

FROM _____

Site Contact Name & Phone Number _____

School Name _____

Rosa.Ayala@palmbeachschools.org

Permit # _____

Mary.Murphy@palmbeachschools.org

TO: *Building Code Services*

ATTENTION:

Gabriela.Casalesmarquez@palmbeachschools.org

BCS@palmbeachschools.org

TRADE (Building / Electrical / Mechanical / Plumbing / Fire Sprinkler / Electrical Systems)	INSPECTION TYPE	INSPECTION AREA / DESCRIPTION	INSPECTION DATE	AFTER HOURS? <i>(check box if YES)</i>

ACCEPTABLE INSPECTION TYPES:

- | | | | |
|---------------|----------------|----------------------|-------------|
| Above Ceiling | Duct Rough | Pre-CSIR | Structural |
| Above Ground | Equipment Room | Pressure Test | Temporary |
| Accessibility | Final | Re-Inspection | Tilt Wall |
| ADA | Fire Alarm | Roofing Installation | Underground |
| Ansul | Fire Safety | Rough | Wall Rough |
| Chiller Plant | Foundation | Service | |
| Demolation | Generator | Site | |
| Dry Wall | Insulation | Slab | |

**1) CUT OFF TIME FOR NEXT DAY
INSPECTIONS IS 3:00 PM**

**2) TWO (2) DAY ADVANCE NOTICE REQUIRED
FOR ALL AFTER HOURS INSPECTIONS**

(ABSOLUTELY NO EXCEPTIONS)