

## RESIDENTIAL BUILDING INSPECTION CARD

**PLEASE POST THIS CARD IN A VISIBLE PLACE AT THE JOB SITE**

No work requiring an inspection shall be concealed in any way until approved. This card must be signed off in the appropriate spaces, provided below, prior to any work being concealed.

DATE: \_\_\_\_\_ PERMIT #: \_\_\_\_\_ OWNER: \_\_\_\_\_ PROJECT TYPE: \_\_\_\_\_

### CONTRACTOR SIGNATURES

BUILDING: _____	Phone # _____
ELECTRICAL: _____	Phone # _____
PLUMBING: _____	Phone # _____
HEATING: _____	Phone # _____

### INSPECTIONS

#### **FOOTING**

After footings are dug/formed, steel in place, before concrete  
 App. By: \_\_\_\_\_  
 DATE: \_\_\_\_\_

#### **FOUNDATION**

After forms are in, steel in place, before concrete  
 App. By: \_\_\_\_\_  
 DATE: \_\_\_\_\_

#### **UNDER SLAB PLUMBING**

Water or air test required  
 App. By: \_\_\_\_\_  
 DATE: \_\_\_\_\_

#### **SEWER LATERAL**

App. By: \_\_\_\_\_  
 DATE: \_\_\_\_\_

#### **UNDER SLAB HEATING**

Water or air test required  
 App. By: \_\_\_\_\_  
 DATE: \_\_\_\_\_

#### **4-WAY**

Includes: After the roof, all framing, chimney and vents are complete, windows in place – this inspection is a 4 WAY.

#### ROUGH PLUMBING

Water or air test required  
 App. By: \_\_\_\_\_  
 DATE: \_\_\_\_\_

#### ROUGH HEATING

App. By: \_\_\_\_\_  
 DATE: \_\_\_\_\_

#### FRAMING

App. By: \_\_\_\_\_  
 DATE: \_\_\_\_\_

#### FLASHING

App. By: \_\_\_\_\_  
 DATE: \_\_\_\_\_

#### ROUGH ELECTRICAL

App. By: \_\_\_\_\_  
 DATE: \_\_\_\_\_

#### GAS LINE

App. By: \_\_\_\_\_  
 DATE: \_\_\_\_\_

#### **RE 4 WAY/INSULATION**

App. By: \_\_\_\_\_  
 DATE: \_\_\_\_\_

#### **LATH/WEATHER BARRIER**

App. By: \_\_\_\_\_  
 DATE: \_\_\_\_\_

#### **DRYWALL/NAILING**

App. By: \_\_\_\_\_  
 DATE: \_\_\_\_\_

#### **FINISH PLUMBING**

App. By: \_\_\_\_\_  
 DATE: \_\_\_\_\_

#### **FINSH HEATING**

App. By: \_\_\_\_\_  
 DATE: \_\_\_\_\_

#### **FINISH ELECTRICAL**

App. By: \_\_\_\_\_  
 DATE: \_\_\_\_\_

#### **DRIVEWAY APPROACH BASE/CUT**

Driveway approaches must be inspected by a Public Works Inspector. Call (801) 491-7836 to schedule.  
 App. By: \_\_\_\_\_  
 DATE: \_\_\_\_\_

#### **FINAL INSPECTION**

App. By: \_\_\_\_\_  
 DATE: \_\_\_\_\_

#### **WATER METER**

App. By: \_\_\_\_\_  
 DATE: \_\_\_\_\_