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| **Project Information** |
| **Subrecipient or State Representative’s Name:**  | **Contract No. and/or WO:** |
| **Applicant Name:** | **Co-Applicant Name:** |
| **Physical Address:** |
| **City:** | **State: Texas** | **ZIP Code:** |
| ***Must be Completed Immediately Prior to Drywall\*\**** |
| **General Inspection** |
| [ ] Yes [ ] No [ ] N/A | Confirm which Green Standard applies: |
| [ ] Yes [ ] No [ ] N/A | Building permit and green tags in place and visible. |
| [ ] Yes [ ] No [ ] N/A | Confirm foundation municipal tag and engineer’s report is issued (with the plans) and available (if applicable). |
| [ ] Yes [ ] No [ ] N/A | Verify it’s framed according to plans, correct number of rooms, bathrooms, windows and elevation, etc. |
| [ ] Yes [ ] No [ ] N/A | At least one 36-inch entrance door on an accessible route served by no-step entrance or ramp. |
| [ ] Yes [ ] No [ ] N/A | Check finished slab surface complete/plumbing entry points patched and cured. |
| [ ] Yes [ ] No [ ] N/A | No slab areas of unevenness exceeding 3/8 inch per 32 inches. |
| [ ] Yes [ ] No [ ] N/A | Confirm rough opening for interior passage doors will accommodate a 32-inch door, unless the door provides access only to closet of less than 15 sq. ft. in area. |
| [ ] Yes [ ] No [ ] N/A | Each hallway has a width of at least 36 inches and is level. |
| [ ] Yes [ ] No [ ] N/A | Anchor bolts, washer, nuts, all tightened. Location(s): |
| [ ] Yes [ ] No [ ] N/A | 2x6 joist hangers are installed at attic/all areas, with appropriate number of nails in hangers. |
| [ ] Yes [ ] No [ ] N/A | Check AC drain installed and visually clear of debris. |
| [ ] Yes [ ] No [ ] N/A | Foundation cables properly stressed and secured (if applicable). |
| [ ] Yes [ ] No [ ] N/A | Gas and electric meter location reasonably near home. |
| [ ] Yes [ ] No [ ] N/A | Fur downs per plan. |
| [ ] Yes [ ] No [ ] N/A | Poly and baffles done as required. |
| [ ] Yes [ ] No [ ] N/A | All trade nail guards in place. |
| [ ] Yes [ ] No [ ] N/A | Framing is free from unacceptable irregularities such as excessive mud/mildew/knots or flaws/notching or scabbing, or overall damage. Note unusual nail patterns/usage. |
| [ ] Yes [ ] No [ ] N/A | Inside of home is free from debris and swept. |
| [ ] Yes [ ] No [ ] N/A | All trash is picked up and placed in trash area/dumpster. |
| **Inspector Observation Remarks:** |
| **Interior Inspection** |
| [ ] Yes [ ] No [ ] N/A | Each bathroom is reinforced with blocking for potential grab bar installation. |
| [ ] Yes [ ] No [ ] N/A | Check plan on sizes of ceiling joists and rafters. Check doubles around openings. |
| [ ] Yes [ ] No [ ] N/A | Studs are installed at 16 inches on center. |
| [ ] Yes [ ] No [ ] N/A | All grab bar blocking or deadwood installed. |
| [ ] Yes [ ] No [ ] N/A | Door and window headers are sized to scale, load-bearing and non-load-bearing. |
| [ ] Yes [ ] No [ ] N/A | Check windstorm clips/item per plan. |
| [ ] Yes [ ] No [ ] N/A | All receptacles (electric outlets) at least 15 inches above floor. |
| [ ] Yes [ ] No [ ] N/A | Light switches, fan switches and thermostat no higher than 48 inches from floor. |
| [ ] Yes [ ] No [ ] N/A | Each breaker box is located not higher than 48 inches above the floor inside the building on the first floor in the utility room or garage; *unless the applicable building code or codes do not prescribe another location for the breaker boxes.* |
| [ ] Yes [ ] No [ ] N/A | Check all electrical clears door casings, and that it is not behind door swing. |
| [ ] Yes [ ] No [ ] N/A | Smoke detector and carbon monoxide detector locations. |
| [ ] Yes [ ] No [ ] N/A | All walls and corners are plumb. |
| [ ] Yes [ ] No [ ] N/A | Toilets at 18 inches on center from side wall. |
| [ ] Yes [ ] No [ ] N/A | Space is provided on both sides of doors for casing. |
| **Inspector Observation Remarks:** |
| **Windows and Doors** |
| [ ] Yes [ ] No [ ] N/A | Verify windows are compliant with windstorm/Green Standard requirements. |
| [ ] Yes [ ] No [ ] N/A | House wrap is installed in all window and door openings prior to installation of windows/doors. |
| **Inspector Observation Remarks:** |
| **Exterior Inspection** |
| [ ] Yes [ ] No [ ] N/A | Exterior walls are plumb and straight (no bows). |
| [ ] Yes [ ] No [ ] N/A | Lap Siding: 'HZ10' Hardie Plank, 6 1/4", smooth or textured finish, pre-primed.   |
| [ ] Yes [ ] No [ ] N/A | Cracked, dented, or chipped siding requires replacement. |
| [ ] Yes [ ] No [ ] N/A | All butt-joints are less than 1/8 inch, both siding and trim. |
| [ ] Yes [ ] No [ ] N/A | Use trim nails on 1x4 Hardie trim (siding). |
| [ ] Yes [ ] No [ ] N/A | Every door and window location and size are confirmed. |
| [ ] Yes [ ] No [ ] N/A | Window and door openings are plumb. |
| [ ] Yes [ ] No [ ] N/A | Sheathing on the house is cut tight, straight, without gaps or holes, and nailed per plan specifications.  |
| [ ] Yes [ ] No [ ] N/A | Two exterior hose bibs (front/back). |
| **Inspector Observation Remarks:** |
| **Roof/Attic** |
| [ ] Yes [ ] No [ ] N/A | HVAC ductwork in place, no gaps or openings in ductwork. |
| [ ] Yes [ ] No [ ] N/A | All windstorm/fortified appurtenances are in place. |
| [ ] Yes [ ] No [ ] N/A | Roof sheathing is flat, no valleys or high places.  |
| [ ] Yes [ ] No [ ] N/A | Roof decking is installed with small gap 1/16–1/8 inch on all end joints. |
| [ ] Yes [ ] No [ ] N/A | Roof sheathing is nailed per plan and windstorm requirements. |
| [ ] Yes [ ] No [ ] N/A | Double check elevation on all 4 sides (with floor plans). |
| [ ] Yes [ ] No [ ] N/A | All roof jacks installed. |
| **Inspector Observation Remarks:** |
| **Signatures** |
| Under penalties of perjury, I certify that the information presented in this Affidavit is true and accurate to the best of my knowledge and belief. I further understand that providing false representations herein constitutes an act of fraud. False, misleading or incomplete information may result in my ineligibility to participate in Programs that will accept this Affidavit. 18 U.S.C. Section 1001 states that a person is guilty of a FELONY if he/she knowingly and willfully makes false statements to any department of the United States Government.  |
| **Inspector’s Printed Name:** | **Date:** |
| **Inspector’s Signature:** |
| **Superintendent’s Printed Name:** | **Date:** |
| **Superintendent’s Signature:** |

\*\*Based upon IRC 2012, ADA 2010, HUD Housing Quality Standards and CDR Design Standards.