



Florida State College at Jacksonville

Inspection Report

Inspection Report #:				Date of Inspection:					
Project Name:									
FSCJ Project Number:				Permit Number:					
Time of Visit:				Temperature/Weather:					
Final Inspection:	Yes		No		Inspection:	Pass		Fail	
Inspector:				Inspector's Signature:					

Progress:	% Complete:	Comments:

Compliance:

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Quality:

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Contractor/Subcontractors:	No. of People:	Comments/Photographs