                                                                              |
| FIRE DEPT. MAP NO.<br>229-24                                                                                                       | JOB PHONE<br>361-5000                                                                                                                  | CALL-IN DATE<br>07/30/92                 | CALL-IN TIME<br>14:52                                      | SCHEDULE DATE<br>07/31/92                                                                    |
| INSPECTOR NO.<br>67                                                                                                                | INSPECTOR NAME<br>JESSE SCHELL                                                                                                         |                                          |                                                            |                                                                                              |
| INSPECTION<br>REQUESTED                                                                                                            | BUILDING FINAL (140)                                                                                                                   |                                          |                                                            |                                                                                              |
|                                                                                                                                    |                                                                                                                                        |                                          |                                                            |                                                                                              |
| <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<br>SIGNATURE                                                                                                             |                                                     |                                          | INSPECTION DATE<br>7-31-92                                 |                                                                                              |
| <input checked="" type="checkbox"/> PROJECT<br>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 |                                                                                                                                        |                                          |                                                            |  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>91-128906</b>                             | <b>INSPECTION NUMBER</b>                           | <b>18</b>                           |
| <b>JOB ADDRESS</b><br><b>2221 SILVER PINE DR</b>         |                                              |                                                    |                                     |
| <b>LOT NO.</b><br><b>48</b>                              | <b>BLOCK NO.</b><br><b>17</b>                | <b>SUBDIVISION NAME</b><br><b>TORREY PINES III</b> |                                     |
| <b>FIRE DEPT. MAP NO.</b><br><b>2219-24</b>              | <b>JOB PHONE</b><br><b>361-5000</b>          | <b>CALL-IN DATE</b><br><b>07/30/92</b>             | <b>CALL-IN TIME</b><br><b>14:52</b> |
| <b>INSPECTOR NO.</b><br><b>67</b>                        | <b>INSPECTOR NAME</b><br><b>JESSE SCHELL</b> |                                                    |                                     |
| <b>INSPECTION REQUESTED</b>                              | <b>BUILDING FINAL (140)</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>REJECTED (R)</b>                | <b>REINSPECTION REQUIRED - CALL *229-2071</b>                                          |                                              | <input type="checkbox"/> <b>HOLD (H)</b>                       |
| <input type="checkbox"/> <b>REFEE (F)</b>                   | <b>REINSPECTION FEE REQUIRED - PAY AT CITY HALL 3RD FLOOR - 400 E. STEWART STREET.</b> |                                              | <input type="checkbox"/> <b>PERMIT REQUIRED</b>                |
| <b>INSPECTOR SIGNATURE</b><br><i>Jesse Schell</i>           |                                                                                        | <b>INSPECTION DATE</b><br><b>7-31-92</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**

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 | 91-128906                             | INSPECTION NUMBER                           | 18                           |
| JOB ADDRESS<br><b>2221 SILVER PINE DR</b>         |                                       |                                             |                              |
| LOT NO.<br><b>48</b>                              | BLOCK NO.<br><b>17</b>                | SUBDIVISION NAME<br><b>TORREY PINES III</b> |                              |
| FIRE DEPT. MAP NO.<br><b>2219-24</b>              | JOB PHONE<br><b>383-3415</b>          | CALL-IN DATE<br><b>06/29/92</b>             | CALL-IN TIME<br><b>11:20</b> |
| SCHEDULE DATE<br><b>06/30/92</b>                  |                                       |                                             |                              |
| INSPECTOR NO.<br><b>67</b>                        | INSPECTOR NAME<br><b>JESSE SCHELL</b> |                                             |                              |
| INSPECTION REQUESTED                              |                                       | <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 3RD FLOOR - 400 E. STEWART STREET. |                                                                                                                                     |                                                         |                                          |
| INSPECTOR SIGNATURE<br><i>Jesse Schell</i>                                                                                      |                                                                                 | INSPECTION DATE<br><b>6-30-92</b>                                                                                                   |                                                         |                                          |
| <input checked="" 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<br/>NUMBER</b> | 91-128906 | <b>INSPECTION<br/>NUMBER</b> | 19 |
|-------------------------------------|--------------------------|-----------|------------------------------|----|

|                                           |                                       |                                             |                              |                                  |
|-------------------------------------------|---------------------------------------|---------------------------------------------|------------------------------|----------------------------------|
| JOB ADDRESS<br><b>2221 SILVER PINE DR</b> |                                       |                                             |                              |                                  |
| LOT NO.<br><b>48</b>                      | BLOCK NO.<br><b>17</b>                | SUBDIVISION NAME<br><b>TORREY PINES III</b> |                              |                                  |
| FIRE DEPT. MAP NO.<br><b>2219-24</b>      | JOB PHONE<br><b>383-3415</b>          | CALL-IN DATE<br><b>06/29/92</b>             | CALL-IN TIME<br><b>11:21</b> | SCHEDULE DATE<br><b>06/30/92</b> |
| INSPECTOR NO.<br><b>67</b>                | INSPECTOR NAME<br><b>JESSE SCHELL</b> |                                             |                              |                                  |

|                                 |                             |
|---------------------------------|-----------------------------|
| <b>INSPECTION<br/>REQUESTED</b> | <b>BUILDING FINAL (140)</b> |
|---------------------------------|-----------------------------|

①      *recept Garbage Disp & Dishwasher must be 20 amp*

②      *no GFI Breaker in Panel Baths & ext*

③      *no Fuses AC Disconnect*

④      *garage door to self-close*

⑤      *water valve in 2hr wall*

|                                                         |                                               |                                                                                 |                                                         |                                          |
|---------------------------------------------------------|-----------------------------------------------|---------------------------------------------------------------------------------|---------------------------------------------------------|------------------------------------------|
| <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"/> <b>REJECTED (R)</b> |                                               | 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                              |                                                                                                                                     | INSPECTION DATE<br><b>6-30-92</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

