INSPECTION REPORT

TYPE:

PERMIT NUMBER:

DATE:

BP-14-00490

9/4/2014

OWNER'S NAME:

GROENKE

Stove or fireplace

TIME STARTED:		12:23 PM	INSPECTOR:	Amber Green	
MAP NUMBER:		18-19-32063-0002			
	1. Solid fu	lel burning appliance is requir	ed to have fresh	air vented directly to the fire	
	box.	3 411 3 3 4 4			
INSTRUCTIONS: Complete above, call for re-inspection.					
NEXT INSPECTION: Re-Final					
RE-INSPECTION FEE DUE? VES \$					
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 				