

3011 GAREHME ST.

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# CITY OF LAS VEGAS, NEVADA

LOG NO. & AREA M-504 DATE 3-16-89 CONSTRUCTION VAL. \$ 39,017.95

DEPARTMENT OF BUILDING AND SAFETY  
PHONE 386-6251

## BUILDING PERMIT

FOR: Swimming Pool or Spa

ADDRESS OF CONSTRUCTION 3011 Garehime St. OWNER MAX. Bill & Kathy PHONE NO. 645-6295

CONTRACTOR Tropicana Sylvan Pools. STATE LICENSE NO. 23414 CITY LICENSE NO. C11-00171-2-007454

LOT(s) 2 BLOCK 1 SUBDIVISION Desert Breeze ZONE R-D  
PLUMBING CONTRACTOR Tropicana Sylvan Pools. ELECTRICAL CONTRACTOR R&M 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.

CIRCLE TYPE OF POOL THAT APPLIES: PRIVATE SEMI-PUBLIC PUBLIC SPA  
MATERIALS OF CONSTRUCTION: REINFORCED GUNITE REINFORCED CONCRETE OTHER \_\_\_\_\_

SQUARE FEET OF SURFACE POOL 398 SPA \_\_\_\_\_ VOLUME IN GALLONS 13432

I state that I am familiar with the effective ordinances of the City of Las Vegas, Nevada and the effective Statutes of the State of Nevada covering construction and use of the above type; I agree to perform said construction in conformity therewith. I further agree that issuance of a permit on the above application will not excuse me from conforming with the said Ordinances and Statutes despite any errors on the part of the building inspector or engineer in checking plans and application herewith.

All swimming pools must be fenced before the pool is filled with water. No electrical lines shall cross over a pool. Applicants must have separate plot plans showing location of power pole, proposed or existing fencing and location of swimming pool. I agree to repair any utility line, if damaged during excavation work. I have read and understand the contents of above application. I hereby state that the same are true and correct.

SIGNED [Signature] 3-16-89 CONTRACTOR  
BY [Signature] 3/15/89 AGENT/OWNER  
PLANNING DEPT. [Signature] 3/15/89 DATE  
BUILDING DEPT. [Signature] 3/15/89 DATE

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

| DESCRIPTION                              |                                   |                    | FEE                   | TOTAL    |
|------------------------------------------|-----------------------------------|--------------------|-----------------------|----------|
| ISSUANCE FEE                             |                                   |                    | 10.00                 | 10.00    |
| SEWER CONNECTION FEE (to 30,000 GALLONS) |                                   |                    | <del>50.00</del> 5800 | 5800     |
| BUILDING PERMIT - POOL & OR SPA:         |                                   |                    |                       | 60.00    |
| PLUMBING PERMIT                          | PRIVATE POOL OR SPA               | PREFORMED SPA      | 10.00                 |          |
|                                          |                                   | OTHERWISE          | 20.00                 | 20.00    |
|                                          | PUBLIC OR SEMI-PUBLIC POOL OR SPA | PREFORMED SPA      | 20.00                 |          |
|                                          |                                   | OTHERWISE          | 30.00                 | 05/16/89 |
|                                          | FUEL PIPING FOR POOL HEATER       |                    | 6.00                  |          |
| ELECTRICAL PERMIT                        | SPA                               |                    | 8.00                  |          |
|                                          | SWIMMING POOL                     | RESIDENTIAL        | 20.00                 | 20.00    |
|                                          |                                   | PUBLIC-SEMI-PUBLIC | 30.00                 |          |
|                                          | ELECTRICAL SERVICE CHANGE         |                    | 6.00                  |          |
| MISC.                                    |                                   |                    |                       |          |
| TOTAL FEES                               |                                   |                    |                       | 168.60   |

RECEIPT  
\*\*0003\*\*  
POOL 70.60  
SEWR 58.00  
PLBG 20.00  
ELEC 20.00  
CHEK 168.60  
2870A000 13:19

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

Permit Expires 180 Days After Abandonment of Work

## CITY OF LAS VEGAS, NEVADA

PERMIT NO.

DEPARTMENT OF BUILDING AND SAFETY  
PHONE 386-6251

FOR INSPECTIONS, CALL 799-2071

89-019157  
ELECTRICAL PERMIT

LOG NO. &amp; AREA

DATE

3/27/89

CONST. VAL. \$

ADDRESS OF  
CONSTRUCTION

3011 Gachine

OWNER

Max

CONTRACTOR

Hi-Tek Electric

STATE

LICENSE NO.

