



\*This form must be completed by the **District's Licensed Inspector**. A signed and dated original must be submitted to Emerald Bay Municipal Utility District Office at the address below for record keeping purposes.

## **PLUMBING FINAL INSPECTION REPORT**

PWS I.D. Number: 2120105

Inspection Permit Number: \_\_\_\_\_

Name of Contractor: \_\_\_\_\_

Phone Number: \_\_\_\_\_

Name of Owner: \_\_\_\_\_

Phone Number: \_\_\_\_\_

Address of Construction: \_\_\_\_\_ Bullard, Texas 75757

### **REASON FOR INSPECTION**

☐ New construction

☐ Major renovation or expansion

### **RESULTS OF INSPECTION**

I certify that I have inspected the facilities located at the address above. Violations, if any, are noted in the check list section of this report.

☐ Approved

☐ Stop work

☐ Re-Inspection required

☐ Approved with corrections

This document, once approved in the section above, will become a permanent record of the Emerald Bay Municipal Utility District permanent records.

Name of Inspector: \_\_\_\_\_ Phone Number: \_\_\_\_\_

Address: \_\_\_\_\_ Cell Number: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Remarks: \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

Inspector Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Registration Number: \_\_\_\_\_ Type of Registration: \_\_\_\_\_

Distribution: To File  
Builder