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|  **Project Information** |
| **Authorized Representative of Subrecipient/State:** | **Contract No. and/or WO:** |
| **Applicant’s Name:** | **Co-Applicant’s Name:** |
| **Physical Address:** |
| **City:** | **State: Texas** | **ZIP Code:** |
| **Builder Name:** |
| ***\*\*Must Be Completed Immediately Prior to TREC Inspection\*\**** |
|  **General Inspection** |
| **Green Building Standards Used (specify):** |
|  [ ] Yes [ ] No [ ] N/A | Building meets all applicable elevation standards for development in the floodplain. |
|  [ ] Yes [ ] No [ ] N/A | House numbers are installed. |
|  [ ] Yes [ ] No [ ] N/A | Accessible route present from street to one entrance door. |
|  [ ] Yes [ ] No [ ] N/A | At least one (1) entrance door, with standard 36” door. |
|  [ ] Yes [ ] No [ ] N/A | No step entrance or serviced by ramp (if ramp is present the slope is 1:12) &handrails (if applicable) per ADA 2010. |
| [ ] Yes [ ] No [ ] N/A | Building permit and green tags in place and visible. |
|  [ ] Yes [ ] No [ ] N/A | Termite treatment complete. |
|  [ ] Yes [ ] No [ ] N/A | Green Standards Certification (Energy) certificate complete and on hand. |
|  [ ] Yes [ ] No [ ] N/A | Accessible route throughout home. |
|  [ ] Yes [ ] No [ ] N/A | Each hallway 36” level, with ramped or beveled changes at each door threshold. |
|  [ ] Yes [ ] No [ ] N/A | Exterior door locks properly adjusted, deadbolt fully extends into jamb. |
|  [ ] Yes [ ] No [ ] N/A | 36-inch height on stair handrails (measured at front of stair nose). |
|  [ ] Yes [ ] No [ ] N/A | Maximum 4-inch opening on all balusters/rail supports (if applicable). |
|  [ ] Yes [ ] No [ ] N/A | All weatherproofing installed at exterior doors. |
|  [ ] Yes [ ] No [ ] N/A | Roof complete including drip edge, all vent boots/caps, shingles straight & level. |
|  [ ] Yes [ ] No [ ] N/A | Inside of home is free from debris, swept and clean. |
|  [ ] Yes [ ] No [ ] N/A | Exterior free of trash and construction materials. |
|  [ ] Yes [ ] No [ ] N/A | Porch/decks and ramps cleaned/pressure washed. |
| **Inspector Observation Remarks:** |
| **Exterior Inspection** |
|  [ ] Yes [ ] No [ ] N/A | All piping/drain lines secured to home and exposed pipes insulated. |
|  [ ] Yes [ ] No [ ] N/A | Appropriate water main cut-off exists. |
|  [ ] Yes [ ] No [ ] N/A | Check electrostatic grounding of gas lines. |
|  [ ] Yes [ ] No [ ] N/A | All flatwork (driveway, walks, etc.) level, not cracked/damaged/irregular, pitting,spalling, expansion joints present. |
|  [ ] Yes [ ] No [ ] N/A | Siding not cracked, dented or chipped (if so replace it). |
|  [ ] Yes [ ] No [ ] N/A | Verify minimum ½ inch air gap between siding and porch floor, and where sidewalks/driveways abut to house foundations. |
|  [ ] Yes [ ] No [ ] N/A | All exposed surfaces painted, and exterior paint complete without visible defects (from 6 feet away). |
|  [ ] Yes [ ] No [ ] N/A | Silicone caulk present at exterior door sills and windows. |
|  [ ] Yes [ ] No [ ] N/A | All screens installed, not damaged/torn. |
| [ ] Yes [ ] No [ ] N/A | Gutters, splash blocks, water diverters, etc., are in place. |
|  [ ] Yes [ ] No [ ] N/A | Finish Grade at house foundation provides positive drainage away from structure and shall start a minimum of 6 inches below finish floor at slab on grade or a minimum of 6 inches below pier footings for elevated floor. |
|  [ ] Yes [ ] No [ ] N/A | Trees trimmed at least 3 feet from the structure/roof, and Sod is in required area. |
| **Inspector Observation Remarks:** |
| **Interior Inspection** |
| [ ] Yes [ ] No [ ] N/A | Operable switches, circuit breakers & thermostat no higher than 48” above floor. |
|  [ ] Yes [ ] No [ ] N/A | All switches and receptacles properly installed and operable; switch plates level, flush, and without defects. Each receptacle/plug is at least 15” above the floor. |
|  [ ] Yes [ ] No [ ] N/A | Visually inspect wall for deficiencies; a level may be utilized to determine if defect is more than 1/4 inch within 32 inches in either direction. Note ridges, bubbling, cracking at tape joints and/or if ceiling lines are not straight. |
|  [ ] Yes [ ] No [ ] N/A | Verify all base is matching profile. Base appears to be straight; a bow in the base is a visual cue drywall is bowed. |
|  [ ] Yes [ ] No [ ] N/A | Smoke/CO2 detectors installed in proper locations and operational. |
|  [ ] Yes [ ] No [ ] N/A | Ensure paint coverage is acceptable, free from flaws visible from 6 feet away. |
|  [ ] Yes [ ] No [ ] N/A | Ensure interior doors are at least standard 32” door, unless the door provides access only to closet of less than 15 square feet in area. |
|  [ ] Yes [ ] No [ ] N/A | Check vinyl flooring for deficiencies such as peeling/lifting, visible gaps/seams, ridges/depressions, or overall poor workmanship. |
|  [ ] Yes [ ] No [ ] N/A | Carpet properly installed. |
|  [ ] Yes [ ] No [ ] N/A | Check ceramic or porcelain tile joints (vertical and horizontal), all joints perpendicular and parallel to walls. Installed around outlets, pipes, fixtures, and fittings so that plates, escutcheons, and collars overlap cuts. |
| [ ] Yes [ ] No [ ] N/A | Check for Hot-Cold control reversal in all showers, tubs, and sinks. |
|  [ ] Yes [ ] No [ ] N/A | Check for leaks in supply and drain lines under sinks. |
|  [ ] Yes [ ] No [ ] N/A | Toilets flush properly and are firmly seated in place (no movement). |
|  [ ] Yes [ ] No [ ] N/A | AC & Heat — check for cold and hot air movement; system in good working order. Check thermostat functions. |
|  [ ] Yes [ ] No [ ] N/A | AC filter in place; filter panel easily removable. |
|  [ ] Yes [ ] No [ ] N/A | AC registers properly installed (no gaps, all screws) and level. |
|  [ ] Yes [ ] No [ ] N/A | Septic system installed and operational (if applicable). |
|  [ ] Yes [ ] No [ ] N/A | Well water system installed and operational (if applicable). |
|  [ ] Yes [ ] No [ ] N/A | Hot water heater installed, operational. |
|  [ ] Yes [ ] No [ ] N/A | Appliances installed, operational. |
|  [ ] Yes [ ] No [ ] N/A | Anti-tip device installed for the stove/oven range. |
|  [ ] Yes [ ] No [ ] N/A | Insulation stop at attic access. |
|  [ ] Yes [ ] No [ ] N/A | Insulation in attic properly installed. |
|  [ ] Yes [ ] No [ ] N/A | Check windows & doors for operability (all hinge screws installed, locks & hardware operate smoothly). |
|  [ ] Yes [ ] No [ ] N/A | Check to ensure cabinets are straight and line up with the walls properly. |
|  **Electrical Inspection** |
|  [ ] Yes [ ] No [ ] N/A | Air Conditioner breaker properly sized. |
|  [ ] Yes [ ] No [ ] N/A | All exhaust fans and ceiling fans are operational, no excessive noise or vibration. |
|  [ ] Yes [ ] No [ ] N/A | AC Condenser location ok, and on concrete pad. |
|  [ ] Yes [ ] No [ ] N/A | Breaker box located on 1st floor, operational parts no higher than 48” from floor. |
|  [ ] Yes [ ] No [ ] N/A | Check that all required GFCI circuits are present and operating properly. |
|  [ ] Yes [ ] No [ ] N/A | Check that all required AFCI circuits are present and operating properly. |
|  [ ] Yes [ ] No [ ] N/A | All circuit breakers clearly labeled. |
|  [ ] Yes [ ] No [ ] N/A | Check ground and polarity of all receptacles. |
| **Inspector Observation Remarks:** |