27990

CITY

LICENSE NO.

038184

(PRINT NAME OF MASTER ELECTRICIAN)

Phillip Cortney

MASTER CARD NO.

MI-376

PHONE 273-0024

PROPOSED CONSTRUCTION:

Elect portion of pool

USE:

ELECTRIC  
PERMIT NO.Approval for the work under this permit will be given only after refuse  
and debris have been removed from job site and public right of way.

| UNITS                                                                                                                         | DESCRIPTION                                                                                                                                                                                                                                                               | FEE   | TOTAL |
|-------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------|-------|
| <b>PERMIT ISSUANCE</b>                                                                                                        |                                                                                                                                                                                                                                                                           |       |       |
| 1                                                                                                                             | For Issuing Each Permit                                                                                                                                                                                                                                                   | 10.00 | 10.00 |
|                                                                                                                               | Supplemental Fee                                                                                                                                                                                                                                                          | 4.50  |       |
| <b>APPLIANCE CHARGE</b>                                                                                                       |                                                                                                                                                                                                                                                                           |       |       |
| <b>Residential or General Commercial</b>                                                                                      |                                                                                                                                                                                                                                                                           |       |       |
| +                                                                                                                             | Receptacle _____ Switch _____                                                                                                                                                                                                                                             | .40   |       |
|                                                                                                                               | Each Light Fixture, Socket, or Exit Light<br>Smoke Detector or Exhaust Fan                                                                                                                                                                                                | .30   |       |
|                                                                                                                               | EACH OUTLET FOR SPECIAL PURPOSE:<br>Dishwasher, Garbage Grinder, Trash Compactor,<br>G.F.I., Clothes Washer, Dryer, Electric Range,<br>Ovens, Water Heater, Space Heater, Blast Coil<br>Heater, (PER K.W.), Mercury Lamp, Quartz Lamp,<br>Sodium Lamp, 20AMP Sign Circuit | .70   |       |
|                                                                                                                               | X-Ray Unit                                                                                                                                                                                                                                                                | 10.00 |       |
|                                                                                                                               | Area Lighting (First 3,000 Watts)                                                                                                                                                                                                                                         | 8.00  |       |
|                                                                                                                               | Each Additional 1,000 Watts                                                                                                                                                                                                                                               | 3.00  |       |
| <b>MOTORS (1 H.P. AND OVER) TRANSFORMERS, ELEVATORS, WELDERS,<br/>GENERATORS, CHILLERS, SIGNS AND A/C UNITS (OVER 5 TONS)</b> |                                                                                                                                                                                                                                                                           |       |       |
| +                                                                                                                             | First H.P. or Ton For each Unit                                                                                                                                                                                                                                           | 3.00  | 3.00  |
|                                                                                                                               | First KVA For Each Unit                                                                                                                                                                                                                                                   | 3.00  |       |
|                                                                                                                               | Each Additional H.P., Ton or KVA up to 50                                                                                                                                                                                                                                 | .50   |       |
|                                                                                                                               | Each Additional H.P., Ton or KVA over 50                                                                                                                                                                                                                                  | .35   |       |
|                                                                                                                               | Temporary power or Pole                                                                                                                                                                                                                                                   | 6.00  |       |
| <b>ELECTRIC SERVICE OR MAIN DISCONNECT</b>                                                                                    |                                                                                                                                                                                                                                                                           |       |       |
|                                                                                                                               | Up to 200 AMP                                                                                                                                                                                                                                                             | 6.00  |       |
|                                                                                                                               | 400 AMP And 600 AMP                                                                                                                                                                                                                                                       | 12.50 |       |
|                                                                                                                               | Over 600 AMP To 1200 AMP                                                                                                                                                                                                                                                  | 25.00 |       |
|                                                                                                                               | Over 1200 AMP                                                                                                                                                                                                                                                             | 50.00 |       |
|                                                                                                                               | Each Additional Meter Socket                                                                                                                                                                                                                                              | .50   |       |
|                                                                                                                               | Sub Panel, Motor Control Center<br>Disconnect Switch, Transfer Switch (Each)                                                                                                                                                                                              | 3.00  |       |
| 1                                                                                                                             | Swimming Pool (Residential)                                                                                                                                                                                                                                               | 20.00 | 20.00 |
|                                                                                                                               | Swimming Pool (Semi-Public)                                                                                                                                                                                                                                               | 30.00 |       |
|                                                                                                                               | Spas                                                                                                                                                                                                                                                                      | 8.00  |       |
|                                                                                                                               | Recreational Vehicle Spaces (Each)                                                                                                                                                                                                                                        | 3.00  |       |

