# FOUNDATION INSPECTION FORM

## INSPECTION INFORMATION

<table>
<thead>
<tr>
<th><strong>INSPECTION STATUS</strong></th>
<th>GREEN TAG</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>FINAL COMMENTS</strong></td>
<td>Ok</td>
</tr>
<tr>
<td><strong>INSPECTION DATE</strong></td>
<td>12-20-2018</td>
</tr>
<tr>
<td><strong>INSPECTION #</strong></td>
<td>130799</td>
</tr>
<tr>
<td><strong>NFD JOB #</strong></td>
<td>00/000000</td>
</tr>
<tr>
<td><strong>BUILDER NAME</strong></td>
<td>DAVID HUNT</td>
</tr>
<tr>
<td><strong>PROJECT STREET ADDRESS</strong></td>
<td>2140 N. HAMPTON ROAD</td>
</tr>
<tr>
<td><strong>SUBDIVISION</strong></td>
<td>-</td>
</tr>
<tr>
<td><strong>CITY</strong></td>
<td>DESOTO TX</td>
</tr>
<tr>
<td><strong>LOT</strong></td>
<td>-</td>
</tr>
<tr>
<td><strong>BLOCK</strong></td>
<td>-</td>
</tr>
<tr>
<td><strong>PLAN #</strong></td>
<td>106126.0</td>
</tr>
<tr>
<td><strong>BUILDING OCCUPANCY &amp; USAGE</strong></td>
<td>COMMERCIAL</td>
</tr>
<tr>
<td><strong>INSPECTION TYPE?</strong></td>
<td>PRE-POUR</td>
</tr>
<tr>
<td><strong>SLAB TYPE?</strong></td>
<td>POST TENSION</td>
</tr>
<tr>
<td><strong>RE-INSPECTION?</strong></td>
<td>NO</td>
</tr>
</tbody>
</table>

## OBSERVATIONS

| **FOUNDATION PLANS ON SITE?** | Yes            |
| **TREES & SHRUBBERY >20' AWAY?** | Yes            |
| **STRING LINE IN PLACE?**     | No             |
| **FORM BOARDS STRAIGHT & BRACED?** | Yes            |
| **FIRE PAD INSTALLED CORRECTLY?** | Yes            |
| **BEAM WIDTH?**               | 12              |
| **BEAM DEPTH?**               | 26              |
| **BEAM WATER FREE?**          | Yes             |
| **BEAMS CAVE-IN FREE?**       | Yes             |
| **BEAMS SPACED PER PLANS?**   | Yes             |
| **REBAR INSTALLED CORRECTLY?** | Yes             |
| **# OF HORIZONTAL CABLES?**   | 21              |
| **# OF VERTICAL CABLES?**     | 35              |
## Foundation Inspection Form

<table>
<thead>
<tr>
<th>Item</th>
<th>Status</th>
</tr>
</thead>
<tbody>
<tr>
<td>Cables installed per plans?</td>
<td>Yes</td>
</tr>
<tr>
<td>Cables free of damage?</td>
<td>Yes</td>
</tr>
<tr>
<td>Cables chaired properly?</td>
<td>Yes</td>
</tr>
<tr>
<td>Cables properly draped &amp; doweled?</td>
<td>Yes</td>
</tr>
<tr>
<td>Anchors secured per plans?</td>
<td>Yes</td>
</tr>
<tr>
<td>Cables chaired off plumbing?</td>
<td>N/A</td>
</tr>
<tr>
<td>Cushion sand allows slab thickness?</td>
<td>Yes</td>
</tr>
<tr>
<td>Beam steel correct?</td>
<td>Yes</td>
</tr>
<tr>
<td>Slab steel correct?</td>
<td>Yes</td>
</tr>
<tr>
<td>Steel have proper support?</td>
<td>Yes</td>
</tr>
<tr>
<td>Steel have proper coverage?</td>
<td>Yes</td>
</tr>
<tr>
<td>Is there a grounding electrode?</td>
<td>No</td>
</tr>
<tr>
<td><strong>Type:</strong></td>
<td>Ground Rod</td>
</tr>
<tr>
<td><strong>Size:</strong></td>
<td>0</td>
</tr>
<tr>
<td><strong>Cable color?</strong></td>
<td>Black</td>
</tr>
</tbody>
</table>

