



STAFF REPORT

HISTORIC PRESERVATION COMMISSION MEETING DATE: 12/12/12

DEPARTMENT: PLANNING

ITEM DESCRIPTION: Report by Department of Planning regarding administrative reviews of applications for building permits for properties listed on the city of Las Vegas Historic Property Register, Ward 3 (Coffin).

BACKGROUND

No relevant case history.

ANALYSIS

- 10/29/12 Historic Preservation Officer administratively approved a permit application (222617) for 615 Franklin Avenue, located in the John S. Park Neighborhood Historic District, (APN 162-03-515-002), R-1 (Residential) Zone, Ward 3 (Coffin).
- 10/18/12 Historic Preservation Officer administratively approve a permit application (222049) to replace existing electrical panel with a 200 am panel at 1240 S. Ninth Street, located in the John S. Park Neighborhood Historic District, (APN 162-03-515-085), R-1 (Residential) Zone, Ward 3 (Coffin).
- 11/13/12 Historic Preservation Officer administratively approved a permit application (223217) for an above-ground Jacuzzi in the back yard of 705 Park Paseo, located in the John S. Park Neighborhood Historic District, (APN 162-03-510-004), R-1 (Residential) Zone, Ward 3 (Coffin).

STAFF RECOMMENDATION

No action required.

BACKUP DOCUMENTS

- 222617 – 615 Franklin Avenue permit application, dated October 29, 2012
- 223217 – 705 Park Paseo permit application, dated November 13, 2012
- 222049 – 1240 S. Ninth Street permit application, dated October 18, 2012



CITY OF LAS VEGAS
DEPARTMENT OF BUILDING & SAFETY
PERMIT APPLICATION

Project # 222617-R-12 (CLV ONLY) Parent (Original) Project # _____

FOR: ☐ Commercial & Public Structures ☐ Single Family Residence VALUATION: \$ 1000

WORK DESCRIPTION: gas tag / gas test

*Please use the Web Estimator, <http://www.lasvegasnevada.gov/Apply/permitEstimator.htm>, for your fee estimates. A print out of your Permit Estimator results should be attached to this application. Do not bring a pre-printed check as your final fees may be different from the estimate.

PROJECT/TENANT NAME: _____

PROJECT ADDRESS: 615 Franklin Ave ZIP 89104

PARCEL NO.: _____ ZONE: _____ Land Use/Entitlements: _____

APPLICANT INFORMATION:

Company Name: Focus Plumbing Individual Name: _____

Phone: 702-220-5621 Fax: 702-851-7941 Email: _____

CONTRACTOR INFORMATION:

☐ Owner/Builder (Residential Only on primary residence)

Company Name: Focus Plumbing Individual Name: _____

Phone: 702-220-5621 Fax: 702-851-7941 Email: _____

State Contractor License: 73209 City of Las Vegas Business License: 3000000205

REQUIRED FOR SUBMITTAL: (Please note that plan check fees are based on occupancy, use, construction type and square footage)

OCCUPANCY GROUP: _____ USE: _____ CONST. TYPE: _____

TOTAL SQUARE FOOTAGE: _____ AFFECTED SQ' (TI's): _____ ☐ Is this a Highrise? More than 55'?

****IF THE BUILDING IS MIXED USE, PROVIDE CODE ANALYSIS PER FLOOR AS A SEPARATE ATTACHMENT****

SQUARE FT OF FLOOR AREAS: 1st _____ 2nd _____ 3rd _____ Garage _____

Patio _____ Balcony _____ No. of Units _____ No. of Stories _____

SPECIAL CONDITIONS: PAINTED TO MATCH RESIDENCE

352-4092-Eric

I state that the information I have supplied on this application is true and correct. By signing this application, I agree to comply with all conditions as noted on this permit.

U. Uona 10.29.12
Contractor or Agent / Owner Date

[Signature] 10/29/12
Planning Department Date

Land Development/Flood Control Engr. Date

Fire Department Date

Building Department Date

TOTAL PERMIT FEE: \$ _____

PRE-PAID: Plan Review \$ _____

PRE-PAID: Zoning \$ _____

TOTAL \$ _____

**Permit Expires 180 Days After
Abandonment of Work**

Permits expire when no inspection has been approved for any 180-day period after the permit has been issued.