| UNITS                                                                         | DESCRIPTION                                                                                                                                                                           | FEE               | TOTAL |
|-------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------|-------|
|                                                                               | Busways-Trolley or Plug-in (Ea. 100 Ft.)                                                                                                                                              | 3.00              |       |
|                                                                               | Gas Pumps, Dispensers (Each)                                                                                                                                                          | 3.00              |       |
|                                                                               | Permanent A/C Unit (5 Tons or Less)                                                                                                                                                   | 3.00              |       |
|                                                                               | Each Air Handler                                                                                                                                                                      | 1.00              |       |
| <b>RESIDENTIAL LOW VOLTAGE INSTALLATIONS</b>                                  |                                                                                                                                                                                       |                   |       |
|                                                                               | Speaker Outlets (Each)                                                                                                                                                                | .30               |       |
|                                                                               | Signal or Alarm Outlets (Each)                                                                                                                                                        | .30               |       |
|                                                                               | Amplifiers                                                                                                                                                                            | 2.00              |       |
|                                                                               | Control Panel                                                                                                                                                                         | .50               |       |
|                                                                               | TV Master System                                                                                                                                                                      | .30               |       |
|                                                                               | Telephone or Computer Outlet                                                                                                                                                          | .30               |       |
| <b>OTHER INSPECTIONS AND FEES:<br/>INCLUDES ISSUANCE FEES WHEN APPLICABLE</b> |                                                                                                                                                                                       |                   |       |
|                                                                               | Inspections outside of normal business hours<br>(minimum charge — three hours)                                                                                                        | 30.00<br>per hour |       |
|                                                                               | Reinspection fee assessed under provisions of TABLE<br>3-A of the Uniform Building Code = \$30.00 EACH.                                                                               | 30.00<br>each     |       |
|                                                                               | Inspections for which no fee is specifically<br>indicated (minimum charge — one-half hour).                                                                                           | 30.00<br>per hour |       |
|                                                                               | Additional plan review required by changes, additions<br>or revisions to approved plans (minimum charge —<br>one-half hour). After work hours — \$30.00 per hour<br>— minimum 1 hour. | 30.00<br>per hour |       |
|                                                                               | Starter Permit                                                                                                                                                                        | 50.00             |       |
| <b>CONTRACT PRICE OR COST OF INSTALLATION</b>                                 |                                                                                                                                                                                       |                   |       |
|                                                                               | Commercial — Burglar Alarms                                                                                                                                                           |                   |       |
|                                                                               | — Music Systems                                                                                                                                                                       |                   |       |
|                                                                               | — Data Processing                                                                                                                                                                     |                   |       |
|                                                                               | — Communication                                                                                                                                                                       |                   |       |
|                                                                               | Conduit Only—Contract Price                                                                                                                                                           |                   |       |
|                                                                               | All Misc. Electric                                                                                                                                                                    |                   |       |

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

# 2310-2402

## 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 HOWEOWNER, CONTRACTOR

Phillip Cortney

BUILDING DEPT

DATE

3/27/89

Permit Expires 180 Days After Abandonment of Work

PERMIT  
FEE

30

LESS  
STARTER PERMITTOTAL  
FEES

30

PERMIT NO.

