

ADDRESS

*3927-11 Street*

Owner or

*Wrtan*

Contractor

*15*

Permit No.

*E 7175*

Date

*11-8-65*

REMARKS

*check progress*

*lines down with  
not finished*

*L.F. 30 days*

B. I. 6

Inspector

*[Signature]*

INSPECTION  
REQUESTED

FORM

JOIST

FRAME

S. R.

LATH

F. P.

SCRATCH

BROWN

FINAL

OTHER

DAY

Mon.

Tues.

Wed.

Thurs.

Fri.

