



PROVISIONAL OCCUPANCY GUIDELINE SINGLE FAMILY DWELLING

BUILDING PERMIT NO. _____

REQ'D INSPECTIONS COMP YES NO N/A

Septic Use Approval	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Footing	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Foundation drainage	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Plumbing rough-in	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Framing:	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Insulation:	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
HVAC rough-in	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Fireplace / Woodstove	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Rough grading	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Provisional Occupancy	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Final grading, OLS, P.Eng approval	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

REQUIRED – MISC. YES NO N/A

Electrical, heat, water & sewer	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Plumbing fixtures	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Note ESA for final	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Handrails / Guards / Stairs	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Headroom – stairs , bulkheads	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
1- w/c, basin, tub working	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

SMOKE/CO YES NO N/A

One each bedroom / Hallway if required	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Visual signaling component	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
CO ² Detectors near sleeping rooms	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
One each floor	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Test Smoke Alarm & Interconnected	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

EXTERIOR YES NO N/A

Civic Address	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Finishes/Caulk./Vent./Flash	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Principal entrance complete	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Doors (deadbolt / door viewer)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Entrance lights installed	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Exhaust hoods installed /proper height	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Backflow preventers on hose bibs	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Clearance to grade	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

DECK YES NO N/A

Installed	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Doors guarded if no deck	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

GARAGE YES NO N/A

Fume Proofed/Caulk./Sealed	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Door Closer / Door Seal/ Main & Base	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Deadbolt installed (door(s) to dwelling)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

ABOVE GROUND STORIES YES NO N/A

Attic Insulation (Certificate & Visual)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Attic Access (Weather-stripped) (20X28)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Stairs Lighted (3 way if Fin. Basement)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Trap Under Sink & c/o after trap?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Clearance over range 2'-6" w/o hood	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Clearance over range 2' w/ hood	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Adjacent cabinets 18" sq. on sides	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Interior finishes comp. to protect insul.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

BASEMENT OR CRAWLSPACE YES NO N/A

Finished or unfinished basement	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Light switch at top if unfinished basement	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Bdrm. Window (3.8 sq. ft. openable)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Cold room (Exterior door & vented)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
4" Cleanout ABS	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Protection of foamed plastics	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

MECHANICAL ROOM YES NO N/A

2017 DHWT Efficiency match EEDS	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
3/4" supply to DHWT	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
18" copper from DHWT if pex used	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Water Temp. Control 49°C	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Insulation on outlet side R3.5 for 2.5m	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
H.W.T. Blowdown (min 6" to max 12")	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Floor Drain	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Furnace Fan Switch Central Location	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Supply/ return grilles installed	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Finished basement SA to floor	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
HRV Balanced and drain looped	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
R8 for HRV supply exceeding 3m	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Condensate drains connected	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Sump pit sealed – discharge support	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Sewage pit sealed – discharge support	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
DWHR (required/capable ?) installed	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

WATER Requirements YES NO N/A

Potable water test (Well water)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Water Meter Installed (Sealed)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

CRAWLSPACE YES NO N/A

Ground Cover on Floor	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Access Provided	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Ventilation of Crawlspace	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Insulation Floor / Walls	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Crawl space access 20 x 28	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Date: _____

Inspector: _____