MUST BE MACHINE VALIDATED

DEPARTMENT OF BUILDING & SAFETY CITY OF LAS VEGAS

|                                                                                             |                                |                                                                                                                |                             |
|---------------------------------------------------------------------------------------------|--------------------------------|----------------------------------------------------------------------------------------------------------------|-----------------------------|
| JOB ADDRESS                                                                                 |                                | PERMIT NO.                                                                                                     |                             |
| 3011 Gartzheim                                                                              |                                | 17950                                                                                                          |                             |
| LOT NO.                                                                                     | MAP NO.                        | INSPECTOR                                                                                                      | DATE                        |
|                                                                                             |                                | # 51                                                                                                           |                             |
| SUBDIVISION NAME                                                                            |                                | PHONE                                                                                                          |                             |
|                                                                                             |                                |                                                                                                                |                             |
| INSPECTOR SIGNATURE                                                                         |                                | INSPECTION DATE                                                                                                |                             |
| G. Shoemaker                                                                                |                                | 4-7                                                                                                            |                             |
| <input type="checkbox"/> PARTIAL INSPECTION - DESCRIPTION                                   |                                |                                                                                                                |                             |
| <input checked="" type="checkbox"/> APPROVED                                                |                                |                                                                                                                |                             |
| <input type="checkbox"/> PERMIT REQUIRED                                                    |                                |                                                                                                                |                             |
| <input type="checkbox"/> STOP WORK                                                          |                                |                                                                                                                |                             |
| <input type="checkbox"/> REJECTED - CORRECTION NOTICE - REINSPECTION REQUIRED CALL 799-2071 |                                |                                                                                                                |                             |
| INSPECT                                                                                     | DESCRIPTION                    | INSPECT                                                                                                        | DESCRIPTION                 |
| <input type="checkbox"/> E-1                                                                | POURING LAYOUT, REPAIR, JOTING | <input type="checkbox"/> P-1                                                                                   | ON SITE SEWER               |
| <input type="checkbox"/> E-2                                                                | STRENGTH & FORMS & REPAIR      | <input type="checkbox"/> P-2                                                                                   | ON SITE WATER               |
| <input type="checkbox"/> E-3                                                                | PRESLAB                        | <input type="checkbox"/> P-3                                                                                   | BUILDING SEWER (YARD LINES) |
| <input type="checkbox"/> E-4                                                                | JOINT WEATHERING               | <input type="checkbox"/> P-4                                                                                   | UNDERSLAB PLUMBING          |
| <input type="checkbox"/> E-5                                                                | FRAMING                        | <input type="checkbox"/> P-5                                                                                   | TOP OUT-OF-DATE GAS WASTE   |
| <input type="checkbox"/> E-6                                                                | INSULATION                     | <input type="checkbox"/> P-6                                                                                   | FINAL GAS TEST              |
| <input type="checkbox"/> E-7                                                                | DOWNDRAIN LAYOUT               | <input type="checkbox"/> P-7                                                                                   | FINAL PLUMBING              |
| <input type="checkbox"/> E-8                                                                | EXTERIOR FINI STUDIO           |                                                                                                                |                             |
| <input type="checkbox"/> E-9                                                                | WALL CRACK & SPLIT             | <input type="checkbox"/> E-1                                                                                   | UNDERGROUND ELECTRICAL      |
| <input type="checkbox"/> E-10                                                               | POOL                           | <input type="checkbox"/> E-2                                                                                   | ROUGH ELECTRICAL            |
| <input type="checkbox"/> E-11                                                               | POOL                           | <input type="checkbox"/> E-3                                                                                   | LOW VOLTAGE ELECTRICAL      |
| <input type="checkbox"/> E-12                                                               | POOL                           | <input type="checkbox"/> E-4                                                                                   | SEWER INSPECTION            |
| <input type="checkbox"/> E-13                                                               | PAINTING                       | <input type="checkbox"/> E-5                                                                                   | FINAL ELECTRICAL            |
| <input type="checkbox"/> E-14                                                               | CEILING & FLOOR                | <input type="checkbox"/> E-6                                                                                   | SEWER PUMP                  |
| <input type="checkbox"/> FINAL INSPECTION                                                   |                                | BEING HANDLED WITH S.F.E. QUALITY CONTROL & PLANNING APPROVALS<br>SIGNED OFF FOR ISSUANCE FOR 30 DAY GUARANTEE |                             |

**FOR TECHNICAL ASSISTANCE - CALL: 799-6916**



DEPARTMENT OF BUILDING & SAFETY CITY OF LAS VEGAS

|                                   |         |                           |
|-----------------------------------|---------|---------------------------|
| ADDRESS<br>3011 Garheim St.       |         | PERMIT NO.<br>17960       |
| LOT NO.                           | MAP NO. | INSPECTOR<br>64           |
| SUBMISSION NAME                   |         | PHONE                     |
| INSPECTOR SIGNATURE<br>Don Harris |         | INSPECTION DATE<br>5/8/89 |

