

R235 F312

BUILDING DIVISION — BUILDING INSPECTOR'S REPORT CARD \$5.00

TYPE BUILDINGS

PERMIT NO. S-5701	LOCATION 531 - I Street	A-2
DATE 3-29-68	PURPOSE Const. Sign Class N	
ZONE	OWNER Standard Oil Co.	909 - 12th St
	ARCH'T	
	CONTR Owner	Same

VAL. \$100.	STORIES	ROOMS	APTS.	SIZE
INSP.	DATE	BLDG. TYPE	OCCUPANCY GROUP	PHONE (O) (C)
FORM				
JOIST				
FRAME				
SHEET ROCK				
FINAL	<i>4-3-68</i>	<i>Dana Fuller</i>		<i>609</i>

1. If building is not inspected, check this box. 2. If building is inspected, check this box. 3. If building is not inspected, check this box. 4. If building is inspected, check this box. 5. If building is not inspected, check this box. 6. If building is inspected, check this box. 7. If building is not inspected, check this box. 8. If building is inspected, check this box. 9. If building is not inspected, check this box. 10. If building is inspected, check this box. 11. If building is not inspected, check this box. 12. If building is inspected, check this box. 13. If building is not inspected, check this box. 14. If building is inspected, check this box. 15. If building is not inspected, check this box. 16. If building is inspected, check this box. 17. If building is not inspected, check this box. 18. If building is inspected, check this box. 19. If building is not inspected, check this box. 20. If building is inspected, check this box. 21. If building is not inspected, check this box. 22. If building is inspected, check this box. 23. If building is not inspected, check this box. 24. If building is inspected, check this box. 25. If building is not inspected, check this box. 26. If building is inspected, check this box. 27. If building is not inspected, check this box. 28. If building is inspected, check this box. 29. If building is not inspected, check this box. 30. If building is inspected, check this box. 31. If building is not inspected, check this box. 32. If building is inspected, check this box. 33. If building is not inspected, check this box. 34. If building is inspected, check this box. 35. If building is not inspected, check this box. 36. If building is inspected, check this box. 37. If building is not inspected, check this box. 38. If building is inspected, check this box. 39. If building is not inspected, check this box. 40. If building is inspected, check this box. 41. If building is not inspected, check this box. 42. If building is inspected, check this box. 43. If building is not inspected, check this box. 44. If building is inspected, check this box. 45. If building is not inspected, check this box. 46. If building is inspected, check this box. 47. If building is not inspected, check this box. 48. If building is inspected, check this box. 49. If building is not inspected, check this box. 50. If building is inspected, check this box. 51. If building is not inspected, check this box. 52. If building is inspected, check this box. 53. If building is not inspected, check this box. 54. If building is inspected, check this box. 55. If building is not inspected, check this box. 56. If building is inspected, check this box. 57. If building is not inspected, check this box. 58. If building is inspected, check this box. 59. If building is not inspected, check this box. 60. If building is inspected, check this box. 61. If building is not inspected, check this box. 62. If building is inspected, check this box. 63. If building is not inspected, check this box. 64. If building is inspected, check this box. 65. If building is not inspected, check this box. 66. If building is inspected, check this box. 67. If building is not inspected, check this box. 68. If building is inspected, check this box. 69. If building is not inspected, check this box. 70. If building is inspected, check this box. 71. If building is not inspected, check this box. 72. If building is inspected, check this box. 73. If building is not inspected, check this box. 74. If building is inspected, check this box. 75. If building is not inspected, check this box. 76. If building is inspected, check this box. 77. If building is not inspected, check this box. 78. If building is inspected, check this box. 79. If building is not inspected, check this box. 80. If building is inspected, check this box. 81. If building is not inspected, check this box. 82. If building is inspected, check this box. 83. If building is not inspected, check this box. 84. If building is inspected, check this box. 85. If building is not inspected, check this box. 86. If building is inspected, check this box. 87. If building is not inspected, check this box. 88. If building is inspected, check this box. 89. If building is not inspected, check this box. 90. If building is inspected, check this box. 91. If building is not inspected, check this box. 92. If building is inspected, check this box. 93. If building is not inspected, check this box. 94. If building is inspected, check this box. 95. If building is not inspected, check this box. 96. If building is inspected, check this box. 97. If building is not inspected, check this box. 98. If building is inspected, check this box. 99. If building is not inspected, check this box. 100. If building is inspected, check this box.

DATE	SPECIAL CONDITIONS OF WORK — REMARKS
	COMPLETE AND OK INSPECTOR