

Notice to County of El Paso of Completion of Residential Construction or Improvements

Complete and submit this Notice within 10 days after the final inspection to both the County of El Paso and the person for whom the work is being done.

A. General	Information	
1.	Construction Address:	
2.	Property Owner:	_
3.	Legal Description:	_
		 _
4.	Mailing Address:	 _
5.	Daytime Phone No.	 _
6.	Alternate Phone No.	 _
B. Foundat	tion Inspection	
Nar	ne of Company	
Cor	mpany Address	
Day	ytime Phone No.	
Alte	ernate Phone No.	
1.	Date Inspected:	
2.	Inspector's Name (printed):	
3.	Inspector's License No.:	
4.	Inspector's Signature:	
5.	Inspection Results:	
	Date Completed:	
	Passed:	
	Failed:	
	Other / Comments:	

C. Framing and Mechanical Systems Inspections (Must be done prior to drywall) Name of Company Company Address Daytime Phone No. Alternate Phone No. 1. Date Inspected: 2. Inspector's Name (printed): 3. Inspector's License No.: 4. Inspector's Signature: 5. Inspection Results: Date Completed: Passed: Failed: Other / Comments: D. Construction Completion Name of Company Company Address Daytime Phone No. Alternate Phone No. 1. Date Inspected: 2. Inspector's Name (printed): 3. Inspector's License No.: 4. Inspector's Signature: 5. Inspection Results: Date Completed: Passed: Failed: Other / Comments:

Received by County of El Paso		
Date:	Employee:	