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>                                                                                                                | 91-128906                                   | <b>INSPECTION NUMBER</b>                                | 35                                                                                           |
| <b>JOB ADDRESS</b><br>2221 SILVER PINE DR.                                                                                      |                                                                                                                                     |                                             |                                                         |                                                                                              |
| <b>LOT NO.</b><br>48                                                                                                            | <b>BLOCK NO.</b><br>17                                                                                                              | <b>SUBDIVISION NAME</b><br>TORREY PINES III |                                                         |                                                                                              |
| <b>FIRE DEPT. MAP NO.</b><br>2219-24                                                                                            | <b>JOB PHONE</b><br>387-3585                                                                                                        | <b>CALL-IN DATE</b><br>07/09/92             | <b>CALL-IN TIME</b><br>15:00                            | <b>SCHEDULE DATE</b><br>07/10/92                                                             |
| <b>INSPECTOR NO.</b><br>67                                                                                                      | <b>INSPECTOR NAME</b><br>JESSE SCHELL                                                                                               |                                             |                                                         |                                                                                              |
| <b>INSPECTION REQUESTED</b>                                                                                                     |                                                                                                                                     | <b>BUILDING FINAL (140)</b>                 |                                                         |                                                                                              |
| <p>- 1ST FLOOR BATH RECEPTACLES NOT OKI</p> <p>- 2ND FLOOR BATH NOT OKI</p> <p>- 20 AMP RECEPTACLES RECD AT WORKER / PLTICK</p> |                                                                                                                                     |                                             |                                                         |                                                                                              |
| <input type="checkbox"/> PARTIAL INSPECTION                                                                                     | <input type="checkbox"/> PARTIAL APPROVAL (P)                                                                                       | <b>PARTIAL DESCRIPTION</b>                  |                                                         |                                                                                              |
| <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.                                                     |                                             |                                                         |                                                                                              |
| <b>INSPECTOR SIGNATURE</b>                                                                                                      |                                                  |                                             | <b>INSPECTION DATE</b><br>7-10-92                       |                                                                                              |
| <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



**PERMIT  
NUMBER**

91-128906

**INSPECTION  
NUMBER**

34

JOB ADDRESS

2221 SILVER PINE DR

LOT NO.

48

BLOCK NO.

17

SUBDIVISION NAME

TORREY PINES III

FIRE DEPT. MAP NO.

2219-24

JOB PHONE

361-5000

CALL-IN DATE

05/07/92

CALL-IN TIME

16:51

SCHEDULE DATE

05/08/92

INSPECTOR NO.

67

INSPECTOR NAME

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 \* 799-2071

☐ REFEE (F)

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

☐ PERMIT  
REQUIRED

**INSPECTOR  
SIGNATURE**

*Jesse Schell*

INSPECTION DATE

5-8-92

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

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

|                                           |                          |                                |                              |               |
|-------------------------------------------|--------------------------|--------------------------------|------------------------------|---------------|
| <input checked="" type="checkbox"/>       | <b>PERMIT<br/>NUMBER</b> | 92-139719                      | <b>INSPECTION<br/>NUMBER</b> | 17            |
| JOB ADDRESS<br><b>2221 SILVER PINE DR</b> |                          |                                |                              |               |
| LOT NO.                                   |                          | BLOCK NO.                      | SUBDIVISION NAME             |               |
| FIRE DEPT. MAP NO.                        | JOB PHONE                | CALL-IN DATE                   | CALL-IN TIME                 | SCHEDULE DATE |
| 2219-24                                   | 871-6467                 | 05/11/92                       | 16:42                        | 05/12/92      |
| INSPECTOR NO.<br>67                       |                          | INSPECTOR NAME<br>JESSE SCHELL |                              |               |
| <b>INSPECTION<br/>REQUESTED</b>           |                          | UFER GROUND (203)              |                              |               |

A.M.

2 services to 1 common  
UFER (Cad weld) OK AS  
per #42 Bob Wagner

|                                                                                                                                    |                                                                                                                                        |                                          |                                                            |                                      |
|------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------|------------------------------------------|------------------------------------------------------------|--------------------------------------|
| <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.                                                     |                                          |                                                            |                                      |
| <b>INSPECTOR<br/>SIGNATURE</b>                                                                                                     |                                                                                                                                        | <b>INSPECTION DATE</b>                   |                                                            |                                      |
| Jesse Schell                                                                                                                       |                                                                                                                                        | 5-12-92                                  |                                                            |                                      |
| <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>229-6769</b>                      |

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

# DEPARTMENT OF BUILDING & SAFETY CITY OF LAS VEGAS

|                                                                                                                                        |                                                                                        |                                                                                                                                                    |                                                        |                                                 |
|----------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------|-------------------------------------------------|
| <input type="checkbox"/>                                                                                                               | <b>PERMIT NUMBER</b>                                                                   | <b>91-128906</b>                                                                                                                                   | <b>INSPECTION NUMBER</b>                               | <b>59</b>                                       |
| <b>JOB ADDRESS</b> <b>2221 Silver Pine Dr</b>                                                                                          |                                                                                        |                                                                                                                                                    |                                                        |                                                 |
| <b>LOT NO.</b>                                                                                                                         |                                                                                        | <b>BLOCK NO.</b>                                                                                                                                   |                                                        | <b>SUBDIVISION NAME</b>                         |
| <b>FIRE DEPT. MAP NO.</b>                                                                                                              |                                                                                        | <b>JOB PHONE</b>                                                                                                                                   | <b>CALL-IN DATE</b>                                    | <b>CALL-IN TIME</b>                             |
|                                                                                                                                        |                                                                                        |                                                                                                                                                    |                                                        | <b>SCHEDULE DATE</b> <b>5-6-92</b>              |
| <b>INSPECTOR NO.</b>                                                                                                                   |                                                                                        | <b>INSPECTOR NAME</b>                                                                                                                              |                                                        |                                                 |
| <b>67</b>                                                                                                                              |                                                                                        |                                                                                                                                                    |                                                        |                                                 |
| <b>INSPECTION REQUESTED</b>                                                                                                            |                                                                                        | <b>Insul / 123</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)</b> | <b>- 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>                                                                                                                             |                                                        |                                                 |
| <i>Jesse Schell</i>                                                                                                                    |                                                                                        | <b>5-6-92</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> |                                                                                        |                                                                                                                                                    |                                                        |                                                 |

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

# DEPARTMENT OF BUILDING & SAFETY CITY OF LAS VEGAS



PERMIT  
NUMBER

91-128906

INSPECTION  
NUMBER

31

JOB ADDRESS

2221 SILVER PINE DR

LOT NO.

48

BLOCK NO.

17

SUBDIVISION NAME

TORREY PINES III

FIRE DEPT. MAP NO.

2219-24

JOB PHONE

387-3585

CALL-IN DATE

07/14/92

CALL-IN TIME

14:29

SCHEDULE DATE

07/15/92

INSPECTOR NO.

