

# REQUEST FOR STRUCTURAL INSPECTION

CALL DATE: 1-27-21 TIME 11:00 AM / PM

PROPERTY ADDRESS: 11607 Arrowwood

PERMIT NUMBER: 17583

- 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: \_\_\_\_\_ TIME \_\_\_\_\_ AM/PM

INSPECTOR: 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. DRIVEWAY/FLATWORK FORMS    | <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"/> |
| <u>11. Generator Steel</u> | <input type="checkbox"/> | 4. TRENCH                     | <input type="checkbox"/> |
| 12. Generator Final        | <input type="checkbox"/> | 5. TEMP FENCING               | <input type="checkbox"/> |

CONTRACTOR/CALLER NAME: KISS Construction

CONTACT TEL/PGR/MOBILE: Burf

INSPECTOR COMMENTS: \_\_\_\_\_

PASS	FAIL
DATE: <u>1-27-21</u>	
TIME: <u>11:00</u>	
INSPECTOR: <u>JB</u>	

Reinspection fee required