

INSPECTION STAGE NO. 1

(upon completion of foundation, prior to backfill)

APPROVED - REJECTED

(circle one upon completion)

Builder Name: _____ Enrollment No.: _____

Property Identification: _____ Date of Inspection: _____

City: _____ State: _____

1. Description of foundation: (i.e.: slab on grade, full / partial basement, crawl space, or any combination thereof)

2. What is the frost line depth for this area? _____ inches.

Satisfactory
Y, N, I or N/A*

Rate the quality of the construction
(Scale of 1 to 5; 5=best, 3=compliant): _____

(*Y=Yes, N=No, I=Incomplete, N/A=Not Applicable)

REMARKS

3. Bearing Soil Condition: *

*Notify this office immediately if evidence of filled ground or potential sinkholes and underground springs exist.

4. Footers - Dimensions: Thickness: _____ Inches

Width: _____ Inches

Depth below Est. Frontline: _____

5. Foundation Walls -

Poured Concrete or Block (circle)

Dimension of above: _____ Inches

Est. Fill to be placed

against wall: _____ Feet

6. Parging - Thickness: _____ Inches

7. Waterproofing - Type: _____

8. Perimeter Drain Tile: _____ Drained to: _____

9. Anchor Bolts / Anchor Straps (circle one)

On Center: _____ ft.

10: Chimney Foundation - Footers:

Block:

11. Support Column Footings: Depth: _____ Inches

Width: _____ Inches

12. If Slab Construction: Thickness: _____ Inches

Reinforcements:

Insulation:

13. If Crawl Space:

Ventilation:

Access Opening:

14. Pier Construction Is: _____

I.E.: Hollow Block / Steel Post

Pier Dimension: _____

Pier Footing Size: _____ x _____ x _____

Certification: I certify that I have personally inspected the above described structure, that I have no interest present or prospective in same, that I have reported all variances observed and that all construction is in conformance with the governing building codes and warranty standards. This inspection is conducted for the sole benefit and use of Quality Builders Warranty Corp. There is no representation, expressed or implied, to any other party including builder or the homeowner, as to the adequacy of construction.

Inspector's Signature: _____ Date: _____

Inspector's Name (PRINT): _____