67

INSPECTOR NAME

JESSE SCHELL

INSPECTION  
REQUESTED

BUILDING FINAL (140)

① water valve in 2hr wall  
must have rated door

☐ 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

7-15-92

☐ PROJECT  
COMPLETE

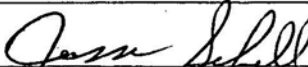
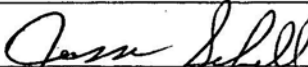
BRING HARD CARD WITH FIRE, QUALITY CONTROL & PLANNING APPROVALS  
SIGNED OFF TO BLDG & SAFETY FOR C. of Q. ISSUANCE (Commercial Only)

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<br/>NUMBER</b>                                                                                                             |  | 92-139719                                                                           |  | <b>INSPECTION<br/>NUMBER</b>          |                 | 41                                                      |            |
| JOB ADDRESS                                                                                                                          |  |                                                                                     |  |                                       |                 |                                                         |            |
| 2221 SILVER PINE DR                                                                                                                  |  |                                                                                     |  |                                       |                 |                                                         |            |
| LOT NO.                                                                                                                              |  | BLOCK NO.                                                                           |  | SUBDIVISION NAME                      |                 |                                                         |            |
| FIRE DEPT. MAP NO.                                                                                                                   |  | JOB PHONE                                                                           |  | CALL-IN DATE                          |                 | CALL-IN TIME                                            |            |
| 2219-24                                                                                                                              |  | 871-6467                                                                            |  | 05/29/92                              |                 | 14:51                                                   |            |
| INSPECTOR NO.                                                                                                                        |  | INSPECTOR NAME                                                                      |  |                                       |                 |                                                         |            |
| 67                                                                                                                                   |  | JESSE SCHELL                                                                        |  |                                       |                 |                                                         |            |
| <b>INSPECTION<br/>REQUESTED</b>                                                                                                      |  | FINAL ELECTRICAL (240)                                                              |  |                                       |                 |                                                         |            |
| <p style="font-size: 2em; font-family: cursive;">Dup call</p>                                                                        |  |                                                                                     |  |                                       |                 |                                                         |            |
| <input type="checkbox"/> PARTIAL INSPECTION                                                                                          |  | <input type="checkbox"/> PARTIAL APPROVAL (P)                                       |  | PARTIAL DESCRIPTION                   |                 |                                                         |            |
| <input checked="" type="checkbox"/> APPROVED (A)                                                                                     |  | <input type="checkbox"/> STOP WORK (S)                                              |  | <input type="checkbox"/> COMMENTS (C) |                 | <input type="checkbox"/> TEMPORARY APPROVAL (T) - UNTIL |            |
| <input type="checkbox"/> REJECTED (R)                                                                                                |  | REINSPECTION REQUIRED - CALL * 229-2071                                             |  |                                       |                 | <input type="checkbox"/> HOLD (H)                       |            |
| <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<br/>SIGNATURE</b>                                                                                                       |  |  |  |                                       | INSPECTION DATE |                                                         |            |
| <input type="checkbox"/> PROJECT COMPLETE                                                                                            |  |  |  |                                       |                 |                                                         |            |
| BRING HARD CARD WITH FIRE, QUALITY CONTROL & PLANNING APPROVALS SIGNED OFF TO BLDG & SAFETY. FOR C. of O. ISSUANCE (Commercial Only) |  |                                                                                     |  |                                       |                 |                                                         |            |
| IF YOU HAVE ANY QUESTIONS ON THIS INSPECTION, YOU MAY CALL THE INSPECTOR FROM 7:00 A.M. - 7:15 A.M. OR 2:45 P.M. - 3:00 P.M. AT      |  |                                                                                     |  |                                       |                 |                                                         | ▶ 229-6769 |

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



# DEPARTMENT OF BUILDING & SAFETY CITY OF LAS VEGAS

|                                                                                                                                 |                                                                                                                                     |                                          |                                                         |                                   |
|---------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------|------------------------------------------|---------------------------------------------------------|-----------------------------------|
| <b>PERMIT NUMBER</b> 92-136322                                                                                                  |                                                                                                                                     | <b>INSPECTION NUMBER</b> 13              |                                                         |                                   |
| <b>JOB ADDRESS</b> 2221 SILVER PINE DR                                                                                          |                                                                                                                                     |                                          |                                                         |                                   |
| LOT NO.                                                                                                                         | BLOCK NO.                                                                                                                           | SUBDIVISION NAME<br>TORREY PINES VILLAGE |                                                         |                                   |
| FIRE DEPT. MAP NO.<br>2219-24                                                                                                   | JOB PHONE<br>876-2933                                                                                                               | CALL-IN DATE<br>06/18/92                 | CALL-IN TIME<br>12:28                                   | SCHEDULE DATE<br>06/19/92         |
| INSPECTOR NO.<br>67                                                                                                             | INSPECTOR NAME<br>JESSE SCHELL                                                                                                      |                                          |                                                         |                                   |
| <b>INSPECTION REQUESTED</b>                                                                                                     |                                                                                                                                     | FINAL PLUMBING (440)                     |                                                         |                                   |
|                                                                                                                                 |                                                                                                                                     |                                          |                                                         |                                   |
| <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><i>M. Hall</i>                                                                                           |                                                                                                                                     | INSPECTION DATE<br>6-19-92               |                                                         |                                   |
| <input type="checkbox"/> PROJECT COMPLETE                                                                                       | BRING HARD CARD WITH FIRE, QUALITY CONTROL & PLANNING APPROVALS SIGNED OFF TO BLDG & SAFETY FOR C. of O. ISSUANCE (Commercial Only) |                                          |                                                         |                                   |
| IF YOU HAVE ANY QUESTIONS ON THIS INSPECTION, YOU MAY CALL THE INSPECTOR FROM 7:00 A.M. - 7:15 A.M. OR 2:45 P.M. - 3:00 P.M. AT |                                                                                                                                     |                                          |                                                         | 229-6769                          |

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

# DEPARTMENT OF BUILDING & SAFETY CITY OF LAS VEGAS

|                                     |                      |                        |                          |               |
|-------------------------------------|----------------------|------------------------|--------------------------|---------------|
| <input checked="" type="checkbox"/> | <b>PERMIT NUMBER</b> | 92-139719              | <b>INSPECTION NUMBER</b> | 42            |
| JOB ADDRESS                         |                      |                        |                          |               |
| 2221 SILVER PINE DR                 |                      |                        |                          |               |
| LOT NO.                             |                      | BLOCK NO.              | SUBDIVISION NAME         |               |
| FIRE DEPT. MAP NO.                  | JOB PHONE            | CALL-IN DATE           | CALL-IN TIME             | SCHEDULE DATE |
| 2219-24                             | 871-6467             | 05/29/92               | 14:52                    | 06/01/92      |
| INSPECTOR NO.                       |                      | INSPECTOR NAME         |                          |               |
| 67                                  |                      | JESSE SCHELL           |                          |               |
| <b>INSPECTION REQUESTED</b>         |                      | FINAL ELECTRICAL (240) |                          |               |

