KITTITAS COUNTY COMMUNITY DEVELOPMENT SERVICES

# INSPECTION REPORT

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| **PERMIT NUMBER:** | BP-14-00129 | **OWNER'S NAME:** | CALHOUN |
| **DATE:** | 4/23/2015 | **TYPE:** | Final |
| **TIME STARTED:** | 1:57 PM | **INSPECTOR:** | Jeremy Haberman |
| **MAP NUMBER:** | 17-17-01052-0001 | | |

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| | 1. Blower Door Test Not Onsite at Time of Inspection. |
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**INSTRUCTIONS:** Provide Blower Door Test Result to Inspector.

**NEXT INSPECTION:** ReInspect.

**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:

_____jeremy.haberman **@co.kittitas.wa.us**