

REQUEST FOR ELECTRICAL INSPECTION

DATE: 2-6-13 TIME 3:00: AM / PM

JOB ADDRESS: 14 Still Forest

PERMIT NUMBER: 11237

INSPECTION DATE:

Codes Used: NFPA 70, NEC 2005 or NEC 2011

ELECTRICAL INSPECTORS: 1) Jason Biene 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 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 checked="" 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"/> | | |

PASS	FAIL
DATE: <u>2-6-13</u>	
TIME: <u>3:00</u>	
INSPECTOR: <u>[Signature]</u>	

CONTRACTOR/CALLER NAME: M.J. Campbell

CONTACT TEL/PGR/MOBILE: Melissa 832-512-9098

INSPECTOR COMMENTS:

NEED TO CALL IN TO Centerpoint

Reinspection fee required

REQUEST FOR ELECTRICAL INSPECTION

DATE: 2-6-13 TIME: 2:25: AM / PM

JOB ADDRESS: 11335 Holiday Way

PERMIT NUMBER: 12199

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 type="checkbox"/> | 1. Generator Ditch Cover <input type="checkbox"/> |
| 4. Slab Cover <input type="checkbox"/> | 2. Generator Electrical Final <input checked="" 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"/> | |

PASS	FAIL
DATE: <u>2-6-13</u>	
TIME: <u>2:25</u>	
INSPECTOR: <u>[Signature]</u>	

CONTRACTOR/CALLER NAME: Hurricane Equipment

CONTACT TEL/PGR/MOBILE: _____

INSPECTOR COMMENTS: _____



Reinspection fee required