① Recepticle For dedicated circuit  
D.washer & disposal must be 20 Amp

② All recept in ~~gar~~ garage must be  
on GFI or single dedicated outlet (?)  
E tag # 42779

30 DAY temp power

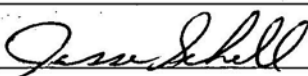
|                                                                                                                                 |                                                                                 |                                                                                                                                     |                                                         |                                          |
|---------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------|------------------------------------------|
| <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>                                                                                                              |                                                         |                                          |
| Jesse Schell                                                                                                                    |                                                                                 | 6-1-92                                                                                                                              |                                                         |                                          |
| <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                               |

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> | 92-139719                             | <b>INSPECTION<br/>NUMBER</b> | 15              |
| JOB ADDRESS<br><b>2221 SILVER PINE DR</b> |                          |                                       |                              |                 |
| LOT NO.                                   |                          | BLOCK NO.                             | SUBDIVISION NAME             |                 |
| FIRE DEPT. MAP NO.                        | JOB PHONE                | CALL-IN DATE                          | CALL-IN TIME                 | SCHEDULE DATE   |
| <b>2219-24</b>                            | <b>871-6467</b>          | <b>05/28/92</b>                       | <b>09:13</b>                 | <b>05/29/92</b> |
| INSPECTOR NO.<br><b>67</b>                |                          | INSPECTOR NAME<br><b>JESSE SCHELL</b> |                              |                 |
| <b>INSPECTION<br/>REQUESTED</b>           |                          | <b>FINAL ELECTRICAL (240)</b>         |                              |                 |

*see 2217 List*

|                                                                                                                                 |                                                                                 |                                                                                                                                     |                                                         |                                                                                                     |
|---------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------|-----------------------------------------------------------------------------------------------------|
| <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. |                                                                                                                                     |                                                         |                                                                                                     |
| <b>INSPECTOR<br/>SIGNATURE</b>                                                                                                  |                                                                                 | <b>INSPECTION DATE</b>                                                                                                              |                                                         |                                                                                                     |
|                                              |                                                                                 | <b>5-29-92</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



PERMIT  
NUMBER

92-140536

INSPECTION  
NUMBER

53

JOB ADDRESS

2221 SILVER PINE DR

LOT NO.

48

BLOCK NO.

17

SUBDIVISION NAME

TORREY PINE VILLAGE I

FIRE DEPT. MAP NO.

2219-24

JOB PHONE

362-9878

CALL-IN DATE

12/02/92

CALL-IN TIME

15:00

SCHEDULE DATE

12/03/92

INSPECTOR NO.

67

INSPECTOR NAME

JESSE SCHELL

INSPECTION  
REQUESTED

ROUGH MECHANICAL (320)

passed on 11-19-92

☐ 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

*12-3-92*

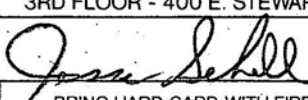
☐ PROJECT  
COMPLETE

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.

|                                                                                                                                    |                                                                                    |                                                                                                                                        |                                                            |                                                                                                     |
|------------------------------------------------------------------------------------------------------------------------------------|------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------|------------------------------------------------------------|-----------------------------------------------------------------------------------------------------|
| <input checked="" type="checkbox"/>                                                                                                | <b>PERMIT<br/>NUMBER</b>                                                           | 92-140536                                                                                                                              | <b>INSPECTION<br/>NUMBER</b>                               | 53                                                                                                  |
| <b>JOB ADDRESS</b><br>2221 SILVER PINE DR                                                                                          |                                                                                    |                                                                                                                                        |                                                            |                                                                                                     |
| <b>LOT NO.</b><br>48                                                                                                               |                                                                                    | <b>BLOCK NO.</b><br>17                                                                                                                 | <b>SUBDIVISION NAME</b><br>TORREY PINE VILLAGE I           |                                                                                                     |
| <b>FIRE DEPT. MAP NO.</b><br>2219-24                                                                                               | <b>JOB PHONE</b><br>362-9878                                                       | <b>CALL-IN DATE</b><br>12/02/92                                                                                                        | <b>CALL-IN TIME</b><br>15:00                               | <b>SCHEDULE DATE</b><br>12/03/92                                                                    |
| <b>INSPECTOR NO.</b><br>67                                                                                                         |                                                                                    | <b>INSPECTOR NAME</b><br>JESSE SCHELL                                                                                                  |                                                            |                                                                                                     |
| <b>INSPECTION<br/>REQUESTED</b>                                                                                                    |                                                                                    | ROUGH MECHANICAL (320)                                                                                                                 |                                                            |                                                                                                     |
| <p>passed on 11-19-92</p>                                                                                                          |                                                                                    |                                                                                                                                        |                                                            |                                                                                                     |
| <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. |                                                                                                                                        |                                                            |                                                                                                     |
| <b>INSPECTOR<br/>SIGNATURE</b>                                                                                                     |                                                                                    | <b>INSPECTION DATE</b>                                                                                                                 |                                                            |                                                                                                     |
|                                                 |                                                                                    |  12-3-92                                            |                                                            |                                                                                                     |
| <input checked="" 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>229-6769</b> |

# DEPARTMENT OF BUILDING & SAFETY CITY OF LAS VEGAS

|                                                                    |                                    |                                               |                           |
|--------------------------------------------------------------------|------------------------------------|-----------------------------------------------|---------------------------|
| <input checked="" type="checkbox"/> <b>PERMIT NUMBER</b> 92-140536 |                                    | <b>INSPECTION NUMBER</b> 53                   |                           |
| JOB ADDRESS <b>2221 SILVER PINE DR</b>                             |                                    |                                               |                           |
| LOT NO. <b>48</b>                                                  | BLOCK NO. <b>17</b>                | SUBDIVISION NAME <b>TORREY PINE VILLAGE I</b> |                           |
| FIRE DEPT. MAP NO. <b>2219-24</b>                                  | JOB PHONE <b>362-9878</b>          | CALL-IN DATE <b>12/02/92</b>                  | CALL-IN TIME <b>15:00</b> |
| SCHEDULE DATE <b>12/03/92</b>                                      |                                    |                                               |                           |
| INSPECTOR NO. <b>67</b>                                            | INSPECTOR NAME <b>JESSE SCHELL</b> |                                               |                           |
| <b>INSPECTION REQUESTED</b>                                        |                                    | <b>ROUGH MECHANICAL (320)</b>                 |                           |

