



**City of Charleston
Inspections Division**

INSPECTION REQUEST FORM

Please Send Requests to - inspections@charleston-sc.gov
Online Inspection Status Viewer - gis.charleston-sc.gov/inspections

It shall be the duty of the person performing the work authorized by a permit to notify the City that such work is ready for inspection. It shall be the duty of the permit holder requesting any inspections required by this code to provide access to and means for inspection of such work. Inspection requests submitted before noon will be scheduled for the next business day. Inspection requests submitted after noon will be scheduled the 2nd business day. Inspection requests are to be made by the permit holder.

Date of Request _____ Desired Date _____ Permit Number _____

Project Address (To Be Inspected) _____

Requested By _____ Company Name _____

Telephone Number _____ Email _____

Peninsula (Downtown) West Ashley Daniel Island James Island John's Island

Commercial Residential

TYPE OF INSPECTION

BUILDING	ELECTRICAL	PLUMBING	MECHANICAL	GAS	FIRE
<input type="checkbox"/> Found/Footing	<input type="checkbox"/> Under Ground	<input type="checkbox"/> Rough/TPO	<input type="checkbox"/> Rough	<input type="checkbox"/> Rough	<input type="checkbox"/> Sprinkler Underground
<input type="checkbox"/> Foundation Wall	<input type="checkbox"/> Rough	<input type="checkbox"/> Slab	<input type="checkbox"/> Hood	<input type="checkbox"/> Safety	<input type="checkbox"/> Sprinkler Rough
<input type="checkbox"/> Slab	<input type="checkbox"/> Slab	<input type="checkbox"/> Sewer	<input type="checkbox"/> Change Out	<input type="checkbox"/> Temp Gas Release	<input type="checkbox"/> Sprinkler Hydro
<input type="checkbox"/> Pile	<input type="checkbox"/> Safety	<input type="checkbox"/> Final	<input type="checkbox"/> Final	<input type="checkbox"/> Final	<input type="checkbox"/> Sprinkler Final
<input type="checkbox"/> Bond Beam	<input type="checkbox"/> Pool Bonding	<input type="checkbox"/> Other	<input type="checkbox"/> Other	<input type="checkbox"/> Other	<input type="checkbox"/> Hood Suppression
<input type="checkbox"/> Sheathing	<input type="checkbox"/> Pool Grounding				<input type="checkbox"/> Fire Alarm Rough
<input type="checkbox"/> Fire Rough	<input type="checkbox"/> Temporary Pole				<input type="checkbox"/> Fire Alarm Final
<input type="checkbox"/> Framing	<input type="checkbox"/> Temp Power Release				<input type="checkbox"/> Fire Building Final
<input type="checkbox"/> Above Ceiling	<input type="checkbox"/> Final				<input type="checkbox"/> Other
<input type="checkbox"/> Insulation	<input type="checkbox"/> Other				
<input type="checkbox"/> Final					
<input type="checkbox"/> Other					

COMMENTS _____
