

BUILDING DIVISION—BUILDING INSPECTOR'S REPORT CARD

TYPE BUILDINGS

PERMIT NO. <i>43716</i>	LOCATION <i>1021 - 9th Ave</i>
DATE <i>11/9/36</i>	PURPOSE <i>Hand Elec work</i>
ZONE <i>-</i>	OWNER <i>Orthopedic Hospital</i>
	ARCH'T. <i>-</i>
	CON'T.R. <i>Elec Dept</i>

VAL. <i>15000</i>	STORIES	ROOMS	APTS.	SIZE
-------------------	---------	-------	-------	------

LIGHT SHAFTS	ELEVATOR SHAFTS
VENT SHAFTS	BOILER ROOMS
OWNER'S INSPECTOR	SPRINKLER SYSTEM
LATH	GAS VENTS
FIRE ESCAPES	CHIMNEYS
STAND PIPES	SKYLIGHTS

<b>DATE</b>	<b>CONDITION OF WORK-REMARKS</b>
	<p data-bbox="315 977 472 1024"><b>COMPLETE AND O. K.</b></p> <p data-bbox="1307 1000 1463 1024"><b>INSPECTOR</b></p>