

FINAL INSPECTION

	SECTION:	LOT #:
APPLICANT: Please fill in all s	paces below.	
ate of Application:		
ate Lot will be Ready for Inspectio		
ate of Scheduled Closing:		
pplicant Name:		
applicant Mailing Address:		
hone # Home:	Work/Fax:	Cell:
Sertificate of Compliance to be Sent		
() Builder's Address:		
() Lender's Address:		
OO NOT WRITE BELOW		
	YES NO	
Plans Approved:	() ()	
Colors Approved: Construction Complete:	() () () () () ()	
Grading & Pavements Complete:	() ()	
Landscaping Complete:	() ()	
(Receipts may be requested for proof of m	eeting minimum.)	
Defects Requiring Completion or Co	arroation:	
Defects Requiring Completion of Co	orrection.	
Poviowar (ACC):		Dato:
Reviewer (ACC):		Date: