

|  |                 |                       |                        |                     |                      |                        |                     |                 |                      |   |                        |                        |                     |                        |                        |                      |                     |                         |                     |   |                        |                       |                   |                     |                       |                       |                       |                  |                        |                        |                    |                       |
|--|-----------------|-----------------------|------------------------|---------------------|----------------------|------------------------|---------------------|-----------------|----------------------|---|------------------------|------------------------|---------------------|------------------------|------------------------|----------------------|---------------------|-------------------------|---------------------|---|------------------------|-----------------------|-------------------|---------------------|-----------------------|-----------------------|-----------------------|------------------|------------------------|------------------------|--------------------|-----------------------|
| Blue Print<br>Issued   | Work<br>Stopped | Can't Not<br>Approved | Steel Work<br>Approved | Curtain<br>Required | Plumbing<br>Required | Fire Alarm<br>Required | No. F. E.<br>Permit | Not<br>Accepted | Exit Not<br>Approved | No. W. A.<br>Htg. Per.                    | No Rough<br>Inspection | No Final<br>Inspection | No St.<br>Htg. Per. | No Rough<br>Inspection | No Final<br>Inspection | No. Boiler<br>Permit | No Final<br>Accept. | Oil Burner<br>Per. Ins. | No Final<br>Accept. | No Elev.<br>Permit                        | No Final<br>Inspection | Sta. Cur.<br>Not App. | No Tank<br>Permit | No Final<br>Accept. | Sta. Str.<br>Required | Standpipe<br>Required | Gas S. O.<br>Required | No Pl.<br>Permit | No Rough<br>Inspection | No Final<br>Inspection | Booth Not<br>Appr. | Shunt Pan<br>Required |
| Street <u>Davenport</u> No. <u>5111</u> To Build <u>Bureau for Garage</u><br>Lot <u>20</u> Block <u>12</u> , <u>Haleyville, Mo.</u> Addition<br>Owner <u>P. N. Winter</u> Architect <u>own</u><br>Bldg. Contr. <u>Belby</u> Cost \$ <u>100<sup>00</sup></u> Heating, Kind of |                 |                       |                        |                     |                      |                        |                     |                 |                      |   |                        |                        |                     |                        |                        |                      |                     |                         |                     |   |                        |                       |                   |                     |                       |                       |                       |                  |                        |                        |                    |                       |
| Proscenium Wall - Constr.  |                 |                       |                        |                     |                      |                        |                     |                 |                      | Stage Curtain                             |                        |                        |                     |                        |                        |                      |                     |                         |                     | Stage Constr.                             |                        |                       |                   |                     |                       |                       |                       |                  |                        |                        |                    |                       |
| Exit, Regular Number of  |                 |                       |                        |                     |                      |                        |                     |                 |                      | Exit, Emergency Number of                 |                        |                        |                     |                        |                        |                      |                     |                         |                     | Booth, Constr. and Size of                |                        |                       |                   |                     |                       |                       |                       |                  |                        |                        |                    |                       |
| Building Permit No. <u>1084</u> Date <u>11/18/35</u>   |                 |                       |                        |                     |                      |                        |                     |                 |                      | W. A. Heating Permit No. _____ Date _____ |                        |                        |                     |                        |                        |                      |                     |                         |                     | Plumbing Permit No. _____ Date _____      |                        |                       |                   |                     |                       |                       |                       |                  |                        |                        |                    |                       |
| Reinf. Conc. Str. Steel _____ Appr. _____  |                 |                       |                        |                     |                      |                        |                     |                 |                      | Stack Insp'n _____ No. of Outlets _____   |                        |                        |                     |                        |                        |                      |                     |                         |                     | Sink _____ Laundry Trays _____            |                        |                       |                   |                     |                       |                       |                       |                  |                        |                        |                    |                       |
| Plans Passed by <u>W. A. W.</u> Plans On File <u>no</u>  |                 |                       |                        |                     |                      |                        |                     |                 |                      | Final Insp'n _____                        |                        |                        |                     |                        |                        |                      |                     |                         |                     | Closet _____ Urinal _____                 |                        |                       |                   |                     |                       |                       |                       |                  |                        |                        |                    |                       |
| Oil Burner Permit No. _____ Date _____   |                 |                       |                        |                     |                      |                        |                     |                 |                      | St. Heating Permit No. _____ Date _____   |                        |                        |                     |                        |                        |                      |                     |                         |                     | Basin _____ Bar Connect. _____            |                        |                       |                   |                     |                       |                       |                       |                  |                        |                        |                    |                       |
| Special Inspector <u>11-26-35 W. L. N.</u>   |                 |                       |                        |                     |                      |                        |                     |                 |                      | Rough Insp'n _____ Rad'n Feet _____       |                        |                        |                     |                        |                        |                      |                     |                         |                     | Bath _____ Ice Box _____                  |                        |                       |                   |                     |                       |                       |                       |                  |                        |                        |                    |                       |