*passed on 11-19-92*

|                                                                                                                                 |                                                                                                                                     |                                       |                                                         |
|---------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------|---------------------------------------------------------|
| <input type="checkbox"/> PARTIAL INSPECTION                                                                                     | <input type="checkbox"/> PARTIAL APPROVAL (P)                                                                                       | PARTIAL DESCRIPTION                   |                                                         |
| <input checked="" type="checkbox"/> APPROVED (A)                                                                                | <input type="checkbox"/> STOP WORK (S)                                                                                              | <input type="checkbox"/> COMMENTS (C) | <input type="checkbox"/> TEMPORARY APPROVAL (T) — UNTIL |
| <input type="checkbox"/> REJECTED (R)                                                                                           | <input type="checkbox"/> HOLD (H)                                                                                                   |                                       |                                                         |
| <input type="checkbox"/> REFEED (F)                                                                                             | REINSPECTION FEE REQUIRED - PAY AT CITY HALL 3RD FLOOR - 400 E. STEWART STREET.                                                     |                                       | <input type="checkbox"/> PERMIT REQUIRED                |
| INSPECTOR SIGNATURE <i>Jesse Schell</i>                                                                                         |                                                                                                                                     | INSPECTION DATE <i>12-3-92</i>        |                                                         |
| <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.

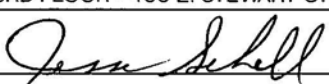


# DEPARTMENT OF BUILDING & SAFETY CITY OF LAS VEGAS

|                                           |                                       |                                             |                              |                                  |
|-------------------------------------------|---------------------------------------|---------------------------------------------|------------------------------|----------------------------------|
| <b>X</b>                                  | <b>PERMIT NUMBER</b>                  | 91-128906                                   | <b>INSPECTION NUMBER</b>     | 38                               |
| <b>JOB ADDRESS</b><br>2221 SILVER PINE DR |                                       |                                             |                              |                                  |
| <b>LOT NO.</b><br>48                      | <b>BLOCK NO.</b><br>17                | <b>SUBDIVISION NAME</b><br>TORREY PINES III |                              |                                  |
| <b>FIRE DEPT. MAP NO.</b><br>2219-24      | <b>JOB PHONE</b><br>361-5000          | <b>CALL-IN DATE</b><br>04/24/92             | <b>CALL-IN TIME</b><br>14:26 | <b>SCHEDULE DATE</b><br>04/27/92 |
| <b>INSPECTOR NO.</b><br>67                | <b>INSPECTOR NAME</b><br>JESSE SCHELL |                                             |                              |                                  |
| <b>INSPECTION REQUESTED</b> FRAMING (120) |                                       |                                             |                              |                                  |

A.M.

- ① insulate behind tubs
- ② wires thru 1 hr envelope - garage
- ③ nail dry wall envelopes @ 7" o.c.
- (TYPICAL ALL units - ALL WALLS)
- ④ repair Kitchen dry wall - 2hr wall
- ⑤ change out ~~penetration~~ penetration - 1 hr envelope - 2nd Floor - Fireplace Flw
- ⑥ Pry wall on top of metal stop 2nd Floor Fireplace chase
- (will V on Insul)

|                                                                                                                                 |                                                                                                                                     |                                       |                                                         |                                          |
|---------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------|---------------------------------------------------------|------------------------------------------|
| <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><br>               |                                                                                                                                     | <b>INSPECTION DATE</b><br>4-27-92     |                                                         |                                          |
| <input type="checkbox"/> PROJECT COMPLETE                                                                                       | BRING HARD CARD WITH FIRE, QUALITY CONTROL & PLANNING APPROVALS SIGNED OFF TO BLDG & SAFETY FOR C. of O. ISSUANCE (Commercial Only) |                                       |                                                         |                                          |
| IF YOU HAVE ANY QUESTIONS ON THIS INSPECTION, YOU MAY CALL THE INSPECTOR FROM 7:00 A.M. - 7:15 A.M. OR 2:45 P.M. - 3:00 P.M. AT |                                                                                                                                     |                                       |                                                         | 229-6769                                 |

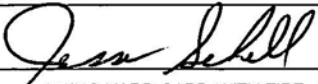
For Additional Assistance Call \* 229-6251. See Reverse Side For Inspection Types.

# DEPARTMENT OF BUILDING & SAFETY CITY OF LAS VEGAS

|                                                                                                                                                                                                                                                    |                                                                                                                                     |                                          |                                                         |                                   |
|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------|------------------------------------------|---------------------------------------------------------|-----------------------------------|
| <input checked="" type="checkbox"/>                                                                                                                                                                                                                | <b>PERMIT<br/>NUMBER</b>                                                                                                            | 92-139719                                | <b>INSPECTION<br/>NUMBER</b>                            | 33                                |
| JOB ADDRESS<br><b>2221 SILVER PINE DR</b>                                                                                                                                                                                                          |                                                                                                                                     |                                          |                                                         |                                   |
| LOT NO.                                                                                                                                                                                                                                            |                                                                                                                                     | BLOCK NO.                                | SUBDIVISION NAME                                        |                                   |
| FIRE DEPT. MAP NO.                                                                                                                                                                                                                                 | JOB PHONE                                                                                                                           | CALL-IN DATE                             | CALL-IN TIME                                            | SCHEDULE DATE                     |
| <b>2219-24</b>                                                                                                                                                                                                                                     | <b>871-6467</b>                                                                                                                     | <b>03/27/92</b>                          | <b>14:00</b>                                            | <b>03/30/92</b>                   |
| INSPECTOR NO.<br><b>67</b>                                                                                                                                                                                                                         |                                                                                                                                     | INSPECTOR NAME<br><b>JESSE SCHELL</b>    |                                                         |                                   |
| <b>INSPECTION REQUESTED</b> <b>ROUGH ELECTRICAL (220)</b>                                                                                                                                                                                          |                                                                                                                                     |                                          |                                                         |                                   |
| <p>① Remove Living circuit From Dining window</p> <p>② Add Kitch recep Frig wall</p> <p>③ move Dishwasher - other side</p> <p>④ install 3-way From garage to HALL</p> <p>⑤ install recept - gas dryer</p> <p>⑥ missing recept - water softener</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"/> 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.                                                     |                                          |                                                         |                                   |
| <b>INSPECTOR SIGNATURE</b><br><i>Jesse Schell</i>                                                                                                                                                                                                  |                                                                                                                                     | <b>INSPECTION DATE</b><br><b>3-30-92</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

