INSPECTION REPORT

TYPE:

PERMIT NUMBER:

DATE:

BP-14-00049

9/10/2014

OWNER'S NAME: VALLEY VET

Multiple (see notes)

TIME STARTED:	10:12 AM	INSPECTOR:	Amber Green
MAP NUMBER:	17-19-06020-0002		
1. Comp	olete vertical bar at short	return by win	dow.
INSTRUCTIONS: (Complete Above, then OK to Pou	ır.	
NEXT INSPECTION:	Exterior Shear		
RE-INSPECTION FE	E DUE? NO YES	S	\$
IF RE	QUIRED, RE-INSPECTION FEES MUST B	E PAID PRIOR TO SC	HEDULING A RE-INSPECTION
Q	UESTIONS? PLEASE CONTACT THE INSP	PECTOR AT THE FOLL	OWING E-MAIL ADDRESS:
		amber.green @co	o.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			