

NEW HOME CONSTRUCTION FINAL INSPECTION

Cassique Architectural Review Board • 7 Beachwalker Drive, Building #8 • Kiawah Island, SC 29455 • 843-768-3419 • 843-768-0517 (fax)

Address of Project _____

Owner _____

Contractor _____

Architect _____

Inspected by _____

As Built Survey with Setbacks and Lot Coverage Percentage Yes No

Homeowners' Association Approval Yes No

Landscape Certification Yes No

Photographs of All Four Sides of Completed House Yes No

YES NO

I. GENERAL

COMMENTS

- | | | | |
|--------------------------|--------------------------|---|-------|
| <input type="checkbox"/> | <input type="checkbox"/> | Sign Removed | _____ |
| <input type="checkbox"/> | <input type="checkbox"/> | Toilet Removed | _____ |
| <input type="checkbox"/> | <input type="checkbox"/> | Dumpster Removed | _____ |
| <input type="checkbox"/> | <input type="checkbox"/> | Debris Removed | _____ |
| <input type="checkbox"/> | <input type="checkbox"/> | Light Pole Removed | _____ |
| <input type="checkbox"/> | <input type="checkbox"/> | Mailbox Installed/Stained (bolt included) | _____ |
| <input type="checkbox"/> | <input type="checkbox"/> | Numbers Routed Correctly | _____ |
| <input type="checkbox"/> | <input type="checkbox"/> | Driveway/Street Joint | _____ |

II. LANDSCAPING

- | | | | |
|--------------------------|--------------------------|----------------------------------|-------|
| <input type="checkbox"/> | <input type="checkbox"/> | Adequate Mulching | _____ |
| <input type="checkbox"/> | <input type="checkbox"/> | Screening | _____ |
| <input type="checkbox"/> | <input type="checkbox"/> | Half Height Foundation Plantings | _____ |
| <input type="checkbox"/> | <input type="checkbox"/> | Driveway and Parking | _____ |
| <input type="checkbox"/> | <input type="checkbox"/> | Street-front: Sodded/Regraded | _____ |
| <input type="checkbox"/> | <input type="checkbox"/> | Lagoon Edges | _____ |
| <input type="checkbox"/> | <input type="checkbox"/> | Golf Course Edges | _____ |
| <input type="checkbox"/> | <input type="checkbox"/> | Dune Edges | _____ |
| <input type="checkbox"/> | <input type="checkbox"/> | Special Conditions | _____ |

III. HOUSE

- | | | | |
|--------------------------|--------------------------|-------------------------------|-------|
| <input type="checkbox"/> | <input type="checkbox"/> | Approved Final Color Form | _____ |
| <input type="checkbox"/> | <input type="checkbox"/> | Color Match Against Sample | _____ |
| <input type="checkbox"/> | <input type="checkbox"/> | Foundation Enclosure Complete | _____ |
| <input type="checkbox"/> | <input type="checkbox"/> | Trim Appropriately Finished | _____ |
| <input type="checkbox"/> | <input type="checkbox"/> | Meter Box/Conduit Painted | _____ |
| <input type="checkbox"/> | <input type="checkbox"/> | Exposed Flashing Painted | _____ |
| <input type="checkbox"/> | <input type="checkbox"/> | Roof Vents Painted | _____ |
| <input type="checkbox"/> | <input type="checkbox"/> | Chimney Hood Painted | _____ |
| <input type="checkbox"/> | <input type="checkbox"/> | HVAC Unit Adequately Screened | _____ |