|                                                                                                                                 |                                                                                                                                     |                                       |                                                         |                                          |
|---------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------|---------------------------------------------------------|------------------------------------------|
| <input checked="" type="checkbox"/>                                                                                             | <b>PERMIT NUMBER</b>                                                                                                                | 92-136322                             | <b>INSPECTION NUMBER</b>                                | 2                                        |
| <b>JOB ADDRESS</b><br>2221 SILVER PINE DR                                                                                       |                                                                                                                                     |                                       |                                                         |                                          |
| <b>LOT NO.</b>                                                                                                                  |                                                                                                                                     | <b>BLOCK NO.</b>                      | <b>SUBDIVISION NAME</b><br>TORREY PINES VILLAGE         |                                          |
| <b>FIRE DEPT. MAP NO.</b>                                                                                                       | <b>JOB PHONE</b>                                                                                                                    | <b>CALL-IN DATE</b>                   | <b>CALL-IN TIME</b>                                     | <b>SCHEDULE DATE</b>                     |
| 2219-24                                                                                                                         | 361-5000                                                                                                                            | 04/03/92                              | 10:52                                                   | 04/06/92                                 |
| <b>INSPECTOR NO.</b><br>67                                                                                                      |                                                                                                                                     | <b>INSPECTOR NAME</b><br>JESSE SCHELL |                                                         |                                          |
| <b>INSPECTION REQUESTED</b> PLUMBING INVESTIGATION (415)                                                                        |                                                                                                                                     |                                       |                                                         |                                          |
| <p>① see List 2209</p> <p>(TYPICAL)</p>                                                                                         |                                                                                                                                     |                                       |                                                         |                                          |
| <input type="checkbox"/> PARTIAL INSPECTION                                                                                     | <input type="checkbox"/> PARTIAL APPROVAL (P)                                                                                       | <b>PARTIAL DESCRIPTION</b>            |                                                         |                                          |
| <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.                                                     |                                       |                                                         |                                          |
| <b>INSPECTOR SIGNATURE</b><br>               |                                                                                                                                     | <b>INSPECTION DATE</b><br>4-6-92      |                                                         |                                          |
| <input type="checkbox"/> PROJECT COMPLETE                                                                                       | BRING HARD CARD WITH FIRE, QUALITY CONTROL & PLANNING APPROVALS SIGNED OFF TO BLDG & SAFETY FOR C. OF O. ISSUANCE (Commercial Only) |                                       |                                                         |                                          |
| IF YOU HAVE ANY QUESTIONS ON THIS INSPECTION, YOU MAY CALL THE INSPECTOR FROM 7:00 A.M. - 7:15 A.M. OR 2:45 P.M. - 3:00 P.M. AT |                                                                                                                                     |                                       |                                                         | 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>91-128906         |                              | <b>INSPECTION NUMBER</b><br>9               |                              |
| <b>JOB ADDRESS</b><br>2221 SILVER PINE DR |                              |                                             |                              |
| <b>LOT NO.</b><br>43                      | <b>BLOCK NO.</b><br>17       | <b>SUBDIVISION NAME</b><br>TORREY PINES III |                              |
| <b>FIRE DEPT. MAP NO.</b><br>2219-24      | <b>JOB PHONE</b><br>361-5000 | <b>CALL-IN DATE</b><br>04/28/92             | <b>CALL-IN TIME</b><br>12:08 |
| <b>INSPECTOR NO.</b><br>67                |                              | <b>INSPECTOR NAME</b><br>JESSE SCHELL       |                              |
| <b>SCHEDULE DATE</b><br>04/29/92          |                              |                                             |                              |

|                                                 |
|-------------------------------------------------|
| <b>INSPECTION REQUESTED</b><br>INSULATION (123) |
|-------------------------------------------------|

① nail drywall @ 1hr envelopes garage  
 At 7" O.C - sleeve Bundles or Fire putty  
 Single wires - R.C AT 16" O.C-envelopes  
 ② Draftstop walls @ 10' O.C. garage  
 ③ replace Holes with drywall - kitchen  
 ④ change out 2nd Floor Fireplace  
 penetration + putty  
~~⑤ Draftstop~~  
 OK to Dry wall All  
 But ABOVE areas  
 (Leave open For Insp)

|                                             |                                                          |                                                                                                                              |                                                                               |
|---------------------------------------------|----------------------------------------------------------|------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------|
| <input type="checkbox"/> PARTIAL INSPECTION | <input checked="" type="checkbox"/> PARTIAL APPROVAL (P) | PARTIAL DESCRIPTION<br>See ABOVE                                                                                             |                                                                               |
| <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"/> REFEE (F)                       | REINSPECTION REQUIRED - CALL *229-2071<br>REINSPECTION FEE REQUIRED - PAY AT CITY HALL<br>3RD FLOOR - 400 E. STEWART STREET. | <input type="checkbox"/> HOLD (H)<br><input type="checkbox"/> PERMIT REQUIRED |

|                                            |                                                                                                                                        |
|--------------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------|
| <b>INSPECTOR SIGNATURE</b><br>Jesse Schell | <b>INSPECTION DATE</b><br>4-29-92                                                                                                      |
| <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 | 229-6769 |
|------------------------------------------------------------------------------------------------------------------------------------|----------|

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

# DEPARTMENT OF BUILDING & SAFETY CITY OF LAS VEGAS



**PERMIT  
NUMBER**

92-139719

**INSPECTION  
NUMBER**

28

JOB ADDRESS

2221 SILVER PINE DR

LOT NO.

BLOCK NO.

SUBDIVISION NAME

FIRE DEPT. MAP NO.

JOB PHONE

CALL-IN DATE

CALL-IN TIME

SCHEDULE DATE

2219-24

871-6467

04/09/92

15:18

04/10/92

INSPECTOR NO.

