

MIAMIBEACH
BUILDING DEPARTMENT

Initial Inspection Report

1700 Convention Center Drive, 2nd Floor Miami Beach, Florida 33139 Ph: 305- 673-7610

http://www.miamibeachfl.gov/building/

Seal

Amended Inspection Report after completion of repairs

MINIMUM INSPECTION PROCEDURAL GUIDELINES FOR BUILDING ELECTRICAL RECERTIFICATION

Licensed Engineer(s) or Architect(s) Responsible for Recertification Inspection Inspection Firm Name (if applicable): Address: Fmail: Telephone Number: Assuming Responsibility for: Αll If portion, please list: Portion **Inspection Commencement Date: Inspection Completion Date:** NOTE: Add pages as required to list all additional design professionals assuming responsibility for the Recertification Inspections or portions thereof. Each Design Professional must sign and seal their portion of the work in accordance with Florida Statutes. Please check the condition that applies: Substantial Structural Deterioration Observed Dangerous Condition Observed. Notify Building Official within 10 days Immediate Dangerous Condition Observed. Notify Building and Fire Officials within 24 hours Maintenance needed but does not rise to the level of Substantial Deterioration or Dangerous Passed the Inspection Architect **Licensed Design Professional: Engineer** Name: License Number:

This report has been based upon the minimum inspection requirements of Miami-Dade County Code Sec. 8-11(f). To the best of my knowledge and ability, this report represents an accurate appraisal of the present conditions of the structure, based on careful evaluation of conditions, to the extent reasonably possible.

Date:

I am qualified to practice in the discipline in which I am hereby signing:

Signature:

MINIMUM INSPECTION PROCEDURAL GUIDELINES FOR BUILDING ELECTRICAL RECERTIFICATION

CASE REFERENCE NUMBER:	JURISDICTION NAME:
*Use separate sheets for additional	responses by referencing the report section number.
1. DESCRIPTION OF BUILDING	
a. Name on Title:	
b. Building Street Address:	Bldg. #:
c. Legal Description:	Attached:
d. Owner's Name:	
e. Owner's Mailing Address:	
f. Owner's email:	
g. Owner's Contact Phone Number:	
h. Corresponding Property Folio Numb	per:
i. Name of Condominium or Cooperation	ve Association (if applicable):
j. Building Code Occupancy Classificati	on:
k. Present Use:	
I. General description, type of construc	ction, size, number of stories, and special features:
m. Number of Stories:	n. Is this a Threshold Building ¹ as per 553.71(12) F.S. (Yes/No):
o. Additional Comments:	

2. INSPECTIONS
a. Date of Notice of Required Inspection:
b. Date(s) of actual inspection:
c. Name and qualifications of licensee submitting report:
d. Are Any Electrical Repairs Required? (YES/NO):
1. If required, describe, and indicate acceptance:
e. Can the building continue to be occupied while recertification and repairs are ongoing? (YES/NO):
1. Explanation/Conditions:

3. ELECTRI	CAL SERVICE					PROVIDE	Е РНОТС
a. Size:	Voltage	Amperage	Type:	Fuses		Breakers	
b. Phase:	Three-Phase	Single Pha	se				
c. Condition	: Good	Fair		N	eeds Repair		
Comments:							

4. N	METERING EQUIPMENT			PROVIDE PHOTO
1. C	learances: Good	Fair	Needs Correction	
Comn	nents:			

5.	ELECTRIC ROOMS			Not Applicable	PROVIDE PHOTO
1.	Clearances:	Good	Fair	Needs Correction	
Cor	nments:				

6. GUTTERS			Not Applicable	PROVIDE PHOTO
1. Location:	Good	Needs Repair		
2. Taps and Fill:	Good	Needs Repair		
Comments:				

7.	ELECTRICAL PANELS		
1.	Panel #	Location:	
		Good	Needs Repair
2.	Panel #	Location:	
		Good	Needs Repair
3.	Panel #	Location:	
		Good	Needs Repair
4.	Panel #	Location:	
		Good	Needs Repair
5.	Panel #	Location:	
		Good	Needs Repair

