

Plumbing

REQUEST FOR **STRUCTURAL** INSPECTION

CALL DATE: 5-25-21 TIME \_\_\_\_\_: \_\_\_\_\_ AM / PM

PROPERTY ADDRESS: 11219 Hermosa

PERMIT NUMBER: 17822

- ☐ 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: 5-25-21 TIME \_\_\_\_\_ AM/PM

INSPECTOR : 1) Jason Bienek \_\_\_\_\_ 2) Bob Baldwin \_\_\_\_\_

INSPECTION TYPE

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

CONTRACTOR/CALLER NAME: Oasis Fire Protection

CONTACT TEL/PGR/MOBILE: 281 382 6114

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

PASS	FAIL
DATE: <u>5-25-21</u>	
TIME: <u>10:10</u>	
INSPECTOR: <u>BhB 3330</u>	

☐ Reinspection fee required