

601 NORTH STAR ST.

# CITY OF LAS VEGAS, NEVADA

LOG NO. & AREA \_\_\_\_\_ DATE \_\_\_\_\_ CONST. VAL. \$ 752

DEPARTMENT OF BUILDING AND SAFETY 030-212-011 **DEVELOPMENT PERMIT AND BUILDING PERMIT**  
 PHONE 386-6251 FOR: Fence, Wall, Retaining Wall

ADDRESS OF CONSTRUCTION 601 NORTH STAR ST. OWNER Robert E. Shutt PHONE 878-1292

CONTRACTOR Owner STATE LICENSE NO. \_\_\_\_\_ CITY LICENSE NO. \_\_\_\_\_

LOT(s) 11 BLOCK 1 SUBDIVISION VALLEY WEST UNIT #3 ZONE: R-1

☐ CONSTRUCTION PLANS SUBMITTED BY OWNER/CONTRACTOR ☒ CONSTRUCTION DESIGN BY CITY DESIGN SHEET.

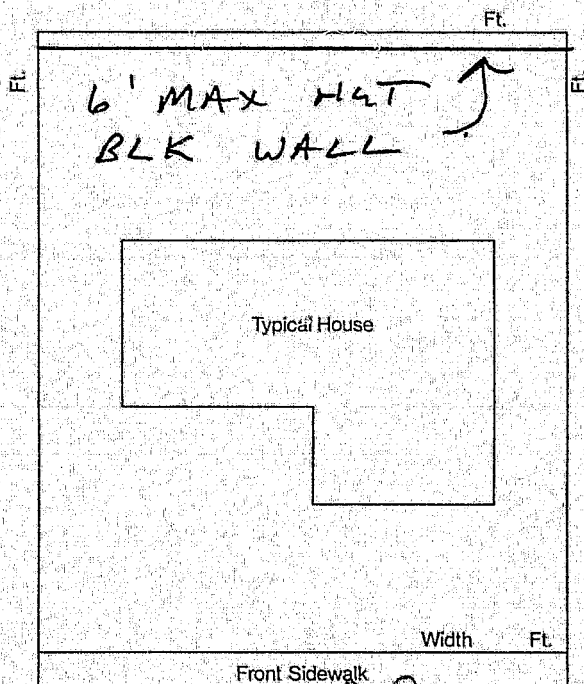
BUILDING PERMIT NO. \_\_\_\_\_ ENGINEER \_\_\_\_\_

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.

| DESCRIPTION                                                | TOTAL LIN. FT. | TOTAL SQ. FT. |
|------------------------------------------------------------|----------------|---------------|
| CHAIN LINK OR WIRE MESH                                    |                |               |
| ORNAMENTAL IRON                                            |                |               |
| WOOD                                                       |                |               |
| <input checked="" type="checkbox"/> MASONRY <u>6' HIGH</u> | <u>50</u>      | <u>300</u>    |
| RETAINING                                                  |                |               |

## OTHER INSPECTIONS AND FEES

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



## CONDITIONS OF THE PERMIT:

1. Any type of retaining wall must be engineered by a Civil or Structural Engineer.
2. If a home owner takes out the Building Permit and if the owner sublets the work to a Contractor, then the Contractor must take out the permit and pay for it.
3. No fence or wall can be built on City property or rights-of-way, but this is not intended to preclude construction within utility easements if utilities will not be damaged or made inaccessible.
4. The fence or wall shall not enclose any water meter, light standard, or fire alarm box and shall not come closer than 3' from the nearest fire hydrant outlet.
5. Department Inspectors must approve footings before concrete is poured and block wall reinforcing before grouting is done.
6. Maximum height of any wall or fence is 6', side and rear yards; 4' maximum in front yard with the vertical surface above the height of 2' - 50% open.
7. I must not obstruct required onsite parking space (2 spaces for each dwelling unit) by the erection of this fence or wall.
8. By the signing of this application I herewith agree to the requirements outlined above.

**FOR INSPECTIONS, CALL 799-2071**

SIGNED Robert E. Shutt CONTRACTOR - AGENT - OWNER  
Mark Fung DATE 4/9/90  
 PLANNING DEPT.

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.