GATE MUST BE SELF CLOSING & LATCHING  
ELECTRICAL GROUNDS CANNOT TERMINATE IN A WIRE NUT  
MUST BE AT A BUS BAR

ADDITIONAL INSPECTION - DESCRIPTION

| <input type="checkbox"/> APPROVED                                                                      |                             | <input type="checkbox"/> PERMIT REQUIRED |                            | <input type="checkbox"/> STOP WORK |                         |
|--------------------------------------------------------------------------------------------------------|-----------------------------|------------------------------------------|----------------------------|------------------------------------|-------------------------|
| <input checked="" type="checkbox"/> REJECTED - CORRECTION NOTICE - REINSPECTION REQUIRED CALL 799-2071 |                             |                                          |                            |                                    |                         |
| ITEM                                                                                                   | DESCRIPTION                 | ITEM                                     | DESCRIPTION                | ITEM                               | DESCRIPTION             |
| <input type="checkbox"/> D-1                                                                           | EXISTING LANDSCAPE PLANTING | <input type="checkbox"/> P-1             | ON-SITE SEWER              | <input type="checkbox"/> X-2       | UNDERGROUND HYDRO       |
| <input type="checkbox"/> D-2                                                                           | STEM WALL FORMS & REBAR     | <input type="checkbox"/> P-2             | ON-SITE WATER              | <input type="checkbox"/> X-3       | UNDERGROUND FAULT FLOW  |
| <input type="checkbox"/> D-3                                                                           | PRE-SLAB                    | <input type="checkbox"/> P-3             | BUILDING SEWER (WARD LINE) | <input type="checkbox"/> X-4       | SPRINKLER SYSTEM HYDRO  |
| <input type="checkbox"/> D-4                                                                           | ROOF SHEATHING              | <input type="checkbox"/> P-4             | UNDERSLAB PLUMBING         | <input type="checkbox"/> X-5       | FIRE ALARM              |
| <input type="checkbox"/> D-5                                                                           | BRAMING                     | <input type="checkbox"/> P-5             | TIE-OUT WATER, GAS, WASTE  | <input type="checkbox"/> X-6       | OTHER                   |
| <input type="checkbox"/> D-6                                                                           | INSULATION                  | <input type="checkbox"/> P-6             | FINAL GAS TEST             | <input type="checkbox"/> X-7       | FINAL FIRE              |
| <input type="checkbox"/> D-7                                                                           | DRY WALL MOUNTING           | <input type="checkbox"/> P-7             | FINAL PLUMBING             |                                    |                         |
| <input type="checkbox"/> D-8                                                                           | DRY WALL LATH & JOINT       |                                          |                            | <input type="checkbox"/> E-1       | UNDERGROUND ELECTRICAL  |
| <input type="checkbox"/> D-9                                                                           | W. GROUP & STEEL            | <input type="checkbox"/> M-1             | RECEIVANCE                 | <input type="checkbox"/> E-2       | HIGH VOLTAGE ELECTRICAL |
| <input type="checkbox"/> D-10                                                                          | FIRE                        | <input type="checkbox"/> M-2             | WOOD                       | <input type="checkbox"/> E-3       | LOW VOLTAGE ELECTRICAL  |
| <input checked="" type="checkbox"/> D-11                                                               | FIRE CLUTE                  | <input type="checkbox"/> M-3             | FINAL MECHANICAL           | <input type="checkbox"/> E-4       | SIGN INSPECTION         |
| <input type="checkbox"/> D-12                                                                          | FIRE FLASHER                | <input type="checkbox"/> M-4             | FINAL ELECTRICAL           | <input type="checkbox"/> E-5       | FINAL ELECTRICAL        |
| <input type="checkbox"/> D-13                                                                          | FINAL MECHANICAL            | <input type="checkbox"/> M-5             | ROOFER FINISH              | <input type="checkbox"/> E-6       | TEMP POWER              |

FOR TECHNICAL ASSISTANCE - CALL: 799-6016

25-10

|                        |                    |                           |                            |
|------------------------|--------------------|---------------------------|----------------------------|
| 3011 <i>Sharshein</i>  | MAP NO.            | INVESTIGATOR<br><i>64</i> | REPORT NO.<br><i>17960</i> |
| INSPECTION<br>SCOUTURE | <i>Don Starnes</i> | DATE                      | PHONE                      |
|                        |                    |                           | <i>5/9/89</i>              |