| Framing Inspection   |                 |                       |                        |                     |                      |                        |                     |                 |                      | Boiler Permit No. _____ Date _____        |                        |                        |                     |                        |                        |                      |                     |                         |                     | Floor Drain _____ Drinking Fountain _____ |                        |                       |                   |                     |                       |                       |                       |                  |                        |                        |                    |                       |
| Certificate of Occupancy   |                 |                       |                        |                     |                      |                        |                     |                 |                      | Boiler, Type _____ Size _____             |                        |                        |                     |                        |                        |                      |                     |                         |                     | Total No. Fixtures _____                  |                        |                       |                   |                     |                       |                       |                       |                  |                        |                        |                    |                       |
| Floor Load Cards Issued  |                 |                       |                        |                     |                      |                        |                     |                 |                      | Boiler, Make _____ No. _____              |                        |                        |                     |                        |                        |                      |                     |                         |                     | Roughing Inspection _____                 |                        |                       |                   |                     |                       |                       |                       |                  |                        |                        |                    |                       |
| Auto. Gas Valve Number Req'd _____ Notice to Install _____   |                 |                       |                        |                     |                      |                        |                     |                 |                      | Installation Accepted _____               |                        |                        |                     |                        |                        |                      |                     |                         |                     | Final Inspection _____                    |                        |                       |                   |                     |                       |                       |                       |                  |                        |                        |                    |                       |
| Certificate of Inspection No. _____ Date _____   |                 |                       |                        |                     |                      |                        |                     |                 |                      | Oil Burner, Make _____                    |                        |                        |                     |                        |                        |                      |                     |                         |                     | Elevator Permit No. _____ Date _____      |                        |                       |                   |                     |                       |                       |                       |                  |                        |                        |                    |                       |
| Fire Escape Permit No. _____ Date _____  |                 |                       |                        |                     |                      |                        |                     |                 |                      | Installation Accepted _____               |                        |                        |                     |                        |                        |                      |                     |                         |                     | Passenger <u>03224</u>                    |                        |                       |                   |                     |                       |                       |                       |                  |                        |                        |                    |                       |
| Type _____ Number Installed _____  |                 |                       |                        |                     |                      |                        |                     |                 |                      | Roof Tank Permit No. _____ Date _____     |                        |                        |                     |                        |                        |                      |                     |                         |                     | Freight _____                             |                        |                       |                   |                     |                       |                       |                       |                  |                        |                        |                    |                       |
| Exits Approved   |                 |                       |                        |                     |                      |                        |                     |                 |                      | Type _____ Size _____ No. _____           |                        |                        |                     |                        |                        |                      |                     |                         |                     | Sidewalk <u>over</u>                      |                        |                       |                   |                     |                       |                       |                       |                  |                        |                        |                    |                       |
| Final Insp'n   |                 |                       |                        |                     |                      |                        |                     |                 |                      | Final Inspection                          |                        |                        |                     |                        |                        |                      |                     |                         |                     | Dumb W. _____                             |                        |                       |                   |                     |                       |                       |                       |                  |                        |                        |                    |                       |
| Standpipes Approved  |                 |                       |                        |                     |                      |                        |                     |                 |                      | Sprinkler System Approved _____           |                        |                        |                     |                        |                        |                      |                     |                         |                     | Insp'n Number _____ Final Insp'n _____    |                        |                       |                   |                     |                       |                       |                       |                  |                        |                        |                    |                       |