R. Bely DATE 4/9/90  
 LAND DEVELOPMENT AND FLOOD CONTROL ENGINEER  
4/9/90 DATE  
 BUILDING DEPT.

## RECEIPT

**\*\*0002\*\***  
 WALL 17.50  
 CASH 17.50  
 2539A000 11:41

04/09/90

PLAN REVIEW FEE

PERMIT FEE 2310-2401

TOTAL FEES

DEPARTMENT OF BUILDING & SAFETY CITY OF LAS VEGAS

|                                                            |                               |                                                                                                                                        |                             |
|------------------------------------------------------------|-------------------------------|----------------------------------------------------------------------------------------------------------------------------------------|-----------------------------|
| JOB ADDRESS<br><b>6001 North Star</b>                      |                               | PERMIT NO.<br><b>68388</b>                                                                                                             |                             |
| LOT NO.<br><b>8-1154AM</b>                                 | MAP NO.<br><b>68</b>          | DATE<br><b>4-9</b>                                                                                                                     |                             |
| SUBDIVISION NAME<br><b>Fence wall</b>                      |                               | PHONE<br><b>848 1292</b>                                                                                                               |                             |
| INSPECTOR SIGNATURE<br><b>J. Carson</b>                    |                               | INSPECTION DATE<br><b>4-10-90</b>                                                                                                      |                             |
| <b>wall near yard</b>                                      |                               |                                                                                                                                        |                             |
| <b>Not ready</b>                                           |                               |                                                                                                                                        |                             |
| <input type="checkbox"/> PARTIAL INSPECTION - DESCRIPTION: |                               |                                                                                                                                        |                             |
| <input type="checkbox"/> APPROVED                          |                               | <input type="checkbox"/> PERMIT REQUIRED                                                                                               |                             |
| <input checked="" type="checkbox"/> REJECTED               |                               | <input type="checkbox"/> STOP WORK                                                                                                     |                             |
| CORRECTION NOTICE - REINSPECTION REQUIRED CALL 799-2071    |                               |                                                                                                                                        |                             |
| INSPECT                                                    | DESCRIPTION                   | INSPECT                                                                                                                                | DESCRIPTION                 |
| <input type="checkbox"/> B-1                               | FOOTING LAYOUT, REBAR, ZONING | <input type="checkbox"/> F-1                                                                                                           | ON SITE SEWER               |
| <input type="checkbox"/> B-2                               | STEM WALL - FORMS & REBAR     | <input type="checkbox"/> P-2                                                                                                           | ON SITE WATER               |
| <input type="checkbox"/> B-3                               | PRE-SLAB                      | <input type="checkbox"/> P-3                                                                                                           | BUILDING SEWER (YARD LINES) |
| <input type="checkbox"/> B-4                               | ROOF SHEATHING                | <input type="checkbox"/> P-4                                                                                                           | UNDERSLAB PLUMBING          |
| <input type="checkbox"/> B-5                               | FRAMING                       | <input type="checkbox"/> P-5                                                                                                           | TOP OUT-WATER, GAS, WASTE   |
| <input type="checkbox"/> B-6                               | INSULATION                    | <input type="checkbox"/> P-6                                                                                                           | FINAL GAS TEST              |
| <input type="checkbox"/> B-7                               | DRYWALL NAILING               | <input type="checkbox"/> P-7                                                                                                           | FINAL PLUMBING              |
| <input type="checkbox"/> B-8                               | EXTERIOR LATH/STUCCO          | <input type="checkbox"/> E-1                                                                                                           | UNDERGROUND ELECTRICAL      |
| <input type="checkbox"/> B-9                               | WALL GROUT & STEEL            | <input type="checkbox"/> E-2                                                                                                           | ROUGH ELECTRICAL            |
| <input type="checkbox"/> B-10                              | POOL PRE-GUNITE               | <input type="checkbox"/> E-3                                                                                                           | LOW VOLTAGE ELECTRICAL      |
| <input type="checkbox"/> B-11                              | POOL PRE-PLASTER / FINI.      | <input type="checkbox"/> E-4                                                                                                           | SIGN INSPECTION             |
| <input type="checkbox"/> B-12                              | BUILDING FINAL                | <input type="checkbox"/> E-5                                                                                                           | FINAL ELECTRICAL            |
| <input type="checkbox"/> B-13                              | CERT OF OCC                   | <input type="checkbox"/> E-6                                                                                                           | TEMP POWER                  |
| <input type="checkbox"/> FINAL INSPECTION                  |                               | BRING HARD CARD WITH FIRE, QUALITY CONTROL & PLANNING APPROVALS<br>SIGNED OFF TO BLDG & SAFETY FOR C. of O. ISSUANCE (Commercial Only) |                             |

