

REQUEST FOR INSPECTION

The general contractor or prime contractor shall fill out this form in order to request an inspection. This form shall be used for milestone inspections as the Work progresses or final inspections. Once it is filled out, the request shall be sent to Planning, Design and Construction in order to schedule an inspection. By requesting this inspection, the contractor is certifying that the project is ready for inspection. If at the time of inspection it is found that the Work is not ready for inspection, the Owner may charge the Contractor for all expenses related to the inspection and subsequent inspections. A minimum of 5 working days' notice must be given prior to the need for the request.

Upon completion, this form may be delivered to Planning, Design and Construction in the Burgess House, or emailed to DesignandConstruction@MissouriState.edu.

Project Name: _____

Project Number (Number as shown on the plans): _____

Building Name: _____

Contractor Name: _____

Inspection Requested by (Name): _____ **Email:** _____

Phone Number: _____ **Fax Number:** _____

Consultant: _____

Area to be inspected: _____

Date of Inspection Requested: _____ **Time:** _____

Work to be covered (mark all that apply):

- | | |
|---|---|
| <input type="checkbox"/> Site Utilities | <input type="checkbox"/> Voice / Data |
| <input type="checkbox"/> Underground / Under Slab | <input type="checkbox"/> Boiler / Pressure Vessel |
| <input type="checkbox"/> In Wall Rough-In | <input type="checkbox"/> Substantial Completion |
| <input type="checkbox"/> Above Ceiling | <input type="checkbox"/> Final Completion |
| <input type="checkbox"/> Elevators | <input type="checkbox"/> Other: _____ |

OFFICE USE ONLY: DO NOT WRITE IN SPACE BELOW

Project Manager: _____

Inspection Date Approved: _____ Time of Inspection: _____

Location (Where inspection begins): _____

Email Notification: _____