



Forsyth County Third Party Inspector Report
E-Mail – Inspectionschedules@forsythco.com

Date of Inspection: _____ Time of Inspection: _____

Name of Principal Engineer: _____

Name of Inspector(s): _____

Company Name: _____ Company Phone: _____

Job Site Information

Building Permit #: _____ Subdivision/Project Name: _____

Site Address: _____

Phase/Unit/Suite: _____ Lot: _____ Builder Name: _____

- ___ The above-name company has verified with the Forsyth County Building and Licensing Department that there are no “holds” of any kind, requirements for “house location plans” or other stipulations that would prevent an inspection:
- ___ Construction does not encroach on either the minimum required building setback distance from property line, stream buffer per state and local requirements, or any utility/storm easement as determined by resources available to the inspector including but not limited to a survey prepared by: (If a survey is referenced, provide a copy)

(Printed name of surveyor and/or field measurements.)

Date

Type of inspection (describe): _____

Inspection Results:

- ___ Passed
___ Failed (**Report required to be attached**)
___ Contact Forsyth County Inspections

Comments: _____

Complete documentation shall be attached for all field corrections.

| | | | |
|--------------------------|-------|-----------------------|-------|
| Inspector's Printed Name | _____ | Inspector's Signature | _____ |
| Inspector's Printed Name | _____ | Inspector's Signature | _____ |
| Inspector's Printed Name | _____ | Inspector's Signature | _____ |
| Inspector's Printed Name | _____ | Inspector's Signature | _____ |