FOR ASSISTANCE CALL: 386-6251

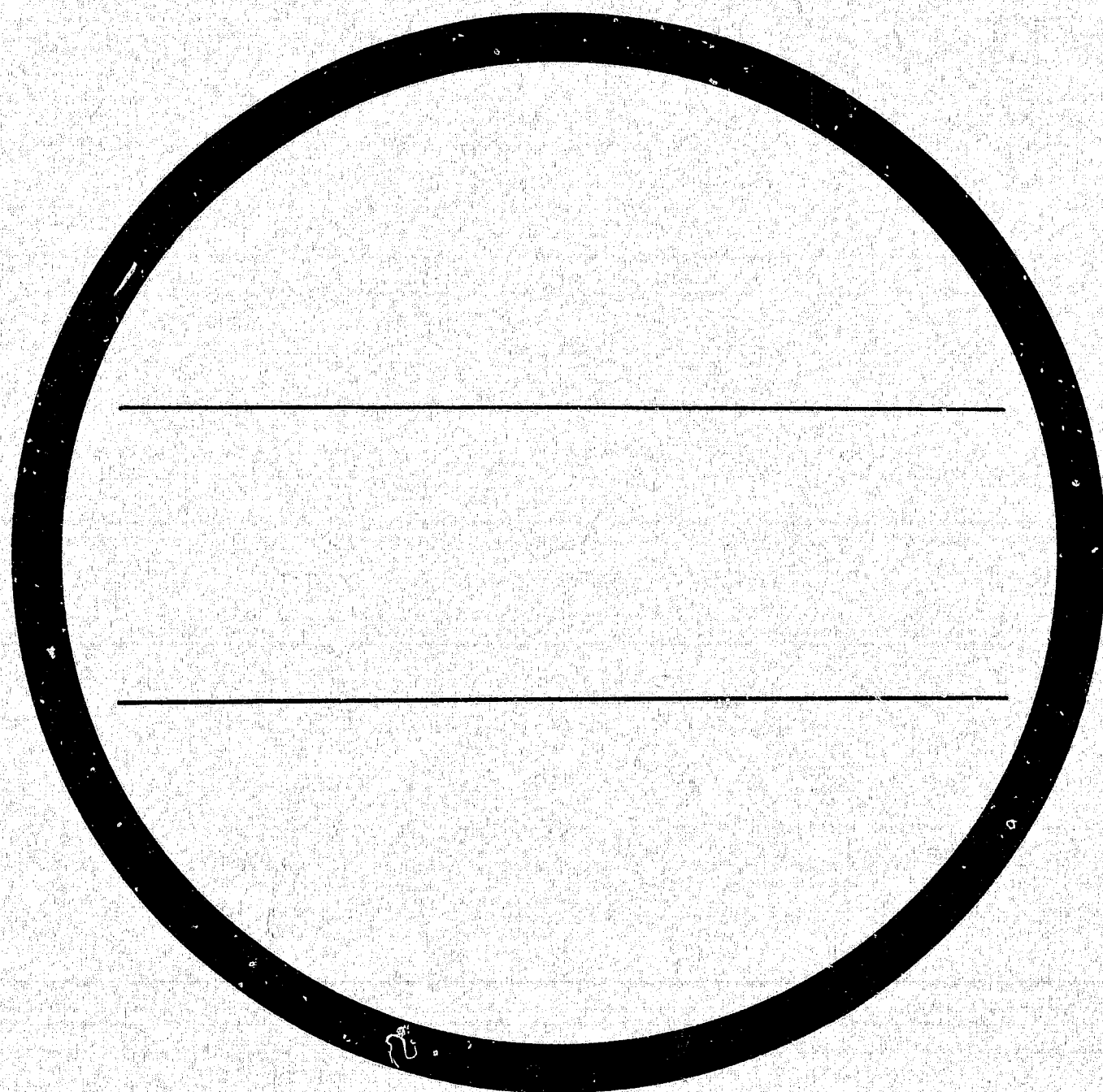
DEPARTMENT OF BUILDING & SAFETY CITY OF LAS VEGAS

|                                                                                             |                                 |                                                                                                                                    |                             |
|---------------------------------------------------------------------------------------------|---------------------------------|------------------------------------------------------------------------------------------------------------------------------------|-----------------------------|
| 1. ADDRESS<br><i>601 Northstar</i>                                                          |                                 | PERMIT NO.<br><i>63833</i>                                                                                                         |                             |
| LOT NO.<br><i>11-10:19a</i>                                                                 | MAP NO.                         | INSPECTOR<br><i>68</i>                                                                                                             | DATE<br><i>4-12</i>         |
| SUBDIVISION<br><i>Fence wall</i>                                                            |                                 | PHONE<br><i>878-1292</i>                                                                                                           |                             |
| INSPECTOR SIGNATURE<br><i>J. Carson</i>                                                     |                                 | INSPECTION DATE<br><i>4-13-90</i>                                                                                                  |                             |
| <i>Block wall - rebar</i>                                                                   |                                 |                                                                                                                                    |                             |
| <i>Add 1 verticle BAR every other 48" space -</i>                                           |                                 |                                                                                                                                    |                             |
| <i>Not done per my plan But wall feel <del>too</del> secure.</i>                            |                                 |                                                                                                                                    |                             |
| <input type="checkbox"/> PARTIAL INSPECTION - DESCRIPTION:                                  |                                 |                                                                                                                                    |                             |
| <input checked="" type="checkbox"/> APPROVED                                                |                                 | <input type="checkbox"/> PERMIT REQUIRED                                                                                           |                             |
| <input type="checkbox"/> REJECTED - CORRECTION NOTICE - REINSPECTION REQUIRED CALL 799-2071 |                                 | <input type="checkbox"/> STOP WORK                                                                                                 |                             |
| INSPECT                                                                                     | DESCRIPTION                     | INSPECT                                                                                                                            | DESCRIPTION                 |
| <input type="checkbox"/> B-1                                                                | FOOTING LAYOUT REBAR ZONING     | <input type="checkbox"/> P-1                                                                                                       | ON SITE SEWER               |
| <input type="checkbox"/> B-2                                                                | STEM WALL - FORMS & REBAR       | <input type="checkbox"/> P-2                                                                                                       | ON SITE WATER               |
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| <input type="checkbox"/> B-5                                                                | FRAMING                         | <input type="checkbox"/> P-5                                                                                                       | TOP OUT/WATER, GAS, WASTE   |
| <input type="checkbox"/> B-6                                                                | INSULATION                      | <input type="checkbox"/> P-6                                                                                                       | FINAL GAS TEST              |
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| <input type="checkbox"/> B-8                                                                | EXTERIOR LATH/STUCCO            |                                                                                                                                    |                             |
| <input checked="" type="checkbox"/> B-9                                                     | <u>WALL GROUT &amp; STEEL</u>   | <input type="checkbox"/> M-1                                                                                                       | ROUGH VENT                  |
| <input type="checkbox"/> B-10                                                               | <u>POOL</u> PRE-GUNITE          | <input type="checkbox"/> M-2                                                                                                       | HOOD                        |
| <input type="checkbox"/> B-11                                                               | <u>POOL</u> PRE-PLASTER - FINAL | <input type="checkbox"/> M-3                                                                                                       | FINAL MECHANICAL            |
| <input checked="" type="checkbox"/> B-12                                                    | <u>BUILDING FINAL</u>           |                                                                                                                                    |                             |
| <input type="checkbox"/> B-13                                                               | CERT OF OCC                     | <input type="checkbox"/> X-1                                                                                                       | KICKER / FLUSH              |
|                                                                                             |                                 | <input type="checkbox"/> E-1                                                                                                       | UNDERGROUND ELECTRICAL      |
|                                                                                             |                                 | <input type="checkbox"/> E-2                                                                                                       | ROUGH ELECTRICAL            |
|                                                                                             |                                 | <input type="checkbox"/> E-3                                                                                                       | LOW VOLTAGE ELECTRICAL      |
|                                                                                             |                                 | <input type="checkbox"/> E-4                                                                                                       | SIGN INSPECTION             |
|                                                                                             |                                 | <input type="checkbox"/> E-5                                                                                                       | FINAL ELECTRICAL            |
|                                                                                             |                                 | <input type="checkbox"/> E-6                                                                                                       | TEMP POW                    |
| <input type="checkbox"/> FINAL INSPECTION                                                   |                                 | BRING HARD CARD WITH FIRE, QUALITY CONTROL & PLANNING APPROVALS SIGNED OFF TO BLDG & SAFETY FOR C of O. ISSUANCE (Commercial Only) |                             |

FOR ASSISTANCE - CALL: 796-6251

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COMGRAPHIX, INC. 

Southwest Microfilm Division

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