

**City of Belleair Bluffs**

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<http://safebuilt.com/locations/florida-gulf-coast-office>**PRIVATE PROVIDER INSPECTION REPORT**

Permit Number: \_\_\_\_\_



*(Must be filled out completely, incomplete reports will not be accepted by the Town)*

At the completion of each inspection the private provider shall:

Post each completed inspection record on the Permit Card posted on site, indicating pass or fail. The “private provider” shall also provide the record on this form to the local Building Official. The original certified inspection must be hand delivered, mailed, or electronically delivered via email; faxes are not acceptable. These inspection records shall reflect those inspections required by the applicable codes of each phase of construction for which permitting by the building department is required.

Permit # \_\_\_\_\_ Date \_\_\_\_\_

Site Address \_\_\_\_\_

Inspection Report #: \_\_\_\_\_ Inspection Date \_\_\_\_\_

Owner Name \_\_\_\_\_

Private Provider \_\_\_\_\_

Contractor \_\_\_\_\_

Inspection Code \_\_\_\_\_ Inspection Type \_\_\_\_\_

**Inspection Result:**

1. Passed

2. Partial Pass

3. Fail

4. Cancelled

Comments: \_\_\_\_\_

*To the best of my knowledge and belief, the building components and site improvements outlined herein and inspected under my authority have been completed in conformance with the approved plans and applicable codes.*

By: \_\_\_\_\_ License # \_\_\_\_\_  
(Print Name)

Certified \_\_\_\_\_ (Signature)