CITY OF LAS VEGAS
DEPARTMENT OF BUILDING & SAFETY
PERMIT APPLICATION

Project # 223217-R12 (CLV ONLY) Parent (Original) Project # _____

FOR: ☐ Commercial & Public Structures ☒ Single Family Residence VALUATION: \$ 500

WORK DESCRIPTION: Jacuzzi Permit - elect on top of ground.
*Please use the Web Estimator, <http://www.lasvegasnevada.gov/Apply/permitEstimator.htm>, for your fee estimates. A print out of your Permit Estimator results should be attached to this application. Do not bring a pre-printed check as your final fees may be different from the estimate.

PROJECT/TENANT NAME: Judy Grafton (owner of Property)

PROJECT ADDRESS: 705 Park Paseo Las Vegas ZIP 89104

PARCEL NO.: 162-03-510-004 ZONE: R-1 Land Use/Entitlements: L

APPLICANT INFORMATION:

Company Name: N/A Individual Name: Judy Grafton

Phone: 702-386-9597 Fax: _____ Email: _____

CONTRACTOR INFORMATION:

☐ Owner/Builder (Residential Only on primary residence)

Company Name: Penny Electric Individual Name: _____

Phone: _____ Fax: _____ Email: _____

State Contractor License: _____ City of Las Vegas Business License: _____

REQUIRED FOR SUBMITTAL: (Please note that plan check fees are based on occupancy, use, construction type and square footage)

OCCUPANCY GROUP: _____ USE: _____ CONST. TYPE: _____

TOTAL SQUARE FOOTAGE: _____ AFFECTED SQ' (TI's): _____ ☐ Is this a Highrise? More than 55'?

****IF THE BUILDING IS MIXED USE, PROVIDE CODE ANALYSIS PER FLOOR AS A SEPARATE ATTACHMENT****

SQUARE FT OF FLOOR AREAS: 1st _____ 2nd _____ 3rd _____ Garage _____

Patio _____ Balcony _____ No. of Units _____ No. of Stories _____

SPECIAL CONDITIONS: _____

I state that the information I have supplied on this application is true and correct. By signing this application, I agree to comply with all conditions as noted on this permit.

Judy Phillips Grafton 11/13/23
Contractor or Agent / Owner Date

Planning Department Date

[Signature] 11-13-12
Land Development/Flood Control Engr. Date

Fire Department Date

Building Department Date

TOTAL PERMIT FEE: \$ 103.00

PRE-PAID: Plan Review \$ _____
PRE-PAID: Zoning \$ _____
TOTAL \$ _____

**Permit Expires 180 Days After
Abandonment of Work**

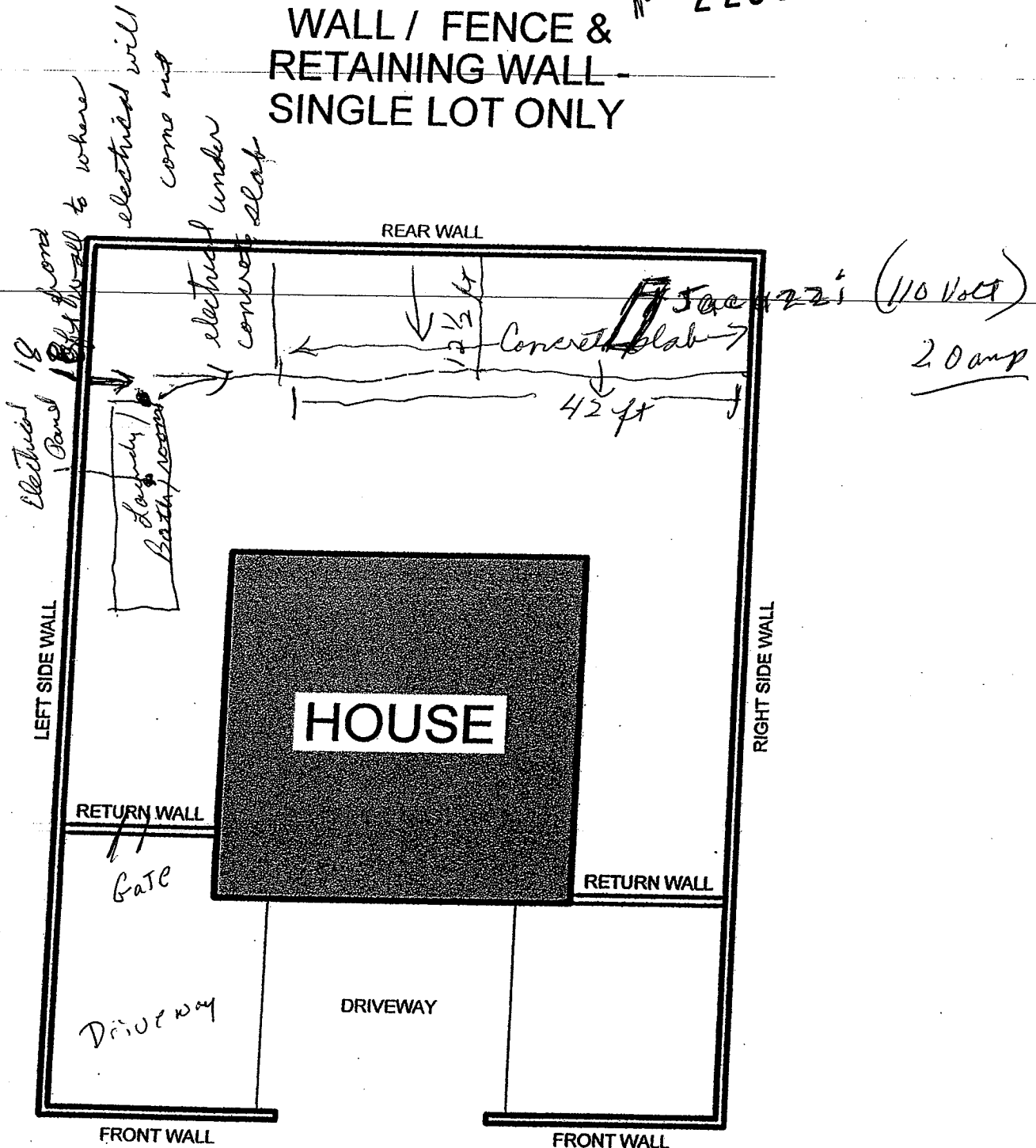
Permits expire when no inspection has been approved for any 180-day period after the permit has been issued.

