KITTITAS COUNTY COMMUNITY DEVELOPMENT SERVICES

INSPECTION REPORT

PERMIT NUMBER:	FO-14-00085	**OWNER'S NAME:**	CAKE BOX
DATE:	12/17/2014	**TYPE:**	Footings
TIME STARTED:	2:01 PM	**INSPECTOR:**	Amber Green
MAP NUMBER:	20-15-20058-0010		

	1. Site must be marked prior to any further inspections.
	2. Remove all water and snow from forms.
	3. All spread footings are missing : re-bar not per plan, depth not per plan, size not per
	plan

INSTRUCTIONS: Complete Above. Do not Pour.

NEXT INSPECTION: Re-Inspection

RE-INSPECTION FEE 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**