

| | Project Information | | | | | |
|--|--|---|--|--|--|--|
| GLO's Desig | nated Representative ("GDR") Name: IEM_test | Contract No. and/or WO: 19-094-015-B568_2 | | | | |
| Applicant Na | nme: asdas | Co-Applicant Name: | | | | |
| Physical Addı | ress: | | | | | |
| Building Con | tractor Name: Contractor 1 | Floor Plan: ROSLIN (ROS) | | | | |
| **Must Be Completed Immediately Prior to TREC Inspection** | | | | | | |
| General Inspection | | | | | | |
| Yes | (REHAB) All in-scope work (on form 11.17) is performed satisfactorily | | | | | |
| N∀A | House numbers installed | | | | | |
| N∀A | Driveway pad is size 14' x 20.' Connection to street 9' wide, where applicable | | | | | |
| Yes | Peepholes on all exterior doors | | | | | |
| N∖∕A | Accessible route present from street to one entrance door | | | | | |
| N∀A | At least one (1) entrance door, with standard 36" door | | | | | |
| N∀A | No-step entrance serviced by ramp (if applicable) slop | pe is 1:12 w/ two (2) grip rails | | | | |
| N∀A | Top surface of gripping handrails at consistent height, 34-38 inches vertically above walking surfaces, stair noses, and ramp surfaces. (ADA 2010, 504.4)s | | | | | |
| N√A | Maximum 4-inch opening on all balusters/rail supports (if applicable) | | | | | |
| N∀A | Building permit, Certificate of Occupancy, Elevation Certificate and Inspection green tags on site and visible | | | | | |
| N∀A | Termite treatment complete with certificate on hand | | | | | |
| N∀A | Green Standards Certification certificate complete and on hand | | | | | |
| N∀A | Accessible route throughout home | | | | | |
| N∀A | Hallways at least 36" wide, level & ramped/beveled c | hanges at each door | | | | |
| N∀A | Exterior door locks properly adjusted, deadbolt fully extends into jamb | | | | | |
| N∀A | 36-inch height on stair handrails (measured at front of stair nose) | | | | | |
| N∀A | Maximum 4-inch opening on all balusters/rail support | s (if applicable) | | | | |
| N∀A | All weatherproofing installed at exterior doors | | | | | |
| N∖⁄A | Roof complete including drip edge, all vent boots/caps, shingles straight & level | | | | | |
| N∀A | Inside of home is free from debris, swept and clean | | | | | |
| N√A | Foundation cables properly stressed and secured (if applicable) | | | | | |
| N∀A | Exterior free of trash and construction materials | | | | | |
| N∖∕A | Porch/decks and ramps cleaned/pressure washed | | | | | |
| N∖∕A | Inspector Observation Remarks1 | | | | | |
| Exterior Inspection | | | | | | |
| N∀A | All piping/drain lines secured to home and exposed pipes insulated | | | | | |
| N∀A | Appropriate water main cut-off exists | | | | | |
| N√A | Check electrostatic grounding of gas lines | | | | | |



| N\ | /A | Hardie plank installed under house, painted (elevated homes where applicable). | |
|------|--|--|--|
| N∀A | | Two (2) hose bibs with vacuum breakers (anti-syphon devices) near front and back. | |
| V | es | All flatwork (driveway, walks, etc.) level, not cracked/damaged/irregular, pitting, spalling, | |
| 1' | | expansion joints present | |
| N∀A | | All siding is free of deficiencies. Note any cracked, dented, bowed, or chipped | |
| N∀A | | All exposed surfaces painted, and exterior paint complete without visible defects (from 6 feet away) | |
| N∀A | | Silicone caulk present at exterior door sills and windows. All exterior penetrations are weatherproofed | |
| N∀A | | All screens installed, not damaged/torn | |
| N√A | | All roof jacks painted to match | |
| N√A | | Gutters, splash blocks, water diverters, etc., are in place | |
| N∀A | | Finish grade at foundation provides positive drainage away from the structure, starting at a min of 6" below finish floor at slab on grade or a min of 6" below pier footings for elevated floor | |
| N\ | /A | Trees trimmed at least 3 feet from the structure/roof, and Sod is in required area | |
| N\ | /A | Existing gutters, splash blocks, water diverters, not damaged or detached | |
| N\ | /A | Inspector Observation Remarks2 | |
| N\ | /A | Appropriate water main cut-off exists | |
| | | Interior Inspection | |
| Yes | ReHab | -Switches, receptacles, circuit breakers & thermostat are functional | |
| N∖/A | ReHab | -All switch and receptacle plates level, flush, and without defects | |
| N\/A | ReHab | -Walls and drywall are visually free of blemishes | |
| N\/A | ReHab | -Verify all base trim is properly installed | |
| N\/A | Inside | of home is free from debris and swept(frml) | |
| N\/A | Operable switches, circuit breakers & thermostat no higher than 48" above floor | | |
| N\/A | All switches and receptacles properly installed and operable; switch plates level, flush, and without defects. Each receptacle/plug is at least 15" above the floor | | |
| Yes | Wall and ceiling sheetrock is free of deficiencies; ridges, bubbling, cracking at tape joints, corners and lines are straight | | |
| N\/A | Verify all base is matching profile. Base appears to be straight; a bow in the base is a visual cue drywa is bowed | | |
| | | /CO2 detectors installed in proper locations and operational | |
| N\/A | Ensure paint coverage is acceptable, free from flaws visible from 6 feet away | | |
| N\/A | ReHab-Carpet is properly installed, not missing sections | | |
| N\/A | Ensure interior doors are at least standard 32" door, unless the door provides access only to closet of less than 15 square feet in area | | |
| N\/A | Check vinyl flooring for deficiencies such as peeling/lifting, visible gaps/seams, ridges/depressions, or overall poor workmanship | | |
| N∖⁄A | Ceramic/porcelain tile – all joints perpendicular & parallel to walls. Installed around outlets, fixtures, pipes/fittings so that plates, escutcheons, and collar overlap cuts | | |
| | - | | |

