

REQUEST FOR ELECTRICAL INSPECTION

DATE: 10-8-14 TIME 10:54 AM / PM

JOB ADDRESS: 11519 DUNSINANE

PERMIT NUMBER: 13703

INSPECTION DATE: _____

Codes Used: NFPA 70, NEC 2008 or NEC 2011

ELECTRICAL INSPECTORS: 1) Jason Bienek 2) Dave Whittaker 3) _____

- | | |
|---|---|
| <p>1. Temp Sump Pump Connection <input type="checkbox"/></p> <p>2. T-pole <input type="checkbox"/></p> <p>3. Ditch Cover <input type="checkbox"/></p> <p>4. Slab Cover <input type="checkbox"/></p> <p>5. Wall / Ceiling Cover <input type="checkbox"/></p> <p>6. TCI <input type="checkbox"/></p> <p>7. Meter Loop And Service <input type="checkbox"/></p> <p>8. Reconnect <input type="checkbox"/></p> <p>9. Electrical Final <input type="checkbox"/></p> <p>10. Landscape Lighting Cover <input type="checkbox"/></p> <p>11. Landscape Lighting Final <input type="checkbox"/></p> | <p>1. Electrical Pool Cover <input checked="" type="checkbox"/></p> <p>2. Electrical Pool Final <input type="checkbox"/></p> <p>1. Generator Ditch Cover <input type="checkbox"/></p> <p>2. Generator Electrical Final <input type="checkbox"/></p> <p>1. Partial / See Comments <input type="checkbox"/></p> |
|---|---|

<input checked="" type="checkbox"/> PASS	<input type="checkbox"/> FAIL
DATE: <u>10-8-14</u>	
TIME: <u>10:54</u>	
INSPECTOR: <u>[Signature]</u>	

CONTRACTOR/CALLER NAME: Falcon Electric

CONTACT TEL/PGR/MOBILE: 281-830-3165

INSPECTOR COMMENTS: _____

Reinspection fee required

REQUEST FOR STRUCTURAL INSPECTION

CALL DATE: 10.7.2014 TIME : AM / PM

PROPERTY ADDRESS: 5 Oak Lawn Drive

INSPECTOR NAME: (Jeff Ybarra) P# 13609

- 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: 10.08.2014 ^{Wednesday} TIME : AM / PM

INSPECTION TYPE

- | | |
|---|---|
| <ul style="list-style-type: none"> 1. PRE CONSTRUCTION SITE <input type="checkbox"/> 2. PIERS <input checked="" type="checkbox"/> 3. FOUNDATION STEEL <input type="checkbox"/> 4. RIDGE HEIGHT <input type="checkbox"/> 5. HURRICANE TIES <input checked="" type="checkbox"/> 6. STUCCO LATHE/BRICK TIES <input type="checkbox"/> 7. FRAMING / FRAMING COVER <input type="checkbox"/> 8. BUILDING FINAL <input type="checkbox"/> 9. TREE FINAL <input type="checkbox"/> 10. ROOF Final/ DEMO FINAL <input type="checkbox"/> 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 type="checkbox"/> 4. TRENCH <input type="checkbox"/> 5. TEMP FENCING <input type="checkbox"/> |
|---|---|

CONTRACTOR/CALLER NAME: (281) 932-2324 -

CONTACT TEL/PGR/MOBILE: Steve Goodchild

INSPECTOR COMMENTS: Good child Builders

Wind strap.
- clips/straps only

PASS <u>Passion</u> FAIL
DATE: <u>10/8/14</u>
TIME: <u>10:08</u>
INSPECTOR: <u>[Signature]</u>

REQUEST FOR ELECTRICAL INSPECTION

DATE: 10-8-14 TIME 11:15: AM / PM

JOB ADDRESS: 8 PINETREE

PERMIT NUMBER: 12744

INSPECTION DATE:

Codes Used: NFPA 70, NEC 2005 or NEC 2011

ELECTRICAL INSPECTORS: 1) Jason Bienek 2) Dave Whittaker 3)