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| **Accessibility Inspection (when applicable)** |
|  [ ] Yes [ ] No [ ] N/A | If lift present, ensure it is operable, and lift gates fasten securely. |
|  [ ] Yes [ ] No [ ] N/A | Walk-in shower. |
|  [ ] Yes [ ] No [ ] N/A | Grab bars installed properly. |
|  [ ] Yes [ ] No [ ] N/A | Toilet 18 inches (on center) from finished side wall. |
|  [ ] Yes [ ] No [ ] N/A | Toilet seat height is 17–19 inches from floor. |
| **Inspector Observation Remarks:** |
| **Visitability Waiver** |
| * I/We understand that the external accessibility/visitability features listed below are waived on my disaster impacted home.
* I/We further understand that the waiver will not be granted if a member of my household has a disability.
* The external visitability changes are explained:
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| GLO has reviewed the request and has made the following determination: | [ ]  Approved [ ] Denied [ ] N/A |
| **Lead Based Paint** |
| [ ] Yes [ ]  No [ ]  N/A | I have received a copy of the “Protect Your Family From Lead in Your Home” pamphlet. |
| [ ] Yes [ ]  No [ ]  N/A | I have received a copy of the “Lead-safe Certified Guide to ‘Renovate Right’”. |

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| **Signatures** |
| Under penalties of perjury, I certify that the information presented in this Affidavit is true and accurate to the best of my knowledge and belief. I further understand that providing false representations herein constitutes an act of fraud. False, misleading or incomplete information may result in my ineligibility to participate in Programs that will accept this Affidavit. Warning: Any person who knowingly makes a false claim or statement to HUD may be subject to civil or criminal penalties under 18 U.S.C. 287, 1001 and 31 U.S.C. 3729. |
| **Inspector’s Printed Name:** | **Date:** |
| **Inspector’s Signature:** |
| **Superintendent’s Printed Name:** | **Date:** |
| **Superintendent’s Signature:** |
| **Applicant’s Printed Name:** | **Date:** |
| **Applicant’s Signature:** |
| **Co-Applicant’s Printed Name:** | **Date:** |
| **Co-Applicant’s Signature:** |
| **Builder’s Printed Name:** | **Date:** |
| **Builder’s Signature:** |

\*\*Based upon IRC 2012, ADA 2010, HUD Housing Quality Standards and CDR Design Standards.

***Disclaimer:*** *The Texas General Land Office has made every effort to ensure the information contained on this form is accurate and in compliance with the most up-to-date CDBG-DR and/or CDBG-MIT federal rules and regulations, as applicable. It should be noted that the Texas General Land Office assumes no liability or responsibility for any error or omission on this form that may result from the interim period between the publication of amended and/or revised federal rules and regulations and the Texas General Land Office's standard review and update schedule.*