



County of Shenandoah

DEPARTMENT OF BUILDING INSPECTIONS

600 N. Main Street, Suite 107

Woodstock VA 22664

www.shenandoahcountyva.us

THIRD PARTY INSPECTION REPORT FORM

Permit Number: _____

Date of Inspection: _____

Owners Name: _____

Contractors Name: _____

Jobsite Location: _____

Weather Conditions: _____

Temperature: _____

Property Set Backs: Front: _____

Rear: _____

Left: _____

Right: _____

Type of Inspection

<input type="checkbox"/> Footings Width: _____ Depth: _____ Bar Reinforcement: _____ If yes, is the Ufer Ground Present? _____	<input type="checkbox"/> Concrete Walls (PSI: _____) Thickness: _____ Height: _____ Vertical Reinforcement: _____ Horiz. Reinforcement: _____ Fill Height _____ Soil Type: _____
<input type="checkbox"/> Slabs Slab Location: _____ Fill Height or Base Thickness: _____ Is the Vapor Retarder Installed? _____ Reinforcement Type: _____ Slab Thickness: _____	<input type="checkbox"/> Back Fill / Drain Tile Fill Material: _____ Shrink/Swell: _____ Filter Membrane/Cloth Installed? _____ Approved Draintile Material Installed, with 2" gravel base & 6" gravel coverage? _____

Please included a copy of the concrete ticket with this report form to the Building Official.

Please list any corrections that were made or other special notes below

Third Party Inspector Signature: _____