



DEPARTMENT OF CONSUMER & REGULATORY AFFAIRS

Government of the District of Columbia
Department of Consumer and Regulatory Affairs
Inspections and Compliance Administration
1100 4th St, SW; Washington, DC 20024

On-Site Inspection Record

Property Address & Unit Number:	
Site Representative & phone #:	
Historic property? YES <input type="checkbox"/> NO <input type="checkbox"/>	Parent Building Permit:
Third Party Inspection Company? YES <input checked="" type="checkbox"/> NO <input type="checkbox"/> Company Name: Lourenco Consultants Company Cert #: 2011503	

Schedule Your DCRA Inspections
24 Hours a Day, 7 Days a Week
from your Phone
Just Call 202-442-9557

Required?	Inspection Type (IVR Code) Check required inspections	DATE	INITIALS AND BADGE/ID #	
			APPROVE	DISAPPROVE
<input type="checkbox"/>	<input checked="" type="checkbox"/> Footing (160)	12-23	JL	12/23
<input type="checkbox"/>	<input checked="" type="checkbox"/> Foundation (130)	12/23	SR	12/23
<input type="checkbox"/>	<input checked="" type="checkbox"/> Slab (178)	12/23	MC	12/23
<input type="checkbox"/>	<input checked="" type="checkbox"/> Wall Check Required			
<input type="checkbox"/>	<input checked="" type="checkbox"/> Framing (100)			
<input type="checkbox"/>	<input checked="" type="checkbox"/> -Accessibility			
<input type="checkbox"/>	<input checked="" type="checkbox"/> Insulation (110)			
<input type="checkbox"/>	<input checked="" type="checkbox"/> Fire Final (174)			
<input type="checkbox"/>	<input checked="" type="checkbox"/> Final (170)			
<input type="checkbox"/>	<input checked="" type="checkbox"/> -Accessibility			
<input type="checkbox"/>	<input checked="" type="checkbox"/> Zoning by DCRA (175)			
<input type="checkbox"/>	<input type="checkbox"/> Fire Alarm Acceptance Test			
<input type="checkbox"/>	<input type="checkbox"/> Sprinkler Hydro			
<input type="checkbox"/>	<input type="checkbox"/> Sprinkler Final			

BUILDING
Permit # B1508643

Required?	Inspection Type (IVR Code) Check required inspections	DATE	INITIALS AND BADGE/ID #	
			APPROVE	DISAPPROVE
<input type="checkbox"/>	<input checked="" type="checkbox"/> Ground Work (400)			
<input type="checkbox"/>	<input checked="" type="checkbox"/> Rough-in (410)			
<input type="checkbox"/>	<input checked="" type="checkbox"/> -Accessibility			
<input type="checkbox"/>	<input checked="" type="checkbox"/> Final (430)			
<input type="checkbox"/>	<input checked="" type="checkbox"/> Gas Line / Gas Test (485)			
<input type="checkbox"/>	<input checked="" type="checkbox"/> Rough-in (360)			
<input type="checkbox"/>	<input checked="" type="checkbox"/> Final (380)			
<input type="checkbox"/>	<input checked="" type="checkbox"/> Ground Work (225)			
<input type="checkbox"/>	<input checked="" type="checkbox"/> Rough-in (215)			
<input type="checkbox"/>	<input checked="" type="checkbox"/> Final (200)			
<input type="checkbox"/>	<input checked="" type="checkbox"/> TPF (230)			
<input type="checkbox"/>	<input checked="" type="checkbox"/> Building Final (715)			
<input type="checkbox"/>	<input checked="" type="checkbox"/> Elevator Certificate Verified			
<input type="checkbox"/>	<input checked="" type="checkbox"/> Boiler Inspection Verified			
<input type="checkbox"/>	<input checked="" type="checkbox"/> Zoning Use (745)			

PLUMBING
Permit # _____

MECHANICAL
Permit # _____

ELECTRICAL
Permit # _____

C of O
Inspections
Permit # _____

