

LOG #

SPECIAL INSPECTION APPLICATION

STEVENS COUNTY BUILDING DEPARTMENT
COURTHOUSE ANNEX
215 SOUTH OAK STREET
COLVILLE, WA 99114
(509) 684-8325 FAX: (509) 685-0674

PROPERTY OWNER: _____

MAILING ADDRESS: _____

_____ CITY STATE ZIP DAYTIME TELEPHONE #

SITE ADDRESS FOR INSPECTION: _____

DIRECTIONS TO SITE: _____

PARCEL # _____ LEGAL DESCRIPTION: _____

TYPE OF SPECIAL INSPECTION REQUESTED:

_____ FIRE LIFE/SAFETY CODE COMPLIANCE INSPECTION
_____ MOVED BUILDING
_____ MANUFACTURED HOME TITLE ELIMINATION: MAKE _____ YEAR _____
SIZE _____ FEET X _____ FEET
ASSESSOR'S PARCEL # FOR MANUFACTURED HOME: _____
_____ OTHER (DESCRIBE) _____

DATE/TIME INSPECTION REQUESTED _____
(INSPECTION DATE/TIME MUST BE CONFIRMED BY BUILDING DEPARTMENT)

DATE RECEIVED FEE AMOUNT RECEIPT #

INSPECTION COMMENTS:
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INSPECTOR: DATE OF INSPECTION