INSPECTOR NAME

67

JESSE SCHELL

**INSPECTION  
REQUESTED**

ROUGH ELECTRICAL (220)

*passed on 4-7-92*

☐ 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<br/>NUMBER</b>                                                                                                            | 91-128906                             | <b>INSPECTION<br/>NUMBER</b>                            | 11                                |
| JOB ADDRESS<br><b>2221 SILVER PINE DR</b>                                                                                                                                 |                                                                                                                                     |                                       |                                                         |                                   |
| LOT NO.<br><b>48</b>                                                                                                                                                      |                                                                                                                                     | BLOCK NO.<br><b>17</b>                | SUBDIVISION NAME<br><b>TORREY PINES III</b>             |                                   |
| FIRE DEPT. MAP NO.<br><b>2219-24</b>                                                                                                                                      | JOB PHONE<br><b>361-5000</b>                                                                                                        | CALL-IN DATE<br><b>04/06/92</b>       | CALL-IN TIME<br><b>14:30</b>                            | SCHEDULE DATE<br><b>04/07/92</b>  |
| INSPECTOR NO.<br><b>67</b>                                                                                                                                                |                                                                                                                                     | INSPECTOR NAME<br><b>JESSE SCHELL</b> |                                                         |                                   |
| <b>INSPECTION REQUESTED</b> <b>ROUGH ELECTRICAL (220)</b>                                                                                                                 |                                                                                                                                     |                                       |                                                         |                                   |
| <p style="font-size: 1.2em;">① install wfer ground cube</p> <p style="font-size: 1.2em;">will ✓ before FINAL</p> <p style="font-size: 1.2em;">BAL of corrections made</p> |                                                                                                                                     |                                       |                                                         |                                   |
| <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><i>Jesse Schell</i>                                                                                                                                |                                                                                                                                     | INSPECTION DATE<br><b>4-7-92</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

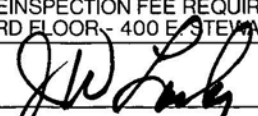
|                                                                                                                                                                                                    |                              |                                       |                                             |                                  |
|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------------|---------------------------------------|---------------------------------------------|----------------------------------|
| <input type="checkbox"/>                                                                                                                                                                           | <b>PERMIT NUMBER</b>         | 91-128906                             | <b>INSPECTION NUMBER</b>                    | 52                               |
| JOB ADDRESS<br><b>2221 SILVER PINE DR</b>                                                                                                                                                          |                              |                                       |                                             |                                  |
| LOT NO.<br><b>48</b>                                                                                                                                                                               |                              | BLOCK NO.<br><b>17</b>                | SUBDIVISION NAME<br><b>TORREY PINES III</b> |                                  |
| FIRE DEPT. MAP NO.<br><b>2219-24</b>                                                                                                                                                               | JOB PHONE<br><b>361-5000</b> | CALL-IN DATE<br><b>04/13/92</b>       | CALL-IN TIME<br><b>16:07</b>                | SCHEDULE DATE<br><b>04/14/92</b> |
| INSPECTOR NO.<br><b>67</b>                                                                                                                                                                         |                              | INSPECTOR NAME<br><b>JESSE SCHELL</b> |                                             |                                  |
| <div style="display: flex; align-items: center;"> <div style="border: 1px solid black; padding: 2px; margin-right: 10px;"><b>INSPECTION REQUESTED</b></div> <div><b>FRAMING (120)</b></div> </div> |                              |                                       |                                             |                                  |

- ① plumb not passed
- ② msti 48 strap - 2nd Floor At stairs
- ③ Draftstop 1st Floor Fireplace
- ④ repair holes Kitchen wall - 2hr
- ⑤ Have approved system penetration thru envelope 2nd Floor
- ⑥ Insulate behind tube before lathe
- ⑦ install envelopes both sides garage - run 2hr wall to roof
- ⑧ penetrations - wire & hot water flu thru envelopes

|                                                                                                                                 |                                               |                                                                                                                                     |                                                          |                                          |
|---------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------|------------------------------------------|
| <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><b>4-14-92</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>                          |

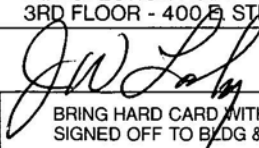
For Additional Assistance Call \* 229-6251. See Reverse Side For Inspection Types.

# DEPARTMENT OF BUILDING & SAFETY CITY OF LAS VEGAS

|                                                                                                                                    |                                                                                                                                        |                                          |                                                            |                                      |
|------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------|------------------------------------------|------------------------------------------------------------|--------------------------------------|
| <b>X</b>                                                                                                                           | <b>PERMIT<br/>NUMBER</b>                                                                                                               | 92-136322                                | <b>INSPECTION<br/>NUMBER</b>                               | 25                                   |
| JOB ADDRESS<br><b>2221 SILVER PINE DR</b>                                                                                          |                                                                                                                                        |                                          |                                                            |                                      |
| LOT NO.                                                                                                                            |                                                                                                                                        | BLOCK NO.                                | SUBDIVISION NAME<br><b>TORREY PINES VILLAGE</b>            |                                      |
| FIRE DEPT. MAP NO.<br><b>2219-24</b>                                                                                               | JOB PHONE<br><b>361-5000</b>                                                                                                           | CALL-IN DATE<br><b>04/14/92</b>          | CALL-IN TIME<br><b>13:02</b>                               | SCHEDULE DATE<br><b>04/15/92</b>     |
| INSPECTOR NO.<br><b>67</b>                                                                                                         |                                                                                                                                        | INSPECTOR NAME<br><b>JESSE SCHELL</b>    |                                                            |                                      |
| <b>INSPECTION<br/>REQUESTED</b>                                                                                                    |                                                                                                                                        | <b>OTHER (450)</b>                       |                                                            |                                      |
| <p><b>"PLUMBING ONLY</b></p> <p style="font-size: 2em; margin-left: 50px;">423</p>                                                 |                                                                                                                                        |                                          |                                                            |                                      |
| <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<br>SIGNATURE<br>                      |                                                                                                                                        | INSPECTION DATE<br><b>4-15-92</b>        |                                                            |                                      |
| <input type="checkbox"/> PROJECT<br>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>229-6769</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>91-128906</b>                                                                                                                                   | <b>INSPECTION NUMBER</b>                                       | <b>27</b>                                       |
| <b>JOB ADDRESS</b><br><b>2221 SILVER PINE DR</b>                                                                                       |                                                                                       |                                                                                                                                                    |                                                                |                                                 |
| <b>LOT NO.</b><br><b>48</b>                                                                                                            |                                                                                       | <b>BLOCK NO.</b><br><b>17</b>                                                                                                                      | <b>SUBDIVISION NAME</b><br><b>TORREY PINES III</b>             |                                                 |
| <b>FIRE DEPT. MAP NO.</b><br><b>2219-24</b>                                                                                            | <b>JOB PHONE</b><br><b>361-5000</b>                                                   | <b>CALL-IN DATE</b><br><b>04/10/92</b>                                                                                                             | <b>CALL-IN TIME</b><br><b>12:07</b>                            | <b>SCHEDULE DATE</b><br><b>04/13/92</b>         |
| <b>INSPECTOR NO.</b><br><b>67</b>                                                                                                      |                                                                                       | <b>INSPECTOR NAME</b><br><b>JESSE SCHELL</b>                                                                                                       |                                                                |                                                 |
| <b>INSPECTION REQUESTED</b><br><b>ROUGH MECHANICAL (320)</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 S STEWART STREET.</b> |                                                                                                                                                    |                                                                |                                                 |
| <b>INSPECTOR SIGNATURE</b><br>                      |                                                                                       | <b>INSPECTION DATE</b><br><b>4-13-92</b>                                                                                                           |                                                                |                                                 |
| <input type="checkbox"/> <b>PROJECT COMPLETE</b>                                                                                       |                                                                                       | <b>BRING HARD CARD WITH FIRE, QUALITY CONTROL &amp; PLANNING APPROVALS SIGNED OFF TO BDDG &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**

