

BENTON PUD FINAL INSPECTION CHECKLIST (REEP)
Single Family & Manufactured

Homeowner Name: _____ Phone: _____
 Service Address: _____ Date of Insp: _____
 Contractor Name: _____ Phone: _____
 Structure Type: ___ Single Family ___ Manufactured

General Program Specifications-

- 1. Applicable Codes Met ___ P ___ F _____
- 2. Permanent Housing ___ P ___ F _____
- 3. Workmanlike Install ___ P ___ F _____
- 4. Installation Certificate ___ P ___ F _____
- 5. Exhaust Fan Extension ___ P ___ F _____
- 6. Knob and Tube ___ P ___ F _____
- 7. Accessible gaps sealed ___ P ___ F _____
- 8. M/H Comb Appliance ___ P ___ F _____
- 9. Approved Materials ___ P ___ F _____
- 10. Sound Bldg Structure ___ P ___ F _____
- 11. CO Detector ___ P ___ F _____
- 12. Human Contact areas ___ P ___ F _____
- 13. Fire Barriers as reqrd ___ P ___ F _____
- 14. Approved Caulking ___ P ___ F _____
- 15. Warranty rcv'd by HP ___ P ___ F _____

Ceiling Insulation-

- 1. Correct R-Value ___ P ___ F _____
- 2. Knee Walls R-Value ___ P ___ F _____
- 3. Knee Walls Covered ___ P ___ F _____
- 4. Ducts Insulated ___ P ___ F _____
- 5. Access Lids R-30 ___ P ___ F _____
- 6. Water Pipes Insulated ___ P ___ F _____
- 7. Vapor Barrier Location ___ P ___ F _____
- 8. Proper Ventilation ___ P ___ F _____
- 9. Heat Prod Fixtures ___ P ___ F _____
- 10. Chimney Clearance ___ P ___ F _____
- 11. Kitchen and Bath Fans ___ P ___ F _____
- 12. Insulation Dams ___ P ___ F _____
- 13. Depth Rulers/300 sf ___ P ___ F _____
- 14. Correct Sq Ft on Bid ___ P ___ F _____

Under Floor Insulation-

- 1. Correct R-Value ___ P ___ F _____
- 2. MH Floor at least R-22 ___ P ___ F _____
- 2. Access lids R-19 ___ P ___ F _____
- 3. Ducts Insulated ___ P ___ F _____
- 4. Pony Walls R-Value ___ P ___ F _____
- 5. Water Pipes Insulated ___ P ___ F _____
- 6. Contact with Floor ___ P ___ F _____
- 7. Properly Supported ___ P ___ F _____
- 8. Vapor Barrier ___ P ___ F _____
- 9. Ground Cover ___ P ___ F _____
- 10. Protection for Exp Ins ___ P ___ F _____
- 11. Ventilation ___ P ___ F _____
- 12. Correct Sq Ft on Bid ___ P ___ F _____

Duct Insulation-

- 1. R-11, Comp Coverage P F _____
- 2. Ducts Supported P F _____
- 3. Joints Sealed w/ Mastic P F _____
- 4. Flame Spread Facing P F _____
- 5. Human Contact Areas P F _____
- 6. Insulation Supported P F _____

Unfinished Wall Insulation-

- 1. Proper R-value P F _____
- 2. Vapor Barrier P F _____
- 3. Complete coverage P F _____
- 4. Correct Sq Ft on Bid P F _____
- 5. No Fbrgl below grade P F _____

Wall Cavity Insulation- (Blow-In)

- 1. Proper R-value P F _____
- 2. Empty Cavity Avail P F _____
- 3. Insert Tube Method P F _____
- 4. Cavities Comp filled P F _____
- 5. Cavs w/ Pipes & Htrs P F _____
- 6. Switch boxes clear P F _____
- 7. Holes Plugged P F _____
- 8. Non-Combustible@FPs P F _____
- 9. Correct Sq Ft on Bid P F _____

Prescriptive Air Sealing-

- 1. Access W/stripped P F _____
- 2. Registers Sealed P F _____
- 3. Proper Sealing Mtrls P F _____
- 4. Chases Sealed P F _____
- 5. Non-IC Cans Shielded P F _____
- 6. Can Lights Caulked P F _____
- 7. Exhaust Fans Sealed P F _____
- 8. Registers Sealed P F _____
- 9. Elec & Plumbing Pens P F _____
- 10. Top Plates P F _____
- 11. Thermal By-Passes P F _____
- 12. CO Detector P F _____

Windows-

- 1. Approved U-Value P F _____
- 2. Flashing correct P F _____
- 3. Access weight void insul P F _____
- 4. No increase in area P F _____
- 5. Correct Sq Ft on pprwk P F _____
- 6. Safety Glass if needed P F _____
- 7. Safety Glass marked P F _____
- 8. No free fall danger P F _____
- 9. Security latches P F _____
- 10. Proper labeling P F _____

Comments: _____

Inspector: _____ P F Reinsp? Y N Approval Date: _____