

REQUEST FOR STRUCTURAL INSPECTION

CALL DATE: 1-8-21 TIME _____ : _____ AM / PM

PROPERTY ADDRESS: 11306 Claymore

PERMIT NUMBER: 17473

- Pass Fail Street Clean In Front of Property- (Nothing in Gutter)
- Pass Fail Dirt, Mud, Construction Tracks in Front of Property
- Pass Fail Trash Anywhere on Property
- Pass Fail O-Tolerance for Lunch Trash This May Result in Project to be Temporarily Shut Down!
- Pass Fail Dumpster full to the Lip & Needs to be Serviced
- Pass Fail Port-O-Can Door Facing Away From Street
- Pass Fail Port-O-Can Screened and/or Needs Maintenance
- Pass Fail Tree Protective Fencing Down
- Pass Fail Filter Fabric Fencing Down
- Pass Fail High Grass and/or Tall Weeds
- Pass Fail Overall Condition of Construction Site Good _____ Poor
_____ Verbal Warning _____ Site Cleaned at Insp. _____ City Citation Issued _____ City Notified

DATE: 1-11-21 TIME _____ AM/PM

INSPECTOR : 1) Jason Bienek 2) Bob Baldwin

INSPECTION TYPE

- | | | | | |
|----------------------------|--------------------------|---|-------------------------------|-------------------------------------|
| 1. PRE CONSTRUCTION SITE | <input type="checkbox"/> | | 1. POOL STAKE OUT/POOL SET-UP | <input type="checkbox"/> |
| 2. PIERS | <input type="checkbox"/> | <i>Front walk
& right side sidewalk</i> | 2. POOL STEEL | <input type="checkbox"/> |
| 3. FOUNDATION STEEL | <input type="checkbox"/> | | 3. POOL DECK/PATIO STEEL | <input type="checkbox"/> |
| 4. RIDGE HEIGHT | <input type="checkbox"/> | | 4. POOL BARRIER | <input type="checkbox"/> |
| 5. HURRICANE TIES | <input type="checkbox"/> | | 4. POOL FINAL | <input type="checkbox"/> |
| 6. STUCCO LATHE/BRICK TIES | <input type="checkbox"/> | | 1. FENCE POST HOLE | <input type="checkbox"/> |
| 7. FRAMING / FRAMING COVER | <input type="checkbox"/> | | 2. FENCE FINAL | <input type="checkbox"/> |
| 8. BUILDING FINAL | <input type="checkbox"/> | | 1. DRIVEWAY/FLATWORK FORMS | <input checked="" type="checkbox"/> |
| 9. TREE FINAL | <input type="checkbox"/> | | 2. DRIVEWAY FINAL | <input type="checkbox"/> |
| 10. ROOF Final/ DEMO FINAL | <input type="checkbox"/> | | 3. OTHER | <input type="checkbox"/> |
| 11. Generator Steel | <input type="checkbox"/> | | 4. TRENCH | <input type="checkbox"/> |
| 12. Generator Final | <input type="checkbox"/> | | 5. TEMP FENCING | <input type="checkbox"/> |

CONTRACTOR/CALLER NAME: Corbal Custom Homes

CONTACT TEL/PGR/MOBILE: 781 652-?

INSPECTOR COMMENTS: _____

PASS	<u>FAIL</u>
DATE:	<u>1-11-21</u>
TIME:	<u>2:30</u>
INSPECTOR:	<u>bbB</u>

Could not find approved drawing with right side sidewalk

Reinspection fee required

REQUEST FOR STRUCTURAL INSPECTION

CALL DATE: 1-4-21 TIME 12:50 AM / PM

PROPERTY ADDRESS: 11306 Claymore

PERMIT NUMBER: 17473

- Pass Fail Street Clean In Front of Property- (Nothing in Gutter)
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- Pass Fail Overall Condition of Construction Site Good _____ Poor
- _____ Verbal Warning _____ Site Cleaned at Insp. _____ City Citation Issued _____ City Notified

DATE: _____ TIME _____ AM/PM
INSPECTOR: 1) Jason Bienek 2) Bob Baldwin

INSPECTION TYPE	
1. PRE CONSTRUCTION SITE <input type="checkbox"/>	1. POOL STAKE OUT/POOL SET-UP <input type="checkbox"/>
2. PIERS <input type="checkbox"/>	2. POOL STEEL <input type="checkbox"/>
3. FOUNDATION STEEL <input type="checkbox"/>	3. POOL DECK/PATIO STEEL <input type="checkbox"/>
4. RIDGE HEIGHT <input type="checkbox"/>	4. POOL BARRIER <input type="checkbox"/>
5. HURRICANE TIES <input type="checkbox"/>	4. POOL FINAL <input type="checkbox"/>
6. STUCCO LATHE/BRICK TIES <input type="checkbox"/>	1. FENCE POST HOLE <input type="checkbox"/>
7. FRAMING / FRAMING COVER <input type="checkbox"/>	2. FENCE FINAL <input type="checkbox"/>
8. BUILDING FINAL <input type="checkbox"/>	1. <u>DRIVEWAY/FLATWORK FORMS</u> <input type="checkbox"/>
9. TREE FINAL <input type="checkbox"/>	2. DRIVEWAY FINAL <input type="checkbox"/>
10. ROOF Final/ DEMO FINAL <input type="checkbox"/>	3. OTHER <input type="checkbox"/>
11. Generator Steel <input type="checkbox"/>	4. TRENCH <input type="checkbox"/>
12. Generator Final <input type="checkbox"/>	5. TEMP FENCING <input type="checkbox"/>

CONTRACTOR/CALLER NAME: Carbel Custom

CONTACT TEL/PGR/MOBILE: Nick

INSPECTOR COMMENTS: 713-461-6864

PASS	FAIL
DATE: <u>1-4-21</u>	
TIME: <u>12:50</u>	
INSPECTOR: <u>JB</u>	

Reinspection fee required