

REQUEST FOR PLUMBING / MECHANICAL INSPECTION

DATE: 2-9-21 TIME: : AM / PM

JOB ADDRESS: 334 Tynebrook

PERMIT NUMBER: 17491

- | | | |
|---|-------------------------------|---|
| <input type="checkbox"/> Pass | <input type="checkbox"/> Fail | Street Clean In Front of Property- (Nothing in Gutter) |
| <input type="checkbox"/> Pass | <input type="checkbox"/> Fail | Dirt, Mud, Construction Tracks in Front of Property |
| <input type="checkbox"/> Pass | <input type="checkbox"/> Fail | Trash Anywhere on Property |
| <input type="checkbox"/> Pass | <input type="checkbox"/> Fail | O-Tolerance for Lunch Trash This May Result in Project to be Temporarily Shut Down! |
| <input type="checkbox"/> Pass | <input type="checkbox"/> Fail | Dumpster full to the Lip & Needs to be Serviced |
| <input type="checkbox"/> Pass | <input type="checkbox"/> Fail | Port-O-Can Door Facing Away From Street |
| <input type="checkbox"/> Pass | <input type="checkbox"/> Fail | Port-O-Can Screened and/or Needs Maintenance |
| <input type="checkbox"/> Pass | <input type="checkbox"/> Fail | Tree Protective Fencing Down |
| <input type="checkbox"/> Pass | <input type="checkbox"/> Fail | Filter Fabric Fencing Down |
| <input type="checkbox"/> Pass | <input type="checkbox"/> Fail | High Grass and/or Tall Weeds |
| <input type="checkbox"/> Pass | <input type="checkbox"/> Fail | Overall Condition of Construction Site <u> </u> Good <u> </u> Poor |
| <u> </u> Verbal Warning <u> </u> Site Cleaned at Insp. <u> </u> City Citation Issued <u> </u> City Notified | | |

INSPECTOR : Bob Baldwin

INSPECTION DATE: 2-9-21

PLUMBING

- | | |
|----------------------|-------------------------------------|
| 1. Water line | <input type="checkbox"/> |
| 2. Rough In | <input checked="" type="checkbox"/> |
| 3. Top Out | <input type="checkbox"/> |
| 4. Shower Pan | <input type="checkbox"/> |
| 5. Sewer Line | <input type="checkbox"/> |
| 6. WC Flange | <input type="checkbox"/> |
| 7. GTO | <input type="checkbox"/> |
| 8. Plumbing Final | <input type="checkbox"/> |
| 9. Pool Drainage | <input type="checkbox"/> |
| 10. Site Drainage | <input type="checkbox"/> |
| 11. Irrigation Final | <input type="checkbox"/> |
| 12. Other | <input type="checkbox"/> |

MECHANICAL

- | | |
|---|--------------------------|
| 1. Vent Hood | <input type="checkbox"/> |
| 2. Rough/cover | <input type="checkbox"/> |
| 3. Mech Final | <input type="checkbox"/> |
| 4. Water Heater Final | <input type="checkbox"/> |
| 5. Fire Sprinkler cover
(need MVFD approval) | <input type="checkbox"/> |
| 6. Fire Sprinkler Final | <input type="checkbox"/> |

PASS

FAIL

DATE: 2-9-21

TIME: 12:45

INSPECTOR: Bob B 3330

CONTRACTOR/CALLER NAME: A & T Plumbing

CONTACT TEL/PGR/MOBILE: 713 464 5508

INSPECTOR COMMENTS:

☐ Reinspection fee required