INSPECTION REPORT

BP-14-00099

PERMIT NUMBER:

OWNER'S NAME: MARSHALL

DATE:	10/9/2014	TYPE:	Shearwalls
TIME STARTED:	3:29 PM	INSPECTOR:	Amber Green
MAP NUMBER:	18-19-35000-0012		
1. Shear OK			
INSTRUCTIONS: OK TO COVER			
NEXT INSPECTION: FRAME/PLUMB/MECH			
RE-INSPECTION F	EE DUE? NO YE	S	\$
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			
• INS	PECTION REQUEST LINE: www.co.kit 411 N. Ruby Street, Suite 2, Ellensburg,		<u> </u>