## **INSPECTION REPORT**

OWNER'S NAME: CASCADE VIEW INC

PERMIT NUMBER:	BP-14-00709	OWNER'S NAME:	CASCADE VIEW INC	
DATE:	1/26/2015	TYPE:	Exterior shear	
TIME STARTED:	11:26 AM	INSPECTOR:	Amber Green	
MAP NUMBER:	18-18-27071-0144			
1. Bottom	n plate to PT sill plate nai	lling per shear	schedule.	
2. A35 clips at P1-4 shearwalls to bottom chord of truss at 16" o.c.				
3. Re-check P1-3 nailing at rear walls.				
4. Nail sheathing to each plate per 1/L-1.				
INSTRUCTIONS: Complete Above, Re-Call Inspection. Do Not Cover.				
NEXT INSPECTION:	Re-Inspection			
RE-INSPECTION FEE I	DUE? NO YES		\$	
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			
	<b>TION REQUEST LINE:</b> <a href="www.co.kitti">www.co.kitti</a> L N. Ruby Street, Suite 2, Ellensburg, V			