INSPECTION REPORT

TYPE:

OWNER'S NAME:

PERMIT NUMBER:

DATE:

BP-13-00413

9/8/2014

DEFOOR

Slab plumbing

TIME STARTE	o: 1:47 PM	INSPECTOR:	Amber Green
MAP NUMBER	R: 19-17-35053-0001		
1. D\	NV (stack/15min) - OK		
	(Coolers remain)		
INSTRUCTIONS: Ok to Backfill. No plans or permit on site, must be on site for future inspections.			
NEXT INSPECTION: Slab Insulation			
RE-INSPECTIO	N FEE DUE? NO YES	5	\$
IF REQUIRED, RE-INSPECTION FEES MUST BE PAID PRIOR TO SCHEDULING A RE-INSPECTION			
QUESTIONS? PLEASE CONTACT THE INSPECTOR AT THE FOLLOWING E-MAIL ADDRESS:			
amber.green @co.kittitas.wa.us			
• INSPECTION REQUEST LINE: www.co.kittitas.wa.us/cds/request.asp or 509-962-7694 • 411 N. Ruby Street, Suite 2, Ellensburg, WA 98926 • Main Office Line: 509-962-7506			
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