- | | | | |
|------------------------------|-------------------------------------|-------------------------------|--------------------------|
| 1. Temp Sump Pump Connection | <input type="checkbox"/> | 1. Electrical Pool Cover | <input type="checkbox"/> |
| 2. T-pole | <input type="checkbox"/> | 2. Electrical Pool Final | <input type="checkbox"/> |
| 3. Ditch Cover | <input checked="" type="checkbox"/> | 1. Generator Ditch Cover | <input type="checkbox"/> |
| 4. Slab Cover | <input type="checkbox"/> | 2. Generator Electrical Final | <input type="checkbox"/> |
| 5. Wall / Ceiling Cover | <input type="checkbox"/> | 1. Partial / See Comments | <input type="checkbox"/> |
| 6. TCI | <input type="checkbox"/> | | |
| 7. Meter Loop And Service | <input type="checkbox"/> | | |
| 8. Reconnect | <input type="checkbox"/> | | |
| 9. Electrical Final | <input type="checkbox"/> | | |
| 10. Landscape Lighting Cover | <input type="checkbox"/> | | |
| 11. Landscape Lighting Final | <input type="checkbox"/> | | |

<u>PASS</u>	FAIL
DATE: <u>10-8-14</u>	
TIME: <u>11:15</u>	
INSPECTOR: <u>JB</u>	

CONTRACTOR/CALLER NAME: JOE SWARTZ Electric

CONTACT TEL/PGR/MOBILE: Pattie 713-695-5835

INSPECTOR COMMENTS:

Need to straighten and level
and strap conduits before TCI
is called

Reinspection fee required

REQUEST FOR STRUCTURAL INSPECTION

CALL DATE: 10.6.2014 TIME : AM / PM
 PROPERTY ADDRESS: 11402 Wendover
 INSPECTOR NAME: (Mike Peloguin) PH# 13684

- 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: 10.8.2014 / ~~Tuesday~~ wednesday TIME : AM / PM

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"/> 9. TREE FINAL <input type="checkbox"/> 10. ROOF Final/ DEMO FINAL <input type="checkbox"/> 11. Generator Steel <input type="checkbox"/> 12. Generator Final <input type="checkbox"/> | <p style="font-size: 1.2em; color: brown; opacity: 0.5; transform: rotate(-15deg);">afternoon inspection</p> <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 checked="" type="checkbox"/> 2. DRIVEWAY FINAL <input type="checkbox"/> 3. OTHER <input type="checkbox"/> 4. TRENCH <input type="checkbox"/> 5. TEMP FENCING <input type="checkbox"/> |
|---|---|

CONTRACTOR/CALLER NAME: Ruben (713.702.8107)

CONTACT TEL/PGR/MOBILE: Tex Stone

INSPECTOR COMMENTS: new - cinder patio
a steel

PASS	FAIL
DATE: <u>10-8-14</u>	
TIME: <u>3:00</u>	
INSPECTOR: <u>MP</u>	

OK

REQUEST FOR STRUCTURAL INSPECTION

CALL DATE: 10-7-2014 TIME: _____ : _____ AM / PM

PROPERTY ADDRESS: 11503 Wendover

INSPECTOR NAME: (Jeff Ybarra) P# 13745

- 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: 10.8.2014, wednesday TIME: _____ : _____ AM / PM

INSPECTION TYPE

- | | | | |
|----------------------------|-------------------------------------|-------------------------------|--------------------------|
| 1. PRE-CONSTRUCTION SITE | <input type="checkbox"/> | 1. POOL STAKE OUT/POOL SET-UP | <input type="checkbox"/> |
| 2. <u>PIERS</u> | <input checked="" 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 checked="" 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"/> |
| 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: Joy Homes

CONTACT TEL/PGR/MOBILE: Kurt Berkes

INSPECTOR COMMENTS: (7) 410-0811

Concrete scheduled for 1:00 p.m.
- pending pier letter

PASS <input checked="" type="checkbox"/>	FAIL <input type="checkbox"/>
DATE: <u>10/8/14</u>	
TIME: <u>11:09</u>	
INSPECTOR: <u>[Signature]</u>	