

***Owner Occupied Rehabilitation Project  
Field Inspection Report  
(Detail attached)***

**PROJECT SITE:**  
(address)

**FIELD INSPECTION NO.:** \_\_\_\_\_  
**PROJECT NUMBER:** \_\_\_\_\_  
**CONTRACT DATE:** \_\_\_\_\_  
**CONTRACT FOR:** \_\_\_\_\_  
(HOME, CDBG, OTHER)

**CONTRACTOR:**  
(name and address)

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**Date of Inspection:** \_\_\_\_\_

**Beginning Time:** \_\_\_\_\_ **Ending Time:** \_\_\_\_\_

**Weather Conditions:**

**Attachments (example: photos, draw schedule):**

**Persons Present:**

**Observations:**

**Corrective Items:**

**Concerns:**

**By:** \_\_\_\_\_

**Date:** \_\_\_\_\_