

REQUEST FOR STRUCTURAL INSPECTION

CALL DATE: 3-11-21 TIME 11:00 AM/PM

PROPERTY ADDRESS: 11319 Greenbay

PERMIT NUMBER: 17490

- 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 : 1) Jason Bienek 2) Bob Baldwin

INSPECTION TYPE

- | | |
|--|---|
| <ul style="list-style-type: none"> 1. PRE CONSTRUCTION SITE <input type="checkbox"/> 2. PIERS <input type="checkbox"/> 3. FOUNDATION STEEL <input type="checkbox"/> 4. RIDGE HEIGHT <input type="checkbox"/> 5. HURRICANE TIES <input type="checkbox"/> 6. STUCCO LATHE/BRICK TIES <input type="checkbox"/> 7. FRAMING / FRAMING COVER <input type="checkbox"/> 8. BUILDING FINAL <input type="checkbox"/> <i>INTERIOR</i> 9. TREE FINAL <input type="checkbox"/> <i>WALL</i> 10. ROOF Final/ DEMO FINAL <input type="checkbox"/> <i>BOARD</i> 11. Generator Steel <input type="checkbox"/> 12. Generator Final <input type="checkbox"/> | <ul style="list-style-type: none"> 1. POOL STAKE OUT/POOL SET-UP <input type="checkbox"/> 2. POOL STEEL <input type="checkbox"/> 3. POOL DECK/PATIO STEEL <input type="checkbox"/> 4. POOL BARRIER <input type="checkbox"/> 4. POOL FINAL <input type="checkbox"/> 1. FENCE POST HOLE <input type="checkbox"/> 2. FENCE FINAL <input type="checkbox"/> 1. DRIVEWAY/FLATWORK FORMS <input type="checkbox"/> 2. DRIVEWAY FINAL <input type="checkbox"/> 3. OTHER <input checked="" type="checkbox"/> 4. TRENCH <input type="checkbox"/> 5. TEMP FENCING <input type="checkbox"/> |
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CONTRACTOR/CALLER NAME: PARKER HOUSE

CONTACT TEL/PGR/MOBILE: SARAH

INSPECTOR COMMENTS: 713-447-0297

PASS	FAIL
DATE: <u>3-11-21</u>	
TIME: <u>11:00</u>	
INSPECTOR: <u>JB</u>	

Reinspection fee required