



## SUMMARY OF BUILDING INSPECTIONS Site-Built Residential Construction

Owner of Record: \_\_\_\_\_

Owner of Record is:  Owner-Builder  Licensed Residential Contractor

Legal Description: \_\_\_\_\_  
(Include Recording District)

Site Address: \_\_\_\_\_

This certification is issued pursuant to the requirements of AS 18.56.300 and Alaska Housing Finance Corporation (AHFC) regulations 15 AAC 150.030. Use of alternate methods, such as videos, must have prior written approval of AHFC.

By my signature below, I certify I have the current, applicable certifications of authority. I am not personally or financially related to the builder, seller, buyer, real estate agent, or other interested party for this project, other than as a fee inspector. I certify that all inspections have been completed pursuant to the requirements of 15 AAC 150.035, including Section .04 Part B. of the AHFC New Construction Inspections Guidelines, per the standards adopted by 15 AAC 155.010

### 1. Plan Approval

Printed Name Signature License No.\* Date

### 2. Completion of Footings & Foundation

Printed Name Signature License No.\* Date

Footings \_\_\_\_\_

Foundation \_\_\_\_\_

### 3. Completion Of Framing, Electrical, Plumbing & Mechanical

Printed Name Signature License No.\* Date

Framing \_\_\_\_\_

Electrical \_\_\_\_\_

Plumbing \_\_\_\_\_

Mechanical \_\_\_\_\_

Recorder: Index by Legal, Owner and Builder

Return to: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

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Legal Description: \_\_\_\_\_

**4. Completion of Installation of Insulation & Vapor Barrier**

<u>Printed Name</u>	<u>Signature</u>	<u>License No.*</u>	<u>Date</u>
_____	_____	_____	_____

**5. Conditional Approval**

Items to be completed: \_\_\_\_\_  
\_\_\_\_\_ To Be Completed By: \_\_\_\_\_

<u>Printed Name</u>	<u>Signature</u>	<u>License No.*</u>	<u>Date</u>
_____	_____	_____	_____

**6. Final Approval**

<u>Printed Name</u>	<u>Signature</u>	<u>License No.*</u>	<u>Date</u>
_____	_____	_____	_____

\* License No. is the inspector's Registration # under AS 08.18 and 12 AAC 22

**CONTRACTOR'S CERTIFICATION**

Under penalty of perjury, by my signature below, I certify that the required inspections have been completed and the building meets or exceeds standards set forth under AS 18.56.300 and 15 AAC 150.030. I also certify that any/all engineered components are currently listed with the International Code Council (ICC) and to my knowledge there has been no action to rescind ICC approval. I further certify that the information below is true and correct.

Builder's Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Builder's Name: \_\_\_\_\_ License No.: \_\_\_\_\_  
(if applicable)

Residential Endorsement No.: \_\_\_\_\_ Dated: \_\_\_\_\_

Business Name: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ ZIP Code: \_\_\_\_\_

Before me, a Notary Public in and for the State of Alaska, \_\_\_\_\_  
has executed the foregoing document of his/her own free will.

\_\_\_\_\_  
Notary Signature

My Commission Expires: \_\_\_\_\_

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Legal Description: \_\_\_\_\_

**4. Completion of Installation of Insulation & Vapor Barrier**

<u>Printed Name</u>	<u>Signature</u>	<u>License No.*</u>	<u>Date</u>
_____	_____	_____	_____

**5. Conditional Approval**

Items to be completed: \_\_\_\_\_

\_\_\_\_\_ To Be Completed By: \_\_\_\_\_

<u>Printed Name</u>	<u>Signature</u>	<u>License No.*</u>	<u>Date</u>
_____	_____	_____	_____

**6. Final Approval**

<u>Printed Name</u>	<u>Signature</u>	<u>License No.*</u>	<u>Date</u>
_____	_____	_____	_____

\* License No. is the inspector's Registration # under AS 08.18 and 12 AAC 22

**EXEMPT BUILDER'S CERTIFICATION**

Under penalty of perjury, by my signature below, I certify that the required inspections have been completed and to the best of my knowledge the building meets or exceeds standards set forth under AS 18.56.300 and 15 AAC 150.030 and that I qualify as an exemption under AS 08.18.161. If I am an owner-builder under AS 08.18.161(11), I further certify that I have not built a single family building, duplex, triplex, fourplex or commercial building within the prior two years.

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

Name: \_\_\_\_\_

Business Name: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ ZIP Code: \_\_\_\_\_

Before me, a Notary Public in and for the State of Alaska, \_\_\_\_\_  
has executed the foregoing document of his/her own free will.

\_\_\_\_\_  
Notary Signature

My Commission Expires: \_\_\_\_\_

Recorder: Index by Legal, Owner and Builder

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