Со	mments:			
8.	BRANCH CIRCU	JITS		PROVIDE PHOTO
1.	Identified:	Yes	Must be Identified	
2.	Conductors:	Good	Deteriorated	Must be Replaced
Co	mments:			
9.	GROUNDING (OF SERVICE		PROVIDE PHOTO
		Good	Needs Repair	
Co	mments:			
10.	GROUNDING C	F EQUIPMENT		PROVIDE PHOTO
		Good	Needs Repair	
Co	mments:			

11.SERVICE CONDUIT/RACEWAYS		PROVIDE PHOTO
Good	Needs Repair	
Comments:		
12.GENERAL CONDUIT/RACEWAYS		PROVIDE PHOTO
Good	Needs Repair	
Comments:		
13.WIRE AND CABLES		PROVIDE PHOTO
Good	Needs Repair	
Comments:		
14.BUSWAYS	Not Applicable:	PROVIDE PHOTO
Good	Needs Repair	
Comments:		

15.THERMOGRAPHY INSPECTION RESULTS	Not Applicable	PROVIDE PHOTO
Design Professional to summarize results below. Attach thermography report by o	certified thermographe	r.
Are there any anomolies reported in the thermography report? (Yes/No)		
Comments:		

16.OTHER COND	DUCTORS		PROVIDE PHOTO
	Good	Needs Repair	
Comments:			

17. TYPES OF WIRING METHODS		PROVIDE PHOTO
1. Conduit Raceways Metallic: Good	Needs Repair	N/A
2. Conduit PVC: Good	Needs Repair	N/A
3. NM Cable: Good	Needs Repair	N/A
4. Other Conductors/Cables: Good	Needs Repair	N/A
a. Other Conductors/Cables (Specify):		
Comments:		

18.EMERGENCY LIGHTING				
	Good	Needs Repair	N/A	
Comments:				

19.BUILDING EGRESS ILLU	PROVIDE PHOTO			
Goo	d	Needs Repair	N/A	
Comments:				

20.FIRE ALARM SYSTEM				
Good	Needs Repair	N/A		
Comments:				

21.SMOKE DETECTORS (Part of a Fire Alarm System Only)		Not Applicable	PROVIDE PHOTO
Good	Needs Repair	N/A	
Comments:			

22.EXIT LIGHTS				PROVIDE PHOTO
	Good	Needs Repair	N/A	
Comments:				

23.EMERGENCY GENERAT	PROVIDE PHOTO			
Goo	od	Needs Repair	N/A	
Comments:				

24.WIRING IN OPEN OR UNDER COVER PARKING GARAGE AREAS			PROVIDE PHOTO
	Good	Requires Additional Illumination	N/A
Comments:			

25.0PEN OR UNDER COVER PARKING GARAGE AND EGRESS ILLUMINATION			PROVIDE PHOTO
	Good	Requires Additional Illumination	N/A
Comments:			

26.SWIMMING P	POOL WIRING			PROVIDE PHOTO
	Good	Needs Repair	N/A	
Comments:				

27.W	IRING TO MECHANICAL EQUIPME	NT		PROVIDE PHOTO
	Good	Needs Repair	N/A	
Comm	ents:			
28. U	NDERGROUND OR LOWER-LEVEL	PARKING GARAGES	N/A	PROVIDE PHOTO
CHECK	LIST ITEMS TO CONFIRM OR CONSIDER FO	R UNDERGROUND PARKING GARAG	E:	
Numb	er of Levels Below Grade Plane:			
A. Ar	re the sump pumps operational? Select:	(Yes/Needs Repair/N.A.)		
Explan	ation:			
B. If	the elevator(s) travel below grade plane			
	Are they programmed to return to a le			
1	Select: (Yes, No, Needs Repair, Will Retro	•	•	
Explan	ation:			
2.	Are they equipped with sensors that pr Select: (Yes, No, Needs Repair, Will Ret		to a flooded h	oistway?
Explan	ation:			
3.	Are the branch electrical circuits feedir	ng devices below grade plane prote	ected by a Gro	ound Fault Circuit
	Interrupter (GFCI) breaker?		, a c. c	
Explan	Select: (Yes, No, Needs Repair, Will Ret	trofit):		
Lapian	ation.			

29. GENERAL ADDITIONAL COMMENTS	PROVIDE PHOTO