

SC HTF Home Repair HTF-2A Inspection Request Form

Date of Request:	1	
SC HTF Award #:		
Sponsor Name:	Contact:	
E-mail:		
Alternate Contact		
Contact #2:	Cell#:	
Contact #3:		
Project Information		
Beneficiary Name:	Phone/ Cell#:	
Address:	E-mail:	
City, State, Zip:	County:	
Number of Household Members:		
Inspection Type: □ Property Assessment Inspection □ Preliminary Scope of □ Quality Control □ Interim Draw Inspection # Percentage Complete % □ Change Order Review # Desk Review	☐ Revised Scope of Work Inspection #	
Attachments: ☐ HTF-2B Work Write-Up ☐ HTF-2C Change Order Re ☐ HTF-2E SC Housing Essential Property Standards Checklis ☐ HTF-4B Draw Summary Form ☐ HTF-4C Certification ☐ HTF-1B Hazardous Materials Affidavit ☐ HTF-5A Receipt of the Small Entity Compliance Guide ☐ HTF-5B Receipt of Pre-Renovation Hazardous Materials T☐ HTF-5C Receipt of EPA's Safe Guide to Renovate Right ☐ HTF-5D Receipt of Post-Renovation Hazardous Materials T☐ HTF-5D Receipt of Post-Renovation Hazardous Materials T☐ Photographs ☐ Paid Invoices ☐ Other	st	
Authority Use Only		
Program Coordinator:	Inspector:	
Date Processed for Inspection:	Date of Inspection:	
Inspection has been: ☐ Approved ☐ Denied		
Inspectors Signature:		