



PRIVATE PROVIDER CERTIFICATE OF COMPLIANCE

PERMIT No. _____
SITE ADDRESS _____
CONTRACTOR NAME _____
CONTRACTOR LICENSE _____

The following inspections have been completed and approved for the above listed permit: (Please check the box next to each inspection performed)

- | | | |
|--|---|--|
| ☐ Under slab-
Electric/Plumbing/Mechanical | ☐ Rough Gas/Bonding/Piping | ☐ Final Gas |
| ☐ Footing | ☐ Insulation | ☐ Final Electrical Inspection |
| ☐ Slab | ☐ Window/Door Installation | ☐ Firewall/Sheetrock |
| ☐ Roof Sheathing | ☐ Shutters | ☐ Meter Can |
| ☐ Wall Sheathing | ☐ Roofing Materials/Installation | ☐ Temporary Pole |
| ☐ Hurricane Tie Down System | ☐ Tile Roofing Materials | ☐ Hood/Duct |
| ☐ Lintel | ☐ Tile/Metal Roofing | ☐ Pool Rough |
| ☐ Rough Plumbing | ☐ Soffit Materials | ☐ Safety Final |
| ☐ Rough Electric | ☐ Lath Corner Bead | ☐ Mobile Home |
| ☐ Rough Framing | ☐ Stucco Installation | ☐ Columns/Beams |
| ☐ Rough Mechanical | ☐ Final Building Inspection | ☐ Brick Flashing |
| ☐ Other _____ | ☐ Final Plumbing | ☐ Irrigation |

Approval from all Federal, State and local agencies has been granted.

To the best of my knowledge and belief, the building components and site improvements outlined here and inspected under my authority, have been completed in conformance with the approved plans and the applicable codes.

Private Provider Name (Print) _____ Private Provider # _____

Signature _____