JUL

CLV WORKSHEET

FOR
WALL / FENCE &
RETAINING WALL -
SINGLE LOT ONLY

NO 223217-R-12



Judy Phillips Grafton



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

Project # 222049-R-12 (CLV ONLY) Parent (Original) Project # _____

FOR: ☐ Commercial & Public Structures ☒ Single Family Residence VALUATION: \$ 800.00

WORK DESCRIPTION: replace old panel with new one 200 Amp meter tag ~~add new load service~~

*Please use the Web Estimator, <http://www.lasvegasnevada.gov/Apply/permitEstimator.htm>, for your fee estimates. A print out of your Permit Estimator results should be attached to this application. Do not bring a pre-printed check as your final fees may be different from the estimate.

PROJECT/TENANT NAME: Rochelle

PROJECT ADDRESS: 1240 S. 9th Street Las Vegas NV ZIP _____

PARCEL NO.: _____ ZONE: _____ Land Use/Entitlements: _____

APPLICANT INFORMATION:

Company Name: Callidus Electric Individual Name: Brandon McCoy

Phone: 702-403-4562 Fax: _____ Email: _____

CONTRACTOR INFORMATION:

☐ Owner/Builder (Residential Only on primary residence)

Company Name: Same as above Individual Name: _____

Phone: _____ Fax: _____ Email: _____

State Contractor License: 0076488 City of Las Vegas Business License: C25-01576

REQUIRED FOR SUBMITTAL: (Please note that plan check fees are based on occupancy, use, construction type and square footage)

OCCUPANCY GROUP: _____ USE: _____ CONST. TYPE: _____

TOTAL SQUARE FOOTAGE: _____ AFFECTED SQ' (TI's): _____ ☐ Is this a Highrise? More than 55'?

****IF THE BUILDING IS MIXED USE, PROVIDE CODE ANALYSIS PER FLOOR AS A SEPARATE ATTACHMENT****

SQUARE FT OF FLOOR AREAS: 1st _____ 2nd _____ 3rd _____ Garage _____

Patio _____ Balcony _____ No. of Units _____ No. of Stories _____

SPECIAL CONDITIONS: _____

I state that the information I have supplied on this application is true and correct. By signing this application, I agree to comply with all conditions as noted on this permit.

[Signature] 10-18-2012
Contractor or Agent / Owner Date

Planning Department Date

Land Development/Flood Control Engr. Date

Fire Department Date

[Signature] 10-18-12
Building Department Date

TOTAL PERMIT FEE: \$ 203.00

PRE-PAID: Plan Review \$ _____
PRE-PAID: Zoning \$ _____
TOTAL \$ _____

**Permit Expires 180 Days After
Abandonment of Work**
Permits expire when no inspection has been approved for any
180-day period after the permit has been issued.