## Inspection Status

**Inspection Status:** Green Tag

## Client Contact Information

**Client Name:** David  
**Phone Number:** (214) 236-2273  
**Concrete Provider:** Builder  
**Email Address:** david@omcdfw.com

## Inspector Information

**Name:** William  
**Phone Number:** (817) 773-3720  
**Email Address:** inspector2@nortexfoundation.com

## Sign Off

**Final Comments:** Ok

**Legal Information:** By my signature below, I certify that the information provided above is true, accurate, and complete at the date provided at the top of this form.
FOUNDATION INSPECTION FORM

INSPECTOR SIGNATURE

[Signature]

[Address]
4416 KELLER HICKS ROAD
FORT WORTH, TX 76244
PH. 817-379-0866
INSPECTIONS@NORTEXFOUNDATION.COM
FOUNDATION INSPECTION FORM

INSPECTION INFORMATION

INSPECTION STATUS  GREEN TAG
FINAL COMMENTS  Ok
INSPECTION DATE  01-25-2019
INSPECTION #  131135
NFD JOB #  00/00000
BUILDING NAME  ACCESS SELF STORAGE
PROJECT STREET ADDRESS  2140 N. HAMPTON
SUBDIVISION  N/A
CITY  DESOTO TX
LOT  -
BLOCK  -
PLAN #  APARTMENT
BUILDING OCCUPANCY & USAGE  RESIDENTIAL
INSPECTION TYPE?  PRE-POUR
SLAB TYPE?  REBAR
RE-INSPECTION?  NO

OBSERVATIONS

FOUNDATION PLANS ON SITE?  Yes
TREES & SHRUBBERY >20' AWAY?  Yes
STRING LINE IN PLACE?  No
FORM BOARDS STRAIGHT & BRACED?  Yes
FIRE PAD INSTALLED CORRECTLY?  Yes
BEAM WIDTH?  12
BEAM DEPTH?  24
BEAM WATER FREE?  Yes
BEAMS CAVE-IN FREE?  Yes
BEAMS SPACED PER PLANS?  Yes
REBAR INSTALLED CORRECTLY?  Yes
CUSHION SAND ALLOWS SLAB THICKNESS?  Yes
BEAM STEEL CORRECT?  Yes
FOUNDATION INSPECTION FORM

SLAB STEEL CORRECT?  Yes
STEEL HAVE PROPER SUPPORT?  Yes
STEEL HAVE PROPER COVERAGE?  Yes
IS THERE A GROUNDING ELECTRODE?  No

TYPE:  GROUND ROD
SIZE  0

INSPECTION STATUS
INSPECTION STATUS  GREEN TAG

CLIENT CONTACT INFORMATION
CLIENT NAME  DAVID
PHONE NUMBER  (214) 236-2273
CONCRETE PROVIDER  OMC
EMAIL ADDRESS  DAVID@OMCDFW.COM

INSPECTOR INFORMATION
NAME  William
PHONE NUMBER  (817) 773-3720
EMAIL ADDRESS  inspector2@nortexfoundation.com

SIGN OFF
FINAL COMMENTS  Ok
LEGAL INFORMATION  By my signature below, I certify that the information provided above is true, accurate, and complete at the date provided at the top of this form.

INSPECTOR SIGNATURE  [Signature]
FOUNDATION INSPECTION FORM

INSPECTION INFORMATION

INSPECTION STATUS           GREEN TAG
FINAL COMMENTS              Ok
INSPECTION DATE             01-09-2019
INSPECTION #                130928
NFD JOB #                   00/000000
BUILDER NAME                ACCESS SELF STORAGE
PROJECT STREET ADDRESS      2140 N. HAMPTON RD

CITY                        DESOTO TX
LOT                         -
BLOCK                       -
PLAN #                      BUILDING E
BUILDING OCCUPANCY & USAGE  COMMERCIAL
INSPECTION TYPE?            PRE-POUR
SLAB TYPE?                  POST TENSION
RE-INSPECTION?              NO

OBSERVATIONS

FOUNDATION PLANS ON SITE?   Yes
TREES & SHRUBBERY >20' AWAY? Yes
STRING LINE IN PLACE?       No
FORM BOARDS STRAIGHT & BRACED? Yes
FIRE PAD INSTALLED CORRECTLY? Yes
BEAM WIDTH?                 12
BEAM DEPTH?                 24
BEAM WATER FREE?            Yes
BEAMS CAVE-IN FREE?         Yes
BEAMS SPACED PER PLANS?     Yes
REBAR INSTALLED CORRECTLY?   Yes
# OF HORIZONTAL CABLES?     14
# OF VERTICAL CABLES?       42
FOUNDATION INSPECTION FORM

