

Contact Details in Inspector App

Inspection Contact:

Verizon 6:51 AM

Inspection Details

3500 Rough Plumbing
Inspection ID: 1896286

Record [View Record >](#)
Type: Residential 1 & 2 Fam Dwelling (New Only)
ID: 247-15-000119-DWL
Name: N/A

Location [View on Map >](#)
51405 MAC CT LA PINE, OR 97739 51405 MAC CT, LA PINE, DESCHUTES, OR, 97739, US
[Get Coordinates](#)

Contact
Inspection Contact
555-555-5555

Back office – Complete the Inspection Contact Name section when scheduling

Schedule Inspections

Menu Submit Add Reset Cancel Help

Assign to All:
Department Current Department Inspector Current User Scheduled Date Clear Scheduled Start Time Clear
--Select-- --Select--

Inspection Type	Assign to Department	Assign to Staff	Permit Number	Scheduled Date
1 3500 Rough Plumbing	State ePermitting	Current Department Heidi Shamberger	Current User 247-15-000119-DWL	06/04/2015

Inspection Detail - 1 3500 Rough Plumbing

Menu Apply to All Help

Address: 51405 MAC CT, LA PINE, OR 97739
Status: Scheduled
Requestor: Current User
First: MI: Last: Requestor's Phone Number: Estimated Start Time: Estimated End Time:

Inspection Contact Name [Clear](#) **Inspection Contact Phone Number** [Clear](#)
First Inspection: MI: Last Contact: 555-555-5555

Request Comment -- Include AM/PM Request

ACA – Complete the Contact section

Schedule/Request an Inspection
Inspection type: 1130 Foundation Wall/Rebar

Location and Contact
Verify whether the location and contact person for the selected inspection are correct.

Location
51405 MAC CT
LA PINE OR 97739

Contact
First Last
5555555555

[Change Contact](#)

Continue Back Cancel

Scheduling App – Complete the Contact section

Verizon 7:22 AM

Back Submit Inspection

Contact Name*
inspection contact

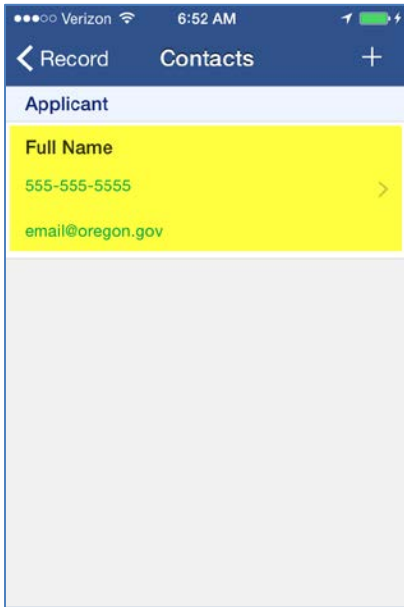
Phone Number*
5555555555

Comments:
comment

Submit

Permits Inspections

Record Contacts (including Licensed Professionals):



Back office – Complete the Full Name, Primary Phone, and E-mail fields in the Contacts and Licensed Professionals portlet

Go To Contacts (1)

Type * Primary

Full Name
Full Name

Last Name First Name MI
Last First

Organization Name

Address Line 1

Address Line 2

City State Zip Code

Primary Phone **Secondary Phone** **Fax**

E-mail
email@oregon.gov

Form Name: Contact Spear Form

Record Owner:

Verizon 6:52 AM

< Details Record

247-15-000119-DWL
Residential 1 & 2 Fam Dwelling (New Only)

Record Name:
Open Date: June 4, 2015
Status: App Submitted
Description:
Heidi

Condition
Locks: Holds: >
Notices: Requires: >

Owner
SMITH, RONALD J & NANCY A
555-555-5555

Attachments >

Back office – Complete the **Name** and **Primary Phone** fields in the **Owner** portlet

Go To Owner (1)

Name *	Primary		
SMITH, RONALD J & NANCY A	Yes		
Mail Address Line 1 51405 MAC CT			
Mail Address Line 2 			
Mail City	Mail State	Mail Zip Code	Country/Region
LA PINE	OR	97739	--Select--
E-mail email@oregon.gov			
Primary Phone	Secondary Phone		
555-555-5555			

Form Name: Owner Spear Form