

*R 330 F 412*

**BUILDING DIVISION — BUILDING INSPECTOR'S REPORT CARD**

**\$12.00****TYPE BUILDINGS**

|                             |                     |   |       |                 |                                  |
|-----------------------------|---------------------|---|-------|-----------------|----------------------------------|
| PERMIT NO.<br><b>H-7432</b> |                     | LOCATION <b>2228 - Roanoke Avenue A-6</b>       |       |                 |                                  |
| DATE<br><b>June-9-72</b>    |                     | PURPOSE <b>Const. addn. to dwelling</b>         |       |                 |                                  |
| ZONE<br><b>R-1</b>          |                     | OWNER <b>L. L. Bresette Same</b>                |       |                 |                                  |
|                             |                     | ARCH'T  |       |                 |                                  |
|                             |                     | CONT'R <b>W. K. Paschao 1012-Eastern Avenue</b> |       |                 |                                  |
| VAL. <b>\$1,000.</b>        |                     | STORIES   | ROOMS | APTS.           | SIZE<br><b>70 sq.ft.</b>         |
| INSP.                       | DATE                | BLDG. TYPE                                      |       | OCCUPANCY GROUP | PHONE (O) (C)<br><b>483 3183</b> |
| FORM                        | <i>6-13-72</i>      | <i>Sullivan</i>                                 |       |                 |                                  |
| JOIST                       |                     |   |       |                 |                                  |
| FRAME SHEET ROCK            | <i>7-6-72</i>       | <i>Constr</i>                                   |       |                 |                                  |
| FINAL                       | <i>R.C. 5-31-73</i> | <i>[Signature]</i>                              |       |                 |                                  |

| DATE | SPECIAL CONDITIONS OF WORK — REMARKS |
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|      | COMPLETE AND OK                      |
|      | INSPECTOR                            |