Form 11.03 - Final Inspection Checklist

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| N∖∕A | Check for Hot-Cold control reversal in all showers, tubs, and sinks | | | | |
|--------------------|--|--|--|--|--|
| N\/A | Check for leaks in supply and drain lines under sinks | | | | |
| N\/A | Coilets flush properly and are firmly seated in place (no movement) | | | | |
| N\∕A | AC & Heat - check for cold and hot air movement; system in good working order; check thermostat | | | | |
| INVA | functions | | | | |
| N\∕A | AC filter in place; filter | AC filter in place; filter panel easily removable | | | |
| N\/A | AC registers properly | AC registers properly installed (no gaps, all screws) and level | | | |
| N\/A | Septic system installed and operational (if applicable) | | | | |
| N\/A | Well water system installed and operational (if applicable) | | | | |
| N\∕A | Water heater installed, operational. (If located on main floor in construction plans, must be in | | | | |
| | designated and properly ventilated closet.) | | | | |
| N\/A | Appliances installed, operational | | | | |
| N\/A | Anti-tip device installed for the stove/oven range | | | | |
| N\/A | ReHab-Attic insulation is installed properly | | | | |
| N\/A | | por insulated and closes properly | | | |
| N\/A | | reens installed, NOT excessively torn or missing | | | |
| N\/A | ReHab-Insulation stop | | | | |
| N\/A | Washing machine outlet box, ice maker outlet box, dryer vent box (or trim) present | | | | |
| N\/A | Region | | | | |
| N\/A | - | attic - Verify insulation installed, stop, and access door insulation are present | | | |
| N\/A | Windows & doors operate smoothly (hinge screws installed, locks & hardware) | | | | |
| N\∕A | Ensure cabinets are str | raight and line up with the walls properly | | | |
| | | Electrical Inspection | | | |
| N\/A | A Air Conditioner | preaker properly sized | | | |
| $N \lor A$ | A All exhaust fans | All exhaust fans and ceiling fans are operational, no excessive noise or vibration | | | |
| $N \lor A$ | A ReHab-AC Con | ReHab-AC Condenser location ok, and operable | | | |
| $N \lor A$ | A AC Condenser 1 | ocation on concrete pad or deck. Water diverter over AC unit | | | |
| $N \bigvee A$ | A ReHab-Aluminu | n wiring is NOT visually apparent. (If aluminum wiring, check "NO" | | | |
| N\/A | A Breaker box loc | ted on 1st floor, operational parts no higher than 48" from floor | | | |
| $N \lor A$ | A Check that all re | uired GFCI circuits are present and operating properly | | | |
| N\/A | A Check that all re | quired AFCI circuits are present and operating properly | | | |
| N\/A | A All circuit break | ers clearly labeled | | | |
| N√A Check ground a | | nd polarity of all receptacles | | | |
| Yes | Electrical Obser | ation Remarks | | | |
| | A | ccessibility Inspection (when applicable) | | | |
| N∀A | | If lift present, ensure it is operable, and lift gates fasten securely | | | |
| | N∀A | Walk-in showers | | | |
| | N√A | Grab bars installed properly | | | |
| | | - | | | |



| N∀A | Toilets exactly at 18 inches (on center) from finished side wall | | |
|---|---|---|--|
| N∀A | Toilet seat height is 17–19 inches from floor | | |
| N∀A | Inspector Observation Remarks3 | | |
| | Signatu | res | |
| best of my knowledge and belief. act of fraud. False, misleading or that will accept this document. | I further understand that p incomplete information m wingly makes a false claim | sented in this document is true and accurate to the roviding false representations herein constitutes an ay result in my ineligibility to participate in Programs on or statement to HUD may be subject to civil or a.C. 3729 | |
| Inspector Printed Name: Inspector Signature: Image not fou | nd or type unknown | Date: | |
| Superintendent Printed Name: Superintendent Signature: | | Date: | |
| Applicant Printed Name: asdas Applicant Signature: | | Date: | |
| Co-Applicant Printed Name: | | | |

Co-Applicant Signature:

Date:

^{**}Based upon IRC 2012, ADA 2010, HUD Housing Quality Standards and CDR Design Standards































































Deficiencies























