



INSPECTION

REQUEST

Development Services/Building Division
 210 US 79 East, Suite 103
 Hutto, Texas 78634

512-846-2640
 Fax 512-759-5962
www.huttotx.gov

Fax Inspections to: 512-759-5962
Email Inspections to: inspections@huttotx.gov

Please note: All Inspection requests must be received in writing to Inspections.

| | |
|-----------------|---------------------|
| Address: | Date Needed: |
| Permit# | Subdivision: |

| | |
|--------------------------|---------------------------|
| Today's Date: | Requestor's Phone: |
| Company/Builder: | Requestor's Fax: |
| Requestor's Name: | Email Address: |

Please check type of inspection requested:

| | STATUS | | STATUS | | STATUS |
|---|--------|---|--------|---|--------|
| <input type="checkbox"/> Temp Power | | <input type="checkbox"/> Permanent Meter | | Misc Inspections: | |
| <input type="checkbox"/> Layout/ Plumbing Rough | | <input type="checkbox"/> Electrical Final | | <input type="checkbox"/> Grease Trap | |
| <input type="checkbox"/> Sewer and Water | | <input type="checkbox"/> Plumbing Final | | <input type="checkbox"/> Pool Layout | |
| <input type="checkbox"/> Copper | | <input type="checkbox"/> Mechanical Final | | <input type="checkbox"/> Pool Bond | |
| <input type="checkbox"/> Foundation | | <input type="checkbox"/> Gas Final | | <input type="checkbox"/> Pool Final | |
| <input type="checkbox"/> Plumbing Top Out | | <input type="checkbox"/> Flatwork | | <input type="checkbox"/> Hood | |
| <input type="checkbox"/> Frame | | <input type="checkbox"/> Right-of-Way (Driveway/Sidewalk) | | <input type="checkbox"/> Gas Underground | |
| <input type="checkbox"/> Electrical Rough | | <input type="checkbox"/> Final Right-of-Way | | <input type="checkbox"/> Water Softener | |
| <input type="checkbox"/> Mechanical Rough | | <input type="checkbox"/> Landscape | | <input type="checkbox"/> Irrigation/ Back-flow | |
| <input type="checkbox"/> Gas Rough | | <input type="checkbox"/> Building Final | | <input type="checkbox"/> Water Heater Replacement | |
| <input type="checkbox"/> Insulation | | <input type="checkbox"/> Certificate of Occupancy | | <input type="checkbox"/> HVAC Replacement | |
| <input type="checkbox"/> Wallboard | | <input type="checkbox"/> Other: | | <input type="checkbox"/> P-Trap | |
| | | | | <input type="checkbox"/> Fire/Fire Final | |

Status: P=Pass / PP= Partial Pass / F=Failed (re-inspection required) / NA = Not Applicable / C= Cancelled

Comments:

| | | |
|--|----------------------|-------|
| | Inspector Signature: | Date: |
|--|----------------------|-------|