CITY OF CANNON BEACH BUILDING DEPARTMENT P.O. Box 368 163 East Gower Street CANNON BEACH, OREGON 97110

(503) 436-2045 FAX (503) 436-2050

Inspection Request & Report



INSPECTION REQUEST				
Date Requested:	Time	:	Type of Inspection	1:
☐ Electrical ☐ Pluml	bing	☐ Structural	☐ Mechanical [☐ Manufactured Home
Permit No.:	Owner:			
Contractor:		Job Address:		
Directions:				
Ready:	M on.	. Tues. Wed.	☐ Thurs. ☐ Fri.	□ a.m. □ mid □ p.m.
Call before coming?				
INSPECTION REPORT				
Date Inspected:	Time		Type of inspection	1:
☐ Unable to inspect ☐ No corrections noted ☐ Correction(s) expected within days				
Inspection report no Correction(s) noted: (Pg of)				
Reinspection required prior to approval OK to continue after corrections made				
Owner/Contractor sign below indicating all corrections made and return to inspector				
Signature:				
☐ Call for reinspection				
Inspector:		Sign	ature:	

White - Job Site Yellow - Office