CABLES INSTALLED PER PLANS? Yes
CABLES FREE OF DAMAGE? Yes
CABLES CHAIRED PROPERLY? Yes
CABLES PROPERLY DRAPED & DOWELED? Yes
ANCHORS SECURED PER PLANS? Yes
CABLES CHAIRED OFF PLUMBING? Yes
CUSHION SAND ALLOWS SLAB THICKNESS? Yes
BEAM STEEL CORRECT? Yes
SLAB STEEL CORRECT? Yes
STEEL HAVE PROPER SUPPORT? Yes
STEEL HAVE PROPER COVERAGE? Yes
IS THERE A GROUNDING ELECTRODE? No
TYPE: GROUND ROD
SIZE 0
CABLE COLOR? BLACK

INSPECTION STATUS
INSPECTION STATUS GREEN TAG

CLIENT CONTACT INFORMATION
CLIENT NAME DAVID
PHONE NUMBER (214) 236-2273
CONCRETE PROVIDER OMC
EMAIL ADDRESS DAVID@OMCDFW.COM

INSPECTOR INFORMATION
NAME William
PHONE NUMBER (817) 773-3720
EMAIL ADDRESS inspector2@nortexfoundation.com

SIGN OFF
FINAL COMMENTS Ok

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[Signature]

[Company Logo]
FOUNDATION INSPECTION FORM

INSPECTION INFORMATION

INSPECTION STATUS  GREEN TAG
FINAL COMMENTS  Ok
INSPECTION DATE  01-25-2019
INSPECTION #  131135
NFD JOB #  00/000000
BUILDING NAME  ACCESS SELF STORAGE
PROJECT STREET ADDRESS  2140 N. HAMPTON
SUBDIVISION  N/A
CITY  DESETO TX
LOT
BLOCK
PLAN #  BLDG D
BUILDING OCCUPANCY & USAGE  COMMERCIAL
INSPECTION TYPE?  PRE-POUR
SLAB TYPE?  POST TENSION
RE-INSPECTION?  NO

OBSERVATIONS

FOUNDATION PLANS ON SITE?  Yes
TREES & SHRUBBERY >20' AWAY?  Yes
STRING LINE IN PLACE?  No
FORM BOARDS STRAIGHT & BRACED?  Yes
FIRE PAD INSTALLED CORRECTLY?  Yes
BEAM WIDTH?  12
BEAM DEPTH?  24
BEAM WATER FREE?  Yes
BEAMS CAVE-IN FREE?  Yes
BEAMS SPACED PER PLANS?  Yes
REBAR INSTALLED CORRECTLY?  Yes
# OF HORIZONTAL CABLES?  19
# OF VERTICAL CABLES?  12
FOUNDATION INSPECTION FORM

CABLES INSTALLED PER PLANS? Yes
CABLES FREE OF DAMAGE? Yes
CABLES CHAIERED PROPERLY? Yes
CABLES PROPERLY DRAPED & DOWELED? Yes
ANCHORS SECURED PER PLANS? Yes
CABLES CHAIERED OFF PLUMBING? N/A
CUSHION SAND ALLOWS SLAB THICKNESS? Yes
BEAM STEEL CORRECT? Yes
SLAB STEEL CORRECT? Yes
STEEL HAVE PROPER SUPPORT? Yes
STEEL HAVE PROPER COVERAGE? Yes
IS THERE A GROUNDING ELECTRODE? No
TYPE: GROUND ROD
SIZE 0
CABLE COLOR? BLACK

INSPECTION STATUS
INSPECTION STATUS GREEN TAG

CLIENT CONTACT INFORMATION
CLIENT NAME DAVID
PHONE NUMBER (214) 236-2273
CONCRETE PROVIDER OMC
EMAIL ADDRESS DAVID@OMCDEFW.COM

INSPECTOR INFORMATION
NAME William
PHONE NUMBER (817) 773-3720
EMAIL ADDRESS inspector2@nortexfoundation.com

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INSPECTOR SIGNATURE

W. Preston