| | | spection Sum | · |
|--|-------------------|-----------------------|---------------------------|
| Permit #:PRPWTC2024 Address: 307 SW 3RD S | • | • | nit |
| corrective actions hav | e been completed. | . Do not cover any wo | rk until approved. |
| Inspection: | Inspector: | Outcome: | rk until approved. Date: |