91-128906

**INSPECTION  
NUMBER**

49

JOB ADDRESS

2221 SILVER PINE DR

LOT NO.

48

BLOCK NO.

17

SUBDIVISION NAME

TORREY PINES III

FIRE DEPT. MAP NO.

2219-24

JOB PHONE

361-5000

CALL-IN DATE

05/01/92

CALL-IN TIME

15:06

SCHEDULE DATE

05/04/92

INSPECTOR NO.

67/61

INSPECTOR NAME

JESSE SCHELL

**INSPECTION  
REQUESTED**

EXTERIOR LATH/STUCCO (129)

*Need card*

☐ 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

5-4-92

☐ 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

91-128906

INSPECTION  
NUMBER

6

JOB ADDRESS

2221 SILVER PINE DR

LOT NO.

48

BLOCK NO.

17

SUBDIVISION NAME

TORREY PINES III

FIRE DEPT. MAP NO.

2219-24

JOB PHONE

361-5000

CALL-IN DATE

02/12/92

CALL-IN TIME

09:11

SCHEDULE DATE

02/13/92

INSPECTOR NO.

67

INSPECTOR NAME

JESSE SCHELL

INSPECTION  
REQUESTED

FOOTING, LAYOUT, REBAR, ZONING (101)

☐ 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

*Jesse Schell*

INSPECTION DATE

2-13-92

☐ PROJECT  
COMPLETE

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

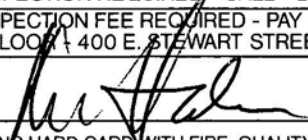
IF YOU HAVE ANY QUESTIONS ON THIS INSPECTION, YOU MAY  
CALL THE INSPECTOR FROM 7:00 A.M. - 7:15 A.M. OR 2:45 P.M. - 3:00 P.M. AT

229-6769

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

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

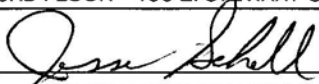
# DEPARTMENT OF BUILDING & SAFETY CITY OF LAS VEGAS

|                                                                                                                                    |                                                                                                                                        |                                          |                                                            |                                                                                                     |
|------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------|------------------------------------------|------------------------------------------------------------|-----------------------------------------------------------------------------------------------------|
| <input checked="" type="checkbox"/>                                                                                                | <b>PERMIT<br/>NUMBER</b>                                                                                                               | 92-136322                                | <b>INSPECTION<br/>NUMBER</b>                               | 19                                                                                                  |
| JOB ADDRESS<br><b>2221 SILVER PINE DR</b>                                                                                          |                                                                                                                                        |                                          |                                                            |                                                                                                     |
| LOT NO.                                                                                                                            |                                                                                                                                        | BLOCK NO.                                | SUBDIVISION NAME                                           |                                                                                                     |
| FIRE DEPT. MAP NO.<br>-                                                                                                            |                                                                                                                                        | JOB PHONE                                | CALL-IN DATE<br><b>02/14/92</b>                            | CALL-IN TIME<br><b>11:48</b>                                                                        |
| SCHEDULE DATE<br><b>02/18/92</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 *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<br>SIGNATURE<br>                      |                                                                                                                                        | INSPECTION DATE<br><b>2-18-92</b>        |                                                            |                                                                                                     |
| <input type="checkbox"/> PROJECT<br>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> |

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# DEPARTMENT OF BUILDING & SAFETY CITY OF LAS VEGAS

|                                                                                                                                 |  |                                                                                                                                     |  |                                             |  |                                                         |                                                                                                     |
|---------------------------------------------------------------------------------------------------------------------------------|--|-------------------------------------------------------------------------------------------------------------------------------------|--|---------------------------------------------|--|---------------------------------------------------------|-----------------------------------------------------------------------------------------------------|
| <b>PERMIT NUMBER</b>                                                                                                            |  | 91-128906                                                                                                                           |  | <b>INSPECTION NUMBER</b>                    |  | 21                                                      |                                                                                                     |
| JOB ADDRESS<br><b>2221 SILVER PINE DR</b>                                                                                       |  |                                                                                                                                     |  |                                             |  |                                                         |                                                                                                     |
| LOT NO.<br><b>48</b>                                                                                                            |  | BLOCK NO.<br><b>17</b>                                                                                                              |  | SUBDIVISION NAME<br><b>TORREY PINES III</b> |  |                                                         |                                                                                                     |
| FIRE DEPT. MAP NO.<br><b>2219-24</b>                                                                                            |  | JOB PHONE<br><b>361-5000</b>                                                                                                        |  | CALL-IN DATE<br><b>02/19/92</b>             |  | CALL-IN TIME<br><b>14:38</b>                            |                                                                                                     |
| SCHEDULE DATE<br><b>02/20/92</b>                                                                                                |  |                                                                                                                                     |  |                                             |  |                                                         |                                                                                                     |
| INSPECTOR NO.<br><b>67</b>                                                                                                      |  | INSPECTOR NAME<br><b>JESSE SCHELL</b>                                                                                               |  |                                             |  |                                                         |                                                                                                     |
| <b>INSPECTION REQUESTED</b>                                                                                                     |  | <b>PRE-SLAB (105)</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>2-20-92</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.