CITY OF LAKE STATION

1969 Central Avenue Lake Station, IN 46405 (219) 850-1331

INSPECTION REQUEST

PHONE NUMBER:	RE-INSPECTION FEE:
_____	$_____

DATE	TIME RECEIVED	INSPECTION RE-INSPECTION	REQUESTED BY	PERMIT NUMBER

- ☐ P/P FTG
- ☐ FTG
- ☐ FOUND
- ☐ CRAWL
- ☐ SLAB
- ☐ BASEMENT

- ☐ ROUGH BUILDING
- ☐ ROUGH ELECTRICAL
- ☐ ROUGH PLMG
- ☐ ROUGH HVAC
- ☐ INSULATION
- ☐ FIREPLACE

- ☐ ELECTRIC SERVICE
- ☐ UNDGND PLMG
- ☐ UNDGND ELEC
- ☐ UNDGND HVAC
- ☐ METER SET
- ☐ _____

- ☐ FINAL BUILDING
- ☐ FINAL ELECTRIC
- ☐ FINAL PLMG
- ☐ FINAL HVAC
- ☐ FULL RELEASE
- ☐ TEMP RELEASE

PROJECT ADDRESS	SUBDIVISION	LOT #

COMMENTS:

_____
_____
_____
_____
_____
_____
_____
_____

INSPECTION RESULTS

PASS **FAIL** **STOP WORK ORDERED**

REASON FOR FAIL/STOP WORK

_____
_____
_____
_____
_____
_____

_____ _____ _____

Owner/Representative/Contractor **Owner/ Representative Printed Name** **Date**

INSPECTION MADE:

AM
PM

_____ _____

DATE **TIME** **INSPECTOR SIGNATURE**