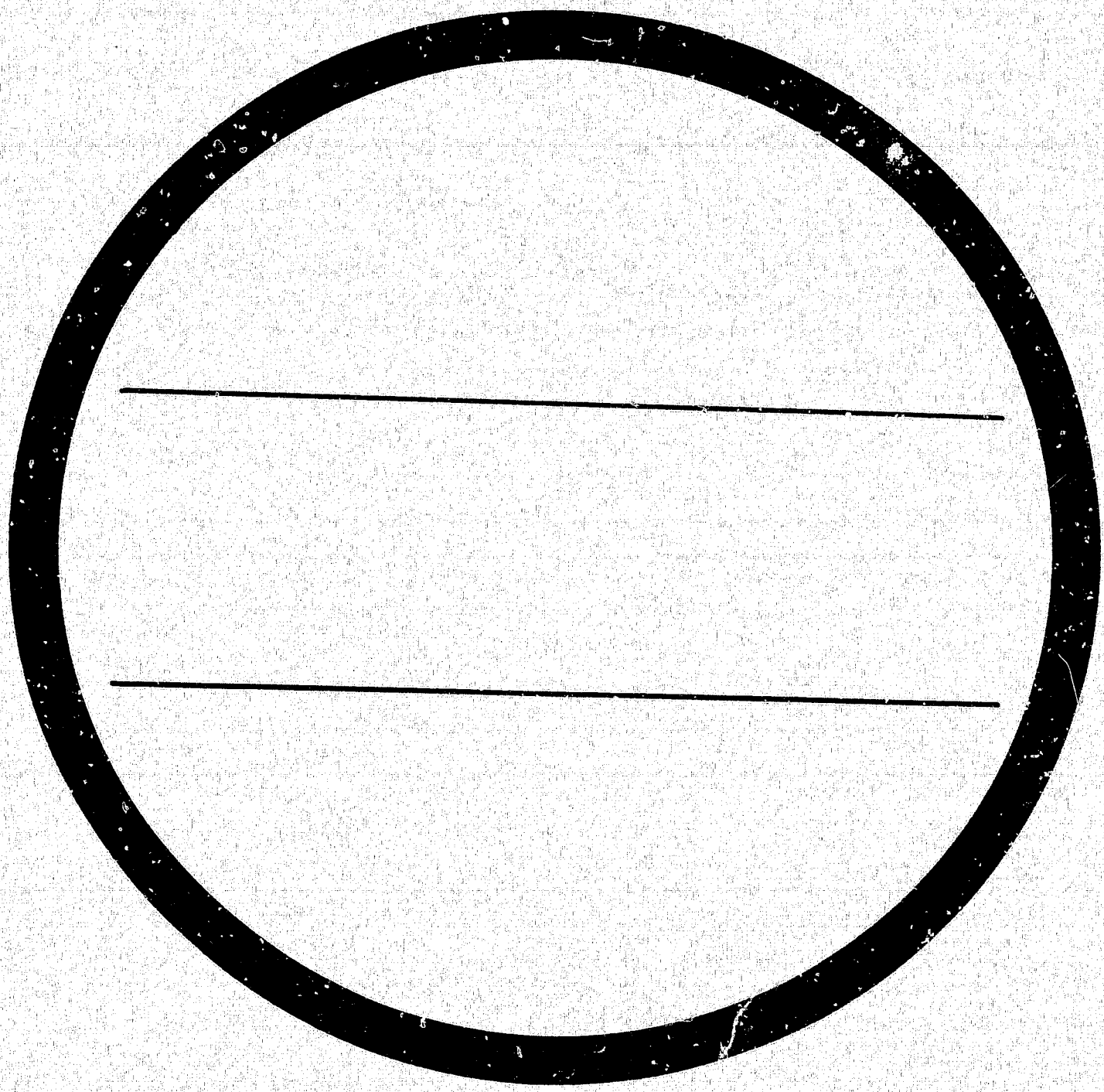
|                                                                                             |                                          |                                    |
|---------------------------------------------------------------------------------------------|------------------------------------------|------------------------------------|
| <input checked="" type="checkbox"/> APPROVED                                                | <input type="checkbox"/> PERMIT REQUIRED | <input type="checkbox"/> STOP WORK |
| <input type="checkbox"/> REJECTED - CORRECTION NOTICE - REINSPECTION REQUIRED CALL 799-2071 |                                          |                                    |

|                                                  |                                                                                                                                    |
|--------------------------------------------------|------------------------------------------------------------------------------------------------------------------------------------|
| <input type="checkbox"/> <b>FINAL INSPECTION</b> | BRING HARD CARD WITH PIPE QUALITY CONTROL & PLANNING APPROVALS SIGNED OFF TO BLDG & SAFETY FOR C. OF C. ISSUANCE (Commercial Only) |
|--------------------------------------------------|------------------------------------------------------------------------------------------------------------------------------------|

FOR ASSISTANCE -CALL- 386-6251

2530

9



COMGRAPHIX, INC.

Southwest Microfilm Division